

The Magic of AcuDetox®

by Brian C. Bailey M.D.

Part One, Chapter Two: The Magic Reveals (Much of) Its True Nature

For the first two years since introducing it in our *stress management* practice, **AcuDetox** had become a fetching but still poorly-understood (*mysterious*) “**black box**” phenomenon. Patients who were “*stuck*” - unable to “*slay the dragon*” of stress - would attend 15 **AcuDetox** sessions - following which two out of three somehow became “*unstuck*” - succeeding at a hard-to-believe rate of about double our usual psychotherapy success rate. And these results were unrelated, as far as we knew, to anything we had added or could add to the process.



*Mirroring Smith's substance-addicted patients, our stress management patients were experiencing less anxiety, insomnia, and agitation, were becoming relaxed and more comfortable with their own thoughts, experiencing a sense of “letting go” of tensions and apprehensions, and were entering more easily into participation in group settings with others, relating better with self and others, and participating more readily and willingly in treatment. But symptom across-the-board relief muddied the waters rather than shedding light. Documenting symptom relief was not tantamount to seeing the inner dynamics of what was happening. While we were able to see these mental-emotional-spiritual benefits through the eyes of Traditional Chinese Medicine (TCM) as benefits of the acupuncture correction of deficient kidney yin, we were encountering and seeking to understand those patients who failed to realize these benefits. With some clients we used extra acupuncture after **AcuDetox** to improve our results. While Dorothy and I had both been trained to appreciate the dynamics of TCM, we were, at heart, Western-trained psychotherapists. So, we were constantly on the lookout for ways of person-to-person interaction with our clients which would further improve our results.*



Examples of our quest for ever-improving results included pushing people to achieve even more once they began to move forward and congregating people in followup groups after their three weeks of treatment. My pushing people to move faster was an unmitigated failure. I learned from it that the help we can be as providers demands much more incisiveness and subtlety on our part. On the other hand, our conducting post-treatment groups immediately improved our results considerably. We initially attributed the success to our giving people a forum in which to articulate their changes.

If we had restricting ourselves to following up on our clients individually, we might have missed the phenomena that occurred when people who had just done **AcuDetox** discovered the excitement of talking to others who had recently been through the process as well. The people who gathered for our monthly post-treatment groups seemed unusually hungry for the experience of comparing notes with others. We had done lots of group work before, so this was cause for excitement on our part as well, and an impetus driving us to understand what was happening here. We were hearing such comments as him “*Wow, that's almost exactly how I feel!*” and were getting requests for more of these evenings.





While people's enjoyment of the group was one thing, the fact that once we got people together in groups, our overall results were getting better was another. We began to see the people finding common ground with each other. And the somewhat joyous discovery of this common ground was followed by each of them becoming more adventuresome in their lives. After talking to someone else who was wrestling with a similar issue, each of the two gained in terms of their own *competency*. We began to see a rudimentary pattern emerging by which people who had been depressed talked together about the initiatives they were taking in their lives now, and people who had been primarily anxious began to talk with others who were similarly discovering that a peaceful flexibility was supplanting their pre-treatment hypervigilance. It was in our groups that the word *competency* began to be more often used.

Then I twigged to what was occurring with **Gordon** - that after **AcuDetox**, his ability to "read" the emotions of others around him had "*turned on*" for the first time - and remained turned on. **Gordon** had noted the actual phenomenon himself, but it took my pointing it out to him for him to see that his lifelong inability to "read" people's emotional milieu had brought about his Peeping Tom misadventure. He had then been able to use this realization to solve his problem.

