

78. Static Magnets to Relieve Pain & Improve Overall Health

[Peter Kulish] (0:05 - 0:27)

It's the amount of energy that it takes to magnetize or demagnetize it, when in fact the surface gauss is much less, but extremely powerful, particularly with these new neodymium rare earth super-magnets.

[Dr Tom Lewis] (0:27 - 0:27)

Right.

[Peter Kulish] (0:28 - 0:37)

Because they're Oersted level, the level that, I mean, the penetration values that they have is a whole new school.

[Dr Tom Lewis] (0:39 - 0:43)

Do you have a device to measure the strength of the magnetic field?

[Peter Kulish] (0:43 - 1:05)

Oh, sure, sure. It's, you know, I've got a standardized gauss meter. But our magnets, the two of the middle sized ones in a two stack will deflect a compass at 18 inches. The larger one will deflect the compass at 22 inches.

[Dr Tom Lewis] (1:06 - 1:12)

That's really such a profound way to measure.

[Peter Kulish] (1:13 - 1:17)

Well, it is. I mean, of course, we have the surface gauss.

[Dr Tom Lewis] (1:17 - 1:25)

At least comparatively, yeah. I'll have to go find my compass. What's that?

I'll have to go find my compass. It's been a while.

[Peter Kulish] (1:26 - 1:32)

Be careful. You can magnetize it so that the pointer changes its polarity.

[Dr Tom Lewis] (1:33 - 1:34)

Yep. Right.

[Peter Kulish] (1:37 - 1:39)

Okay. Yeah. Let's see what we got here.

[Peter Kulish] (8:38 - 13:03)

So for people were not here during the first seminar

BiomagScience, we consider it the **science of biomagnetism**. The proper method application to **apply solid state magnetic fields** to **normalize cellular voltage**. Which means normalizing the cells function. Which of course, when you have individuals who are ill or have an injury. The cells are out of shape. They're out of whack. They're chaotic. They're trying...

What happens when you have an injury is: Let's say you hurt your elbow.

That **sends a signal to the brain** and the **brain sends Bio negative electromotive energy** to that site **to help heal it**. Well that's what biomagnetism is about is that. We apply generally as a rule the **bio negative energy**. We apply that to **amplify exactly what the body's healing mechanism is doing**. And we found that through the years.

Well, the first thing that's nice about it is that **it reduces the pain**. One of the things about it is that the **pain comes from inflammation** and the **inflammation is positively charged** so the **body is sending negative energy** and we apply a **very amplified form of negative energy** and that **starts reducing the inflammation very quickly** and **starts to move the cells toward normalizing their voltage**.

It's one of the things that people who work with it really appreciate. Because I'm using biomagnetism, we're **literally able to amplify the body's healing energy**. We found that in most cases it's about **four times as fast**. So you get **immediate pain relief** or **pretty close to immediate pain relief**.

Some issues that may take **up to three days or so** but effectively you're doing it **four times faster** than it would happen anyway.

And there are issues such as Malabsorption.

Malabsorption is really tough. I mean, really tough. I've met people who've had it for 25 years. They were in bed. Sick. In pain. For 25 years. There was nothing that could be done. And we were able to help them **elevate their cellular voltage**.

And. So, but we'll get to that.

Most of the work. For pain relief and increasing the negative energy to a site is the bio negative energy.

Now. The bio positive energy, it has to be used carefully because it can produce a positive acid chemistry. It can denormalize...

[Peter Kulish] (13:06 - 13:13)

Excuse me. Hello. Excuse me. I'm sorry. (in response to woman speaking unexpectedly)

[Peter Kulish] (13:17 - 15:53)

Let me go back here.

This is the **bio positive energy**. We made it **red** because it's positive.

Our magnets are **green** for the **bio negative healing side** because green is the color of healing. And one thing about our magnets is that they are color coded. They're very powerful.

All three of them are designed specifically for topical - to mid range - to very deep penetration. They're specific to the book that I've written with protocols for over 180 conditions. A to Z conditions.

And they've got safety caps on them. This is a neodymium. People or companies are selling neodymium without any coverings on them and they're very dangerous.

If you snap them together in the dark, when they crack you'll see a little explosions of electrical charges coming off of it. And anyone who's done that and has had to go to the doctor because of the... This has happened to me. I've had to go to the eye doctor and get the pieces taken out of my eyes because they're very explosive so we put safety caps around them.

And on the red side. We have the letters raised ever so slightly so that you can feel it. In case you're putting them on your back or someplace where you can't see them you can feel them. So we've done everything to them. We do guarantee them for life if something

happens to them we'll replace them if they come apart or so it has happened. It's very unusual.

And again the power

Let me see. Wait a moment, let me just go back here real quick.

You see the small one. That's our power wafer and it's about the size of a dime.

[Joy] (15:56 - 16:03)

We're not seeing your slides. We just see you. So you may have to share slide.

[Peter Kulish] (16:03 - 16:09)

Okay. Yeah, sure. I mean, wow.

All this whole time here. Okay.

[Joy] (16:12 - 16:38)

Yeah, a number of folks on the chat as well. They have purchased your kit. And some are just wanting to get started as well.

Like just kind of some basic steps on getting started. So I know you have your chronic health and preventative health protocols and then you also have acute. Acute issue. Protocol so two, two very separate things. I'm hoping you're able to show.

[Peter Kulish] (16:38 - 16:48)

We can go there. Sure. Let me see.

I'm just trying to. All right. Is it coming through now?

[Joy] (16:48 - 16:49)

Yes, it is.

[Peter Kulish] (16:49 - 16:50)

There you go.

[Joy] (16:50 - 16:51)

Okay.

