

# Secrets of a Healer – Magic of Iridology

The Story Your Eyes Tell



# History

By Bernard Jensen

Most of the text books on iridology give a rather thorough outline of the stages and development of the science, so we will go into this only briefly. Whether the history is true or not it is no reflection on the science as it is being developed today. The account of the original discovery runs something like this: Dr. Ignatz von Peczely of Egervar, near Budapest, Hungary, discovered nature's record in the eye quite by accident when only a boy of ten years. While playing with an owl, he happened to break one of its legs. He also happened to notice the appearance of a dark stripe in the lower region of the iris of the bird, and later found that this darkened area corresponded to the location of the broken leg. Eventually this black streak became a tiny black spot, around which were white lines and shading. This incident made a lasting impression upon the mind of the future doctor, and when working later in the college hospital in surgical wards, he had a good opportunity to observe the eyes of patients after accidents and before and after operations. In this manner he was enabled to construct the first chart of the iris.

As far as we know, Doctor von Peczely did not follow up the relations suggested by the changes in the iris of the owl until about 1861, when he was treating his very sick mother. At the age of 36 he became interested in medicine and studied first in Budapest in 1862. In 1864 he went on to Vienna. In 1866 he started practicing in Budapest, and published his first book on the iris, "Discovery in the Realm of Nature and Art of Healing" This work was made known in Germany by August Zoeppritz. Dr Emil Schlegel of Tuebingen published a book on the results of von Peczely's work.

There was also a Swedish homeopath, Nils Liljequist, who discovered and improved many of the methods of iris diagnosis and brought this work to America. His writings were translated into two volumes called "Diagnosis from the Eye". It is interesting to note that although these men lived many miles apart and did not know each other, they wrote similar books at the same time, even writing alike word for word in many instances.

Today, after many years of research work by prominent doctors, most of them medical men, all organs of the body have been represented in charts developed through the efforts of these various doctors Dr Henry Edward Lane, a native of Austria, came to this country and taught iridology to Dr Henry Lindlahr from Chicago. Doctor Lane wrote the first iridology book published in this country, entitled "Iridology, the Diagnosis from the Eye". This book was copyrighted and is in the Congressional Library in Washington. The sixth edition was published in 1904. Doctor Lindlahr, as Doctor Lane's student, gave iridology serious study and applied it in his work in natural therapeutics. He wrote a very valuable reference book entitled "Iris Diagnosis," which is Volume VI of his library on nature cure. Doctor Lindlahr was the one who favored the regime of bringing back the acute conditions which began every chronic condition in the body.

It was Dr. Nils Liljequist who discovered, through the effects of vaccines and drugs such as quinine and iodine, that certain color changes and markings eventually appear in the irises of patients who take drugs. In his own words he says:

'In my thirteenth or fourteenth year I was vaccinated the second time. Being formerly hale and hearty, I now became sickly; first the lymph glands of my neck began to swell, then I was taken ill with malaria, vehement cough, influenza, polyps appeared in the nose, terrible pains in the bones of the legs, and all that in the course of a year after the vaccination. Physicians were consulted for years. They always prescribed iodine to besmear the swollen glands, quinine for malaria, and used the tongs to remove the polyps which, however, reappeared every year. Thus years passed by. In the meantime I noticed how the color of my eyes changed more and more, and when twenty years of age I brought forth my discovery: 'Quinine and iodine change the color of the iris; formerly I had blue eyes, now they are greenish with red spots in them. Nevertheless, I continued taking medicine, in spite of the warning of Dr. T., a homeo-path and then a teacher at the Helsingborg gymnasium. He even offered me homeopathic remedies and let me try small granules of sugar. But why didn't I accept his kind offer? I often regretted it, but then my sound judgment was disturbed by a newspaper article which wholly ridiculed homeopathy. I took the same standpoint which the Royal Swedish

Board of Medicine still takes in the year 1893 and believed that homeopathic medicine contained nothing but 'sugar, starch, and water.' Besides I desired to become a physician myself and did not care to promote the "silly teachings" of homeopathy. But the longer and the more I suffered, the more vanished my admiration for the sacrificing, philanthropic vocation of the physician, and finally I lost my liking for it altogether.

"When I came to the city of Lund in 1871, I consulted there new physicians, hoping they would prescribe for me some better mixtures; but I was disappointed. I continually got quinine and iodine with the addition of iron which should help my exhausted stomach. I began to protest, but the physician declared that it would mean my death if I stop taking quinine: As I did not like to die quite so young, I strictly followed his advice. Sometimes I got up to three grams of quinine per doses. Thus I spent six of the best years of my life on the sickbed. Oh' If I had only conformed myself to suffer from malaria, I should have felt well at least some time in my life, as the fever does not appear daily during the whole year But on account of the quinine and iodine dosing I had been constantly sick since my seventeenth year; every day vehement headache, especially in the forenoon, heaviness and dullness above the eyes, ringing in the ears, all symptoms of quinine poisoning.

"Finally in my thirtieth year I arrived at the conviction that there must be other methods to acquire health, and other remedies besides those which I had taken. Professor Jaeger's work *Die neural Analyze* convinced me of the truth and excellence of homeopathy, and in the year 1882 I became my own physician, and I did not get any worse on that account. On the contrary, in spite of having suffered from malaria for seventeen years, and in spite of the immense quantities of quinine and iodine which I had swallowed, I am now at 45 years of age quite a healthy man, full of love and vigor for work"

Other scientists also have used and contributed to this science. For example, Peter Johannes Thiel of Germany is considered one of the great iridologists of the day. Dr. J. Kritzer has written a very splendid textbook called "Iris Diagnosis and Guide in Treatment." Dr Marko J. Petinak and Dr F. W. Collins have contributed charts. Probably the greatest recent contributor to the development of iridology in this country is Dr. R. M. McLain of Oakland, California, who has been teaching this science for many years.

In the past the provisions for learning iridology have been very limited. Very few schools and colleges have taught it. Most of the men who know this science have had to learn it by their own efforts It has been my endeavor to correlate and to bring together into a volume all published material, to include my years of experience, and to present material which will teach this science logically, giving practical explanations and a practical foundation upon which to base conclusions.

## Question?

Do the various features of the iris represent a permanent aspect of an individual's health or will the iris shift and change throughout the person's life in response to their behaviour?

The different schools of iridology seem to answer this question differently and in shades of grey. For the purposes of this course, we can break the schools into two general groups:

### A:

The iris is a "snapshot" of a single point in a person's life and can change due to various stresses and Hering's Law of Cure. Acquired problems and weaknesses show up when the fibres split apart showing the layers below.

The iris is constructed in five layers, as seen in the cross-section of the iris

To illustrate the process of a lesion formation, reflecting the condition of a weaker organ, let us take the example of a person coming down with a cold. When a person ends up with a cold it reflects an irritated mucus condition in the lungs. In the iris, a portion of the lung area, at approximately 2:30 in the left iris, will show swollen tissue fibre that is raised and whitest in colour in a blue iris. A brown iris will show a lighter brown colour in the region. These fibres will appear to rise off the surface of the iris, reflecting an acute condition in the lung.

Acute means a condition in its active stage of inflammation; coughing, sneezing, with a running nose or spitting up mucus. Acute conditions, anywhere in the body, will show up as raised tissue which is whiter or lighter in colour.

At this stage, the outcome is dependent on what the person does. At this point it is important for us to step back and take a look at what the body is trying to do, People who believe in natural therapies don't believe in the post-Pasteurian theory that you just "catch a cold".

You don't just catch a cold for one reason or another. Probably there was a low level of vital energy in the lungs, along with an accumulation of morbid mucus. The mucus with low vital energy is a breeding ground for the virus, thus producing a catarrh. The word catarrh is derived from the Greek - "to flow". Part of the process of a cold is to encourage the morbid mucus to flow out of the body, taking toxic materials with it. If you use a pharmaceutical that relieves the symptoms of a cold, what do you do? You dry up the mucous membranes, crystallizing the mucus so it can't flow. Yes, you relieve the symptoms of the cold but do you overcome the problem? The answer, of course, is "no". All that you do is drive the toxins deeper into the tissue. This gives us a symptom-free situation but brings us into the second level of inflammation.

### B:

Iris markings **don't** change over a person's life.

They are just a blue print of the person's composition (general make up).

These markings would show us what could happen to a person if they abuse their body.

Since 1992, I have been studying Iridology and my own eyes, I have had many changes in that time and with all the pictures that I have taken so far there has been no change to my eyes.

*\*Just remember it takes 3 similar markings to even mean that there may be a serious issue / trait.*

**Our course is based on this 'B' belief system, until science has proved this different.**

## **Some beliefs of what Iridology Can and Cannot do**

*What Iridology can identify...from Jensen & Bodeen, Visions of Health, 1992.*

- The primary nutritional needs of the body.
- The inherent strength or weakness of organs, glands and tissues.
- Constitutional strength or weakness
- Which organs are in greatest need of repair and rebuilding.
- The relative amount of toxic settlement in the organs, glands and tissues.
- Where inflammation is located in the body.
- The stage of tissue inflammation and activity.
- Under activity or sluggishness of the bowel
- Spastic and ballooned conditions of the bowel.
- The need for acidophilus in the bowel
- Prolepses of the transverse colon.
- A nervous condition or inflammation of the bowel.
- High-risk tissue areas in the body that may be progressing toward a disease.
- Pressure on the heart
- The circulation level in various organs.
- Nerve force and nerve depletion.
- Hyperactivity or hypoactivity of organs, glands, and tissues.
- The influence of one organ on another or the contribution of an organ to a condition elsewhere in the body
- Lymphatic-system congestion.
- Poor assimilation of nutrients.
- Depletion of minerals in an organ, gland, or tissue.
- The relative ability of an organ, gland, or tissue to hold nutrients.
- The results of physical or mental fatigue or stress on the body.
- The need for rest to build up immunity.
- Tissues areas contributing to suppressed or buried symptoms
- High or low sex drive.
- A genetic pattern of inherent weakness and their influence on other organs, glands, and tissues.
- The effects of iatrogenic conditions.
- The preclinical stages of diabetes, cardiovascular conditions, and many other diseases
- Miasms
- The recuperative ability and health level of the body.
- The buildup of toxic material before the manifestation of a disease.
- Genetic weaknesses affecting the nerves, blood supply, and mineralization of bone.
- The genetic influence on any symptoms present.
- Healing signs indicating an increase of strength in an organ, gland, or tissue.
- The potential for varicose veins in the legs
- Positive and negative nutritional needs of the body.
- A probable allergy to wheat
- Sources of infection.
- Acidity of the body and catarrh development.
- Suppression of catarrh
- The condition of tissues in any one part of the body, or in all the parts of the body at one time.
- The climate and altitude that is best for the patient.
- The potential for senility.

- The effects of a polluted environment
- Adrenal exhaustion
- Resistance to disease.
- The relationship or unity of symptoms with conditions in the organs, glands, and tissues.
- The difference between a healing crisis and a disease crisis.
- The accuracy of Hering's Law of Cure
- Whether a particular program or therapy is working.
- The quality of nerve force (nerve energy) in the body.
- The body's response to a treatment.
- The whole, or overall, health level of the body.

### **What Iridology cannot identify...**

- Blood pressure levels (normal or abnormal), blood sugar level, and other specific diagnostic findings and laboratory test results
- Which specific medications or drugs an individual is using or has used in the past.
- What surgical operations a person has had
- Specifically what foods a person does and does not eat.
- How much uric acid is in the body.
- The time and cause of an injury to the body.
- Whether a snake bite is poisonous and if the snake venom has entered the bloodstream.
- The correlation between tissue inflammation levels and specific diseases or symptoms or disease.
- Diseases by name.
- Whether a subject is male or female.
- Whether asbestos settlements or silicosis exist in the body.
- If hair is falling out and why.
- The number of organs with which a person was born.
- The presence of a yeast infection, such as *Candida albicans*.
- Which tooth is causing problems.
- The presence of lead, cadmium, aluminum, or any other metallic elements in the tissues.
- If a woman is on birth control pills.
- If a woman is pregnant.
- Whether an operation is necessary
- Whether a tumor is present and what size it is.
- Whether Hemorrhage exists in the body or where it is located
- The difference between drug side-effect symptoms and the symptoms of actual diseases.
- Whether irregular menstrual periods are caused by the thyroid
- The presence of multiple sclerosis, Parkinson's disease, or bubonic plague.
- Whether healing signs indicate a rising of the general health level.
- The presence of syphilis, gonorrhea, or another sexually transmitted disease.
- Orientation toward homosexuality.
- The presence of AIDS
- The presence of gallstones or kidney stones.
- Whether a cardiac artery is blocked.

## **Practitioner Ethics**

Remember being a professional iridologist, clients may take every word you say literally. The brain is a powerful computer, the client may think that what you just said means that they are sick or even have cancer. If a person believes something enough they might just create it. It takes 3 markings to even mean that there may be a serious issue/trait. Take your time in reading your clients eyes, it is a marvelous technique to add into your tool kit of preventative medicine. Iridology, Reflexology, Muscle Testing etc. can be used to understand your client better. Once you have an understanding of your client's constitution, your job as a Practitioner is simplified in eliminating stress in their lives.

A very experienced practitioner charges anywhere from \$25 - \$60. Some Iridologists take pictures of the eyes with a camera (may be an extra charge of \$15.00), computer program or just by the old fashioned way with a magnifying glass. The session may take a half hour to an hour and a half. Some practitioners take the photo and do a reading on it before they even see the client... What ever you decide just enjoy yourself on your new journey of becoming an experienced Iridologist.

## **Reading the Eyes**

To start with you will need to purchase a lighted magnifying glass. There are a few different powers that you can purchase (up to a 10 x is all that is needed for most people). You can usually purchase them from an eye glass store or Eye Dr. Office. Some practitioners purchase a Contac scope so they can read their own eyes.

You will sit on a chair with your legs on one side of the client's chair.

You may want to have a breath freshener; mints or tic tac first. When you are ready to start to read the clients eyes have one hand lightly touching the clients head before you come in with the scope. Make sure you always hold the magnifying glass firmly in your hand. Remember a client can only keep their eyes open without blinking for a short period of time with the light so bright. So he/she may need to take a moment's break.

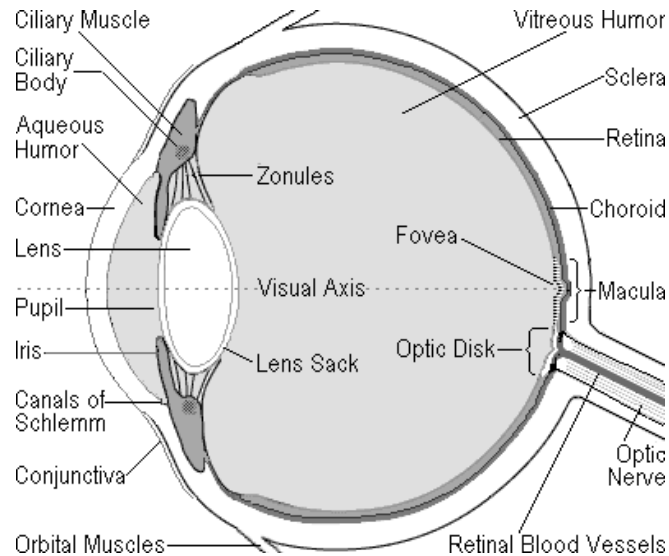
Case studies will be done on a friend or family member who will let you practice on them.

As you go through this course start looking at as many different eyes as possible (even if it is in magazines). Do not tell anybody what you think they have. We are not allowed to diagnosis! If need be just tell them what marking you are looking for. Later when you are confident you may tell them about their personality and what systems will need to be kept healthy.

Enjoy!

# Anatomy of the Eye

## Cross-section of the eye



## Parts of the Eye

The Iris is actually composed of individual fibers (trabeculae) which cross over each other at the autonomic nerve wreath. The contraction and relaxation of the iris tissue alters the shape and size of the pupil, in turn allowed differing amounts of light into the eye. The eye is actually an extension of the brain. Embryonic development stems from the mesoderm and neurectoderm composing the optic cup.

By approx. the seventh month in utero the iris is functional.

Iris size: Approx. 12 mm (size of a dime)

Layers of the iris:

- Anterior border layer
- Stroma
- Muscle layer
- Posterior epithelium

The iris has been estimated to contain 28,000 nerve endings. Medical science, so far, has found no apparent function for these nerve fibers that seem to end blindly in the stroma.

### Cornea

The transparent layer of tissue which covers the eyeball.

### Iris

A coloured, muscular ring which controls the amount of light entering the eye. It lies underneath the cornea, in front of the lens and within the sclera.

### Lens

Which allows the focusing of light on the back of the inside of the eyeball (retinal surface), lies behind both the pupil and the iris and is suspended with its own set of ligaments.



