Muscle Testing:  
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A Misunderstood and Maligned but Extremely Intriguing, Useful and practical Tool. 
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Simply put, muscle testing is a method of gathering information. Numerous health professionals utilize muscle testing with their patients, and yet most professionals either have never heard of it, do not know what it really is, or are certain that it is nonsense, useless, and used only by charlatans. A great many Medical doctors, Osteopaths, PhD’s, dentists, Naturopaths, Chiropractors, and others find muscle testing to be one of their most important methods of gathering information about a patient. Many consider it to be their single most useful tool as it gives them very specific information about a specific patient.

Some professionals have created special names and sets of initials to designate their particular protocols or methodology. These are either for their forms of muscle testing or for some therapeutic modality, often used to theoretically treat allergies, in which muscle testing is utilized. A few of these include CRA, TFA, JMT, and NAET. I will not go into any of these special techniques nor will I give opinions as to which ones (if any) I feel are more or less valid or effective. This article discusses and explains to the best of my ability, what I believe to be a scientific, objective, and exceptionally useful tool in any health practitioners arsenal, so long as it is properly (objectively) used.

So once again, what is muscle testing? It is a methodology or procedure in which the tester utilizes the strength variations of a muscle or muscle group in the subject's body, in order to gather information. It is most often done with a subject's arm but more and more health practitioners are beginning to use the subject's fingers instead. Some chiropractors use leg length or overhead arm length in a different way which will not be addressed in this article.

Finger testing example      Arm testing example

Muscle testing is based on the belief (I personally consider this to be a fact) that the energy field which is generated by or exists surrounding a food, a nutritional supplement, a homeopathic remedy, a crystal, or some other energetic substance, will have an effect on any living thing (such as the person or animal being tested) if the item/substance is placed in their energetic field such as in their hand or on their lap. The energy fields of substances are identifiable and can even be photographed with the use of special high voltage photographic equipment developed in Russia called Kirlian cameras or Kirlian photography. Konstantin Korotkov and his cameras can be web searched and read about on the web. His cameras are used worldwide and a great
deal of research has now been done both on and with the use of Kirlian photography. Korotkov has also written a number of books that are available in English. Please do not confuse this technology with the “Aura” cameras that are being used at public health fairs. This is not the same scientific technology and I have no idea as to the validity of these aura devices one way or the other.

In one of the standard forms of muscle testing, the subject stands with an arm outstretched either forwards or to their side. The tester then needs to determine whether he or she is able to discern a noticeable difference between the strength of the subject’s arm muscles when they are holding a harmful substance versus when they are not. Normally the tester will tell the subject to resist, as a downward pressure is applied to the wrist of their outstretched arm (see photo above) so as to gauge their strength. They will then stop pressing and have the subject hold some substance which is not good for them such as a packet of Equal™ or of powdered sugar. In my office I use a bottle of 98% DEET (N,N Diethylmetatoluamide) insect repellant since DEET is a toxic nerve poison. With one of these toxic substances in the subject’s other hand, the outstretched arm is again pressed downward while the subject resists again with an equal amount of strength to what they exerted the first time. In most people, the strength will be noticeably diminished due to the weakening effect on the body caused by contact with the damaging energy field of the harmful substance being held. If the substance is removed and they are tested again with nothing in their hand, their original strength, what I refer to as their baseline strength, will return.

In finger testing, the tester holds the subjects fingers as depicted above and applies a pressure to slowly and evenly to separate the fingers, noting how much effort is required. Again, when a poison is placed in the subjects free hand, it will generally require a great deal less force to separate their fingers. This technique cannot be learned from reading this article and must be practiced extensively, and on many different subjects, to develop a proficient and accurate technique.

When it comes to science, we are far more ignorant then we are knowledgeable. Every few years, we are forced to change “facts” that had been published in the previous years’ scientific or college text books. We make these changes when we learn that the “facts” were incorrect, and we replace them with new “facts” that we yet again believe to be correct. Muscle testing works, but like some of the effects of aspirin, and the ability of a bumble bee to fly, we are not certain as to the exact science behind it. We do know that energies effect living things. There are numerous examples of this in the scientific literature including the documented effects of various forms of radiation, colors, different types of lighting, and homeopathic remedies. Even the simple fact that the energy of electricity can both start a heart or kill a human shows some of the better known effects of energy. Another is the fact that pink florescent lighting can cut the life span of rats by almost 50% and living under full spectrum daylight, with all of it UV and other frequencies, gives rats a distinctly longer life span than under any form of artificial lighting. These are just a few of the areas in which research has been published to show that we are affected by energy.