[Peter Kulish] (16:53 - 25:20)

Let me just get this thing set up here.

All right. Well. Okay. Let's see here. Let's just go down here.

Because the wonderful thing about the bio magnets is that you can wear them on a on a daily basis to get your supplemental energy which probably...

I don't mean to sound so abbreviated here. Im trying to find those slides.

I think your right, people want to know what to do with them right away.

And okay here we go. alright

Daily vitality and health maintenance which is recommended for everyone as you see right here on the center of the top, the center of the fellow on the right. And the center of the fellow on the left. Well, that's called a **Daytime Therapy**.

Men generally use a set of the **power wafers** one inside their shirt and one on the outside of their shirt. That's called a **two stack** and It's an excellent placement. And **women** generally put it on their bra unless it's the bra strap is too far away from the Sternum then move it up a little bit.

Perhaps you may need to use a bandaid to wear it.

Again, a two stack is, they're developed specifically to provide a certain penetration value

and energy value. With a bandaid or a piece of cloth. Tape, whatever, however you're putting them on.

But what this does. Is that location is **over the heart** and the **energy goes into the heart** and thereby goes **throughout the whole blood system**... the blood system, **throughout the whole body**. And what we've seen is we have seen an increase in cellular voltage. A hundred points in an hour wearing that.

Most people wear them on a daily basis. We call it the daytime therapy because they put it on in the morning. They wear it throughout the day and put it on their nightstand at night. Or wherever they put it at night. And it's **the primary energizing point** because it does go right into the heart and therefore throughout the body.

Now the next one is the **Lower CVS** and that's a **two stack** of the **power wafers** on that. And that is, that's a wonderful application. It's because the energy, the bio negative energy goes into the cerebral spinal fluid. It goes up into the brain. And bathes the brain, the neurotransmitter fluid has an increased **Zeta potential** and **energy potential**.

And the reports we've had through the years. And I know that I've used it personally. Is that it's very clarifying, it's very calming. Essentially it provides a kind of an **active brain tune**.

And it's an interesting location because it's made us realize that the **amyloid plaque present in Alzheimer's** individuals apparently **it can be dissolved with this** because we've had people who we're **catatonic** Alzheimer's and their daughter would sit with them and they stared out vacantly and then within about **Four to six weeks of wearing the CVS** and also drinking the energy water that we provide.

I'll get into that later, but, they started to come to.

Matter of fact, there's a story of one story. A woman who became a friend of mine, her mother came out of it and she was so active. I mean, she is. It was like she had been waiting to go shopping or something. And she was. Her daughter couldn't stay up with her. She was so active. So this is a tremendous application. People often wear the **lower CVS application** along with the **sternum application**. Wonderful application.

Then there's the **nighttime therapy**. In case you have trouble sleeping. You take a pair of the power wafers and put them green side by a negative slide down.

I didn't. You know, some of these things I'm reporting. Founded by many other people but anyway, this is excellent. People have had trouble sleeping **this will activate the melatonin** and **will put the pineal into a full negative state for a maximum amount of melatonin output**.

So these are the **three of the basic applications** that you can do on a **daily basis**. And I have to say, look. After so many years of doing this. I'll give you an example. I had a fellow that I was introduced to did public relations. I didn't know at the time that he was deathly ill. He didn't tell me. Just didn't say anything. And I worked with him. When he was 86. He wrote a book called the longevity code. Philip Schaefer. He and his wife. And then he passed when he was 94.

But when I met him he was close to terminating. His brother and his sister had terminated in their 70s and he was kind of on his way out. I didn't know. What he told me that I hadn't met him. I just talked to him on the phone for a number. Well, I mean, a number of months and then finally met him.

Because we did end up working together for years but **I can say that categorically if**

you wear the magnets for daily energy supplementation and drink the negative energized water you're going to be healthier because your cells are all.... You're going to live longer.

So their voltage is going to be high normal. You're going to be. **You're going to live healthier and you're going to live longer.**

And that's, that's just the way it is.

[Dr Carter] (25:21 - 25:38)

So I have a question. This is Dr. Carter. So with the individual who was.

You stated from the **Alzheimer's. Catatonia** and so forth. That is dissolving the amyloid. I mean, have you guys actually done scans?

[Peter Kulish] (25:39 - 25:48)

No, no. You know, I have to say that that's it's theoretical. Why it happened. It happened numerous times.

[Dr Carter] (25:48 - 27:16)

Well, I mean, I would say probably, you know, the anti-inflammatory effect of the magnets. And the water and perhaps even, you know, killing various pathogens. But the amyloid is a. Antimicrobial peptide in the brain.

Right. So amyloid is not really the cause of Alzheimer's. You know, because I mean, they're individuals who have you know, significant build ups, build up of amyloid and, and they don't have cognitive decline. However, you know, it's, it's fairly common. Individuals, but.

You know, In our functional integrative world, we are finding that it's more as a response to a toxin or some inflammatory type scenario, mycotoxins, heavy metals, diabetes, whatever, basically kind of going down the various causes, let's say from the Bredesen protocol and with what Dr. Trimp and Dr. Lewis found earlier on, really looking at the role of the subacute infections in addition to the inflammatory markers. So what your magnets are doing is probably suppressing a lot of that inflammation there.

[Peter Kulish] (27:18 - 27:29)

I, hey, I really don't know how the mechanism works, but that's certainly, it seems like the mode of action.

[Dr Carter] (27:29 - 27:30)

Right, right.

[Peter Kulish] (27:30 - 27:38)

I mean, the one thing that the plaque does is it prohibits communication.

[Dr Carter] (27:39 - 27:40)

Right, absolutely, absolutely.