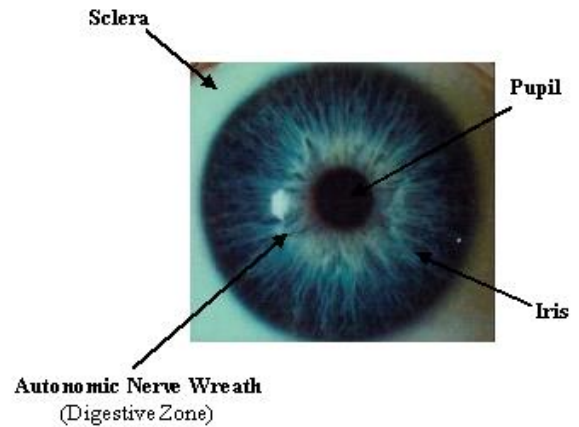
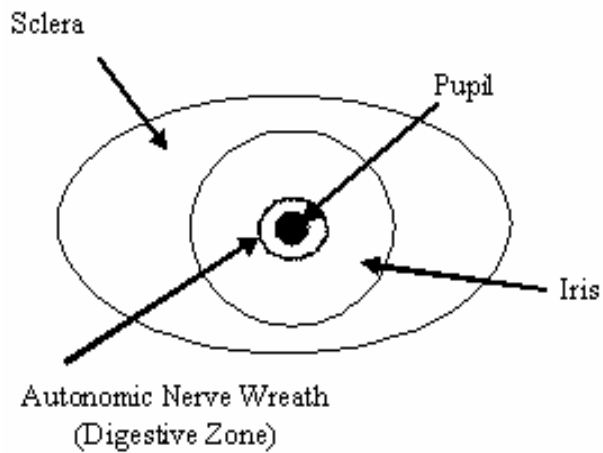
## Pupil

Is the aperture within the iris which allows light to enter the eye. Behind the eye sits a translucent lens which focuses the incoming light. Lens can become cloudy, a condition known as cataracts.

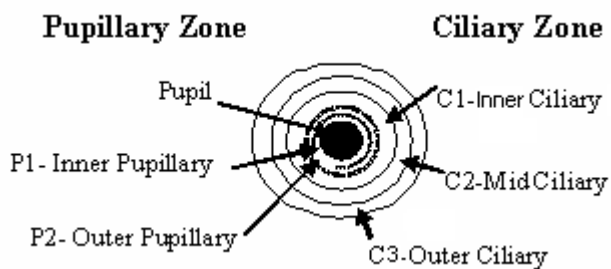
## Sclera

Is the white of the eye, often containing visible blood vessels. It is covered by a translucent layer called the cornea.

## Simple anatomy of the eye



## Simplified Zoning of the eye



## Hering's law of Cure

Three principles:

1. All cure comes from above downward.
2. All cure comes from within, out.
3. All symptoms leave the body in the reversal of the order they enter it.

These three statements can be understood on many levels and as you work with the principles, new applications of it will appear.

1. All cure comes from above downward. If you don't want to be healthy, you won't be. You have to think, feel and desire in order to be healthy. There are many people, some of whom you will no doubt run into, who want to be sick. It is a crutch for them to lean on. They receive attention they otherwise wouldn't. Something for them to feel sorry about. A healthy attitude is a very important ingredient in a well body.

2. All cure comes from within, out. The most vital organs and the most vital parts of an organ will be cured first. Your body will spend more energy to strengthen the health of the liver than spending energy on arthritis in the knee.

3. All symptoms leave the body in the reversal of the order they enter it. Let's say, as in our preceding discussion, a person went through a degeneration process such as cold, flu, bronchitis / pneumonia, hay fever, asthma ... a degenerative lung issue. If this person came into the natural healing clinic and was put on a good natural diet and give the proper herbs, vitamins, and other supplements, after a while they would feel a lot better. The typical response from someone like this after a few months is:

“You know I feel so much better, you wouldn't believe ... I can sleep a whole night through now. Before I could only get a short rest sitting in a chair because when I laid down I felt like I was drowning in the mucus from my lungs. Thanks, you know you saved my life. I'll do anything you say from now on. I'm deeply indebted to you.”

These are warning words to a well-versed practitioner. The patient's vital energies have been raised enough for them to rid their body of a lot of the toxins they have acquired to create their devitalized state in the first place. This person is about to have a healing crisis.

## Healing Crisis

A healing crisis is when the body has gained enough vital energy to rid itself of at least some of the accumulated toxins in the devitalized tissue. The same person, who a week earlier was praising the ground you walked on, might phone back and calling you all kinds of names because they are now sicker than a dog”. In this case study, they would come down with a bad case of asthma, just when they thought they were cured. In a healing crisis, you relive the old symptom set and often it becomes even worse than before ... but usually for very short periods of time, until the accumulated toxins are released. The release of these old toxins is often associated with the elimination of drugs that might have been taken during the period of time of the original disease symptom.

A healing crisis is always preceded by a period of high vital energy and is followed by a period of high vital energy associated with a feeling of release. This whole process of revitalization of the tissue in question can go on until each of the previous symptom sets experienced have gone through a reversal in the order in which they entered the body ... with a healing crisis at each stage until the tissue is completely healed.

The past opinion of healers was that we had to go through all of the healing stages. We have found in our practice this is not necessarily true. A well-trained practitioner can often avoid the need of a major healing crisis, though they will crop up from time to time. If a person goes on long cleanses, trying to vitalize the body quickly, they will definitely have many healing crises. But if they take a slower route, cleanse a little, build a little, cleanse a little, build a little, we can often avoid major healing crises.

Some herbal formulas are very good for this. They may be designed with both slow-cleansing and building properties. This brings the person back to a fully vitalized body by a slower, often more comfortable, path. The change from one health level to another is like changing gears in a car. Sometimes you might “grind the gears” a little but with care, you can switch the gears smoothly.

One of the most common questions at this point is “How can you tell the difference between a healing crisis and a disease crisis?” A healing crisis has a good level of vitality on both sides of it. But you know, to distinguish them apart is little more than an academic exercise. As Doctor Kellogg said:

“You give me any crisis and I can heal that person of all ailments.” When we go into a crisis, whether up the road toward vitality or down the path to a degenerative-type situation, our body is in a state of “health alert”, meaning it can call upon special energies to heal. Let us not forget that fact while reviewing the disease process we discussed at the beginning of the lesson. These were really cases of the body trying to rid itself of toxins and morbid waste.

If you follow the simplest of the laws of nature in a crisis, including plenty of rest, very simple food (maybe just liquid), right vitamins and minerals, and sometimes herbs to assist in the elimination process, you can rid the body of the problem and most often, the organisms associated with it. You have to act before they have too much of a stranglehold.

# Iris Pigmentation

I was also taught this in my Grade 10 biology class

By Bill Caradonna

## Introduction

The iris of the eye provides two characteristics for observation and analysis structure and pigmentation. There are differing perspectives as to the significance of these indicators. This article will examine the origin and types of iris pigmentation and discuss the evolution of their interpretation.

## Eye Color

Throughout the ages, humankind has poetically called the eyes windows of the soul” True emotion hidden elsewhere is often revealed here. But what creates this window? What are we really looking at? Overall eye color is dependent upon the quantity of melanin pigment present Dark brown eyes are heavily pigmented, obscuring underlying iris fibres. Light brown eyes have less melanin, with off-white or yellowish appearing stroma. In blue eyes, there is only a small quantity of scattered melanin granules which reflect light. This is similar to light reflected from suspended particles in the air creating the appearance of a blue sky. Albinos lack melanin and the light reflected on the retina imparts a reddish color. Most Caucasian babies are born with blue eyes, which change color according to genetic determination. The melanocyte granules fill in over the ensuing months. Babies of Asian and African origin are born with murky brown eyes which become darker over time,

The incidence of eye color is dependent upon population composition. Also, coloration definitions must be identical for comparison purposes. The following are two examples of eye color analysis.

- 1) 7000 White Maryland school children
  - 31% blue-eyed (deep blue, light blue, light grey)
  - 36% hazel-eyed (remainder of colors)
  - 33% brown-eyed (hazel brown, dark brown)
- 2) 400 patients in Southern Germany
  - 62% blue-eyed (deep blue, light blue, light grey, hazel)
  - 12% light brown
  - 26% dark brown

While these figures are similar when adjusted to either brown or blue colors, this indicates the subjectivity of categorization. Combinations of pigment patterns create various shadings. Hazel can appear from a basic blue eye with whitish or yellowish overtones. A blue eye with heavier than usual pigmentation in the inner and outer iris zones is often confused with a light brown eye.

European researchers have recognized the importance of iris colors indicators of inherited physical dispositions (constitution). Iris color has also been recognized to delineate differences in motor performance, dental pain, dystonic syndromes, stimulus arousal, and behavioural sensitivities and inhibitors.

## Eye Color Determination:

Several factors influence eye color. This includes both heredity and pigment stimulating factors:

**Heredity:** Eye color is an observable expression of the genetic constitution. Choices of eye color (alleles) are found in a specific position (locus) on the chromosome. If brown-eyed parents have identical alleles for brown eye color (homozygotic), then all their offspring will have brown eyes if the parents' alleles are heterozygotic (both brown and blue choices), then the iris color is inherited in a mendelian manner with blue recessive to brown. This means that an average one out of four children will have blue eyes. If one parent has brown eyes and one parent has blue eyes, but the brown-eyed parent is homozygotic, then all the children will have brown eyes. Two homozygotic blue-eyed parents will have only blue-eyed children.

## Pigment Formation

Embryologically, the pigmented cells of the posterior surface of the iris arise from the neuroectodermal cells that separate from the outer wall of the optic cup prior to pigment migration. The anterior portion, which reflects iris color, arises from the mesoderm and cells that migrate from the neural crest. Both sympathetic cells and melanocytes also originate from the neural crest. The sympathetic nervous system has an important influence on the development of melanin and iris color.

Melanin is found in the cytoplasm of melanocytes by oxidation of the amino acid tyrosine, a copper containing enzyme located in the mitochondria. Melanin is iron-free. The melanocyte stimulating hormone (MSH) of the intermediate lobe of the pituitary gland influences melanin deposition in skin melanocytes but NOT iris melanocytes. Therefore, MSH is not involved in iris color changes. Melanin of the skin, brain, iris, and meninges is bound to various proteins. This may account for the differences in pigmentation. Other specific pigments, or "freckles," are seen in the iris, as well. Rufin, a lipochrome, is responsible for orange and lish colors. Carotenes are bright orange/red unsaturated hydrocarbons. Pure yellow xanthophylls are oxidation products of alpha carotene. Another yellow pigment is thiochrome which has characteristic fluorescence and results from the oxidation of thiamine.

## Heterochromia

Major and minor variations of iris color can occur. When two eyes have different overall colors, this is called "binocular heterochromia." This can be genetically inherited as an irregular but uncomplicated autosomal dominant trait. It can also indicate other inherited syndromes (i.e., Homer's, Waardenburg's.) Sympathetic nervous system disturbances secondary to injury, tumour, etc., is the other reason for this occurrence. Partial pigment variations from the base color occur more frequently and are known as sectoral heterochromias. The size of the heterochromia sector can vary from a few degrees to 1/2 of the iris. This presence is also related to either hereditary anomaly or sympathetic disturbances. Occasionally, this results in a hypopigmented sector (hypotrophic sectoral heterochromia).

In the Maryland study of white children age 12-14, an incidence of .75% was observed for heterochromia. Once brown eyes were eliminated, the incidence rose to 1% (10/1 000). Though heterochromia is observed in brown eyes, it is rare. Heterochromia was seen slightly more in males. A study of 8,000 Belfast children, aged 4-7, produced a similar result. 9/1 000 children were observed to have had heterochromia. No adjustment was made for brown eyes and the percentage of brown eyes in the study was not noted. An Austrian study observed an incidence of .25% of heterochromia in 25,300 individuals from Vienna. Brown eyes were not eliminated. It was also noted that the most frequently found position for sectoral heterochromia was in the lower 1/2 of the iris. Age and sex variations were also seen. 5/6 of all heterochromia were found between the age of 2-19 years, and in significantly higher incidence in females than in males. *Iris Color Changes-An Historical Review*

**Examples of eye color**

Br Br = true brown eyes (iris is a dark brown color)

Bl Bl = true blue eyes (iris is various colors of blue- digestive wreath can be yellow to dark brown)

Br Bl = hybrid eyes (iris is various colors of brown)

Bl Bl = true blue

**Figure #1**

If both parents have hybrid brown eyes,

- Their children have a 25% chance of having true brown eyes
- 50% chance of having hybrid eyes
- And a 25% chance of having true blue eyes.

**Figure 1**

		Parent A (Mom) Hybrid eyes	
		<b>Br</b>	<b>Bl</b>
Parent B (Dad) Hybrid eyes	<b>Br</b>	Child Br Br	Child Br Bl
	<b>Bl</b>	Child Br Bl	Child Bl Bl

**Figure #2**

Parent A has hybrid eyes and parent B has True brown eyes.

- Their children have a 50% chance of having True brown
- And a 50% chance of having Hybrid eyes

**Figure 2**

		Parent A (Mom) Hybrid eyes	
		<b>Br</b>	<b>Bl</b>
Parent B (Dad) True brown eyes	<b>Br</b>	Child Br Br	Child Br Bl
	<b>Br</b>	Child Br Br	Child Br Bl

Figure #3

Parent A and B has True blue eyes.

- Their children have a 100% chance of having True blue eyes

**Figure 3**

		Parent A (Mom) True blue eyes	
		<b>B1</b>	<b>B1</b>
Parent B (Dad) True blue eyes	<b>B1</b>	Child B1 B1	Child B1 B1
	<b>B1</b>	Child B1 B1	Child B1 B1

Current iridology practice has its origins in the late 1800's, first with Ignaz Von Peczley, a Hungarian physician, and then Nils Uljequist, from Sweden. Von Peczley concluded, "Azure is the normal color of the eye of the Caucasian race; that all opathically treated diseases darken the color of the eyes." Liljequist's observations were stimulated by the decline in his own health after vaccinations in his early teens. Having repeatedly taken prescribed quinine and iodine, he concluded that these drugs were responsible for a shift in his eye color from, blue to greenish with red spots by his early 40's. Henry Lane, an Austrian M.D. and student of Liljequist's, emigrated to the U.S. and authored the first American iridology text in 1904. Much of the foundations of beliefs regarding his color change in America originated here.

These beliefs included:

- 1) All newborn children of healthy parents have blue eyes. Further references were made to the "superiority" of the blue-eyed individual. (This followed the Eugenic beliefs of this period that racial groups had genetically based differences in intelligence and behaviour.)
- 2) The darker the color change, the more morbid the condition, and further-more, expelling morbid matter will create lightening of the iris color.
- 3) Blue-eyed parents infected with scabies would bear children with brown eyes, or at least with pigments or scurf rims.
- 4) Pigmentation is caused by drug deposits. Allopathic remedies said to influence eye color included mercury, quinine, iodine, arsenic, phosphorus, strychnine, lead, salicylic acid, creosote, turpentine, glycerine, opium and derivatives, and potassium bromate. Subsequent American authors Lindlahr (1919) and Kritzer (1921) furthered this belief by associating eye color changes with other chemicals such as sulphur, coal tar, sodium, iron, potassium, lime and magnesium.

These early pioneers suffered from a lack of diagnostic capabilities that we take for granted today. While they had only limited power magnifying glasses, we have microscopes capable of 40X magnification. They had to rely on color drawings for records. We now have high quality photography. Modern medicine has also

provided us with an understanding of genetics, physiology, and pathology unknown then. In light of these advances, let us review these beliefs involving pigmentation:

1) Blue-eyed babies are the result of genetics not healthy parents.

2) The belief that “all brown eyes should be blue” is unfair to a majority of the world’s population.

3) Scabies, a mite infestation causing itching, was rampant in the 1800’s and early 1900’s. It was assumed that such infections and the absorption of its protein products was the cause of some of the pigmentation in the iris. Specific iris pigments were often referred to as Psora or Psoric Itch Spots. We now know this assumption to be incorrect

4) The concept of “drug spots” in the iris also does not stand up to modern scrutiny.

The types of chemicals or drugs we are exposed to have changed drastically, yet this belief has persisted with newer drugs being substituted for old ones. Actual drug deposition in the eye has been seen with only a handful of drugs with MSH-like action. This includes mephenytom, chloroquine phosphate, chlorpromazine, and bisulfan. While having pigmentation effects on the skin and sclera, they do not appear to affect iris color. Other hormones that are known to influence skin pigmentation, but not iris color, include corticotropin, estrogens, progesterone, androgen, thyroid, cortisone acetate, and epinephrine.

