

Muscle Testing, Kinesiology and the Socratic Health Method

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More and more practitioners and patients are becoming interested in the growing field of muscle testing and kinesiology. Is it voodoo? Is it real? Is it accurate? How does it even work? Let's find out.

For clinicians interested in applying muscle testing in their practice, it is essential to have a broad understanding of the many applications of this evolving technique.

The History and Evolution of Muscle Testing and Kinesiology

The term "kinesiology", in the classic traditional sense, is the scientific study of human movement. The concept of kinesiology dates back to Aristotle in ancient Greece. Kinesiology is a broad-based science, with many different applications in sports, rehab, ergonomics, etc. In today's world, a kinesiologist has studied anatomy, physiology, biomechanics, exercise physiology, and addresses issues involving movement of the human body while earning their kinesiology degree.

Functional muscle testing was developed in 1912 by Robert Lovett, MD, of Harvard Medical School, in order to evaluate neurological damage in polio patients. Dr. Lovett was one of President Franklin Delano Roosevelt's principle physicians. Functional muscle testing was further investigated and utilized in 1922 by Dr. Charles Lowman, an orthopedic surgeon at the Orthopedic Hospital in Los Angeles. A colleague of Dr. Lovett, Dr. Lowman used muscle testing to assess and treat spastic patients, and was the first to employ underwater exercises and aquatic therapy.

The concept of muscle testing was further developed in 1949, with physical therapists Kendall & Kendall. They published the landmark textbook, *Muscles: Testing and Function* which is still the gold standard for musculoskeletal assessment. While using Kendall & Kendall's muscle testing to treat musculoskeletal problems in the 1960's, chiropractor Dr. George Goodheart also began to use muscle testing to help assess and treat many other types of health issues.

Dr. Goodheart integrated elements of Chinese medicine and acupuncture, clinical nutrition, cranial work, chiropractic, lymphatic and circulatory reflexes and functional neurology, and developed this technique into what we now know as applied kinesiology (AK). In 1980, due to his innovative techniques, Dr. George Goodheart was the first chiropractor ever appointed to the US Olympic medical staff. Because applied kinesiology uses Kendall & Kendall's muscle testing as part of the tech-

nique, many people started using the terms interchangeably.

John Diamond, a medical doctor with diplomate status in applied kinesiology, researched and integrated mental, emotional and intellectual aspects of health using muscle testing in the mid-to-late 1970's. The initial result of his work emerged as the field of behavioral kinesiology and was published in his 1979 book *Your Body Doesn't Lie*.

In the early 1980's, chiropractor and AK practitioner Scott Walker developed Neuro-Emotional Technique (NET), which integrates muscle testing, neurophysiology, acupuncture, nutrition, neuro-linguistic programming and psychology. Through Walker's ONE Foundation, there is published research on muscle testing, semantic testing and the clinical efficacy of NET.

In the 1990's, many more healthcare techniques emerged, using muscle testing as the primary method of communicating with the body-mind-spirit complex and assessing treatment options. Many of these techniques use the word "kinesiology" as part of the name for their technique.

In 1995, David Hawkins, MD, PhD, published the landmark book *Power vs. Force*, which describes in great detail the science behind muscle testing and kinesiology. His work goes beyond clinical methods alone and explains the value and efficacy of muscle testing via advanced theoretical physics, nonlinear dynamics and quantum mechanics.

At present, there are over 80 different forms of therapy in the world which use some form of muscle testing. Tens of thousands of practitioners are treating hundreds of thousands of patients and clients all over the world with a diversity of techniques that use the clinical science of muscle testing. Are they accurate?

The Accuracy of Muscle Testing

Based on research, muscle testing at its best, in the hands of a truly objective, fine practitioner, is about 92% accurate. With 92% accuracy, muscle testing places in the realm of most standard tests, including blood tests, urine tests, saliva tests, X-rays, in-home pregnancy tests, etc. No test is ever 100% accurate; however, many are better than 90%.

I have found in my 16 years of clinical experience that muscle testing can be a great first line of defense for information gathering, assessment and decision making, especially when the mind cannot know what to do. Most healthcare practitioners use their minds alone to try to figure out what to do with



about the author

Dr Andrew Colyer, DC, CSCS, DAAPM, FIAMA began his holistic health career in 1993, and has been a healthcare and business consultant since 1994. He is certified as a strength & conditioning specialist and diplomate in pain management, and with Neuro-Emotional Technique, Total Body Modification and the Gration Technique. Some of the many modalities Dr. Colyer utilizes include acupuncture, advanced chiropractic, clinical nutrition, herbs & homeopathy, neurology, sports injuries, BodyTalk, Yuen Chinese Energetics and Applied Kinesiology. Dr. Colyer has been using muscle testing since 1991 with thousands of patients, building an in-demand practice through the successful use of muscle testing. He can be reached at andrew@muscletestingtips.com.

patients. In any credible application of muscle testing, an essential point is this: the patient's body-mind-spirit complex has most of the answers to what is wrong with them, where their blocks lie, and what needs to be done for them to move in the direction of optimum health and well-being. The practitioner just has to ask the right questions.