[Peter Kulish] (27:40 - 27:53)

You know, and any removal of the plaque is going to reopen the communication. Now, why the plaque occurs is the issue.

[Dr Carter] (27:54 - 28:06)

Well, you know, with some of the studies they've shown, when they tried to aggressively remove the plaque, it could make things worse too. So again- I don't know.

[Peter Kulish] (28:06 - 28:40)

Okay, you know, I will say this, okay? And, you know, while I'm open to learn everything that we can about it, but what we've seen, which has been, you know, a huge benefit- Yeah, absolutely. Is that we've seen these, and **in both cases** that I know about, **that I**

worked directly with, is that the mothers were entirely catatonic.

They're just, you know, staring out in space.

[Dr Carter] (28:40 - 28:41)

Wow, that's impressive.

[Peter Kulish] (28:42 - 29:12)

Coming back. Yeah, just coming back. Awesome.

Yeah, and I have to laugh because the one mother, she became so active. Her daughter was saying it was like she was on a constant stimulant.

And what about the placement of the magnets for- Well, it's just on the back of the neck. Right there at the hairline, on the skin at the hairline.

[Dr Carter] (29:12 - 29:13)

Beautiful.

[Peter Kulish] (29:13 - 29:56)

I mean, and I'll tell you what, you know, I used to have a company where they'd had two doors coming in the place. And sometimes it was so busy. I'd have people at two doors and they had people in the office.

And it was like, you know, wow, this is just too much. And then I'd put the magnets on and it was just like, whoo, just relaxed everything and kind of put it in overdrive. Anyway, whatever.

It's a excellent, excellent application. And, you know, let me talk about energized water here because I have not, I've not discussed that. And it's,

[Peter Kulish] (0:27 - 3:28)

Well, at the bottom is just energized water and we ask people to if they're going to drink water energize it.

Now, what happens when you energize it? You know, there's the **Ono Institute**. They've been studying water from Lourdes, France and Hunza, Pakistan and essentially, why is this healing water?

Well, the thing is, is that those locations happen to have a very strong magnetic energy there. And what happens when you magnetize water? And of course, we're putting a **negative spin** on the water because that works.

It's so compatible with the body, but the idea is to **break up the molecular clusters**. And by breaking them up and putting the molecules in a **monomolecular state** or a **single molecule state**, that suddenly it **makes more hydrogen ions available to the glands and organs**, which are not getting them. And they're running in a slight hypoactive state.

You know, **maybe all your life you're running in a slight hypoactive state** because of **the water that you drink has so many normal molecular clusters** and upon **energizing** them, which of course, what it does is it **spins the electrons in the same energy value**, in this case, what's called the **left-hand spin or left-hand chirality**. They just, you know, by taking on the same charge, the molecules just repel from each other.

And so the single molecules really provide a huge benefit. And the **Ono Institute** has been studying this for years. And people in their **middle age**, when it starts to manifest this **lack of hydrogen ions** to serve, to **provide the key first element in all the organs and glands**, suddenly starts to manifest itself as, you know, various conditions, which go away when they start to drink the energy water. So it's just a wise idea to make sure that you energize your water. And that's part of the daily supplemental energy routine for living more healthy and living longer with energy benefits.

[Joy] (3:28 - 3:36)

So Peter, I just want to confirm in your wellness kit, you do include some magnets to energize water, correct?

[Peter Kulish] (3:37 - 3:45)

Absolutely. Absolutely. If, you know, I can go down to that slide if you would Claire.

[Peter Kulish] (3:46 - 3:58)

Let's see here. Let me just get there. Well, here is the wellness kit.

[Peter Kulish] (3:58 - 6:09)

Of course, I'm thinking that I better blow up the pictures a little bit better. It's got all of the super magnets in their various sizes. And it's got the **water jar energizers**.

And this is, you can put it on a bottle, you put it on a pitcher. We have a **cold line energizer** that can be purchased separately that can go on the faucet. We've had people put it on their shower.

And it's provided tremendous health benefits to their skin. We had one lady, she had acute **psoriasis** for, oh, I don't know, at least 10 years. And we were surprised when we found out, although I had worked with a big cosmetic company, and they had shown how the cosmetics would hydrate better if they were energized.

But the woman who had **acute chronic psoriasis**, it **cleared up in 10 days** by her

using the cold line energizer on her shower, which is in this section right here. So, the **bionegative water is a tremendous benefit**. Whether you drink it, which you should, don't bother drinking anything else other than that.

I mean, you can, of course, you know, drink alkaline. I mean, people, you know, they use alkalizers and things like that, but energize the water so that it's got that charge potential. And you make sure that you're getting the benefit of the single water molecules.

[Joy] (6:10 - 6:23)

Peter, I have a question. It's Joy. So, a number of folks use either hydrogen water machines, or they drop those hydrogen tablets into their water.

How does that compare to using the magnet?

[Peter Kulish] (6:24 - 6:28)

Well, you know, one costs a lot of money and one doesn't.

[Dr Carter] (6:30 - 6:31)

Okay.

[Peter Kulish] (6:32 - 7:13)

You know, I mean, you know, look, you **need the additional hydrogen in your system**, you know, **to satisfy the lack of hydrogen** you're getting from, you know, the clustered water, you know, which are all normal chemical associations. I mean, it's very normal for, you know, liquid, for the molecules in a liquid to cluster together, but it's just kind of tough. You can save yourself a lot of money if you just energize the water, you get the hydrogen then, you know, so it's a good deal.

[Peter Kulish] (7:15 - 7:15)

All right.

[Peter Kulish] (7:16 - 8:44)

I wanted to do the advanced therapies. I wanted to go over that. I thought that that would be a...