5) The issue of color changes is greatly over emphasized. Numerous people have detoxified and recovered from illness without a concurrent color change. Cases of eye color lightening have also been observed without corresponding cleansing or healing. Certain types of irises may reflect color changes more frequently, i.e., the mixed brown eye (transitory eye - Kriege), hazel eyes, or eyes with central heterochromia presence. Other influences on the perception of eye color include size of the pupil, light quality in the room, and clothes the subject is wearing. Inconsistent photography must be recognized for its major role in perpetuating color misperceptions. “Before and After” comparison photos have been proven unreliable. Variables influencing the accuracy of color reproduction include camera model and capability, flash consistency, film types, and development process. Evidence of these errors as iris color change can be observed in several American iridology texts. Is “Eyes - Windows of the Body and the Soul” contains numerous “after” photos taken with a red free filter attachment. This removes much of the brownish pigments from the photo, increasing a blueish appearance. It is evident because the sclera and eyelids also have a blue hue. The author admitted its use. “Iridology Simplified” contains a patient case of recovery from serious illness. The before and after pictures are quite different in color due to glaring photographic inconsistencies. Also, the appearances of changes in iris tissue openings emphasized by the author are from large differences in pupil size. Recent advances in camera systems (i.e., the LENA system), have reduced the possibility of photographic error, supporting the observation that much of the color change issue was caused by equipment inconsistencies. Current computerized *iris analysis* has not been helpful in further illuminating this issue. Color graduations are derived from iris photos, not the naked eye, duplicating the photographic inaccuracies. *It is noteworthy that the American emphasis on color change is virtually absent in European approaches.*



## What Does Happen

Pigments come from pigment releasing cells in the iris. Specific pigments are rarely seen in young children, but appear to aggregate over time. Deck interprets the occurrence of specific pigments as primarily genetically regulated. He recognized that specific types of pigments, especially in the area of other defect signs, reflect a defensive focus. Therefore, the sign can precede demonstrable pathology. Other smaller pigment aggregations are seen as a response to pathological reactions. The exact mechanism by which the chromatophores in the iris are stimulated to form an aggregation of pigment is still a mystery. Several German researchers detailed pigment significance according to color, shape, and location. Rudolf Schnabel (1882-1952) devoted a whole volume to this subject, "Iridoscopy," published in 1959 after his death. Deck further delineates pigmentation into topo-stable (location specific) and topo-labile (overall color and pattern more significant than location).

## Drug and Chemical Exposure

Early Iridology writings in the late 1800s postulated that chemical ingestion and/or exposure were responsible for certain iris signs and associated coloration changes. These chemicals included mercury, quinine, iodine, arsenic, phosphorus, strychnine, lead, salicylic acid, creosote, turpentine, glycerine, opium and derivatives, and potassium bromate.

Later writings in the early 1900s added sulphur, coal tar, sodium, iron, potassium, lime, and magnesium to the list. If this was the case, then the iris could be a useful diagnostic tool for these exposures or be used to monitor these toxicities.

In the ensuing years, these beliefs have been disregarded by European researchers, while they have been continued to be actively taught in America.

*Our course **does not** believe these to be chemical and drug marks!*

## Structural Signs

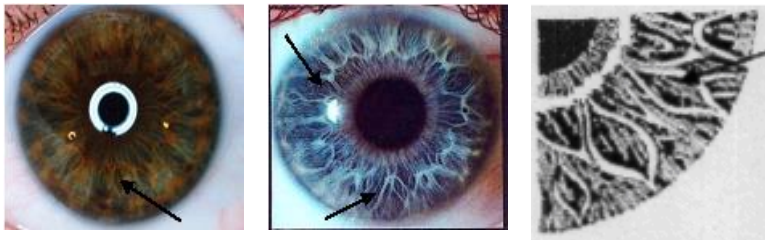
Eye marking(s) that might be in any system of the body.

### Check the CD for Structural Signs

#### Lacunae

Lacuna (plural lacunae), is Latin for “pit” or “hole”, relating to lacune or “lake”.

Lacuna is the word the Europeans use for lesions. As stated lacunae are exactly like lesions with various levels of inflammation: acute, sub-acute, chronic and degenerate.



#### Appearance:

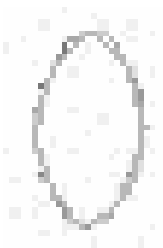
Distinct rounded deficiency of tissue.  
Resembles a flower petal.

#### Meaning:

Indicates decreased vitality or functional capacity of organ or system.

**\*Must evaluate location, size, pattern & depth.**

#### Leaf Lacuna



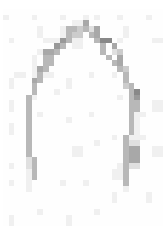
#### Appearance:

Borders of lacuna join into oval shape.

#### Meaning:

Indicates lowered vitality, requires more energy to regain or maintain functional capacity.

#### Open Lacuna



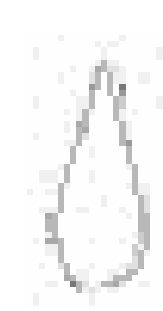
#### Appearance:

Borders of lacuna do not come together.

#### Meaning:

Can be an area of expression of symptoms as a “safety valve” for vitality to maintain balance.

#### Pear Lacuna



#### Appearance:

Pear shape

#### Meaning:

This lacuna is the precursor of the much-feared asparagus lacuna and is supposed to indicate a strong tendency toward cancer (Again, no running to the washroom mirror to look for problems. These are “research” indications and do not always indicate severe problems).

## Lance Lacuna



**Appearance:**

Tight / skinny leaf lacuna

**Meaning:**

Also a forerunner of the asparagus lacuna, the lance lacuna indicates a predisposition towards possible degenerative problems such as cancer.

## Torpedo Lacuna



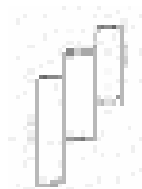
**Appearance:**

Tear drop

**Meaning:**

Large torpedo lacunae represent genetic weakness according to some European researchers. We have seen these lacunae when there was no indication of “normal” genetic weakness. Smaller versions of this shape are considered to represent tumours or possibly cysts in the indicated area.

## Step Lacuna



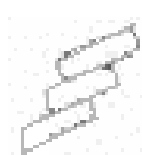
**Appearance:**

Vertical rectangular shapes joined together

**Meaning:**

This shape indicates that there is a weakness in the pancreas.

## Shingle Lacuna



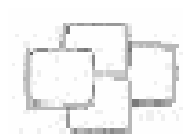
**Appearance:**

Slanted rectangular shapes joined together.

**Meaning:**

Shingle lacuna are basically the same as step lacunae but are “tipped over” and also represent pancreas weakness.

## Honeycomb Lacuna



**Appearance:**

Joined squares, resembles a bee hive honeycomb.

**Meaning:**

Europeans feel this represents an endocrine imbalance. Also often represents a general mineral deficiency.

## Crypt / Rhomboid Lacuna



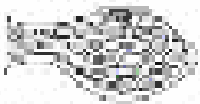
### **Appearance:**

Diamond or rhomboid shaped openings that are located directly inside and outside of bowel wreath. It is also the classic shape of the heart lesion known as the heart diamond

### **Meaning:**

Reflects decreased nutrient exchange, pocketing, or defects in bowel tissue. It is normally seen in the glandular zone. May mean Diabetes mellitus, hypoglycaemia, etc.

## Asparagus Lacuna



### **Appearance:**

Look like the tip of an asparagus.

### **Meaning:**

Some Europeans feels that this lacuna represents a 99% probability of cancer.

We have seen many patients with such lacunae that do not have cancer ... but who do usually have at least a cyst or other advanced problems.

## Iris Pigmentation (color):

After determining the background pigmentation of the iris constitution, there are other localizes and specific pigments.

The colour can determine the level of inflammation, toxicity or acidity in the patient's body.

In most cases, color indicates reduced organ functional capacities or increased susceptibility to stress.

### **Color**

Straw Yellow -

Orange -

Fluorescent Orange -

Brown (light, medium, dark, reddish) -

Black/Tar -

### **Meaning**

Kidney

Pancreas and Liver

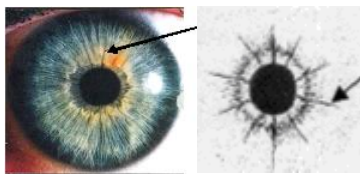
Gallbladder, Pancreas and Liver

Liver

Pre-cancerous and Liver

Check CD/internet pictures

### Radial Solaris



**Appearance:**

Notice the spoke like lines that radiate out from the pupil.

**Meaning:**

Each of the lines indicates a low level of seepage from the intestinal tract into the area represented on the chart.

Thus producing a low level of septasernia (septic blood) and inflammation.

This area may be high in parasite activity.

### Radial Furrows



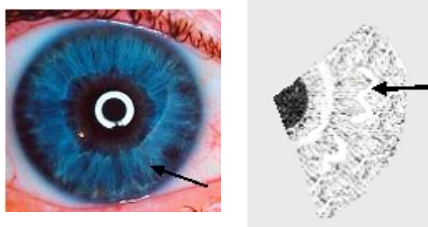
**Appearance:**

Notice the spoke like lines that radiate out from the ciliary 1 zone or autonomic nerve wreath.

**Meaning:**

This indicates increased toxic material in the adjacent and surrounding tissue.

### Transferrals



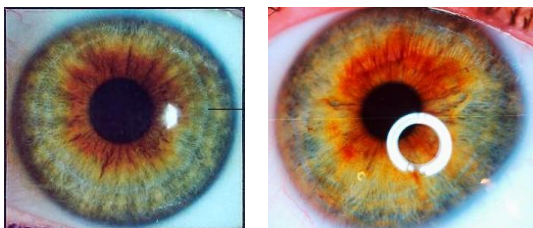
**Appearance:**

Reflexive fibres that transverse the normal direction (squiggly sideways line)

**Meaning:**

Irritation inflammation or pre-cancerous genetic indicators

### Central Heterochromia



**Appearance:**

Orange color (color varies) digestive zone

“Opposite” pigment around the pupil, generally in the digestive or nutrient transport and assimilation zone

**Meaning:**

Increased challenges or focus on digestive and intestinal function.

### Sectoral Heterochromia



**Appearance:**

Orange color (color varies) on iris C1-C3

Opposite” pigment in section of iris.

Varies in size and extension to the iris edge

**Meaning:**

Genetic marker; may be significant depending on color and location.

## Topostable Pigments (fleck)



### **Appearance:**

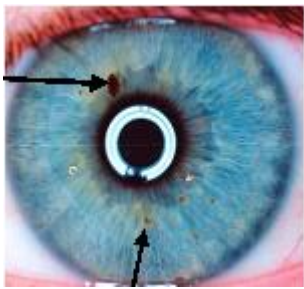
Color fleck, singular pigments that are significant due to appearance or location.

### **Meaning:**

Indicators of potential stress or reactivity in region.

Map or location, specific.

## Topolabile Pigments (flecks)



### **Appearance:**

Color flecks, general pigment pattern scattered through the iris.

### **Meaning:**

Coloration indicates organ susceptibility.

Not map specific, though individual pigments may be considered topostable.

## Miscellaneous Structural Signs

### Arthritic Netting

#### **Appearance:**

Whitish web that is around the outer ciliary 3 zone, usually only seen in blue eyes.

#### **Meaning:**

Increased Arthritic tendency

### Defects

#### **Appearance:**

Small openings or holes in ciliary zone of iris tissue.

#### **Meaning:**

Lowered activity or vitality in specific area.

### Perifocal Lightening

#### **Appearance:**

Extra whitish band, usually bordering a lacuna

#### **Meaning:**

Increased irritation or inflammation in local area.

### Pinguicila

#### **Appearance:**

Deposit of yellowish fatty tissue on the sclera, usually at the midline 3 and 9 o'clock.

#### **Meaning:**

Indicates either tissue response to sun, wind, sand, or glare, or indicator for disturbed fat metabolism and liver stress.

## **Pterugium**

### **Appearance:**

Thickened conjunctive tissue extending over nasal cornea.

### **Meaning:**

Tissue that grows and can obscure underlying iris and interfere with vision if large enough. Usually occurs from sun, wind, sand, glare, or as a stress reaction. Surgically removed, they re-grow approx. 50% of the time.

## **Rarefaction of Stoma**

### **Appearance:**

Subtle or distinct tissue dropout in limited area

### **Meaning:**

Decreased vitality or functional capacity in specific area.

## **Reflexive Signs**

### **Appearance:**

Distinct singular or multiple white fibers

### **Meaning:**

Indicate irritation and inflammation in local region. If pink or red, more reactive.

Look first in the client's right eye, starting at one o'clock and then proceed around the clock to 12:00 o'clock and then repeat the process in the left eye for any marks and check mark each: fleck, lacuna, rarefaction, color, etc,

## Physical Integrity

### I - Resiliency

The iris is composed of two sphincter muscles that are formed by many fibres that resemble spokes of a wheel and together act like the adjustable aperture of a camera.

This is a background identifier which indicates the measure of ability to work hard with reduced physical stress, decreased frequency of illness, increased recuperative abilities, and greater longevity potential. Also indicates the abuse capacity of the body

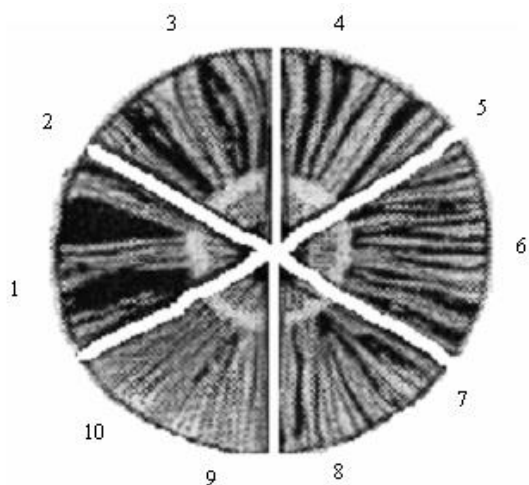
### Appearance

Observe layers or depth of iris tissue and density of fibres. The greater amount of fibres, density and layers, the higher the resiliency.

The more layers and the closer the fibres are, the more resiliency.

If the person does not abuse themselves, more resiliency = healthier life

The closer these **fibres** are, the better the resiliency (10), genetic strength or constitution of the parts.



An analogy that is used:

An oak desk: Oak has a very tight grain and can take much abuse without showing it. It can easily withstand a blow and continue to function. Were as a pine desk, has a softer consistency and a greater tendency to show damage. Drop something sharp or hard on a pine desk and it may show the results forever.

#### Resiliency Scale

1-2 = Pine wood	or Burlap material
3-4 = Fir wood	or Muslin material
5-6 = Oak wood	or Cotton material
7-8 = Maple wood	or Rayon material

9-10= Iron Wood or Silk material

People with a strong resiliency/constitution, (tight fibered irises) can “get away” with more than people with loose fibered irises.

You have heard of the big guy being able to eat 2 hot dogs, 3 hamburgers, french fries, drinks lots of beer and keeps on going. Haven't you wondered how they can still be healthy? They have strong resiliency / constitutions! Where other people become sick with the smallest change from a perfect diet. These people usually have a weaker resiliency. A common term for this quality is tissue reserve.

The greater the individual's overall tissue reserves, the greater the resources they can call upon in times of stress or poor nutrition. Often these strong resilient individuals abuse themselves terribly when they are young because they can take it and around age 45-50, they go to the doctor saying “I've never been sick a day in my life but lately I just feel run down” or “Why do I have arthritis? I've been athletic and healthy my whole life “The abuse catches up sooner or later, even if you have a strong resiliency.

People with a weak resiliency often teach young to walk a narrower health path and therefore often enjoy life to the fullest because they have not abused their life's vital energies.

### **Check the CD/internet pictures for Resiliency numbering.**

Notice the thickness and layers of iris fibres.

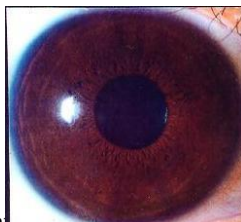
1



6



10



Some pictures from Bill Caradonna

1 being mildly resilient (burlap/Pine) to 10 being extremely resilient (silk/ironwood)



## **II - Resiliency Subtypes:**

Physical Integrity Measurement

Connective, Polyglandular and Neurogenic Tissue

**Check the CD/internet pictures for Resiliency Subtypes.**

**A- Connective Tissue Type** (look ahead in your manual at what a lacuna is, flower petal)

Rating 1-4

**Meaning:** Predisposition to connective tissue weakness reflected in organ ptosis (esp. abdominal), varicosities, and spinal anomalies and subluxations

Appearance:



Loose weave of stroma throughout the iris.  
Notice some of the lacuna's touch (connect) ciliary zones  
*Always touching C1-C3 (inner thru outer).*

## **B- Polyglandular Tissue Type**

Rating 4-7

**Meaning:** Tendency for deficient output of secretory glands, usually digestive (pancreas & gallbladder), and hormonal (adrenal, pituitary, and thyroid).

Appearance:



Daisy petal' pattern of lacunae around the collaret wreath.  
Notice some of the lacunas are only in the ciliary zones 1-2 (inner thru mid). *They are all sizes and can be anywhere*

## **C- Neurgenic Tissue Type**

Rating 7-10

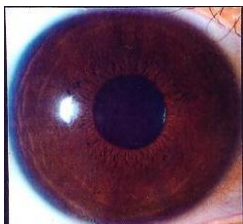
**Meaning:** Increased resilient nature.

Often diligent, hard working, industrious, without appearing stressed.

Differentiation between ROBUST and DEFICIENT variations important.

Risk for nervous system exhaustion, headaches from vascular spasms.

Appearance:



A combination of thin, stretched, and /or delicate fibres frequently seen with a small pupil.

*No lacunas at all.*

Robust - Many layers and great density

Deficient - Few layers and less density

### III - Resiliency Modifiers:

#### **Check the CD/internet pictures for Contraction Furrows**

#### **Contraction Furrows**

Contraction Furrows are also known as; Stress rings and nerve or cramp rings

Rating 1= many and very deep and thick, 9 = hardly any and very, very faint

Decreases proper breathing, increases neuromuscular tension and spinal subluxations.

Decreases calcium availability, esp. in Brown eyes.

Muscular cramping increases (watch chest, abdominal, & upper back areas as well as TMJ (temporal mandible joint disorder).