I began to see my pointing out how his new experience could solve the problem he came with in the first place as equivalent to the joint discoveries which were happening when people came to the post-treatment groups. I then began to see the pattern more clearly. For all intents and purposes, there were **three stories and three stories only** of arising *competency* following **Acudetox**. There were the people who had previously been depressed who were talking excitedly about their *spontaneous* initiatives. There were the people who had previously been locked in anxiety were talking about the competency of peaceful *flexibility*. And there were the people who found, like Gordon, a newfound *resilience* in the ability to "read" others. **The black box had given up the first of several secrets as to how it works. This would be the first revelation of many.**



Researching the Sudden Acquisition of An Ability To Function Extraordinarily

When I saw **Gordon** go from being oblivious to the feelings of his ex-girlfriend one day to being supersensitive to the feelings of his new girlfriend the next and then being able to purvey this new ability into an elegant solution to the terrible abyss into which he had fallen, the lights went on as to what was happening that rescued our **AcuDetox** patients from their *stuckness*. Undoubtedly *the acupuncture correction of deficient kidney yin* was the key stimulant - but the stimulant of what? What had emerged was a fully-developed-highly-specific-and-much-needed ability which previously was hidden from the recipient by an apparent blind spot. **Gordon** would never have solved his Peeping Tom problem without becoming able to *read other people's feelings*. He couldn't possibly have taken into consideration the feelings of the person he was spying on, because they weren't part of his consciousness. No amount of insight would ever have gotten him there. Furthermore, without this ability, his goose was cooked.

My knowledge of brain physiology reminded me that the processing of data about the emotions of others rests largely in the brain's *limbic system*, the central aspect of the brain which is about the size of a fist or slightly smaller. It is the *limbic brain* which predominates in the higher mammals like dolphins, whales, horses - and of course our domestic pets. It is the functioning of this brain that gets our pets to sense how we feel, and to respond accordingly.

Of course, this ability is not restricted to these higher mammals. It is also part of the functioning of the human brain, and we know that it predominates in the personalities of some humans more than others. Nor is the idea of it not functioning to the degree that we need it to, foreign to us either. This is really what is happening with ADD and ADHD. When sufferers of *Attention Deficit Disorder* struggle, it is because rather than “reading” what is going on within people around them (chiefly at school in the case of ADD and ADHD) they have to “make it up” using their thinking. This leads them to be disruptive or “out of the loop” with feelings occurring around them.

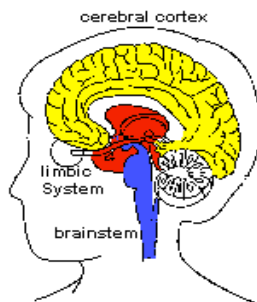
As I turned over in my mind what had happened with **Gordon’s** spectacular instantaneous turnaround, I began to search through the repertoire of my own experience, looking for professional work in which the findings indicated a part of the brain which was not functioning optimally – which by some outward intervention or inward correction, regained normal functioning or even began to function on a higher level than normal. As it happened, I had come across just such work. Not only did I know of the work, but I actually knew the people who were pursuing the work.

Hurley & Donson’s Repressed Centres

I had come to know this remarkable couple - **Ted Donson** and his wife **Kathy** of Denver Colorado through their rental of the conference center my wife and I operated since 1988. Until recently (*Ted has since passed away*), they trained people from around the world in their understanding of personality dynamics - and on two occasions held their international training at our centre - *Econiche House In-The-Gatineau*.



What struck me was that seeing the emerging of an entirely new ability like *being able to read the emotions of others* reminded me of their model of human functioning, advanced by them in several books - which they called the **Repressed Centers** model. They describe their model as follows:



On the nonmaterial plane, people are composed of **three centers of intelligence: thinking, feeling and doing**. These three capacities have been named and worked with in all of the world's philosophies and religions from both east and west, ancient and modern. Further, they are ratified in modern brain research which has found the human brain to be on three levels. The core is the physical brain (old brain and spinal cord), which is the home of the doing (*or INSTINCTUAL*) center (*here coloured BLUE*.) The mid-brain is the emotional-relational brain (*or SENSORY centre*), home of the feeling center (*here coloured RED*). The third part is the neocortex, which is the home of the thinking (*or CONCEPTUAL*) center (*here coloured GOLD*). Because of wounding in childhood, human beings use two of these centers predominantly **while leaving the third behind**. This imbalance is the foundation of personality and creates three temperaments.

People who are predominantly feelers and doers: the **Responders**

People who are predominantly thinkers and doers: the **Go-getters**

People who are predominantly thinkers and feelers: the **Introspectives** ⁸.