You know, this is for people who are very ill and at the same time it's also very important. We have circuit therapies where we're able to help people **regenerate bone to bone knee, regenerate all the connective tissue** and the **spongy mass, regenerate herniated discs** and things like that, which **we came upon quite by accident** with someone using the protocol, the circuit that we developed for the back. A woman, she had **tremendous herniation** and she was just looking for pain relief. She'd been a nurse in the OR and had seen, had been in an operation where the guy came out a paraplegic, so she just would not go under the knife, just would not do it.

And so, let me see here.

[Peter Kulish] (8:44 - 8:56)

Let me just go up here and get this. Okay. Oh, okay.

Here it is.

[Peter Kulish] (8:57 - 12:29)

The **back circuit**, when you look at these pictures, if it's the color green, like for instance, on the left fellow here, the green means that the red is facing the spine. And then the red, of course, shows that the green is facing. This was developed using smaller, the small power wafers with **red going into the tissue to expand it**, because that is what you need to do to **expand the vertebrae** so it **stops pinching the nerve**.

And then you use a larger **bionegative**, that's **positive energy going in the center**,

use a **larger bionegative** to **help strengthen the musculature between the negative and the positive**. It's negative going into the positive and then going into the negative across the back. And what we found out with this lady is that **it had helped her**, but **not only had it helped her**, but **her discs were herniated** she had **several discs** that **herniated at about 18%** and what happened is **the discs grew back to full height**

Well, I remember reading Becker's work on salamanders and regrowing so I started looking at that very carefully and so we started developing what's called the **circuit therapy**. I mean, that back therapy was a circuit therapy, but we started developing that circuit therapy for **knees**, for **elbows**, for **shoulders**, any **joints**.

And it's been excellent for people. We recommend certain supplements. I know glucosamine is good, but we also particularly like acetylmyristoleate, which really helps regrow the connective tissue.

But basically what we found out is that **when you put positive and negative**, you put a circuit on, **it stimulates the DNA to regrow anything that's missing to grow back to blueprint**. And in doing so, it **provides a bridge for the two energies to meet**. The two energies are always trying to reach out and balance.

That's the way it is between positive and negative. And so what we found is that we **create a circuit** through an area that's **missing tissue**, such as a **knee**, and **it will start to regrow everything back**. And well, I tell you what, we've got a couple of **quadriplegics walking** around that are pretty pleased with it. And after long years of not walking, they are walking again.

[Dr Carter] (12:30 - 12:35)

And that's how long of using, on average, the mechanism?

[Peter Kulish] (12:35 - 15:08)

Well, I'll tell you what, let me just go to the **Meridian Energy Therapy**. One year is the **Meridian Energy Therapy**, which...

I put all these slides together here and I'm just getting used to where they are. And also, I'm just getting used to this system too, pardon me.

Meridian Energy Therapy is where you **put a magnet on the five peripheral points of the body**, on the **top of the head**, either in the **palm** or the **wrist of the hand**, and the **bottom of the feet** or the **back of the ankles**. And in doing so, the **first thing it lights up is the nervous system**. And **if you do it a lot it starts to help regenerate that nervous system**

And it also **helps regenerate or activate** and **help heal circulation** and **tissue in between**. Essentially, what's happening is that, again, **the energies are trying to meet**. And in this case, they actually meet more **in the solar plexus**, which if you know about chakras, you know is **the central energy place**.

Well, in this, that happens to be where it happens. It's been **excellent for post-stroke individuals** So, but the one **quad** that we had, and I didn't know about it, that he was doing it, he **started to do the Meridian Energy Therapy on a daily basis**.

And within a couple months, he was starting, he had been **20 years quad from a motorcycle accident**. Excuse me. And he started after a couple months, he started getting feeling, and he worked it in by nine months later, he was up walking.

[Dr Carter] (15:09 - 15:12)

Wow. My goodness.

[Peter Kulish] (15:13 - 20:38)

Well, you know, the thing is, is that I had **worked with another fellow**. And I gave him a **nerve regeneration circuit** of just negative right over the breach about one inch up and positive one inch down. And **within a month, he was getting feeling and movement**.

So, the **first fellow**, he **took nine months** because he had, well, unfortunately, I didn't know he was even doing it. He just followed his own path. But, excuse me, had I known, we would have been able to help him a lot faster.

Yeah, because that's what you can do with **electromotive energy**. I mean, it's remarkable. So, the thing that I wanted to go over, let's see here.

These daily and vitality, okay, the, oh, okay. Advanced therapies. So, I was discussing that, you know, we've developed these circuit therapies, which are in the pictorial guide.

It's fully discussed in the book. But these **circuit therapies** are developed for like **bone on bone knees** or issues where maybe there's **osteoporosis** going on and there are manifest conditions because of that. The first thing we suggest to people, excuse me.

First thing that we suggest to people is that they do the **advanced therapies**. The reason being is that the first therapy, which is the **organ group energizing therapy**, what that does is that **elevates all the glands and organs**. And what we know is that people who are suffering from **arthritis** or they're **wearing out their joints**, it's because, well, let's put it this way.

Their glands and organs are not operating. Some of them are in a **hypostate**. And because of that, their **enzyme outputs** and their **hormone outputs are off**.

And because of that, **the whole metabolism of the body is off**.

So we asked them to do the organ group, well, to do the **advanced therapies**. And the first one is the **Organ Group Energizing therapy**.

And that is to **place them on the lower kidneys** and **on the lower rib cage to the right and left**, as shown in the diagram on the back of the neck. And you wear them **24-3, 24-5**. Someone that is really chronically ill, we ask them to wear them for seven days, 24 hours a day.

Some people say, can I take them off and take a shower? I say, yeah, sure. Of course you can.