Indicator for attraction to stress.

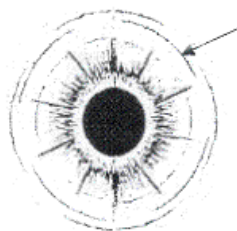
Many projects going at once, not enough hours in the day, never a dull moment, life in the fast lane.

Like a spring wound up inside.

If pushed all the way to the extreme, nervous breakdown behaviour exhibited.

Deep tissue work, aerobic exercises, and deep breathing indicated.

Appearance:



Contraction Furrows

Circular rings, usually in the mid and outer ciliary zones. Can be also seen with Neurogenic subtypes and less frequent with Polyglandular types, and infrequently with Connective Tissue types.

#### **Digestive Zone**

#### **Autonomic Nerve Wreath, Digestive Wreath or Collarette Wreath**

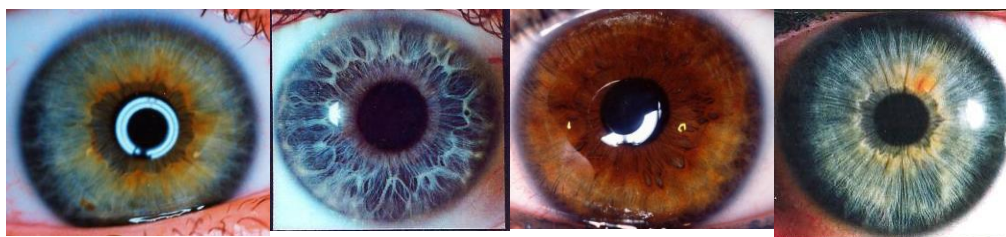
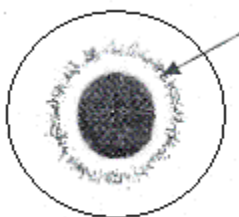
Rating Balanced is a 10 anything else varies 1- 9

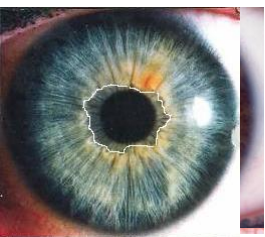
Also known as the bowel wreath, how your bowels are working usually determines your state of health.

Digestive Wreath divides Pupillary 2 and Ciliary 1 Zones

Notie the textures of the fibres are different.

Appearance:





Where to look for a wreath

**Check the CD/internet pictures for Digestion Pictures**

**IV - Iris Constitution or Genotypes**

**Lymphatic, Mixed / Biliary or Hematogenic**

**Check the CD/internet pictures for Lymphatic, Mixed / Biliary or Hematogenic**

Colour of the Iris

Many iridologists believe that there are really only two colours of iris: blue and brown. Generally this might be true, though there are several variations between the two. Also, there are people with “birthmarks” that might reveal themselves, for example, as a brown wedge in a blue iris. Generally, the colours of irises fit into these two basic categories of blue and brown.

Blue irises are classified by the European iridologists as the “lymphatic” type and brown irises are called the “hematogenic” type.

If we look at the anatomy of the iris of the eye we see that the blue colour is due to the reflection of light from the posterior epithelia layer as seen through the unpigmented stroma. This is quite similar to the colour we see resulting from sun reflecting off the surface of a lake.

Brown irises, on the other hand, have pigmented cells in the fibre of the iris. The more pigment, the darker the brown of the iris. For this reason, it is much harder to determine the fibres in the iris of a brown-eyed person. Even though it is an over generalization, we can find a fair number of differences between people who have the two eye colours.

Blue eyed people more often have lymphatic, acidity and catarrhal problems and therefore have a higher predisposition to such things as arthritis, allergies and respiratory conditions.

The brown-eyed person tends toward endocrine, blood toxicity, nerve problems and imbalances.

Apparent inconsistencies in eye colour are abundant. Many people appear to have brown irises, when in reality; they have a blue iris with a lot of toxins, especially in the gastrointestinal tract.

A blue iris with brown toxins appears brownish or hazel in colour.

Green irises are often blue irises with yellow toxins resulting from faulty liver metabolism or the improper elimination of toxins, due to the breakdown of sulphur-containing amino acids.

A yellowish color can also occur in people with a systemic Candida yeast overgrowth.

Most of the colors in the irises of the eye that deviate from the strict blue or brown iris are the result of toxic accumulations.

Some people believe that often these iris colours will change, perhaps very slowly, back to their genetic colour, if the person adopts a subtle cleansing diet, an occasional fast and the use of cleansing herbs.

Within the two genetic colour types, we can make some basic classifications that will aid us in learning preventative health care measures and about a person's genetic predispositions. For example, we can identify the foods that one should eat and those best avoided ... based on a genetic predisposition.

### **Lymphatic (Blue eyes)**

Rating 1-4



Blue eye due to lack of melanin pigment  
Tendency for excess mucous production and discharges with focus on the upper respiratory, lower respiratory,

alimentary, and urogenital tracts.

Overactive immune system and allergies, over acidity, and lymphatic congestion are often present.

Dairy is particularly mucous forming.

Increasing the position to eczematic,

### **Mixed / Biliary (Brown eyes)**

Rating 4-7



Light brown pigment over laying visible white/yellowish fibres.  
Focus on liver, gall bladder, and associated digestive disturbances.  
Often aggravated by dietary errors.

You will never see any blue in them.

### **Hematogenic (True brown eyes)**

Rating 7-10



Original nationalities of; Asian, First Nations, East Indian, etc.  
Brown pigment 'carpet' obscuring iris and fibres.  
Tendency to disorders of blood composition.  
Liver and gastrointestinal areas are also a focus.  
Observe for endocrine disturbances.

### **Iris Constitution Subtypes**

#### **Over Acid or Febrile**

##### **a. Over Acid**

Rating 1-4 (Lymphatic eyes only)

Appearance: Blue eye with whitish fibres.



Acidic, arthritic nature aggravated by over acid foods (meat - esp. red, coffee, chocolate, white flour, white sugar, dairy, alcohol, over acid citrus, and tomato/eggplant family). Kidneys require extra support.

##### **or b. Febrile**

Rating 1-4 (Lymphatic eyes only)

Appearance: Extremely white fibre appearance. Kriege calls this the "steel grey" eye (white fibres have a *greenish* or *yellowish* tinge).



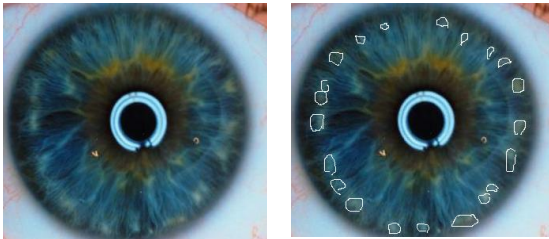
Feverish nature, especially as a child.  
Suppression increases acidic, arthritic risk, with extra stress on the kidneys.

### Hydrogenoid or Uric Acid (Cotton balls)

#### a. Hydrogenoid / Lymphatic Rosary

Rating 1-4 (Lymphatic eyes only)

Appearance: Tophi (tiny cotton balls) connective tissue bundles - in outer ciliary 3 zone.  
Can range in appearance from distinct to poorly defined, and from white to discoloured.

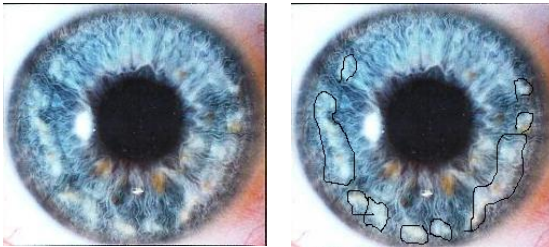


Extra risk for lymphatic congestion and immune system over activity.

#### or b. Uric Acid

Rating 1-4 (Lymphatic eyes only)

Appearance: Thick tophi (big cotton balls) plaques in the ciliary 2 zone



Excess uric acid re-absorption. Irritation to kidneys and increased incidence of gout, gouty arthritis, kidney stones (esp. calcium oxalate), and cardiac irritation.

### Scurf Rim

Rating 1-7 (not in Hematogenic eyes)

Appearance: Darker distinct ring in outer ciliary 3 zone

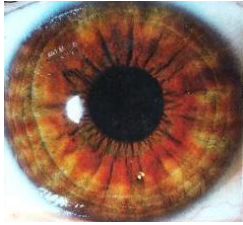


Increased mucous production.  
Decreased skin elimination stresses the kidneys.

### **Ferrum Chromatose (Tiger striping)**

Rating 4-7 (Not in Lymphatic or Hematogenic eyes)

Appearance: Bands of small dark “snuff tobacco” pigments that accumulate on the surface of the iris

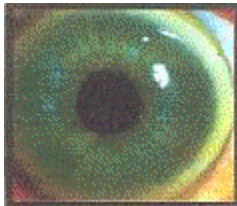


Extra emphasis on the liver. Can indicate “wear and tear”. Pay extra attention to areas where pigment has settled, especially if accompanied by other signs.

### **Lipemic Diathesis / Corneal Arcus / Cholesterol ring**

Rating 1-10

Appearance: **White or yellowish** color ring usually in C3. Fat deposition in outer cornea (ciliary 3) obscuring view of iris fibres. Not a true iris sign comes with age and cholesterol level.



Increased errors in fat metabolism when seen in the ages of the 40’s, 50’s, and 60’s.

Risk of arteriosclerosis and cardiovascular problems. Also liver, pancreas and thyroid insufficiencies. Normal aging sign when seen in later life.

### **A start to Charting**

Have fun by looking at someone’s eyes and start to evaluate – an idea to their overall resiliency.

## Iridology Charting

**A)**

1. Have you ever had an eye injury? Yes \_\_\_ No \_\_\_ \_\_\_\_\_
2. Have you ever had an eye surgery or laser treatment? Yes \_\_\_ No \_\_\_ \_\_\_\_\_
3. Do you wear contact lens? Yes \_\_\_ No \_\_\_ Color \_\_\_\_\_

**B) Check both eyes quickly, write down first thing you noticed.**

Right eye \_\_\_\_\_ Left eye \_\_\_\_\_

**C)**

**Physical Integrity**

Scale (1 is bad 10 is good)

Balanced

<b>Resiliency</b>		R	1	2	3	4	5	6	7	8	9	10
		L	1	2	3	4	5	6	7	8	9	10

**Resiliency Subtypes**

Connective Tissue

Polyglandular

Neurogenic

	R	1	2	3	4	5	6	7	8	9	10
	L	1	2	3	4	5	6	7	8	9	10

**Resiliency Modifiers**

Contraction Furrows

	R	1	2	3	4	5	6	7	8	9	10
	L	1	2	3	4	5	6	7	8	9	10

Digestive Zone

Placement

	R	1	2	3	4	5	6	7	8	9	10
	L	1	2	3	4	5	6	7	8	9	10

Quality

	R	1	2	3	4	5	6	7	8	9	10
	L	1	2	3	4	5	6	7	8	9	10

Shape

	R	1	2	3	4	5	6	7	8	9	10
	L	1	2	3	4	5	6	7	8	9	10

**Iris Constitution**

**Lymphatic**

**Mixed Biliary**

**Hematogenic**

Over Acid

1 2 3 4

Febrile

1 2 3 4

Hydrogenoid

1 2 3 4

5 6

7 Tophi Color \_\_\_\_\_

Uric Acid

1 2 3 4

Tophi Color \_\_\_\_\_

Scurf Rim

1 2 3 4

5 6 7

Ferrum Chromatose

1 2 3 4

5 6 7

Lipemic Diathesis

1 2 3 4

5 6 7 8 9 10

**Over all Resiliency**

1 2 3 4

5 6 7 8 9 10

(Neurogenic increases over all resiliency)



## **Part 2 Iridology Contents**

Content

Charts

How to Chart (*Section A, B & C*)

Over view

    Resiliency

    Resiliency Subtypes Connective, polyglandular, neurogenic

    Contraction Furrows

Autonomic / Digestive Wreath Placement, Quality & Shape

Iris Constitution

Pupil Tonus (*Section D*)

Structural Signs (*Section E*)

Sclerology

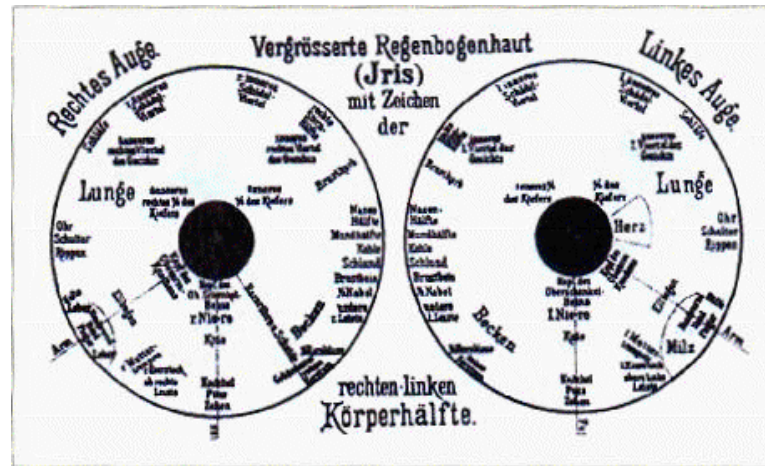
Emotional Constitutions (*Section F*)

Putting it all together

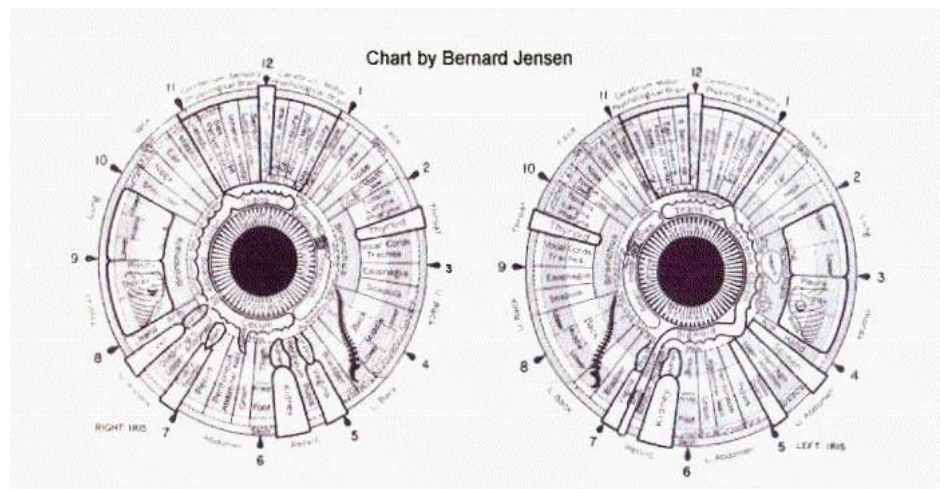
# Charting

# Different Charts

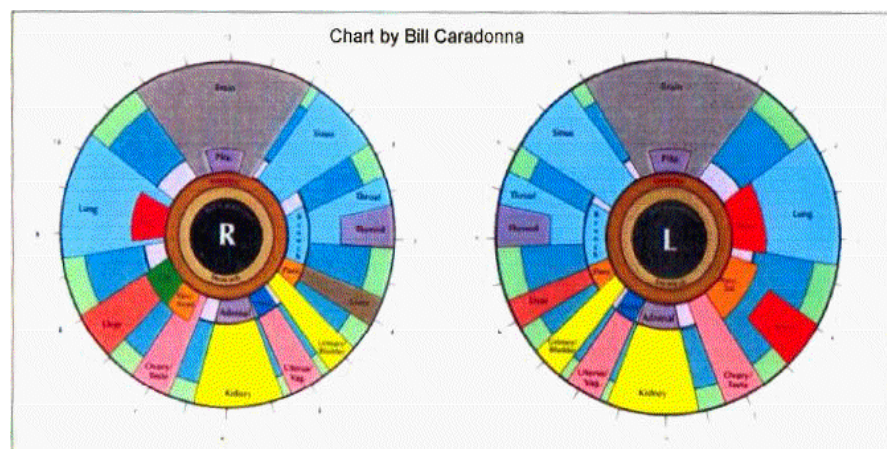
Dr. Peczely's Chart



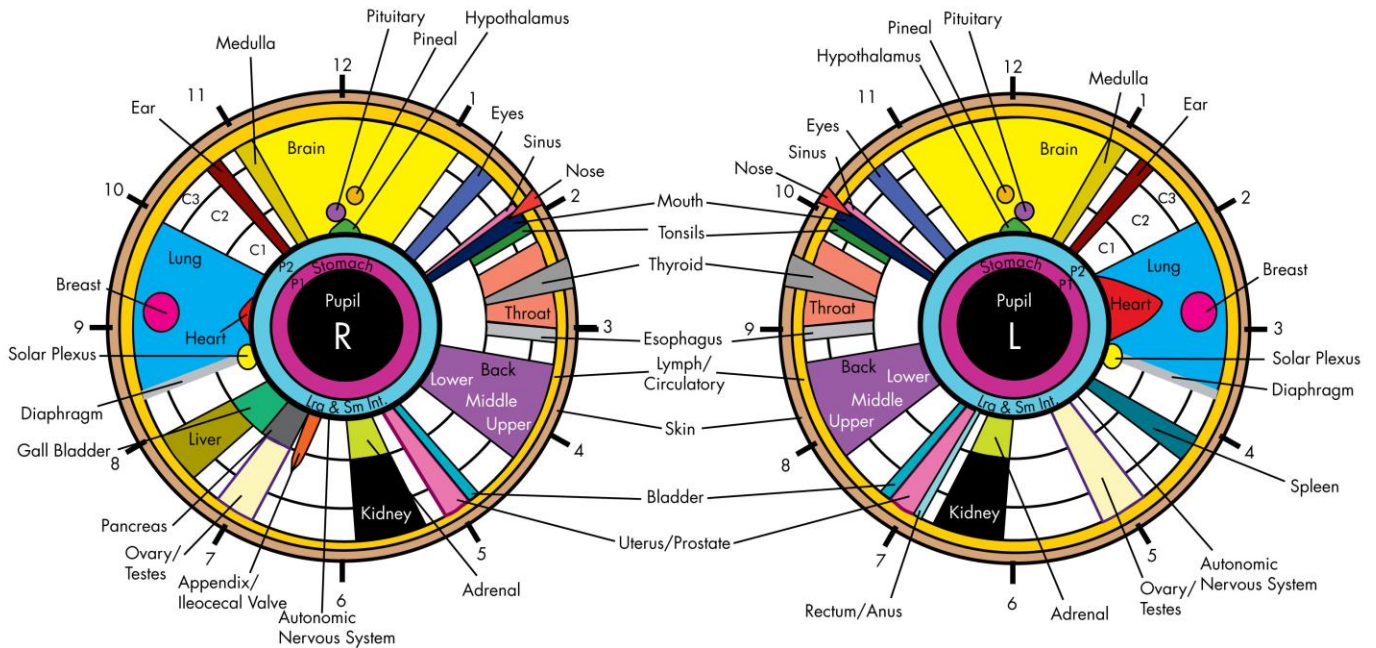
Dr. Bernard Jensen's Chart



Dr. Bill Caradonna's Chart



# Iridology Simplified Research Chart

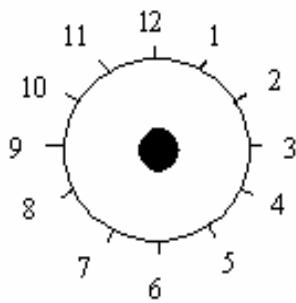


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## Charting Location Zones

To be able to read the eyes we first must understand the graphing procedure. Just as the Earth is graphed into degrees of longitude and latitude, Continents and then into Countries and so forth for us to be able to locate a specific location so are the eyes.