Published double blind studies have documented surprising things such as the ability of prayer (directed energy) to increase healing speed. One of my favorite books which thoroughly documents a great deal of what many would otherwise believe to be hocus
pocus, is by Lynn McTaggart and is entitled *The Field*. You may wish to read it.

As a brief side note, one of my favorite quotes, which exemplifies the unscientific manner in which even science based professionals will dismiss important information is from Herbert Spencer, and English philosopher who died in 1903.

*There is a principle which is a bar against all information, Which is proof against all arguments, and Which cannot fail to keep a man in everlasting ignorance. That principle is- contempt prior to investigation*

With muscle testing, we are simply making use of muscles in the body in order to gauge whether the energy of a substance is strengthening, weakening, or neutral in relation to its effects on these muscles in the subject being tested. Muscle testing is currently being used as an almost limitless information gathering tool. We will discuss how much of this is scientific and repeatable. The growing but still vastly unknown field of quantum physics may eventually hold the key to how and why some of this is possible.

I feel the need to mention that It has been my unfortunate observation that a great many professionals who use muscle testing, are doing it so poorly that their results are meaningless. Others are apparently using it to “prove” that their supplements are superior and should be purchased by the patient or client being tested. Yet others use it to sway the patient away from some other practitioner’s products so as to sell them their seemingly superior products. Muscle testing, like any other tool, is only as good as the professional who is using it and both technique and ethics are important.

I always smile when physicians make comments about needing absolute accuracy and repeatability. Few realize, unless they themselves have split sampled all their diagnostic laboratories, just how inaccurate numerous recognized lab tests actually are. Just as one of numerous examples, I once told my father how much variability there can be in laboratory testing. He then required his physician to send his next set of blood tests (drawn on the same day seconds apart) to two different labs for testing. The physician reluctantly agreed to do so and was completely flabbergasted at the huge variations that the lab reports came back with, on many of the same tests. Physicians have been thoroughly snowed into believing that when they get back a blood test for example, that the numbers (and reference ranges) are accurate, since after all, they are using them to write prescriptions! If they only knew.

If you yourself have been muscle tested, and you are certain that when you were told you were weaker, the tester was simply applying more pressure, and that when they said you were stronger they simply applied less pressure, you are not alone. I have most definitely experienced this incorrect (or even completely bogus) muscle testing from both supplement salespersons, licensed health professionals, and even some instructors who were teaching muscle testing seminars! On the other hand, as I teach in my professional muscle testing classes and on my videos, there is also another possibility which must be examined. When your body is temporarily made physically stronger due to the supportive energy of the product in your hand, it will indeed be easier for you to resist the tester’s pressure on your arm or fingers. In many cases and with many subjects, this difference in strength can be very dramatic, as much as...
a 100% difference in strength. When this happens, it will indeed feel as though the tester is applying less pressure since your muscles are temporarily considerably stronger. A second example that was suggested to me by my wife, a registered massage therapist, occurs in massage. When she is working on an area of the body which is overly tight and therefore overly sensitive, her client will often ask why she is pressing so much harder on that area, even though she is not doing so. It is simply more sensitive and more painful and so the client is certain (but wrong) that she must be pressing harder. So how do you know? Towards the end of this article I will explain how you may be able to determine if a tester is good, as well as how to tell whether those who think they can test themselves, are really able to do so. In many cases, a third person in the room, who is closely watching the testing procedure, can easily see if you are truly stronger and weaker or if the tester is playing tricks such as grunting, while actually applying even less pressure!

In the past, I have always described what I practice and what I teach as “Scientific Muscle Testing”. I used to say this due to my not being willing to do any of what I considered fringe methods of testing. In this article I will be explaining why I have completely changed my views on some of these practices and what has made me slowly and scientifically change my mind and my attitude in this area. Stay tuned.