Some people are unable to wear them at night, but most people are able to and what this does is it helps normalize all the gland and **organ functions**

And the story behind that, it was originated, a fellow had called me, his father, 91 years old, had slipped into a **septic shock coma** because his **kidneys failed** so much that he can no longer do dialysis so he naturally went into a coma.

And he asked me if there's something that can be done with the magnets. And the first thing I said is, wow, man, you got to let me think about this for five minutes.

So I thought about it and realized that we couldn't just go after an organ in a gland or this or that. We have to go after all of them because they all work in symphony. And if we didn't go after all of them, so we gave it a try.

And we placed it down on the lower rib cage to the right and to the left and then back on the kidneys and on the back of the neck for the brain. And he was treading toward

terminating within the next day or so. And instead of that, **he woke up three days later and his kidneys were functioning.**

[Dr Carter] (20:40 - 20:40)

Wow.

[Peter Kulish] (20:40 - 24:18)

I mean, that was, yeah, that was, you know, a kind of **an epiphany** on this therapy. So we've integrated it into our general protocols for **helping to get the body back into shape for healing.** That and then afterwards, the **Meridian Energy Therapy,**

The first therapy is the **Organ Group Energizing** therapy, which **takes care of the glands and organs.**

And then the **Meridian Energy Therapy,** which **energizes and balances out the rest of the body** so that you kind of come out the other side and kind of rebuilt. And this has been excellent for people in creating, well, in two areas, people who are really ill, it helps rebuild their system and get them going again. And **people needing to repair their joints** and or whatever issues, medical issues they have because their body's been out of kilter for a while.

This **provides a healing terrain** for them to **rebuild their knee** or **rebuild their shoulder** or get over, you know, whatever kind of health crisis condition they might have.

Now, we have we have developed what's called baby steps. And we developed this years ago.

Someone called me and asked, what could we do to help someone who had **EHS**? Of course, it wasn't called **EHS**, extremely hypersensitivity to **EMF**. Which those people are also **hypersensitive to mold and chemicals**, everything.

It just I couldn't even talk with her. She couldn't talk to me on the phone. This woman had she got so sensitive to EMF that she moved out of her house in L.A. and moved up into a cabin, a non electric cabin in the mountains. And so I couldn't even talk to her for a couple of months. But in helping her, we develop what we call **the baby steps.** And the reason being the **baby steps** is is that we did not want to give her too much energy because her cellular voltage was so low, That she was really toxic. And we had seen other people at that time who were very ill for a long period of time. And they had a **Herxheimer reaction** to too fast charging.

So we developed with her. She was at the perhaps the lowest vitality that we had run into.

[Peter Kulish] (24:20 - 24:27)

We developed **the baby steps routine**, and it has been useful for people.

[Peter Kulish] (24:30 - 26:40)

Some people are so sensitive that I mean, in other words, you can't apply the magnets too fast. You have to apply them slowly so that as the cells take on their voltage. They don't it's not too much voltage at one time.

Otherwise, they're going to push all those toxins out that have not been able to be pushed out because of their low voltage. You know, malabsorption is an interesting issue. That's what she had.

People who have **EHS**, they have **malabsorption.** What happens is people who have **malabsorption** were generally ill and then caught a cold or a virus or something on top of being ill and they had already used up their **reserve of negative energy** in the body, which all of us have or most of us have.

And on top of using that reserve and being ill, they got further ill and there was **no energy left to shoot to the cells to give them the energy to heal**, and so what happens is that instead of their cells voltage increasing by being supplied with negative energy in the body, the negative energy wasn't there. And so instead of the cells voltage going up, which is what it does in its healing mode, it actually went down and then went through a threshold where it didn't have enough energy to absorb the electrolytes and further nutrients it needed to increase its energy and to increase its function.

So we ended up developing the **Baby Steps routines** to start applying the energy carefully and helping them build up.

[Peter Kulish] (26:41 - 26:49)

And it's been useful for people. Joy, I'm almost, I hear you thinking.

[Peter Kulish] (26:55 - 27:06)

So I don't know where to go right now. I mean, there's so much that can be said here. Are there any questions that people would like to go over right now?

[Joy] (27:11 - 27:17)

Yes, a lot of questions have come in and I also see some hands being raised. So Doris, go ahead. Your hand is raised.

[Peter Kulish] (27:20 - 27:30)

Yes. I want to know, did I miss the **bone on bone therapy**? Well, OK, we can go there.

[Peter Kulish] (27:31 - 29:58)

This is on the right side, the right upper picture, how the magnets go. Oh, what happened? Because, well, you know, this is, what's the primary importance?

And I'm going to go back here first. Hold on, here we go. Years ago, while I questioned it at first, when I first got into this business, that I saw several places where they said the authors of the therapies that said, well, put it on if it hurts, if it starts to hurt, take it off, give it some time, then put it back on.

That didn't make any sense to me. So then I started talking about it and I was led to seeing **Reiki** and then **polarity medicine** and realizing that the limbs on the body, they have meridians, one's **positive** and one's **negative**. Well, if you study electricity, you don't put negative on positive.

You don't put positive on negative. It causes stress. And in studying **energy medicine**, I realized that we had to work with the **meridians of the body** in order to **amplify the flow of healing energy** correctly.

And the way it is, is that in the anatomical view, which let me just go up here. This is a better slide. The one on the left is the anatomical view.

That's the thumbs out, palms forward. And the left front, left anterior arm and hand up to the rotator cuff. And the front of the left leg is negative charged.

[Peter Kulish] (0:00 - 1:37)

The green man on the left green man, the green is all negative charges. And the back of the limb is positive. Of course, you know, one side has to be negative, one side has to be positive.