The right and left eye are divided into two zones;  
**Degrees of a clock:**



## Pupillary & Ciliary Zones:

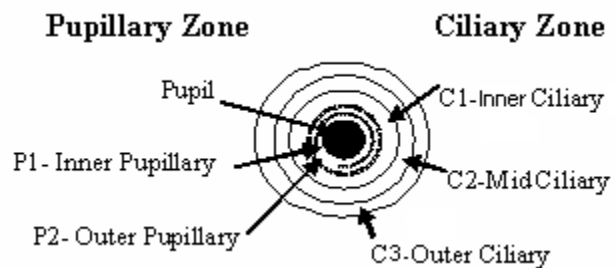
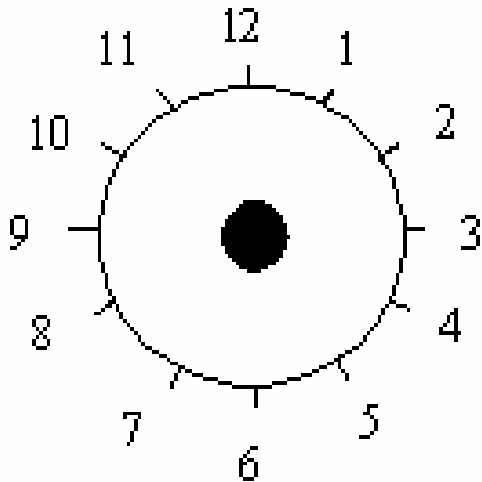


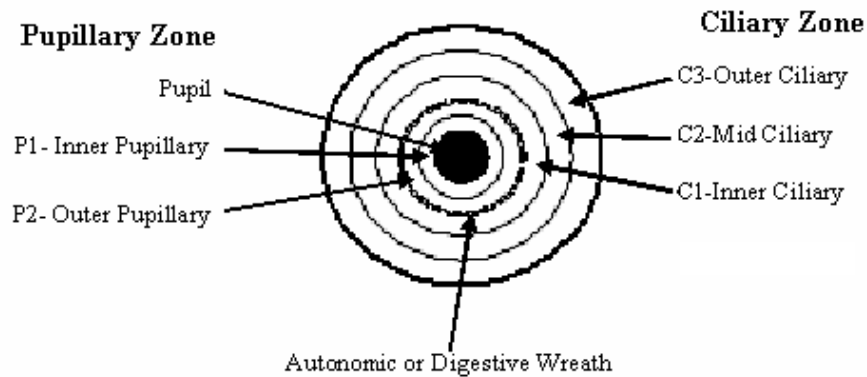
Figure #1



Shows the iris as a clock.  
For both right and left eye's  
Top being 12:00 o'clock and reading clock wise

Figure # 2

Shows the zones; the Pupillary and Ciliary zones, divide the iris into four equal parts.



Pupillary zone is from the pupil to the inside of the Digestive or Autonomic Nerve Wreath.

Pupillary zone is further divided into two equal parts:

- P1- Inner pupillary
- P2- Outer pupillary

The Ciliary Zones are from the outside of the Autonomic or Digestive Wreath to the Sclera (white of the eye).

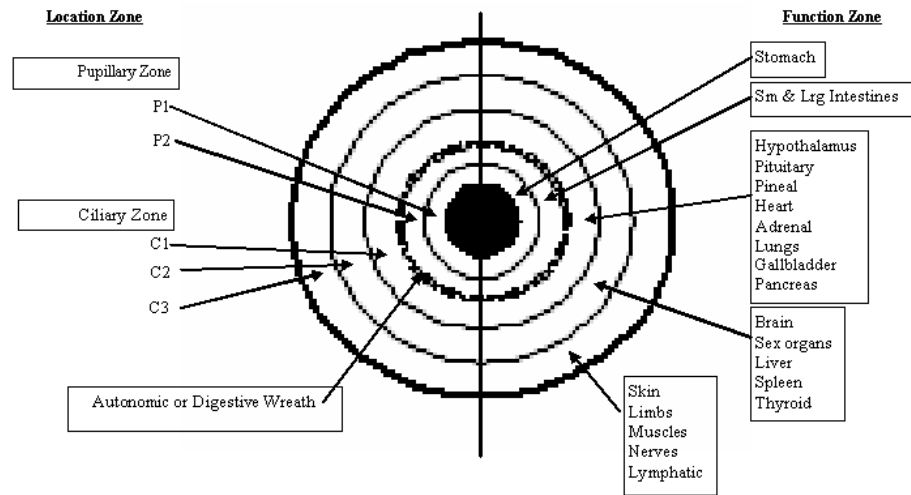
The Ciliary Zone is divided into three equal parts:

- C1- Inner Ciliary
- C2- Mid Ciliary
- C3- Outer Ciliary

**\* When charting your client's the eyes, draw all markings in appropriate time reference and zones.**

**Function Zones**

The iridology markings that you will be focusing on with the different systems of the body are in these zones of the Iris.



More info at end of course.

## Iridology Charting

### A)

Have you ever had an eye injury? Yes \_\_\_ No \_\_\_ \_\_\_\_\_  
 Have you ever had an eye surgery or laser treatment? Yes \_\_\_ No \_\_\_ \_\_\_\_\_  
 Do you wear contact lens? Yes \_\_\_ No \_\_\_ Color \_\_\_\_\_

### B) Check both eyes quickly, write down first thing you noticed.

Right eye \_\_\_\_\_ Left eye \_\_\_\_\_

### C)

**Physical Integrity** I - V Scale (1 is bad 10 is good) Balanced

<b>I- Resiliency</b>	R	1	2	3	4	5	6	7	8	9	10
	L	1	2	3	4	5	6	7	8	9	10

<b>II- Resiliency Subtypes</b>	Connective Tissue				Polyglandular			Neurogenic			
	R	1	2	3	4	5	6	7	8	9	10
	L	1	2	3	4	5	6	7	8	9	10

### III- Resiliency Modifiers

<b>A- Contraction Furrows</b>		Lots & deep							Hardly any and faint			
	R	1	2	3	4	5	6	7	8	9	10	
	L	1	2	3	4	5	6	7	8	9	10	

### B- Digestive Zone

Placement	R	1	2	3	4	5	6	7	8	9	10 (1/4)
(ANW)	L	1	2	3	4	5	6	7	8	9	10
Quality	R	1	2	3	4	5	6	7	8	9	10 (Visible)
(wreath)	L	1	2	3	4	5	6	7	8	9	10
Shape	R	1	2	3	4	5	6	7	8	9	10 (P2 – C1)
(P1-C3)	L	1	2	3	4	5	6	7	8	9	10

### IV- Iris Constitution

		<b>Lymphatic</b>			<b>Mixed Biliary</b>			<b>Hematogenic</b>			
Over Acid or Febrile		1	2	3	4	Blue eyes only					
Hydrogenoid or Uric Acid		1	2	3	4	5	6	7	Tophi Color _____		
Scurf Rim		1	2	3	4	5	6	7			
Ferrum Chromatose		Brown eyes only			4	5	6	7			
Lipemic Diathesis		1	2	3	4	5	6	7	8	9	10

**V- Over all Resiliency** 1 2 3 4 5 6 7 8 9 10

(Add up all circled numbers and divide by the amount of circles you circled)

### D) Pupil

**Pupil Size**

	Small		Normal		Large	
	R	L	R	L	R	L

### **Pupil Tonus** (write info about system)

Elliptical	Right _____	Left _____
Flattening	Right _____	Left _____
Pulsating Pupil	Right _____	Left _____

**E) Structural Signs (markings)**

One check mark in system for each structural sign for;

Lacuna, rarefactions, transversals, topostable/ topolabile flecks, sectoral heterchromia, defects

If there is a colored fleck, Check mark in system also

		Right Eye	Left Eye
Allergies	Lymphatic	_____	_____
	Over acid / Febrile	_____	_____
Circulatory	Pupil	_____	_____
	Hematogenic	_____	_____
	Lipemic Diathesis	_____	_____
	Neurogenic	_____	_____
	Uric Acid	_____	_____
Heart		_____	_____
Digestive	Pupil	_____	_____
	Orange	_____	_____
	Fluorescent orange	_____	_____
	Brown	_____	_____
	Black	_____	_____
	Polyglandular	_____	_____
	Central Heterchromia	_____	_____
	Connective	_____	_____
	Lymphatic	_____	_____
	Mixed / Biliary	_____	_____
	Hematogenic	_____	_____
	Throat / Esophagus	_____	_____
	Gall Bladder	_____	_____
	Liver	_____	_____
	Ferrum Chromatose	_____	_____
	Large Intestine/Colon	_____	_____
	Pancreas	_____	_____
	Rectum/Anus	_____	_____
	Small Intestine/Colon	_____	_____
	Stomach	_____	_____
	Placement	_____	_____
	Quality	_____	_____
	Shape	_____	_____
Endocrine	Pupil	_____	_____
	Polyglandular	_____	_____
	Hematogenic	_____	_____
	Adrenal	_____	_____
	Pituitary	_____	_____
	Pineal	_____	_____
	Hypothalamus	_____	_____
	Thyroid	_____	_____
	Thymus	_____	_____
	Pancreas	_____	_____
	Ovaries/Testies	_____	_____
Headache	Pupil	_____	_____
	Neurogenic	_____	_____



Immune			
	Hydrogenoid	_____	_____
	Lymphatic Mucus	_____	_____
	Scurf Rim	_____	_____
	Appendix	_____	_____
	Sinus	_____	_____
	Spleen	_____	_____
	Tonsils	_____	_____
Integument			
	Scurf Rim	_____	_____
	Skin	_____	_____
Lymphatic			
	Lymphatic	_____	_____
	Hydrogenoid	_____	_____
	Lymph	_____	_____
Muscular			
	Pupil	_____	_____
	Muscular	_____	_____
	Radial Furrows	_____	_____
	Radial Solaris / Parasites	_____	_____
Neurological			
	Pupil	_____	_____
	Autonomic Nervous	_____	_____
	Brain	_____	_____
	Medulla	_____	_____
	Solar Plexus	_____	_____
Reproductive			
	Pupil	_____	_____
	Breast	_____	_____
	Ovaries/Testies	_____	_____
	Uterus/ Prostate	_____	_____
Respiratory			
	Pupil	_____	_____
	Trachea	_____	_____
	Diaphragm	_____	_____
	Lung	_____	_____
Senses			
	Pupil	_____	_____
	Eyes (Sight)	_____	_____
	Ears (Hearing)	_____	_____
	Mouth (Taste)	_____	_____
	Nose (Smell)	_____	_____
	Sinus	_____	_____
	Skin (Touch)	_____	_____
Skeletal			
	Arthritic Netting	_____	_____
	Pupil	_____	_____
	Connective	_____	_____
	Back Upper	_____	_____
	Middle	_____	_____
	Lower	_____	_____

Urinary

	Pupil	_____	_____
Uric Acid		_____	_____
	Straw yellow	_____	_____
	Bladder	_____	_____
	Kidney	_____	_____
Tumor /cancerous		_____	_____
	Black color flecks	_____	_____
	Transferals	_____	_____

**F) Emotional Constitution**

(Rayid Evaluation)

Constitution	Right Eye	Left Eye
Stream (straight lines) <i>steady</i>	_____	_____
Flower (lacunas) <i>emotional</i>	_____	_____
Jewel (flecks) <i>analytical</i>	_____	_____
Shaker (fleck/lacunas) <i>mover</i>	_____	_____

Brain Hemisphere Dominance

	<u>Eye</u>	<u>Thumb</u>	<u>Legs</u>	<u>Bed</u>	<u>Total</u>
Right eye _____	R _____	R _____	R _____	_____	Left brained / <i>analytical</i>
Left eye _____	L _____	L _____	L _____	_____	Right brained / <i>creative</i>

Direction of Flow

Balanced	Right eye / male	Left eye / female
Inward / <i>introvert</i>	_____	_____
Outward / <i>extrovert</i>	_____	_____

Subtypes (Transfer from first page)

Ring of <u>freedom</u> (contraction)	1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10
Ring of <u>harmony</u> (hydrogeniod/uric acid)	1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10
Ring of <u>purpose</u> (scurf rim)	1 2 3 4 5 6 7	1 2 3 4 5 6 7
Ring of <u>determination</u> (lipemic)	1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10

Transfer info:

Number of marks

Systems Chart	Health Chart	Iridology
Skeletal		
Muscular		
Nervous		
Circulatory		
Urinary		
Reproductive		
Digestive		
Endocrine		
Immune		
Lymphatic		
Respiratory		
Senses		

**Quick Reference** on Client Chart (more detail to follow)

**Section A**

There are a few questions to have the client answer.

**Section B**

This matters some times because your intuition seems to sense something important.

**Section C**

This will tell you individual information plus the overall resiliency of the client's constitution (how fast they bounce back from an illness).

**Section D**

Pupil information can count towards the system chart.

**Section E**

Systems of the body shown in the eye.

Look for the mark first starting at one o'clock in the person's eye and then proceed around the clock and then the other eye. (look at persons eye for mark then transfer to form)

If there is something you would like to add just write it in the corresponding system.

You may have more than one mark in any system.

There also will be many systems with no marks.

***One checkmark for each (fleck, lacuna, rarefaction, color, etc) in each eye for all systems system that has something.*** Some systems will have nothing at all.

**Section F**

This will give you emotional / personality information about the client.

With the info from sections C-E (add up all the marks) you will use this chart to show number of marks in each system.

Hypothetical Example:

Systems Chart

	Health Chart	Iridology
Skeletal	11	
Muscular		1111
Nervous		
Circulatory	1	
Urinary		
Reproductive	1	
Digestive		
Endocrine	111	1
Immune		
Lymphatic		
Respiratory		
Senses		

You will notice the client's Muscle and Endocrine systems both have 4 marks and are the two systems to share with the client to make sure they keep healthy... preventative medicine.

**This course will be taught in the sequence of the client form.**

*(Most will be a review from Level 1)*

Take a case study form (*Client's form at back of manual*) to look at while reviewing.

**In section A:**

There are a few questions to have the client answer.

**Section B:**

This matters some times because your intuition seems to sense something important.

**Section C:**

This will tell you individual information plus the overall resiliency of the client's constitution (*how fast they bounce back from an illness*).

**Physical Integrity**

**I - Resiliency**

The iris is composed of two sphincter muscles that are formed by many fibres that resemble spokes of a wheel and together act like the adjustable aperture of a camera.