⁸ **Hurley and Donson** are the authors of several groundbreaking books. their repressed centers work is seen in *Discover Your Soul Potential*, available through their website at: <http://www.hurleydonson.com/e21c.htm> The italicized portions from the Hurley/Donson website quotation above are mine - the bolded emphasis is mine too.

If you are a Responder, it's likely that you:

- Have a strong sense of duty.
- Look for clearly defined direction.
- 3. Feel secure when you know your are accepted and appreciated.
- 4. Tend to work out the details of your projects and programs.
- 5. Want to know how a group or system works before you rise up its ranks.
- 6. Feel more secure in a group when you know there is strong leadership in it.
- 7. Set high personal standards for responding to people and/or situations.
- 8. Tend not to be a risk taker.
- 9. Have a "show me" or "prove it" approach to anything new.
- 10. Diligently and willingly complete responsibilities laid before them.
- 11. Easily take suggestions for improvement as criticism of your work.
- 12. Take one step at a time and hope the "big picture" will emerge.

If you are a Go-getter, it's likely that you:

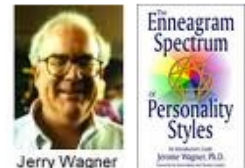
- 1. Communicate directly, factually and to the point.
- 2. Are energized by competitive challenges.
- 3. Convincingly tell rather than persuade.
- 4. Tend to move quickly from the details to the bottom line.
- 5. Inspire others to contribute and/or participate in your projects.
- 6. Can confidently sell either tangibles, intangibles or both.
- 7. Are friendly and skillful with people until you meet resistance.
- 8. Tend to have a wide variety of interests.
- 9. Are primarily interested in results, not process.
- 10. Are a quick decision maker.
- 11. Are often surprised at how strongly you come across to others.
- 12. Resist supervision and deflect other people who attempt to direct your activities.

If you are an Introspective, it's likely that you:

- 1. Pride yourself on your highly individualistic approach, even when others don't appreciate it.
- 2. Generally take the time to listen to a person who needs someone to talk to.
- 3. Are usually astute at reading others' relationships and/or life situations at a distance or when you are not personally invested in the situation.
- 4. Are very dedicated to your special interests.
- 5. Emphasize precision and excellence in your work.
- 6. Are dedicated to and will persevere to the end with projects that are important to you, even if they are laborious.
- 7. Are prone to be independent about your life and make decisions based on your personal likes and dislikes rather than on practical necessities.
- 8. Tend to become discouraged when you run into obstacles and then give up on the project or idea.
- 9. Won't change your mind unless you can prove to yourself that the new way is better.
- 10. Dislike massive structures and detailed regulations.
- 11. Don't waste your energy on anything you don't find fulfilling.
- 12. Tend to underestimate the time and resources needed to complete a project.

In the **Hurley-Donson REPRESSED CENTERS** model depicted above, all people, without exception, fit into one of the three temperaments, based on an emphasis on which two parts of the brain are predominantly used, and which part is predominantly not used (i.e repressed), and therefore is silent unless something can be found to re-engage it. **I've colored one of the temperaments red to indicate that I see Gordon as fitting this temperament - based on what I saw as the reanimation of his limbic brain function following AcuDetox.** We'll come back to this shortly.

Hurley and Donson hardly derived their model out of thin air. They evolved it as students of the **Enneagram of Personality**.⁹ Previously, **Dr. Jerome Wagner**, of Chicago's *Loyola University* had written his PhD thesis on a similar model of the same three temperaments which were distributed throughout the population. While categorizing people by pigeon-holing them into a fixed category which seeks to make some sense of their behavior differs fundamentally from the way mainstream psychiatry and psychology see things, a virtually identical model had been proposed in the 40's by psychoanalyst **Dr. Karen Horney**.



Dr. Karen Horney

The Hornebian Triad is a triad developed by **Karen Horney**. Her division emphasizes how an individual 'automatically' tends to cope with long term stress. The Triads are:

Assertive: These people have a tendency to move into the situation - to make their presence known and assert their wills.

Compliant: These folks attempt to decrease stress by becoming compliant - to external demands, conditions or internal ones (superego) or to rules.

Withdrawn: These people withdraw from the source of stress - either physically removing themselves. Or removing their awareness onto other matters, or zoning out¹⁰.