On the right limb and right leg, the front of it is positive and the back is negative. And so we started, I mean, in following the rules of electricity, we started applying the magnets to the backside. Where, I mean, in other words, if the pain was in the positive meridian, we applied the negative magnets to the backside and it amplified, it reduced the pain and it increased the healing time.

And so we've been working with that for years and people are getting the right response. A story that I often tell is a **72 year old man**, friend of mine, colleague, he was in a **head-on collision** and he **crushed both his knees and splintered the bones all the way down to his ankles**. And they screwed them together.

It took about a week to re-screw them back together, various surgeries.

[Peter Kulish] (1:38 - 1:43)

And he put the magnets, that was the **end of October**.

[Peter Kulish] (1:46 - 2:40)

They told him that he **would not really be able to put any weight on it until approximately August** Then he **would start physiotherapy and learn how to walk again**

So, well, he **put the magnets** down the left front leg in the negative meridian and down the right back, back of the right leg in the negative meridian and **everything was fully calcified** and he was **walking by the third week of January** which is basically **four times faster**. And he didn't have to do the extensive physiotherapy that would have come with the normal healing. So using these **meridians** is, I mean, applying magnets on the correct meridian is a very essential and important issue.

[Peter Kulish] (2:41 - 3:10)

So we go back to, let's see here, where is it here? Yeah, okay. We go back to the **knee circuit** and on the right leg, you apply positive below the knee in two spots, to the left and to the right.

[Peter Kulish] (3:12 - 3:38)

And when you look at the back of it, you, let me see. Well, no, excuse me. That's the left leg. The left leg is the back of the anterior, I mean, the posterior dorsal side of the left leg is positive. So that's where you apply the positive, just below the knee.

[Peter Kulish] (3:40 - 3:45)

And on the, oh, wait a moment.

[Peter Kulish] (3:45 - 4:49)

Pardon me, I'm sorry. I'm looking at this thing incorrectly. I don't have my glasses on.

Okay, well, what you do is you **apply the negative energy above the knee on the front of the left leg** And you **apply the positive energy below the knee on the back of the leg**. Essentially **maintain a circuit of negative on the front to positive on the back through the knee**.

And we have a **knee kit** and it shows, in another photograph, the application, but that's essentially it. You apply positive and negative. On the right knee, the positive goes below the knee.

Always the positive is always the furthest away from the heart. And it goes below the knee

on the front and the negative goes above the knee on the back, on the right leg.

[Peter Kulish] (4:49 - 5:01)

So it's just the opposite of the left leg. And yeah, the knee is, let me just say about the knee.

[Peter Kulish] (5:01 - 5:15)

Since you're questioning it, I assume you have interest in it. The **knee is one of the joints that takes perhaps as long as six to eight weeks to heal.**

[Peter Kulish] (5:18 - 5:22)

Whereas other, the **hip** is similar in nature.

[Peter Kulish] (5:24 - 5:57)

And apparently it's because of the daily stress on it.

The **shoulder** comes in around **four to six weeks**, although there is generally a pain relief. It's hard to say, depends upon the person it could be in **three and a half days, it might take two weeks** but **after about two weeks**, it starts to relieve the pain.

[Joy] (5:58 - 6:25)

Okay, Peter, I'm gonna jump in just because we're coming to the end of our time. We're actually a little bit over. There have been a lot of questions that have come in.

So what I'd like to do is I will compile them all and then get with you separately. And then maybe we can, I'll put all the responses in a document and then Tom Lewis will include all of those responses out with the blog post with the recording, if that's okay with you.

[Peter Kulish] (6:26 - 6:27)

It's fine, sure, absolutely.

[Joy] (6:28 - 6:38)

Okay, do you have any thoughts of potentially **running an educational class** at some point? Because I know an hour is not enough time to really learn about this.

[Peter Kulish] (6:38 - 6:58)

No, absolutely, I'll tell you what, I've been thinking about doing this on a weekly basis and **we're making plans to do it**, absolutely. People need it and we're happy to do it. So I'll be letting everybody know when we've got that together.

[Peter Kulish] (7:00 - 7:01)

Okay, all right, okay.

[Dr Harshfield] (7:02 - 7:11)

Peter, do you mind just touching on **how you're measuring the voltage?** A few people have mentioned that and I think there's quite a bit of curiosity if you wouldn't mind, even just briefly.

[Peter Kulish] (7:12 - 7:14)

Sure, sure, sure.

[Peter Kulish] (7:15 - 7:18)

As a matter of fact, let me go to a slide that's available on that.

[Peter Kulish] (7:22 - 9:38)

We spent some time using, I had someone come in who used a **BIA machine**, which is a device that **runs a very slight current through the body** and it's very sensitive and as it **goes through the cells**, the cell's membrane provides, depending upon its voltage, **provides a certain impedance or resistance.** That's how it's measured and through

that resistance, they're **able to depict what the voltage is** and it's quite remarkable. I mean, **basically it's about two or \$3,000 volt meter** and they used to do it with a Superconducting Quantum Interference Device (SQUID), the long name for a million dollar volt meter.

They used to measure the cellular voltage, but because of technology and everything, they've been able to bring it down to an instrument that, you know, to sit on the desk and we ran the series of voltage tests, which if you go to our site, it's under research, you can look up the tests. It's quite remarkable actually, because we had, like I started to mention, we had one woman who was in bed for 25 years. She had malabsorption, nothing could be done.

I mean, she had tried everything, including magnets, but you know, we kind of know what we're doing with magnets. So we got with her and her voltage within an hour, it hadn't gone up in months and that's with specialized diets and everything. And her voltage went up over a hundred points in an hour.