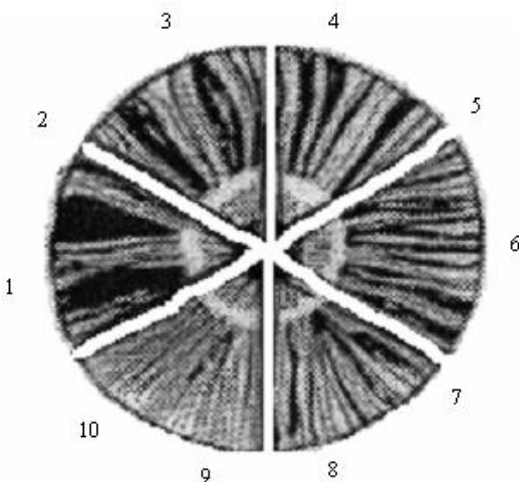
This is a background identifier which indicates the measure of ability to work hard with reduced physical stress, decreased frequency of illness, increased recuperative abilities, and greater longevity potential. Also indicates the abuse capacity of the body

**Appearance**

Observe layers or depth of iris tissue and density of fibres. The greater amount of fibres, density and layers, the higher the resiliency.

The more layers and the closer the fibres are, the more resiliency.

If the person does not abuse themselves, more resiliency = healthier life



The closer these **fibres** are, the better the resiliency (10), genetic strength or constitution of the parts.

An analogy that is used:

An oak desk: Oak has a very tight grain and can take much abuse without showing it. It can easily withstand a blow and continue to function. Were as a pine desk, has a softer consistency and a greater tendency to show damage. Drop something sharp or hard on a pine desk and it may show the results forever.

**Resiliency Scale**

1-2 = Pine wood            or Burlap material

3-4 = Fir wood             or Muslin material

5-6 = Oak wood            or Cotton material

7-8 = Maple wood        or Rayon material

9-10= Iron Wood         or Silk material

People with a strong resiliency/constitution, (tight fibered irises) can “get away” with more than people with loose fibered irises.

You have heard of the big guy being able to eat 2 hot dogs, 3 hamburgers, french fries, drinks lots of beer and keeps on going. Haven’t you wondered how they can still be healthy? They have strong resiliency / constitutions! Where other people become sick with the smallest change from a perfect diet. These people usually have a weaker resiliency. A common term for this quality is tissue reserve.

The greater the individual’s overall tissue reserves, the greater the resources they can call upon in times of stress or poor nutrition. Often these strong resilient individuals abuse themselves terribly when they are young because they can take it and around age 45-50, they go to the doctor saying “I’ve never been sick a day in my life but lately I just feel run down” or “Why do I have arthritis? I’ve been athletic and healthy my whole life “The abuse catches up sooner or later, even if you have a strong resiliency.

People with a weak resiliency often teach young to walk a narrower health path and therefore often enjoy life to the fullest because they have not abused their life’s vital energies.

**Check the CD/internet pictures for Resiliency numbering.**

**Notice the thickness and layers of iris fibres.**

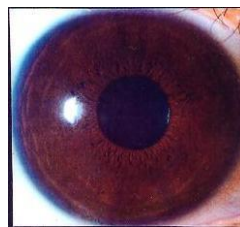
**1**



**6**



**10**



Some pictures from Bill Caradonna

1 being mildly resilient (burlap/Pine) to 10 being extremely resilient (silk/ironwood)

## **II - Resiliency Subtypes:**

Physical Integrity Measurement

Connective, Polyglandular and Neurogenic Tissue

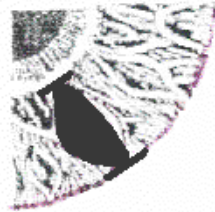
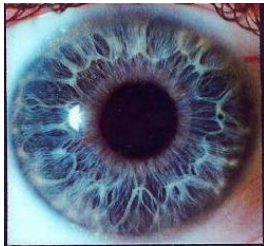
**Check the CD/internet pictures for Resiliency Subtypes.**

### **A- Connective Tissue Type**

Rating 1-4

**Meaning:** Predisposition to connective tissue weakness reflected in organ ptosis (esp. abdominal), varicosities, and spinal anomalies and subluxations

Appearance:



Loose weave of stroma throughout the iris.  
Notice some of the lacuna's touch (connect) ciliary zones *Always touching C1-C3 (inner thru outer).*

### **B- Polyglandular Tissue Type**

Rating 4-7

**Meaning:** Tendency for deficient output of secretory glands, usually digestive (pancreas & gallbladder), and hormonal (adrenal, pituitary, and thyroid).

Appearance:



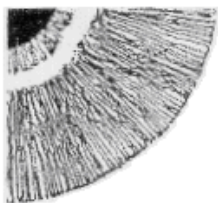
Daisy petal' pattern of lacunae around the collaret wreath.  
Notice some of the lacunas are only in the ciliary zones 1-2 (inner thru mid). *They are all sizes and can be anywhere*

### **C- Neurogenic Tissue Type**

Rating 7-10

**Meaning:** Increased resilient nature.  
Often diligent, hard working, industrious, without appearing stressed.  
Differentiation between ROBUST and DEFICIENT variations important.  
Risk for nervous system exhaustion, headaches from vascular spasms.

Appearance:



A combination of thin, stretched, and /or delicate fibres frequently seen with a small pupil.  
*No lacunas at all.*  
Robust - Many layers and great density  
Deficient - Few layers and less density

**III - Resiliency Modifiers:**

**Check the CD/internet pictures for Contraction Furrows**

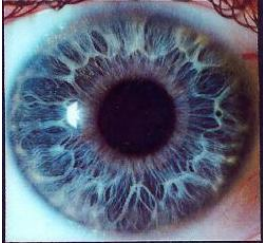
**Contraction Furrows**

Contraction Furrows are also known as; Stress rings and nerve or cramp rings  
Rating 1= many and very deep and thick, 10 = hardly any and very faint

Decreases proper breathing, increases neuromuscular tension and spinal subluxations.

Decreases calcium availability, esp. in Brown eyes.

Muscular cramping increases (watch chest, abdominal, & upper back areas as well as TMJ (temporal mandible joint disorder).



Indicator for attraction to stress.

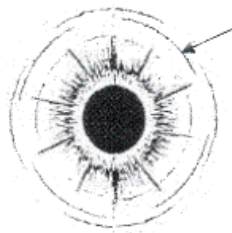
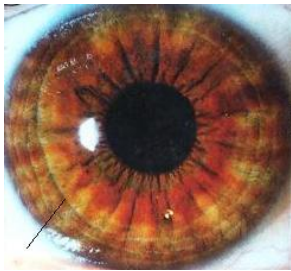
Many projects going at once, not enough hours in the day, never a dull moment, life in the fast lane.

Like a spring wound up inside.

If pushed all the way to the extreme, nervous breakdown behaviour exhibited.

Deep tissue work, aerobic exercises, and deep breathing indicated.

Appearance:



Contraction Furrows

Circular rings, usually in the mid and outer ciliary zones. Can be also seen with Neurogenic subtypes and less frequent with Polyglandular types, and infrequently with Connective Tissue types.

**Digestive Zone**

**Autonomic Nerve Wreath or Digestive Wreath**

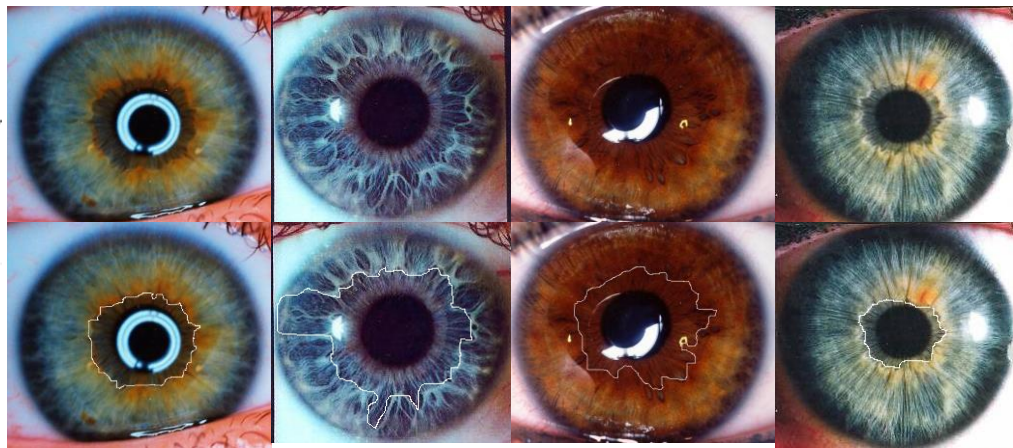
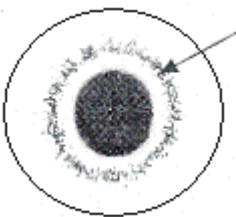
Rating Balanced is a 10 anything else varies 1- 9

Also known as the bowel wreath, how your bowels are working usually determines your state of health.

Autonomic Nerve or Digestive Wreath divides Pupillary 2 and Ciliary 1 Zones

Textures of the fibres are different.

Appearance:



Where to look for a wreath

**Check the CD/internet pictures for Digestion Pictures (comes with the Secrets of a Healer Workshop)**

**Placement**

Divides Pupillary 2 and Ciliary 1 Zones Meaning

Notice if the wreath placement is:

A- Balanced (wreath is 1/4 of the iris) *what we want*; Balanced

B- Constricted (less than 1/4 of the iris) Constipation, hard or no stool

C- Relaxed /atonic (more than 1/4 of the iris) Constipation, loose stool, diarrhoea



10

2

5

Rating Balanced is a 10  
Constricted and Relaxed are 1-9 depending on severity.



**Quality – (wreath itself)**

Notice if the wreath quality is (thick, raised or ropy) (thin, wispy or delicate) (absent wreath).

A- Thick, raised or ropy wreath

Over active

B- Thin, wispy or delicate wreath

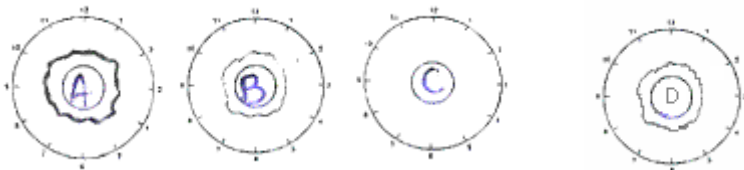
Sensitive, irritable

C- Absent wreath

Under active

D- Balanced

What we want, balanced



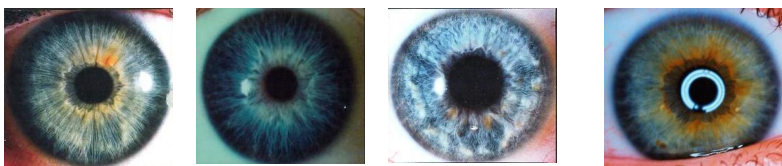
2

4

1

10

Rating Balanced is a 10  
Thick, raised or ropy, Thin, wispy or delicate, absent wreath are 1-9 depending on severity.



Thick

Thin / Wispy

None

Perfect

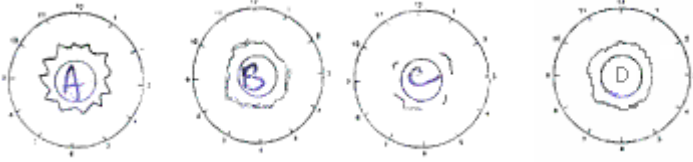


Shape

Notice if the wreath shape is (jagged or star shaped) (double wreath) (intermittent wreath)

- A- Jagged or Star shaped wreath
- B- Double Wreath
- C- Intermittent wreath (start / stop)
- D- Balanced

Loose stools under pressure  
Extra sensitive and irritable  
Irregular pattern of over & under active  
What we want, balanced



3

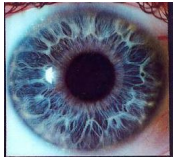
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5

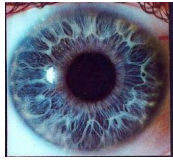
10

Rating Balanced is a 10

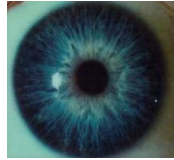
Jagged or Star shaped wreaths, Double Wreath, Intermittent wreath (start / stop) are 1-9 depending on severity.



Crazy shape



also double



starts & stops



Perfect

#### **IV - Iris Constitution**

##### **Lymphatic, Mixed / Biliary or Hematogenic**

**Check the CD/internet pictures for Lymphatic, Mixed / Biliary or Hematogenic**

##### Colour of the Iris

Many iridologists believe that there are really only two colours of iris: blue and brown. Generally this might be true, though there are several variations between the two. Also, there are people with “birthmarks” that might reveal themselves, for example, as a brown wedge in a blue iris. Generally, the colours of irises fit into these two basic categories of blue and brown.

Blue irises are classified by the European iridologists as the “lymphatic” type and brown irises are called the “hematogenic” type.

If we look at the anatomy of the iris of the eye we see that the blue colour is due to the reflection of light from the posterior epithelia layer as seen through the unpigmented stroma. This is quite similar to the colour we see resulting from sun reflecting off the surface of a lake.

Brown irises, on the other hand, have pigmented cells in the fibre of the iris. The more pigment, the darker the brown of the iris. For this reason, it is much harder to determine the fibres in the iris of a brown-eyed person. Even though it is an over generalization, we can find a fair number of differences between people who have the two eye colours.

Blue eyed people more often have lymphatic, acidity and catarrhal problems and therefore have a higher predisposition to such things as arthritis, allergies and respiratory conditions.

The brown-eyed person tends toward endocrine, blood toxicity, nerve problems and imbalances.

Apparent inconsistencies in eye colour are abundant. Many people appear to have brown irises, when in reality; they have a blue iris with a lot of toxins, especially in the gastrointestinal tract.

A blue iris with brown toxins appears brownish or hazel in colour.

Green irises are often blue irises with yellow toxins resulting from faulty liver metabolism or the improper elimination of toxins, due to the breakdown of sulphur-containing amino acids.

A yellowish color can also occur in people with a systemic Candida yeast overgrowth.

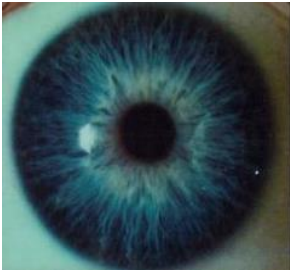
Most of the colors in the irises of the eye that deviate from the strict blue or brown iris are the result of toxic accumulations.

Some people believe that often these iris colours will change, perhaps very slowly, back to their genetic colour, if the person adopts a subtle cleansing diet, an occasional fast and the use of cleansing herbs.

Within the two genetic colour types, we can make some basic classifications that will aid us in learning preventative health care measures and about a person’s genetic predispositions. For example, we can identify the foods that one should eat and those best avoided ... based on a genetic predisposition.

### **Lymphatic (Blue eyes)**

Rating 1-4



Blue eye due to lack of melanin pigment  
Tendency for excess mucous production and discharges with focus on the upper respiratory, lower respiratory, alimentary, and urogenital tracts.

Overactive immune system and allergies, over acidity, and lymphatic congestion are often present.  
Dairy is particularly mucous forming.  
Increasing the position to ezcematic,

### **Mixed / Biliary (Brown eyes)**

Rating 4-7



Light brown pigment over laying visible white/yellowish fibres.  
Focus on liver, gall bladder, and associated digestive disturbances.  
Often aggravated by dietary errors.

You will never see any blue in them.

### **Hematogenic (True brown eyes)**

Rating 7-10



Original nationalities of; Asian, First Nations, East Indian, etc.  
Brown pigment 'carpet' obscuring iris and fibres.  
Tendency to disorders of blood composition.  
Liver and gastrointestinal areas are also a focus.  
Observe for endocrine disturbances.

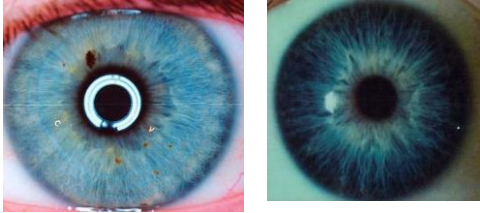
## Iris Constitution Subtypes

### Over Acid or Febrile

#### a. Over Acid

Rating 1-4 (Lymphatic eyes only)

Appearance: Blue eye with whitish fibres.



Acidic, arthritic nature aggravated by over acid foods (meat - esp. red, coffee, chocolate, white flour, white sugar, dairy, alcohol, over acid citrus, and tomato/eggplant family). Kidneys require extra support.

#### or b. Febrile

Rating 1-4 (Lymphatic eyes only)

Appearance: Extremely white fibre appearance. Kriege calls this the “steel grey” eye (white fibres have a greenish or yellowish tinge).



Feverish nature, especially as a child.

Suppression increases acidic, arthritic risk, with extra stress on the kidneys.

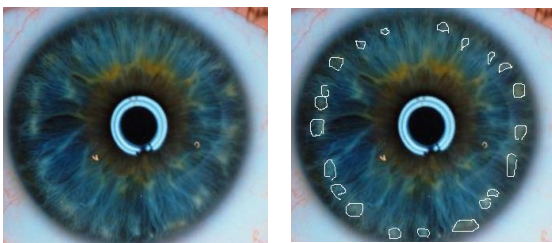
### Hydrogenoid or Uric Acid (Cotton balls)

#### a. Hydrogenoid / Lymphatic Rosary

Rating 1-4 (Lymphatic eyes only)

Appearance: Tophi (tiny cotton balls) connective tissue bundles - in outer ciliary 3 zone.

Can range in appearance from distinct to poorly defined, and from white to discoloured.