The most obvious and science based testing would always require the test subject to be in contact with the food, vitamin, herb, amino acid, homeopathic remedy, perfume, soap, essential oil, detergent, tooth paste, etc that I was testing. In this way I knew that the actual substance and its actual energy field were interacting with my subject’s body. This is in contrast with the fact that I was not previously willing to simply ask a question such as whether the subject has parasites and then test for a weak (no) or strong (yes) response. I was also not willing to test a product that I did NOT have in their hand, such as saying the name of a product which they forgot to bring to the appointment to “ask the body” if it was good for them or not. Who are we kidding?, Where is the science in that, when the energy is not even in my office much less in their hand?. Some practitioners would say, for example, this condition (that the patient has come for help with) has its dominant cause as: and then say, one at a time, A nutrient deficiency; A toxic exposure; and emotional cause, a food reaction, etc. A strong response once again being a yes answer and a weak being a no. I was also never willing to test for the proper dose of a particular supplement, nor to test someone who was not in my office by using some other person as their temporary surrogate. It made no scientific sense and therefore could not be valid. You might note that I was in fact violating the very important point that was made by the philosopher I quoted earlier, and you would be correct. I was being the closed mined person that I now try never to be. Always investigate thoroughly before ever passing judgement. True science requires this and scientific discovery cannot be made without it.

Kirlian photography and laboratory testing, have both been used to verify the more scientific manner in which I originally used muscle testing. One allergy study compared muscle testing results to blood allergy testing and the results were amazingly similar. In fact, they were as similar as the results that a good laboratory might be expected to get if they ran the same allergy test on the same person’s blood twice in the same day.. Although the researcher reported that they were very surprised that the muscle testers were able to accurately identify 86% of the allergic substances, I disagree. The 86%
correlation between the blood allergy testing and the blind muscle testing must be
looked at VERY differently. Let me explain. There are numerous types of allergy and
sensitivity testing methods. These include Elisa, skin patch, provocation/neutralization,
ALCAT, Cytotoxic, RAST, and others. We still do not know all of the different ways in
which the human body can react to various substances which it does not like (so to
speak). Any single allergy test only looks at one of these types of reactions by the
body. Muscle testing on the other hand is investigating whether a person’s body is in
any way weakened by the substance. It is not dependant on any specific way that their
body is reacting. With this in mind, I was surprised that the blood test used in the
research was able to identify as much as 86% of the substances that these subject’s
bodies “did not like” to be exposed to.

What makes muscle testing so exceptional, as long as it is done correctly, is the
number of ways in which it can be used to gather information. Let me give an example
of what I feel is a good and a bad way to use muscle testing and you will see some
obvious problems emerge.

Someone came in for their initial consultation and when I was ready to begin muscle
testing, she tried to save me some time by telling me that her liver and kidneys were
fine and did not need any support. When I inquired how she knew this, I was told that
on a recent visit to another practitioner, she asked if they would test these organs. The
other practitioner muscle tested her as to whether she was strengthened while holding
the products which he carried for both liver and kidney support, and they did not
strengthen her (test for her). This indicated to her that she was not in need of
supporting these two organs.

I proceeded to test her for 5 of the products I use to support liver function and 4 of the
products I use to support kidney function. One of the products in each category
strengthened her so much that she could dramatically feel the difference and each time
she exclaimed, “I sure need some of that”. I told her those were liver and kidney
products and then I had to explain how her other practitioner had been misled. Muscle
testing always tests the “here and now” and it is very exacting. Her practitioner
incorrectly believed that he was testing whether her liver and kidneys needed support.
In fact, with the exactness of a computer, he was only testing whether the specific
products he used were supportive to her liver and kidneys. Her liver indeed needed
support but could not get it from that particular product and so it did not test strong. On
the other hand, I have found that I need many different products for liver and kidney
support in order to be certain to find one that will do the job best if the organ in fact
does need support.

I have found that, due to numerous personal differences including sensitivities to certain
herbs or combinations, many good formulas might not be supportive to people who do
in fact need the type of support that the product is offering. Liver and kidney function
are so vitally important that I test with 4-8 liver products and 3-6 kidney products. In this
way I am a bit more certain that if the organ being tested really needs (or does not
need) support I will be able to find out accurately and will have identified a product to
use.

In a similar fashion, I have had people who had just been tested (within 48 hours) by a
practitioner who uses point testing and found the same problem. In this method, the
tester may put their hand or fingers on the organ to be tested to determine if this elicits
a weak or strong response. In other words the tester might put their hand on the subject’s liver or kidney area while often saying the name of the organ for verification, and test for a strong or weak response. I have found this also to seemingly not be as accurate as the method I use. Now however, that I am willing in some cases to use words or ask questions, I may be able to get an accurate answer as long as I am exceptionally careful selecting the words I use for the question or statement.