And then within about 30 days later, she was up and about out of bed after 25 years.

[Peter Kulish] (9:38 - 9:47)

So yeah, we use the device.

[Peter Kulish] (9:47 - 10:09)

We don't use it on a daily basis. I mean, we got the stats and certainly the proof of the pudding in before and after tests using our various therapies, which again is under research. So yeah, I mean, it's been excellent. It really helped guide us.

[Joy] (11:02 - 11:26)

Yeah, so Peter hosts a forum on his website. Anybody can join the forum. Just go to his homepage, scroll down to the bottom and you can join his health forum.

This is a forum you can ask any questions and Peter does regularly monitor it and replies to the forum. Okay. Very good.

So Dr. Harshfield, I'll turn it over to you.

[Dr Harshfield] (11:29 - 15:58)

Peter, thank you for that presentation. This is a perfect group for you, as you must know. As a radiologist, we play around with magnetic fields all the time, intentionally and accidentally, I must say.

Maybe one thing we should do is that the literature kind of reminds me when we first started using stem cells, a lot of the information came from the early 1900s, 1904, when they started drawing blood, putting it back in to cut some wounds, but nobody wrote anything down.

So in the 60s and so forth, when we figured out how to do endoscopic knee surgeries and how to do surgeries in general, **there was no literature to show any of these orthopedic surgical procedures were effective**. And even today, there's **less than 20% of the surgical procedures we do that have any literature to back them up**.

So when I say this, **I'm not being pejorative about magnets. It's everything**.

It's lifeway patches, the **things that we use every day** and we know **that work, but don't have a lot of literature to back them up**, and therefore the people in the mainstream can say, **well, where's your literature?**

Now, we can't say the same thing, apparently, although we're getting to where we're at. Push it back a little bit. The thing about magnetic fields that's so interesting, they're very

subtle.

The Earth's magnetic field, one tesla is kind of a unit of magnetism named after Nikola Tesla. And MRI systems, think about your donut-shaped MRI that you go into a torpedo tube. That's about 1.5 tesla in strength. Okay, so what does that mean? There are some open MRs that are 0.3 tesla and refrigerator magnets, 0.0001 tesla. And the Earth's field is only 0.001 tesla itself. We live in a magnetic environment and we start monkeying around with our molecules. And when you go lay in an MRI machine, it has a static magnetic field. So SMFs are what we're talking about.

These are magnets made in the neodymium. **NASA's** used them. They use them for the astronauts.

The push-pull effect of magnets create muscular contraction. That's our problem. We get in space, we don't have enough.

We don't weigh enough. So these things are very safe. Now, having said that, let's think a second about what we're doing.

And remember that when Röntgen, Wilhelm Röntgen in 1894 discovered the X-ray, we couldn't see it. And we saw how it generated a picture when he put his wife's hand in front of a phosphor plate and ran a cathode ray through it. And in a minute or so, it showed a figure of her hand with her ring finger.

That's the first X-ray taken. We couldn't see them, so we called them unknown X-rays. And later in life, 40 years later, we realized this radiation is dangerous.

Not all of it, but we have to pay attention to some of this stuff. Because when we throw you in a magnetic field, that's not nothing. It's safe.

It's not ionizing radiation like an X-ray. On the other hand, it's a magnetic field. And our bodies are, in fact, we've got magnetite in our brain.

Remember, there's little dots of magnetic substance, ferrous and ferric oxide. Birds have it to navigate with. I don't know that we use it that way.

It's in their brain, but it's very subtle. And so that we start playing with these things like transcranial magnetic therapies and so forth. We get some fantastic results.

My deal is this, we gotta write this down. This cannot be anecdotal. Because you can't publish 100 patient testimonials.

So when we're using these magnets, we need to push the manufacturers to, hey, write this down, do a study. It won't take that much time. And we're all doing it anyway.

Maybe we could all be little guinea pigs for the magnetic treatment. One of the best studies they've done so far was on the wrist bands for magnets. They couldn't find any scientific reason that they work, but they did for carpal tunnel.

So they just attributed it to placebo effect, which is very powerful. It's very real. So even if that's true, it's a great way to treat.

[Peter Kulish] (16:00 - 19:48)

And it's not- Well, you know, you have to pardon me.

**I wrote a book on this thing.
It's got all the diagrams in it.**

**It's got all the explanations in it.
I've got all the research on the site.**

I am concerned. We had a discussion last time I'm concerned about pulse-to-electromagnetic fields. We've had to develop protocols for people who became very ill for pulse-to-electromagnetic fields because of the pulsing. The pulsing is not natural to the free spin of the electrons, whereas a solid-state magnetic field is.

The only thing I've seen, I mean, obviously the MRI is a wonderful instrument. And I know that there are people who've come out of an MRI and they've been healthier. I mean, some symptoms have gone away.

There are people who've come out of an MRI and have been disoriented from that time on. I mean, really had a big problem. And in our review, the problem is that they had no, there were very low energy levels.

So these people were chronically ill and most of them had malabsorption and they didn't have enough voltage to maintain the proper polarity from these pulse fields that came.

But I'm with you. I mean, I'll tell you what, **I've been doing this for half of my life** and we do need more material.

Now on the site, I try to explain and I try to explain it in the book as best as possible. There are certain mechanisms that I don't understand, but primarily **the energy does have a amplifying effect**. And I've got conditions on the site, A to Z conditions.

We've gathered a lot of information and **we've got a lot of research**. We've done **free radical sites** and seeing that the healing from those, which is about **bare bones inflammation**, as you can see, we can see there's a tremendous increase in healing and a **reduction of the free radical sites as soon as the magnets are applied**. So, you know, to keep this in mind that **not all this is anecdotal**, but a lot of what I've discussed has been anecdotal, but comes through **as clinical cases**.