⁹ see Hurley and Donson's other books - *What's My Type* and *My Best Self* <http://www.hurleydonson.com/books.htm>

¹⁰ Horney, Karen, *Our Inner Conflicts*; New York (New York), W.W. Norton, 1945; and *Neurosis and Human Growth*; New York (New York), W.W. Norton, 1945.

We had an important realization after pondering over the dynamics by which **Gordon** completely solved the major psychiatric problem with which he presented, and after delving into the work of **Jerry Wagner, Kathy Hurley** and **Ted Donson** and the still-relevant-today work of **Dr. Karen Horney**. It was that our **AcuDetox** patients were emerging from their treatment sessions telling one of three *competency* storylines which indicated that they were suddenly enabled to *transcend* their **Assertive (Gogetter), Compliant (Responder),** or **Withdrawn (Introspective)** personality structures¹¹.

The year 2011 will be our 16th year using **AcuDetox** for *stress management*. When we started, in 1995, we were seeing two of every three recipients respond positively to treatment. *The other third had no response at all - or so it seemed at the time. I see it differently now.* Whether I heard it right or not, I came away from the *Alcohol and Drug Foundation of Ontario* presentation **Dr. Smith** gave in Toronto in 1990 with the impression that 85%+ recipients of **AcuDetox** for *substance addiction* were having positive results. This compared very favorably with the industry standard success rate of 30%. Not only have I striven to reach that level of success (85%+), because **Smith** hung that figure out there as the gold standard, but I saw it mattered how we offered **AcuDetox** and how our clients received it. If we walked away from anyone who did not get it right away, or if our clients gave up at the first sign of difficulty, we would never have seen the vast improvement in our results which occurred over the 15 year time period.

We know that with **AcuDetox**, an ability to function at a higher plane of performance bubbles up from within. We know this happens with all types of lifelong stress - from severe mental illness to normal functioning in a person wanting to move to a higher level of functioning. So we also know that whatever the starting point, the endpoint is not just normal functioning but *an extraordinary level of competency*.

We know that about one third of our clients break through to higher functioning with no more assistance on our part than informing them to some extent what to expect. We know that another third will benefit from putting their story into words, and when we hear these stories, we are struck by how articulately they are expressed. They also know that there is a final third of people who will need some assistance with what bubbles up. Just talking about a *final third* suggests, I know, that everyone who receives **AcuDetox** gets the effect - without exception. More and more I've come to believe that to be the case, as an increasing percentage of the final third accept and make use of the assistance we can provide.

The appearance of the results of **AcuDetox** is rarely if ever like a thunderbolt. When new capacities show up they don't come on "*like gangbusters*" like the *peak experience*¹² phenomenon described by **Abraham Maslow** and others. For this reason, sometimes our help in pointing out, then building a platform under what is occurring has been the factor which made the results sustainable. I would like to give you some examples of our delicate dance between letting the recipient make the discoveries and inserting ourselves so that people saw what they were still blind to, even though it had begun to operate in their life.

If we go back to our very first patient, **Sarah**, whose story was told in *Chapter 1*, there was really very little involvement on our part, with the exception, perhaps, of my partner **Dorothy's** forbearance in the face of behavior which was not very endearing. I suppose some provider in the future could blow it in the face of a similar situation, by raining down criticism on a constantly complaining recipient. But constant complaining was her way of relieving anxiety, and until she had another way there was really no way she could be other than how she was. How things ended up was that **Sarah** simply stopped complaining. Now, 15+ years later, we can say that we understand better what happened. What we see all the time is that people who are overly anxious over the long haul of their lives have learned to treat everything like

¹¹ Recently, researchers have been measuring circulating levels of the three major neurotransmitters, dopamine, serotonin and noradrenaline. While it is beyond the scope of the present writing to delve into this in detail, **Eric S. Schulze M.D. PhD.** and **Tina Thomas RN, DCSW11** report that people categorized into three Hornevia types have been shown to have different levels of circulating dopamine. The Assertive types have high levels of dopamine. The Compliant types have medium levels of dopamine. And the Withdrawn types have low levels of dopamine. <http://www.enneagraminstitute.com/articles/NArtTina.asp>