Extra risk for lymphatic congestion and immune system over activity.

#### or b. Uric Acid

Rating 1-4 (Lymphatic eyes only)

Appearance: Thick tophi (big cotton balls) plaques in the ciliary 2 zone



Excess uric acid re-absorption. Irritation to kidneys and increased incidence of gout, gouty arthritis, kidney stones (esp. calcium oxalate), and cardiac irritation.

## Scurf Rim

Rating 1-7 (not in Hematogenic eyes)

Appearance: Darker distinct ring in outer ciliary 3 zone



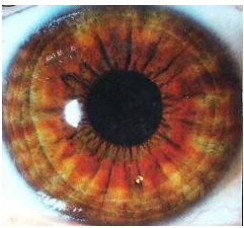
Increased mucous production.

Decreased skin elimination stresses the kidneys.

## Ferrum Chromatose (Tiger striping)

Rating 4-7 (Not in Lymphatic or Hematogenic eyes)

Appearance: Bands of small dark “snuff tobacco” pigments that accumulate on the surface of the iris

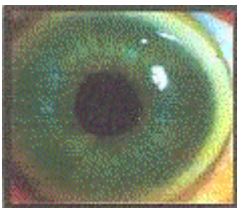


Extra emphasis on the liver. Can indicate “wear and tear”. Pay extra attention to areas where pigment has settled, especially if accompanied by other signs.

## Lipemic Diathesis / Corneal Arcus / Cholesterol ring

Rating 1-10

Appearance: **White or yellowish** color ring usually in C3. Fat deposition in outer cornea (ciliary 3) obscuring view of iris fibres. Not a true iris sign comes with age and cholesterol level.



Increased errors in fat metabolism when seen in the ages of the 40’s, 50’s, and 60’s. Risk of arteriosclerosis and cardiovascular problems. Also liver, pancreas and thyroid insufficiencies. Normal aging sign when seen in later life.

## V - Over all Resiliency

Total Rating of all the Physical Integrity 1-10

Add up circled amounts and divide by the # of circles

This will tell you individual overall resiliency of the client’s constitution (how fast they bounce back from an illness).

Example: If you caught a cold

8 - 10 is a couple of days

4 - 7 is about a week

1 - 3 is a couple of weeks

## Section D Pupil Tonus Chart

Pupil information will count towards the system chart.

### Pupillary Change: Pupil Tonus

The specific purpose of the pupil is to allow light into the eye. The muscles in the iris structure which accomplish this action are the sphincter pupillae and dilator pupillae. Both muscles are under control of the autonomic nervous system, namely the sympathetic and para-sympathetic. When there is a pressure on the nerve root of the spinal cord, such as in the case of a spinal subluxation, a reflex action occurs and the pupil flattens across from the area that is serviced by the particular nerve supply.

For example. If there is nerve root pressure in the upper cervical spine, say C-1 the pupil will flatten on the frontal portion (12 o'clock).

In this way, the pupil can tell the iridologist where there is nerve interference in the entire body and which areas it is affecting. According to research, by correcting the nerve root pressure in the body, the pupil will eventually return to its corrected shape.

The "pupil tonus" is a term used in iridology that refers to the observation of pupil flattening and deformation. To the iridologist, pupil tonus can be another means of clarification and cross-check for iris signs found in analysis. The observance of pupil tonus is noted as a "sectoral flatness" to various sides of the pupil, such as frontal, temporal, nasal, and ventral. The occurrence of pupil deformation signifies the deviation of the circular shape of the pupil and indicates a severe disturbance. The pupil tonus chart developed by Harri Wolf is a valuable chart for observation of pupil tonus and deformation.

**Check** to see what size the pupils are to start with ( E.g. dilated), this will guide you if the iris is stretched or relaxed. Relaxed markings may look wider and the next time you look if the pupils are stretched you may think that a healing occurred when nothing has happened.

### **\*Note if the pupils are any of the following 16 pupil tonus types**

Appearance: Flattening or Elliptical shape of pupil



Elliptical- shape indicates stroke history in family. Observe for other cardiovascular risks in patient.



Flattening- indicates spinal subluxation tendencies specific to certain locations.

Can have more than one flattening on each eye and can have both Flattening and be Elliptical.

**Elliptical Pupils**  
Direction of pupil

**Meaning**

Right eye    Left eye



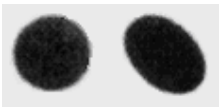
- 1) Weakness and motor disturbances in the lower extremities with possible paralysis.  
Pains due to muscle spasms extending from the buttocks on down.



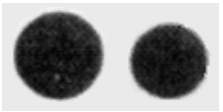
- 2) Right-sided paralysis.  
Genito-urinary disturbances.



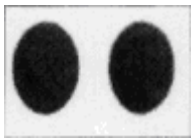
- 3) Left-sided paralysis.  
Sexual disturbances.  
Lack of strength and energy in the legs.



- 4) Nervous asthma.  
Left bronchus is more seriously disturbed.



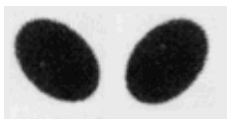
- 5) A background of hereditary syphilitic damage (if there is no history of diphtheria or meningitis)



- 6) Impending cerebral haemorrhage or clotting (coma or paralysis may follow)



- 7) Glandular disturbance with influence upon the heart and respiration (check the Thyroid).  
Depression. Motor disturbances.

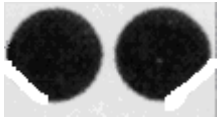


- 8) Anxiety states, neuroses, weeping, spells, muscle spasm.  
Tendency to cerebral haemorrhage & paralysis.

## Flattening Pupils

Direction of pupil

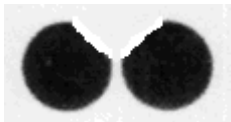
Right eye    Left eye



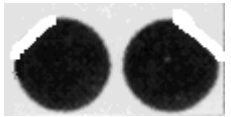
- 9)    Weakness in arm and shoulder movement.  
Irritation and possible subluxation T1-4, T6 & 7 vertebrae.  
Hepatic insufficiency.



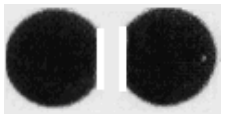
- 10)    Irritation to the Sacral/Lumbar region of the spine and its associated neural pathways.  
Genital-urinary disturbances.  
Arthritic and Rheumatic signs.



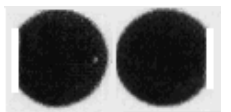
- 11)    Irritation & possible subluxation to cervical vertebra.  
Visual problems  
Digestive & Hepatic insufficiencies.



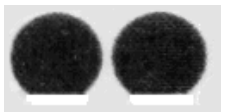
- 12)    Hearing difficulties.  
This may be due to dilation of the cerebral vessels or tumours in the cerebellum.



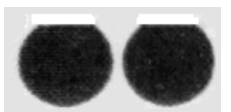
- 13)    Restriction to breathing (the heart may be affected).  
Possible subluxation C1-5 vertebra.



- 14)    Nervous breathing.  
Possible impending circulatory collapse.



- 15)    Weakness in pelvis & lower extremities.  
Poor elimination abilities.  
Possible persistent headaches.



- 16)    Tendencies to depression, fatigue, paranoia, melancholy, and guilt feelings.  
Possible subluxation of C1 vertebra.



## Section E

### Structural Signs

Eye marking(s) that might be in any system of the body.

Look first in the client's right eye, starting at one o'clock and then proceed around the clock to 12:00 o'clock and then repeat the process in the left eye for any marks and check mark each: fleck, lacuna, rarefaction, color, etc,

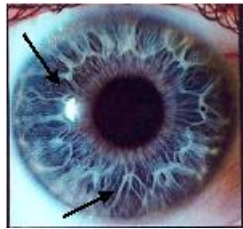
If there is something you would like to add just write it in the correct body system.

#### Check the CD for Structural Signs

#### Lacunae

Lacuna (plural lacunae), is Latin for "pit" or "hole", relating to lacune or "lake".

Lacuna is the word the Europeans use for lesions. As stated lacunae are exactly like lesions with various levels of inflammation: acute, sub-acute, chronic and degenerate.



**Appearance:**

Distinct rounded deficiency of tissue.  
Resembles a flower petal.

**Meaning:**

Indicates decreased vitality or functional capacity of organ or system.

**\*Must evaluate location, size, pattern & depth.**

#### Leaf Lacuna



**Appearance:**

Borders of lacuna join into oval shape.

**Meaning:**

Indicates lowered vitality, requires more energy to regain or maintain functional capacity.

#### Open Lacuna



**Appearance:**

Borders of lacuna do not come together.

**Meaning:**

Can be an area of expression of symptoms as a "safety valve" for vitality to maintain balance.

#### Pear Lacuna



**Appearance:**

Pear shape

**Meaning:**

This lacuna is the precursor of the much-feared asparagus lacuna and is supposed to indicate a strong tendency toward cancer (Again, no running to the washroom mirror to look for problems. These are "research" indications and do not always indicate severe problems).

## Lance Lacuna



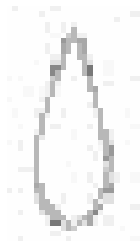
**Appearance:**

Tight / skinny leaf lacuna

**Meaning:**

Also a forerunner of the asparagus lacuna, the lance lacuna indicates a predisposition towards possible degenerative problems such as cancer.

## Torpedo Lacuna



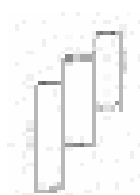
**Appearance:**

Tear drop

**Meaning:**

Large torpedo lacunae represent genetic weakness according to some European researchers. We have seen these lacunae when there was no indication of “normal” genetic weakness. Smaller versions of this shape are considered to represent tumours or possibly cysts in the indicated area.

## Step Lacuna



**Appearance:**

Vertical rectangular shapes joined together

**Meaning:**

This shape indicates that there is a weakness in the pancreas.

## Shingle Lacuna



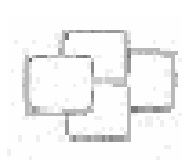
**Appearance:**

Slanted rectangular shapes joined together.

**Meaning:**

Shingle lacuna are basically the same as step lacunae but are “tipped over” and also represent pancreas weakness.

## Honeycomb Lacuna



**Appearance:**

Joined squares, resembles a bee hive honeycomb.

**Meaning:**

Europeans feel this represents an endocrine imbalance. Also often represents a general mineral deficiency.

## Crypt / Rhomboid Lacuna



### **Appearance:**

Diamond or rhomboid shaped openings that are located directly inside and outside of bowel wreath. It is also the classic shape of the heart lesion known as the heart diamond

### **Meaning:**

Reflects decreased nutrient exchange, pocketing, or defects in bowel tissue. It is normally seen in the glandular zone. May mean Diabetes mellitus, hypoglycaemia, etc.

## Asparagus Lacuna



### **Appearance:**

Look like the tip of an asparagus.

### **Meaning:**

Some Europeans feels that this lacuna represents a 99% probability of cancer.

We have seen many patients with such lacunae that do not have cancer ... but who do usually have at least a cyst or other advanced problems.

## Iris Pigmentation (color):

After determining the background pigmentation of the iris constitution, there are other localizes and specific pigments.

The colour can determine the level of inflammation, toxicity or acidity in the patient's body.

In most cases, color indicates reduced organ functional capacities or increased susceptibility to stress.

### **Color**

Straw Yellow -

Orange -

Fluorescent Orange -

Brown (light, medium, dark, reddish) -

Black/Tar -

### **Meaning**

Kidney

Pancreas and Liver

Gallbladder, Pancreas and Liver

Liver

Pre-cancerous and Liver

## **Sclerology**

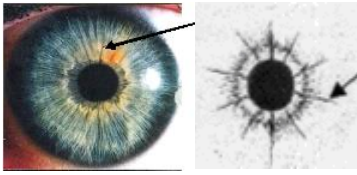
Sclerology is a way to analyse the eye through observing the major diagnostics vessels on the white of the eye, the shape and condition.

In this course we will not be studying this, though a great book to read is:

Practical Iridology and Sclerology by Dr. Donald R. Bamer ISBN 1-885670-02-8

Check CD/internet pictures

### Radial Solaris



**Appearance:**

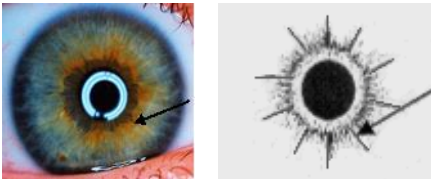
Notice the spoke like lines that radiate out from the pupil.

**Meaning:**

Each of the lines indicates a low level of seepage from the intestinal tract into the area represented on the chart.

Thus producing a low level of septasernia (septic blood) and inflammation. This area may be high in parasite activity.

### Radial Furrows



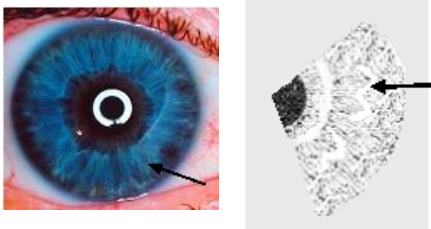
**Appearance:**

Notice the spoke like lines that radiate out from the ciliary 1 zone or autonomic nerve wreath.

**Meaning:**

This indicates increased toxic material in the adjacent and surrounding tissue.

### Transferrals



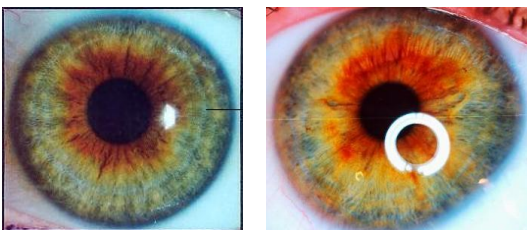
**Appearance:**

Reflexive fibres that transverse the normal direction (squiggly side ways line)

**Meaning:**

Irritation inflammation or pre-cancerous genetic indicators

### Central Heterochromia



**Appearance:**

Orange color (color varies) digestive zone

“Opposite” pigment around the pupil, generally in the digestive or nutrient transport and assimilation zone

**Meaning:**

Increased challenges or focus on digestive and intestinal function.

### Sectoral Heterochromia



**Appearance:**

Orange color (color varies) on iris C1-C3

Opposite” pigment in section of iris.

Varies in size and extension to the iris edge

**Meaning:**

Genetic marker; may be significant depending on color and location.

## Topostable Pigments (fleck)



### **Appearance:**

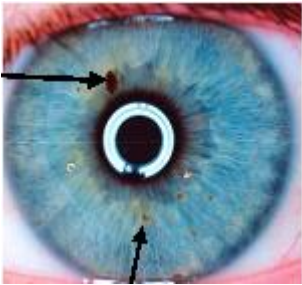
Color fleck, singular pigments that are significant due to appearance or location.

### **Meaning:**

Indicators of potential stress or reactivity in region.

Map or location, specific.

## Topolabile Pigments (flecks)



### **Appearance:**

Color flecks, general pigment pattern scattered through the iris.

### **Meaning:**

Coloration indicates organ susceptibility.

Not map specific, though individual pigments may be considered topostable.

## Miscellaneous Structural Signs

### **Arthritic Netting**

#### **Appearance:**

Whitish web that is around the outer ciliary 3 zone, usually only seen in blue eyes.

#### **Meaning:**

Increased Arthritic tendency

### **Defects**

#### **Appearance:**

Small openings or holes in ciliary zone of iris tissue.

#### **Meaning:**

Lowered activity or vitality in specific area.

### **Perifocal Lightening**

#### **Appearance:**

Extra whitish band, usually bordering a lacuna

#### **Meaning:**

Increased irritation or inflammation in local area.

### **Pinguicila**

#### **Appearance:**

Deposit of yellowish fatty tissue on the sclera, usually at the midline 3 and 9 o'clock.

#### **Meaning:**

Indicates either tissue response to sun, wind, sand, or glare, or indicator for disturbed fat metabolism and liver stress.

**Pterugium****Appearance:**

Thickened conjunctival tissue extending over nasal cornea.

**Meaning:**

Tissue that grows and can obscure underlying iris and interfere with vision if large enough. Usually occurs from sun, wind, sand, glare, or as a stress reaction. Surgically removed, they re-grow approx. 50% of the time.

**Rarefaction of Stoma****Appearance:**

Subtle or distinct tissue dropout in limited area

**Meaning:**

Decreased vitality or functional capacity in specific area.

**Reflexive Signs****Appearance:**

Distinct singular or multiple white fibbers

**Meaning:**

Indicate irritation and inflammation in local region. If pink or red, more reactive.

## Section F

This will give you Emotional information (Rayid evaluation) about the client.

### Emotional Constitution

From -Denny Ray Johnson book, "What the Eye Reveals" ISBN 0-91-7197-04-6

#### Stream- Kinaesthetic Type



**Appearance:**

***Straight Lines*** (no flowers or flecks)

**Quick Reference:**

Steady, Stable, Balancing, Support, Sensitive, Intuitive, Walking radar

**Meaning:**

Streams are subtle variations in the iris structure that appear as straight lines or wedges. Subtle variations in the fibres of the iris which appear as straight lines or streaks of color, indicates a kinaesthetic-type (stream) personality.

These physically-oriented people tend. To be intuitive, yet consistently stable.