So I just wanted to make that statement because I was getting the feeling that perhaps, you know, everyone thought that this was anecdotal. No, it's all written down. You know, I mean, we've covered a lot of it.

So, you know, there's so much to cover that, Joy, when you say there's an hour to do the work, I get nervous, you know? You know, it's almost impossible to touch base with the elements as they really should be portrayed. So, but anyway, I'm sorry, doctor, I don't mean to override your conversation.

I just wanted to make sure that people understand that **there's a wealth of information that we have**. We have over 400 pages on the site. So, you know, and as you know very well, there's a wealth of information that we don't have, you know, and that we're still learning.

And, you know, I follow your lead on that, my friend.

[Dr Harshfield] (19:49 - 21:56)

Well, and to your point, you can lay in a magnetic field that's becoming a static field that's low from left to right and toe to head. So the static field, you lay in there and people that were manic depressive, we'd learned, it changed their mentation. And mostly when you get out of the MR, you have to pee.

That's, I don't know how that works, but you better pee before you go in there because your little kidneys love it. But it allows these folks to get from their left to their right brain more easily because of these gradients that are naturally in a static MR field. And so to

your point, we've noticed that we just, we're gonna have to write this down.

And not that it has to be double blind randomized trials. **Nobody can do those sorts of things.** And some of this stuff just makes sense.

It's like those **academics over in Europe got tired of all these scientists going, well, you need a double blind randomized trial to say this.** They go, hey, I got a deal. If it makes sense and it's not harmful, we should be able to try it.

And they kept arguing with him. And one Christmas, about six or eight years ago, these kids, PhDs wrote this paper. It was awesome.

Okay, here's what we're gonna do. **We're gonna test parachutes when you jump out of a plane. We want these academic scientists to get in the plane. We're gonna randomize them. And the ones that have parachutes, I'll bet, they're gonna do better.**

So in other words, to your point, I know **we're held to a lot higher scientific requirements than the stuff that's in status quo**, but we've got to do it.

I know the Lifeway people are doing it with their patches. We know the stuff works, but we have to do these trials. And again, there's 100 people on this call right here that you could use to see how they do.

Just set up what the dosage is, what their weight is, basal metabolic index. Dr. Lewis has them all labbed up. I mean, we know what everyone's strengths and weaknesses are in their little rubber test tube that we call our body.

What the heck? I mean, it wouldn't take much to do that. And you're a very bright man.

I mean, again, I'm not questioning you.

[Dr Tom Lewis] (21:57 - 22:56)

What I see, David, and I think we all agree there's **plenty of science behind it.** Look, **it's one of the most fundamental things, forms of energy, electromagnetic frequency.** And like Peter says, the static is more natural than the pulse, but why do we- The static is natural.

It is natural. Whereas the pulse- Use the right, shouldn't you use the word more? Is that- It is, yeah, sure.

I always tell people I default to the natural first and then we might add something synthetic as we go. But so like, why do we use PEMF? Because it penetrates deep into tissue and it has a perpendicular electric field.

Electrons are what heals, if you listen to **Tom Levy**. Now I wrote in the comment that **electrons are known to heal.** We don't know so much about the mechanism of the magnetic component, but the magnetic component is there concomitant with the electrical component. And so we know-

[Peter Kulish] (22:57 - 25:28)

Well, it just really, I mean, what you're doing is you're **using the magnetic field to excite the electrons.** The electrons are there. So **in exciting it, you increase their voltage** which **increases all the transfer efficiencies** **increases all the ATP functions**

It just **increases everything** And of course, the nice thing about it is by using that field, it **increases it to normal.** That's where you wanna go anyway, you know, whereas it may have been stuck and oftentimes is stuck.

And so that's the wonder about, but the **solid state field** is, well, let me put it this way. What we found, because we've had to help people who had a **huge sensitivity** to **EMF**, **EMF** had taken them and it just **destroyed their lives**. **EMF** is the same as PEMF, okay?

It's the same thing. And the reason being is that solid state will accelerate the electron in its free spin, whereas the PEMF, it pulses. So you've got an aggressive energy, you've got a collapse stop energy, you've got an aggressive collapse stop and that many times per second.

And, you know, the **electron** is the thing affected by the **magnetic field**. I mean, that is the essence, the mechanism of which makes it work. And that stop-start thing actually, you know, creates a problem, particularly with people who do not have the energy to support the action that the PEMF has created.

The energy is not there to go in and help these cells rebuild their energy. And so what happens is the PEMF depreciates the spin, depreciates the voltage, it depreciates the cellular function and these people become, they get malabsorption and they become stuck with it. And, I mean, there's no doubt about it.

The PEMF technology certainly has its benefits, but it has to be done very carefully with folks who are ill.

[Dr Tom Lewis] (25:29 - 26:06)

It's- Peter, I gotta cut everybody off because I have a 130 and I have to use the same device, but, you know, you don't have to worry about an hour. I mean, this is a topic of great interest to folks. **The beautiful thing about it is the cost, the flexibility and the fact from a scientific perspective, it's foundational, electromagnetic energy.**

So we'll have you back on again. We'll publish this. Joy is gonna look to getting you answering, to answer some of the questions that were left unanswered.

And, you know, it's great. I'm not fully fluent on it yet. So I'm looking forward to another session with you if you're willing and able.

[Peter Kulish] (26:07 - 26:14)

Well, I might. I'm willing. I don't know if I'm able necessarily able, it's all good.

[Dr Tom Lewis] (26:14 - 26:18)

All right. Thank you. Thanks, Tom.

You're welcome. Bye for now.