¹² <http://www.timlebon.com/PeakExperiences.html>

an emergency. After **AcuDetox**, they become much more *flexible*. Emergencies still do happen in their lives and when they do they can respond to them in kind. But no longer is *everything* an emergency. As life comes down the pipe at them, they take things more in their stride, prioritizing those things that they need to deal with, letting go of those things which are not true emergencies. That's what happened when my patient, **Sarah** came back from her three weeks of **AcuDetox**. The complaints that she had previously were obviously still there. But now they weren't descending on her in such full measure that she couldn't handle them. She was lucky. If she'd only been half way there, I'm not sure that I, being new to what I was seeing, could have offered her the other half – as I could easily do today.

In retrospect, and unknown to us at the time, **Sarah** would likely fit **Horney's Compliant, Hurley & Donson's Responder** category. While she was anything but *compliant*, the full range of people in that category includes perfectionistic people who struggle with compliance as their central issue, and come down forcefully on the *noncompliant* side of the issue. I'd like to point out here, in a case where it's abundantly obvious, that everything needed to set our formerly complaining patient on a different pathway – came from within her. **AcuDetox** does the whole job of unearthing new *competency* – not just part of it, but not every recipient sees that clearly. Help at seeing can be offered and accepted. And it can pay off.

Outside assistance was more a part of the equation with **Cynthia**, the patient with *Borderline Personality Disorder* - but when I remember the predominating feature of working with her, I tend to think of how little help she needed. If **Dorothy** and I had known more about the backbreaking treatment regime which today is often required for *Borderlines* to succeed, we might have steered her in the wrong direction. She didn't need a lot of or perhaps any of the *behavior modification* required by most people with this disorder. I remember **Cynthia** as being quite motivated to move forward, always curious about what she could do next to get her life in order. All she seemed to need was some subtle steering, or at times a modicum of validation for her ideas. She stormed through the issues of her life, clarifying and cleaning up previous messes. She almost always appeared with a happy smile, through which one could see that for every difficulty she was still working on, there were two or three which she had already resolved.

Cynthia would probably fit in **Horney's Withdrawn, Hurley & Donson's Introspective** category. If her story of violence directed both outwardly and towards herself does not seem like a *withdrawing* response from an *introspective* person - at an internal level, *withdrawal* was exactly what was going on. From a very early age **Sarah** wanted and needed more attention, especially from her father. The big thing that motivated her was jealousy, and that jealousy had become structured into her personality. She acted out her fears of abandonment by seeking out people he desperately hoped would be interested in her, and then by knocking them off her self-constructed pedestal in the most violent of ways. The most salient feature of her equally self-constructed recovery was that she continually reached out, *spontaneously*, taking a chance on life rather than treating it as a source of misery. What was nice to see was that everything about her was being lived out on the external stage now, rather than being sequestered inside.

Gordon I have are ready to labelled as a **Horney Assertive** (viz. a **Hurley & Donson's Gogetter**. Like all **Assertives**, he needed the “repressed” (as **Hurley & Donson** would call it) **Emotional-Relational Centre** to come alive (i.e. become unrepressed.) Point-blank, he needed to be able to read other people, and he had no capacity to do so - well, no capacity until **AcuDetox** kicked in. To give credit where credit is due, **Hurley & Donson** devised a system by which people in all the categories can work to bring their repressed center back into the foreground in a usable way. Think of how much better a person would be able to benefit from such a system with **AcuDetox** under their belt. This is much the same observation **Smith** had with is addicted patients, who after **AcuDetox** were often able to benefit from *Alcoholics Anonymous* for the first time.



SUMMARY: In Chapter 2 the reader learns that **AcuDetox** is much more than a block box phenomenon. By trial and error and careful observation we saw underneath the surface phenomena of symptom relief - the deeper dynamics in play with our clients—an in fact with all people. The reader as a prospective **AcuDetox** recipient will not need to know and will not even need the **AcuDetox** provider to know which specific dynamic applies in your case. We haven't come to this yet, but the facts are that often enough we only know the dynamic by seeing the end result. Sometimes it's more obvious, but knowing what it is, is not the determinant of how well the person will do. We'll deal with that next!