Communicating and sensing with their bodies, they nurture and balance others. With true empathy, they mediate and integrate the extremes in society. Periodically, their sensitivity becomes excessive and they feel helplessly overwhelmed. Endowed with abundant physical energy and social skills, they are naturals in healing and public service. Their sense of being connected with people can lead to confusion about their own self-worth or purpose in life. By accepting the perfection in life and themselves, the kinaesthetic type learns how to effectively touch others without taking on unnecessary burdens. Stream type structures indicate kinaesthetic sensitivity which learns best through experience. They are attracted to people whose structures contain both Jewel and Flower patterns (shakers).

#### Flower- Emotional Type



**Appearance:**

***Flower Petals / Lacunas*** / Distinctly curved or rounded openings (flowers) in the fibres in the iris indicate an emotional-type person

**Quick Reference:**

Seasonal, Transient, Brief but brilliant, Blossoming, Spontaneous, Changes a lot, Demonstrative, Social, on Stage.

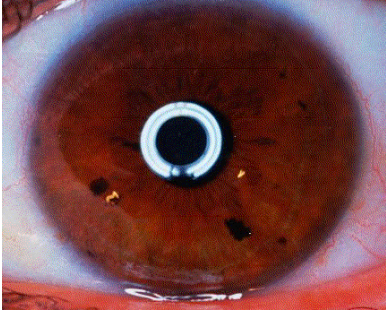
**Meaning:**

These feeling-oriented people tend to be spontaneous, active and changeable.

Excellent visual communicators, animated and expressive, they enjoy being on

stage and flow easily with social situations. However, their passion for experiencing life and tendency to over-commit can exhaust their energies, resulting in occasional bouts of depression or bursts of anger. Bubbling with enthusiasm and creative ideas, they make excellent engineers, artists and musicians. Quick to embrace new concepts, they add vitality to a project, but often fail to see it through to completion. Learning to trust themselves, accept responsibility, and focus their energies enables emotional-type personalities to successfully fulfill their desires. Flower structures indicate an emotional disposition which learns best through auditory stimuli. They are attracted to Jewel-type individuals for long term relationships.

## Jewel- Mental Type



### **Appearance:**

*Flecks / Jewels* are dot-Like concentrations of color that can appear throughout the iris and can range in color from light gold to black.

### **Quick Reference:**

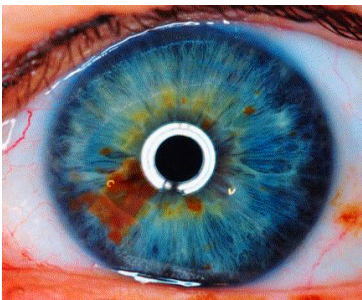
Analytical, Thinking, Intellectual, Rational, Unemotional, Enduring, Slow to change, Increased self control.

### **Meaning:**

Dot-like pigments (jewels) in the iris indicate a thinking intellectually-oriented person. Mental-type personalities direct their active feelings

through internal thought and analysis. Precise verbal communicators, they tend to control themselves, situations and other people. They generally show little emotion and their gestures are few and pointed. Often intense, quietly frustrated people, their attention to detail can prove stifling to the realization of their highest potential. Having well-defined views, they often excel as teachers, leaders and scientists. These self-oriented individuals are slow to accept new ideas, yet having thoroughly analyzed the possibilities; they often end up leading the way. Learning to flow with situations and trust people enables mental-type personalities to better express their feelings and attain long- term goals. Disposition which learns best through visual stimuli. They are attracted to Flower-type individuals for long term relationships.

## Shaker- Extremist Type



### **Appearance:**

*Both, Flecks / Jewel and Lacunas/ Flowers/petals*

The appearance of dot-like pigments and distinct openings in the iris indicate an extremist- type (shaker) personality.

### **Quick Reference:**

Lacks moderation, Mover, Shaker, Accomplishments, Breaks the mold, Pioneers, Intense, Extremes in success and failures,

### **Meaning:**

These action-oriented people tend to be dynamic and progressive individuals.

Unifying visual and verbal modes of communication, their radical nature propels them to the forefront of change and innovation in society. Because of their compelling drive and inherent instability, they experience patterns of great success and failure, often exhausting their physical strength. Characteristically devoted to a cause, they make excellent inventors, explorers and motivators. Acting as the conscience of society, they often stand alone, attracting ridicule from their peers. Learning moderation and consistency enables the extremist-type personality to manifest change with stability.



## Emotional Constitution Subtypes:

### Ring of Freedom / Achievement rings



**Appearance:**

Contraction furrows

**Meaning:**

This person is a go go go person

A doer, always busy, cannot relax and sit still

Greatest strength

Motivation to produce.

### Ring of Harmony



**Appearance:**

Hydrogenoid / Uric Acid (Cotton balls)

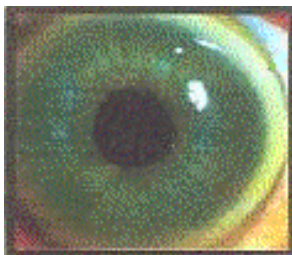
**Meaning:**

This person tries to make everyone happy.

Greatest strength

Influencing others

### Ring of Determination



**Appearance:**

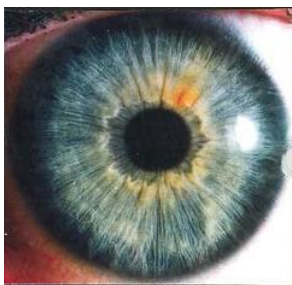
Corneal Arcus / Cholesterol Ring / Lipemic Diathesis

**Meaning:**

This person will not take no for an answer, they will prove anyone wrong, and they will always go the extra mile.

Greatest strength- Determination, boldness

### Ring of Purpose



**Appearance:**

Darker ring / Scuf ring

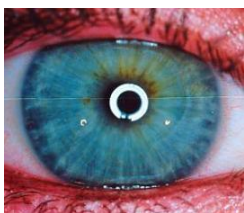
**Meaning:**

This person will know what he/she is doing in life,

Capable of anything, may seem arrogant or confident.

Greatest strength- poise, calmness

### Direction of Energy Flow:



**Inward** (Introvert) energy of anatomic nerve ring is going towards the pupil.

Sensitive, tolerant, insightful, quiet and observant, stability, empathy, integration, appreciation



**Outward** (Extrovert) energy of anatomic nerve ring is going away from the pupil.

Social, practical, expressive, honesty and directness, good at manifesting, coordination

One of the best emotional / physical books to buy is:

Heal your body, by Louise L. Hay ISBN; 9-780937-611357

### **Brain Hemisphere Dominance**

If there are more markings, bigger markings or more colors in one eye than the other you will consider that eye with more markings the dominant eye. You can check with them also what side of the bed they sleep on, which thumb is on top when they interlace their fingers. People can be balanced also.

-Left brain (analytical)

-Majority of markings are in the right eye

Fixed, doubtful, traditional, slow to change, logical, practical, compulsively ordered, restless, materialistic, questioning, contradictory, and fear of being alone.

-Right brain (creative)

-Majority of markings are in the left eye

Spontaneous, accepting, future—oriented, creative, imaginative, intuitive, easygoing, sociable and fear of rejection.

Also depending on which eye has markings, it is known that the left side is feminine and the right is masculine. Meaning the markings in the right eye may mean the client has issues with men and visa - versa.

# Putting all the information together

With sections C-E you will use this chart to show number of marks in each system.

## Section C

Very important

Total / Over all Resiliency:

Will tell you how fast the client will bounce back / heal if sick (1= weeks being sick and takes to recover, 5 being average = 1 week with a cold, 10= a couple of days and hardly felt it)

After you have completed the client chart and have added up all the check marks in each system you will place the marks on the systems chart. This will show you how many marks in each system there is and you can then compare it to their health chart.

Hypothetical Example:

Systems Chart

	Health Chart	Iridology
Skeletal	11	
Muscular		1111
Nervous		
Circulatory	1	
Urinary		
Reproductive	1	
Digestive		
Endocrine	111	1
Immune		
Lymphatic		
Respiratory		
Senses		

You will notice the client's Muscle and Endocrine systems both have 4 marks and are the two systems to share with the client to make sure they keep healthy and to continue preventative medicine with other modalities:

Aromatherapy

Body Balancing

Emotional Clearing Technique

Energy

Hypnosis

Iridology

Massage: ELD, Hot Stone, Swedish, Chair

Meditation

Muscle Testing (Kinesiology)

Other \_\_\_\_\_

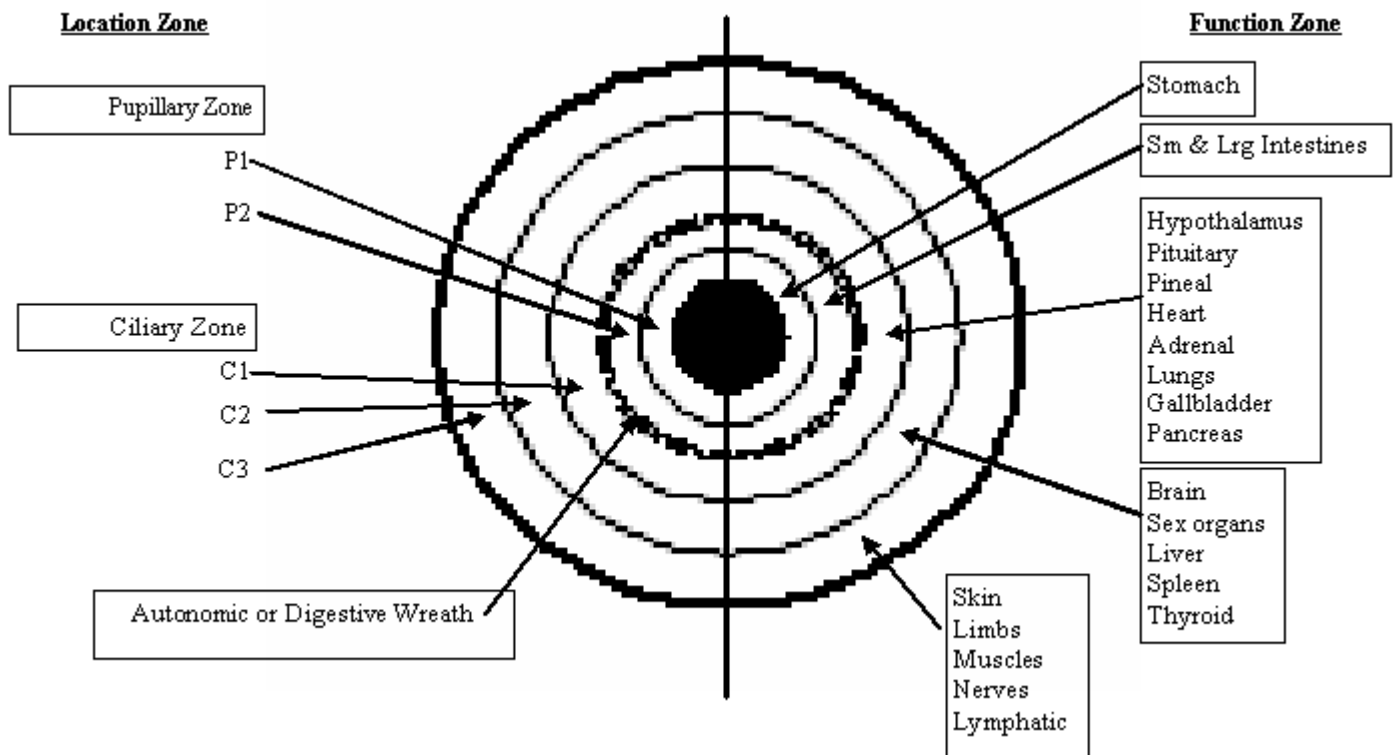
Reflexology - Foot or Hand

Reiki

Spa : \_\_\_\_\_

Table Shiatsu

## Function Zones



### **Some suggestions for healing**

A positive attitude is beneficial in healing. These modalities will reduce stress, improve circulation and bring the body back to homeostasis.

The appropriate Aromatherapy or Herbs will benefit all body systems, Massage, Reflexology, Meditation, Hypnotherapy, Spa, Shiatsu, Reiki, Emotional Clearing Technique and all Energy techniques.

### **Cardiovascular / Circulatory System**

#### Anatomy

Heart, arteries and veins

#### Function

Transport oxygen and nutrients to the cells, remove metabolic wastes from the cells and tissues, and carry hormones from one part of the body to the other.

#### Suggestion

Nutrition, minerals, water, Aromatherapy, Herbs and Exercise. Massage, Reflexology and Shiatsu.

## **Digestive System**

### **Anatomy**

Mouth, salivary gland, tongue, esophagus, stomach, gall bladder, liver, pancreas, large intestine (colon), small intestine, rectum.

### **Function**

To process food & eliminate wastes from the body. Refer back to page 19 to analyze the digestive system.

### **Suggestions**

Food (what is being put into the mouth), the digestive system needs fibre to move the food through and lots of water. The rest of the body needs the proper nutrients to survive. Exercise (movement will help to process the food). Aromatherapy, Herbs and Relaxation a stressed system can not process the food properly.

## **Endocrine System**

### **Anatomy**

Pituitary, pineal, hypothalamus, thyroid, parathyroid, thymus, adrenal, pancreas, ovaries and testes.

### **Function**

Regulate and integrate the body's metabolic activities, maintain homeostasis.

### **Suggestion**

Aromatherapy, Herbs, Meditation, Reiki, Shiatsu, Reflexology and Energy Techniques.

## **Integument / Skin**

### **Anatomy**

The largest organ of the body

### **Function**

Serves as a protective cover against invading pathogens, regulates body temperature via perspiration and shivering, provides a waterproof covering for the body, and receives information about the outside world.

### **Suggestion**

Being that it is one of our eliminating organs, keeping it clean is very important to our detoxifying process. Herbs, Spa, Massage, Aromatherapy techniques can be used here.

## **Immune System**

### **Anatomy**

Tonsils, sinuses, appendix, spleen

### **Function**

To defend the body against attack from infectious organisms and other harmful invaders (aka pathogens)

### **Suggestion**

European Lymph Drainage Massage, Aromatherapy, Herbs, Keep the bodies vibration balanced

## **Lymphatic System**

### Anatomy

Lymph nodes, axillary's lymph nodes, cisterna chyli, inguinal lymph nodes, mammary plexus, thoracic duct

### Function

Production of lymphocytes throughout the body, drainage of intestinal fluid back into general circulation.

### Suggestion

Nutrition, minerals, water and exercise (especially bouncing and walking) are very important. European Lymph Drainage Massage, Aromatherapy, Herbs and Reflexology are beneficial.

## **Muscular System**

### Anatomy

There are 640 named muscles in the body and thousand of unnamed ones.

### Function

To permit movement

### Suggestion

Nutrition, minerals, water and exercise are very important. Relaxation, Aromatherapy, Herbs, Reiki, Reflexology, Muscle testing, Yoga, Tai chi, Qui Gong, Shiatsu and Massage.

## **Neurological System**

### Anatomy

Brain, hypothalamus, spinal column and nerves

### Function

Is to relay information in the form of nerve impulses throughout the body; thereby controlling all of its functions.

### Suggestion

Aromatherapy, Herbs, Meditation, Yoga, Tai chi, Qui gong, deep breathing, relaxation, energy techniques, Reiki, Shiatsu, Reflexology, Massage (Chair, Hot Stone, Swedish or ELD) and Spa techniques.

## **Reproduction System**

### Anatomy

Women- uterus, ovaries, fallopian tubes, vagina.

Men- prostate, testicles, scrotum, seminal vessel.

### Function

Female- produce ovum, produce offspring.

Male- produce sperm, fertilize the ovum.

### Suggestion

Nutrition, minerals, water and exercise are very important. Relaxation, Aromatherapy, Herbs, Reiki, meditation, Reflexology, muscle testing, yoga, Tai chi, Qui gong, Shiatsu and massage.

## **Respiratory System**

### Anatomy

Nose, trachea, bronchi, bronchioles, lung, diaphragm

### Function

Oxygen - carbon dioxide exchange via inspiration and expiration, maintaining proper acid base balance in the blood, speech production.

### Suggestion

Aromatherapy, Herbs, Meditation, Yoga, Tai chi, Qui gong, deep breathing, exercise and Swedish massage

## **Senses**

### Function

Sight, hearing, taste, smell and touch.

### Suggestion

Energy techniques, Muscle Testing, Aromatherapy, Herbs, Reiki, Reflexology, Shiatsu, Meditation and Massage.

## **Skeletal System**

### Anatomy

There are 206 skeletal bones

### Function

Protection, locomotion, production of red and white blood cells by bone marrow, storage of minerals such as calcium and phosphorous.

### Suggestion

Nutrition, minerals, exercise and weights are very important. Aromatherapy and Herbs are beneficial.

## **Urinary System**

### Anatomy

Kidneys, ureters, bladder, urethra

### Function

Separate certain waste products from the blood, help maintain the blood at a constant level of composition.

### Suggestion

Nutrition, minerals, water and exercise are very important. Relaxation, Aromatherapy, Herbs, Reiki, Reflexology.

## **Extra: Parasites**

### Anatomy

Is an organism that obtains its food and shelter by living on or in another organism.

### Function

Parasites only come when the body goes into an acid state which tells the universe the body is dying and it needs to be decomposed.

### Suggestion

Keep the body health on all levels, do a parasite cleans at least once / year.