Laboratory blood tests are the standard of practice in medicine for determining whether liver or kidney function is impaired. Although many laboratory tests are extremely useful for diagnostic purposes, the elevated liver enzyme test and the BUN/Creatinine or eGFR kidney tests appear not to be in this category. Simply put, if someone’s liver enzymes or BUN, creatinine and eGFR are out of range, then we know there is a problem. If however, they are not out of range, it may easily NOT mean that these organs are working anywhere near their optimal or even healthy potentials. Recently, it has been found that some toxic chemicals which destroy liver function, actually poison (prevent) the ability of the liver to produce the elevated liver enzymes that are used to determine there is a problem!

Muscle testing shines in this case as a very effective additional method of gathering information on both the liver and the kidneys. These organs will manage to produce healthy, “in range” laboratory values on a blood test, even though they are only working at 30-40% of their total ability or capacity. The muscle test however will show that the body would be strengthened with the use of a liver or kidney support formula. After a few months or more of support, the products may no longer test, as the organ’s function is now back up to a healthy level. The incomplete accuracy of western medicine’s standard liver and kidney blood tests, can allow a person to seemingly have good liver function one week, and then for no apparent reason, an extremely elevated test the following week. For those health practitioners who are unable to order laboratory tests, and for those who desire more accurate information, the muscle test, when properly carried out, gives what I believe to be a very acceptable indication that some completely non-toxic and harmless support products might be very helpful. In fact, many holistic MD’s who routinely order blood panels, will prescribe more based on muscle testing than on lab results and simply use the lab results for legal protection to add to the patients files.

One additional aspect of muscle testing, which I go over extensively in my health practitioner training seminars, is an interesting phenomenon. The body apparently has a brief memory in that it can still “remember” the energy it felt from a substance that was being held by the subject during a past undetermined number of minutes (1,2,3, 10, ?) This can actually be shown in a scientific way with the Kirlian camera. Take for example a person whose Kirlian image shows a deficient energy in their kidney area. This person is then muscle tested for a number of kidney support remedies, and the one which tests strongest is chosen. If the subject simply holds this product (or puts it in their pocket) while a second Kirlian image is taken, the kidney area is noticeably improved or possibly appears completely normal. It is the same energy which made this remedy test strong, that is now helping, on an energetic level only, to temporarily support the kidneys. Although there will be no real lasting effect unless the remedy is actually taken for weeks or months, there will be a short term effect. If the remedy is removed from the subject, and Kirlian images are taken every 60 seconds for the
following 15 minutes, a strange occurrence will be noted. As time passes, the supportive effect from holding the substance will be seen to start noticeably diminishing as time passes until it no longer exists. The amount of time it will take for the effect to diminish completely will vary from individual to individual. This was shown to us at a seminar in which one of the doctors had carried out this Kirlian test with some patients.

The very interesting retention of an energy signature that I just described, gives a fascinating ability to the field of muscle testing. It enables the tester to determine the order in which supportive supplements might best be utilized. When testing for kidney and liver products, many subjects will test as being benefitted by both. The best procedure at that point is to let the subject hold both the kidney and the liver product which they tested for. The subject is tested again with both products together. If supporting both organs at the same time will not cause any problems, then the subject will still test very strong or possibly even stronger. If they test at all weaker with both products together, then they did while holding them individually, only one should be used at a time. Immediately, the subject should be re-tested with the individual products. The one which the body “desires” to get supported first (I know of no other way to describe this phenomenon) will still test strong. The product to be used second will now test weaker. This gives you yet another example of how properly used muscle testing can give us information which might not otherwise be available or accessible.

When I first began teaching muscle testing, I was very much into doing it properly, objectively, and scientifically. I believed that these three were the most important terms to apply to a good muscle tester. Although I do actually still have this belief, the last word, scientific, has been slowly reshaping itself in my mind.

As I continue to explore energies and the ways in which we are all interconnected, I have had to open myself to new possibilities and even new realities. One of these “openings” has altered some of the ways in which I find that muscle testing can be utilized. This also greatly expands the “pieces of information” to which we have access with the aid of muscle testing.

I was previously against the idea of using muscle testing either to determine the dose for a supplement, or for testing a person who was not in my presence. After much experimentation over a couple of years with numerous patients, I have determined that both of these can indeed be accomplished if they are done properly, and they work amazingly well although this never ceases to surprise me.