Not only can a basic understanding of muscle testing assist in discerning what may be harmful in a patient's environment and lifestyle, but a more advanced application also allows clinicians to apply a number of sophisticated techniques to assess and rectify individual health issues. Muscle testing is an assessment and treatment technique that is designed to be part of a holistic approach to preventive and wellness health care. Any practitioner using muscle testing should always apply it in conjunction with a proper history, physical examination, appropriate lab testing, and clinical decision-making. When incorporated into a larger context of patient care, accuracy improves significantly.

Getting More Accurate Results

Many people are muscle testing and not getting consistent or accurate results. Even trained healthcare practitioners perform muscle testing incorrectly; clearly, this can create more of a problem if any course of treatment is based on incorrect test results.

You may have heard, "*Muscle Testing is easy. Anyone can do it.*" It may be simple; however, it is not easy to do correctly. For instance, dancing is easy, and anyone can do it. But there's a difference between great dancers (like Fred Astaire and Ginger Rogers) and the average person. Like any test, many factors go into achieving accurate, consistent results with muscle testing and kinesiology.

While an in-depth exploration of all those factors is beyond the scope of this article, key domains adept practitioners consider include:

- 1) Is the practitioner following all of the correct mental and physical "mechanics" of muscle testing? Muscle testing is a psychomotor skill. There are 19 factors necessary for one to obtain *accurate* and *consistent* results. Many teach that all one has to do is hold the arm up and push on it; YouTube has many videos of amateurs demonstrating this error. Research and clinical experience has shown that this is simply not true if one wants to obtain reliable results.
- 2) Is there clinical detachment on the part of the practitioner conducting the testing? Many novices - and healthcare professionals, for that matter - have a vested interest in what the outcome of the muscle test is; they would prefer to have the answer they want, or the answer they think is correct. The Heisenberg Principle from quantum physics demonstrates that this can radically skew the results of any test, in the favor of the practitioner/observer.
- 3) Is the patient/client capable of being tested in that moment? Practitioners who wish to obtain accurate and consistent results need to check for neurological disorganization (switching) before proceeding with *any* muscle testing protocols. Failure to do so will definitely result in erroneous test results. Neurological disorganization is a state of the central nervous system where the two hemispheres of the brain are desynchronized. It is a common condition, and can result from many factors, including dehydration, hypoglycemia, acupuncture meridian imbalance, and more stress than the central integrative state of the body-mind-spirit complex can tolerate.

The Socratic Health Method

One of the most comprehensive approaches available to clinicians is The Socratic Health Method, an integrated

healthcare system of protocols for assessment and treatment I co-developed with physical therapist Melanie Buzek. The Socratic Health Method evolved as an "umbrella" technique for healthcare practitioners to learn and use in the clinical environment. Blending modern science with complementary healthcare modalities, practitioners learn how to balance their left-brain training with right-brain intuition in an approach to treating patients.

As seasoned practitioners know, people always want to know "the reason" why something happened to them. The truth is, there is almost never *one* reason why something happened. There are usually many factors involved, and the last one that happened often appears as though it were "the cause."

A common mistake with many practitioners is that they learn a few techniques, and then apply those techniques to every patient who walks in the door. If the patient is fortunate enough to have needed the technique that the practitioner provides, then health and healing can occur. It's a wonder that anyone feels better!

Recognizing the limits of this kind of patient care, many practitioners grow to be open to the fact that often what the patient needs is not a service they provide, and appropriate referrals are often necessary. Committed clinicians also continually seek to broaden the scope of their practice with new and innovative methods of treatment, so that their patients will have the maximum opportunity for health and wellbeing.

The Socratic Health Method teaches practitioners how to quickly assess which tools in their own toolkit are appropriate for each individual patient, and most importantly, *in the order that the person needs on that day*. It's amazing how many practitioners will set up a "cookbook treatment plan" for a particular problem, condition or diagnosis, and then apply that same plan to every patient *who appears* to have that diagnosis. Many practitioners do so, ignoring the fact that each is an individual and that the neurology, physiology, acupuncture meridians, mental/emotional state, and energy of the body-mind-spirit complex are a *dynamic system* unique to each.

Dynamic systems function nonlinearly; when *one thing* in the system changes, the *entire* system changes. Nobody is the same from one day, week, or even from one *moment* to the next. The body-mind-spirit complex is constantly changing. Cookbook treatment plans may work for a certain percentage of the population, but clearly can not work for everyone, because every single person is different. Therefore, their treatment needs to be unique to their body-mind-spirit complex.

How does a practitioner who is new or skeptical to muscle testing know who to refer to or which technique to study? There is a difference between *knowing about* something and *knowing* something. Seeing a demonstration or reading books and articles is a great introduction to *know about* something. Having a direct experience will give one a *knowing* about something. Do some research and find several different quality practitioners in order to gain a direct experience with the clinical science of muscle testing. Since there are over 80 forms of therapy that use muscle testing, remember there are many different experiences to be had; do not judge the clinical validity or reliability based on a small number of experiences. One needs to experience excellence to truly know if they can trust the practitioner or not, or if muscle testing is a tool that they can believe in.

Unlike most tests, techniques and methods available to clinicians, muscle testing is a clinical tool that when properly used gives immediate information through biofeedback from the body-mind-spirit complex. Given the immense value this has for patients and their clinical outcomes, it is no surprise that this field continues to grow.