Dose testing a supplement: Why I decided to explore this idea and how to do it correctly.

A number of years ago, a very sensitive patient “tested” extremely strongly for a specific liquid supplement. The name of the supplement is not important, but she tested so strongly that I knew it would be very beneficial for her. This particular liquid supplement is labeled to be used at 10 drops three times per day. Because this patient was very sensitive, I had her instead start at only 3 drops and only once a day. When she returned for her next visit, she informed me that the product made was fine for 2 days and then it overloaded her so badly that she had to stop it. After a week or so, she had tried one drop once a day. Again she was okay this time for 4 days, but after 5 or 6 days she once again had to stop. She was certain that it would no longer “test” for her. She was wrong and it tested very strongly as before. It was at this point, on that day, that I decided I would try the peculiar idea of “asking” her body what dose would be
appropriate for her. I put the bottle (which just tested very strongly) back in her hand, but before I carried out the next muscle test, I asked a question. Obviously I cannot recall my exact words but it went something like this.

“The best dose of this product for you is one drop, once per day” The test, which was so strong when I was simply testing if the product was beneficial, now became VERY weak. I rephrased my question.

“The best dose of this product for you is less than one drop per day” to which I now received a VERY strong response which represented a YES. This was very interesting and I began to get cautiously excited about what I was learning. I decided to intersperse a new question, even though I did not yet have a definite dose to answer my first question.

“When we find the correct dose, this product would best be taken once per day” The response was weak. “Twice per day” the response was strong again. “Three times per day” weak once again. I repeated - “At the correct dose, this product is best taken by you twice each day” Back came the very strong response. My excitement was increasing. Now I returned to the dose once again.

“This product is best taken at ½ drop twice each day” weak
“This product is best taken at ¼ drop twice each day” Very Strong response
“This product is best taken at less than ⅛ drop twice each day” weak response.

You do not need to say “by this person” or to say their name, since this is obvious and assumed and is therefore not required.

I was still worried since this patient was so very sensitive. I truly had an elephant by the tail and had to think for a minute before adding in a few more questions.

“ This product can be taken at ¼ drop twice per day for two months” (since that was her next appointment time). Weak response. Hmm, glad I asked.
After some amount of time, the dose must be decreased again” Strong response. Now I needed to know for how long.
“The ¼ drop twice a day dose should be decreased to a lower dose after 4 weeks” Weak response. “After between 4 and 8 weeks” Strong response. Then I went up one week at a time and the strong response came back at 6 weeks so I now knew her beginning dose and that she could do this for 6 weeks.

Last set of questions-
“After 6 weeks, your new dose should be ⅛ of a drop twice a day? Weak response.
“It should be ⅛ of a drop once a day” strong response. “You can remain on ⅛ of a drop once per day for many months without a problem” strong response.

What fascinated me even more than this entire procedure, was that the “tested” doses worked and caused her no further trouble.

Some might say that this was a placebo effect and that due to her believing that we had finally found the proper doses for her, she did not get a reaction. I have now done enough of this type of testing with enough individuals that I believe that it has nothing to do with a placebo response. On the other hand, if the body has the ability to make the right things happen, and no longer cause undesirable reaction, it really would not matter.
Since that fateful day, I have used this procedure on more patients than I can count and the results continue to be so positive, that I had to completely change the way I teach muscle testing so as to add this important information, hence this article was totally updated.

Unlike the woman in the example, most very sensitive patients test that their doses need to start low but can later be Raised after a few weeks or longer. It generally depends on whether the substance being tested is a detoxifying product (they need to start low but can handle more later) or a nutritional supplement (they need a lot more at the beginning but after the body gets enough then they need much less to keep their levels adequate).

**Testing someone who is not there with you, but is at some other location, and does not even know that you are gathering information about then.**

Before I explain this procedure I should add that many practitioners do not feel this is ethical, unless the first question you ask is whether it is okay for you to test this person who is not here. Since that is a very quick and simple question to ask, it does not hurt to do this and might possibly help to make sure the answers are valid. As you all roll your eyes back into their sockets while you read this, I implore you to read *The Field* by Lynn McTaggert. Lynn’s book will help you to better accept, although still not understand, just how connected we all are to one another and to the universe in ways we may or may not ever be able to fully comprehend.

You will need a surrogate who preferably is a person that is easy to test (shows a big difference between their weak and strong responses) and is fairly healthy. I believe, but cannot prove, that having a very healthy surrogate for testing should prevent the possible problem of the surrogate so badly needing a supplement, that it comes through in the testing procedure even though you are not testing them but only using them to test another person.

You both simply need to understand that you are actually testing someone else who is not present, and since it may help to connect you, use this person's name and location such as- the testing we will be doing will be to determine the best supplements for your sister Susan Jones who is in Cleveland Ohio. Since there are thousand's of Susan Jones', you make the connection accurate by stating that is it your sister, or whatever the actual connection might be. Since I see no purpose in testing supplements for someone you do not know, there will always be some type of connection for specificity of who this person is. It might be a brother, sister, mother, father, cousin, friend, etc.

Once you have described the person, you simply continue as if this was regular surrogate testing. You still need to do the preparatory procedures (which must always be done before every session of any kind of muscle testing). This includes getting a uniform repeatable muscle response and then doing the poison control to be sure the subject is not switched and that you can feel a distinct weak/strong difference. Then you would simply begin with the first substance in the surrogates hand, and by saying,
for example, “we are testing to determine which of these products are beneficial for your sister (if that is who you are testing for) Susan Jones in Cleveland Ohio, Hold (or resist)"

From my experience, it does not seem necessary to repeat each time that you are testing Susan in Cleveland Ohio (or whoever it is you are actually testing). You have “set the stage” so to speak. I would personally just use the name. So with the second product in the surrogate’s hand I might just say “this product would be good for Susan, Hold” and continue till all the products have been tested. YOU MUST remember, in case you are also going to test the person in your office for anything afterwards, to clearly specify “we are no longer testing your sister, we are now testing you for these next products. Do not be surprised if completely different products test for these two people. If this were not the case, the technique would obviously be useless.

It took me quite a large number of sessions to become comfortable using this procedure. What I did for many months was to test some of my patients relatives or family members who already had upcoming appointments with me but had not come in yet. In every case, when they came in a few days or a few weeks later, they tested in person for the same products that they had long distance surrogate tested for. After this continued to happen over and over and over again, I decided to stop disbelieving what a quantum physicist might tell me makes perfect sense, and simply accept that I could do this.

All of this newer information is so important, that I have now added a text CD, with all of this information, that gets included with both my 3 hour Muscle Testing for your Health instructional DVD and my 6 DVD twelve hour Scientific Muscle Testing for Health Practitioners DVD set.

In closing, I would like to give my suggestions for determining if a prospective health practitioner is likely to be a good muscle tester. Ask them (not their secretary) whether they basically know which supplements will be needed, and that the muscle testing is just a verification, or whether muscle testing often shows them that many of their choices would have been wrong. Unless they tell you that muscle testing often shows them where their supplement choices would have been wrong and that this is why it is so useful, you may wish to consider a different practitioner. With as many people as I have tested and as much knowledge as I have absorbed, I am still amazed at how many times a month I gain important knowledge that I would never have accessed without this wonderful technique. Numerous times, a product that I am certain will be needed by a specific patient, does not test well for them. The muscle testing proved my belief or intuition was wrong, and so I do not recommend the product. The second question to ask is how many products do they carry for supporting things like liver, kidney and lymphatic function or have you just found the one best product and that is the one you carry. If they say they have found the best product and so they only carry one for each of these uses, find another more knowledgeable less egocentric practitioner. There IS NO BEST PRODUCT FOR EVERYONE, we are simply too different.
What I have tried to do in this article is to explain muscle testing techniques, go over some of its apparent abilities, problems, and peculiarities, and provide an example of how it might be used as an adjunct to standard laboratory testing. This article is not meant to teach you the technique of muscle testing. If you wish to learn this skill to have fun trying to test friends and family members, to show how sugar or NutraSweet™ weakens them or to see if they might be better off avoiding certain foods, I suggest you order the three hour video Muscle Testing for your Health from the Price-Pottenger Nutrition Foundation at 1-800-FOODS4U or www.PPNF.org. If you are a health practitioner and wish to learn this skill for use with your clients or patients, you might look for a few good educational seminars in this technique. I personally took five or six from MD’s, PhD’s, chiropractors, acupuncturists and a physics professor before I began to use it in my office. I also have a 12 hour DVD set, taped during one of my two day seminars, available from www.EliteAlternatives.net For $350.00