

## OCULAR PATHOLOGY AND SYNTONIC TREATMENT

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<u>Amblyopia &amp; Amaurosis</u>	$\alpha\delta$ $\mu\delta$	To decrease ionization If toxemia use negative polarity, heat
<u>Asthenopia</u>	$\upsilon\omega$ $\mu\delta$	Sensory motor depressant, inflammation of nerves nerve disorder; muscle fatigue; toxemia; metabolic fatigue decreasing nerve flow; ocular fatigue; creates neuralgia; pressure within & without nerves as mechanical stress; muscle spasms; fatigue as exhaustion of nerve function and waste accumulation, a chief symptom being dry eyes: $\omega$ or $\delta\omega$
<u>Blepharitis</u>	$\upsilon$ $\mu\delta$ , $\alpha\delta$	If ulcerative If chronic or with chalazion
<u>Blepharospasm</u>	N (5) $\mu\upsilon$ (5) $\upsilon$ (5) $\upsilon\omega$ N (8)	
<u>Cataract</u>	1) $\mu\upsilon$ 2) $\alpha\delta$ 3) (Spitler): $\mu\upsilon$ 4) $\mu\upsilon$ 5) (with optic atrophy): $\mu\upsilon$ (5), $\alpha\omega$ (5), $\mu\upsilon$ (5), $\mu\delta$ (5), $\alpha\omega$ (5), $\mu\delta$ (5), then $\mu\delta$ (5), $\alpha\delta$ (5), $\mu\delta$ (5), $\alpha\omega$ (7), $\mu\delta$ (7) 6) Calobar tint	To increase lymphatic route in lens, followed by $\mu\delta$ , $\alpha\delta$ . If metabolism is poor, e.g. abnormal blood sugar/diabetes: have reduced metabolism, accumulation and retention of waste To reduce acidosis and increase calcium metabolism (Spitler): $\mu\upsilon$ for cortical cataracts: vasoconstriction. $\upsilon$ on Stein pacinian corpuscles to bring heat. $\mu\delta$ to increase elimination of metabolic waste, acidic aqueous. To increase reabsorption if early opacity. $\mu\delta$ if reabsorption slow; morbid body (with optic atrophy): $\mu\upsilon$ (5), $\alpha\omega$ (5), $\mu\upsilon$ (5), $\mu\delta$ (5), $\alpha\omega$ (5), $\mu\delta$ (5), then $\mu\delta$ (5), $\alpha\delta$ (5), $\mu\delta$ (5), $\alpha\omega$ (7), $\mu\delta$ (7) Calobar tint
<u>Chalazion</u>	$\alpha\delta$ $\mu\delta/\alpha\delta$	Until points; then $\mu\upsilon$ until drains With blepharitis
<u>Conjunctivitis</u>	$\mu$ , $\mu\upsilon$ $\upsilon$ , $\mu\upsilon$ $\mu\upsilon$ - $\upsilon$ , $\mu\upsilon$ - $\mu\delta$	Acute, alternating Chronic, alternating Hay fever 10 treatments; then alternate $\mu\upsilon/\mu\delta$ 3:1 Magnetic (+): blue From tonsils, middle ear infection, maxillary sinusitis (Loeb) (Simpkins): $\mu$ (10), $\alpha$ (5), $\mu\upsilon$ (5), $\upsilon$ (5) or $\alpha$ (5), $\mu$ (5), $\upsilon$ (5) For discharge of mucus & pus
<u>Cornea</u>		
<u>Opacities</u>	$\alpha\delta$ , $\mu\delta$	Increases corneal "current" for lymph, increases nutrition, (-) polarity
<u>Abrasion</u>	$\mu\upsilon$ , $\upsilon\omega$	D For pain
<u>Keratoconus</u>	$\alpha\delta$ , $\omega$	Alternating: relax EOM To increase circulation - anemic, increase mineralization

Cornea (cont.)

Ulcer

- UV,  $\omega$ D, violet
- Alternate (-)  $\alpha$ ,  $\alpha\delta$  to increase heat to speed repair

Arcus

$\mu$

Corneal Scars

$\mu\nu$

Choroiditis

- Onset  $\mu$  (15),  $\nu$  (5), then  $\alpha\delta$  to increase circulation
- $\mu\nu$  If focal from tonsils, sinus, middle ear infections
- $\delta$  To break up exudates (solutionizes)
- $\mu\nu$ , Then  $\alpha$  to disperse stagnation; or  $\delta$  if  $\alpha$  too strong
- After non-acute hemorrhages

Cycloplegia

$\mu\delta$

Dacryocystitis

$\mu\nu$

Epiphora

$\mu$

Exophthalmos

$\mu\nu$

Glaucoma

- $\alpha\omega$ ,  $\mu\delta$  Alternate daily to increase circulation
- $\alpha\delta$  If chronic
- $\mu\nu$  If pain; widen fluid passage, increase lymphatic drainage; improve acid waste removal. Series:  $\mu\nu$ D 5 treatments,  $\mu\nu$  alternate days with  $\mu\delta$  16 treatments.
- Rock globe with massage to increase lymphatic drainage.
- $\pi\omega$ ,  $\omega$  Incipient glaucoma - "dry up"
- $\mu$  To heat turgid lymphatic process.
- Flash  $\alpha$ , then dark 4 seconds to control sphincter pupillae to mechanically increase aqueous outflow.
- $\mu$  (10),  $\mu\nu$  (15),  $\nu$  (10) followed later by a ground constitutional tonic:  $\alpha$  (10),  $\mu$  (10),  $\nu$  (5) or  $\delta$  (10),  $\mu$  (10),  $\nu$  (5) or  $\alpha$  (5),  $\mu$  (5),  $\delta$  (5),  $\mu$  (5),  $\nu$  (5)

Acute Glaucoma

Iritis

- $\omega$ D,  $\mu\nu$  or  $\mu\nu$  alone: constitutional & irritants into blood, exudates into cornea, aqueous, pupil, vitreous, spastic circular muscle & iris, spastic ciliary.
- $\pi\omega$ ,  $\nu$  For photophobia & pain
- $\mu$ ,  $\mu\nu$  Alternating; as secondary condition to sinus, tonsils, inflammatory diseases, focal dental infection (need constitutional remedies as well)

Macular Degeneration

- Cells not dead but "dormant", field will increase.
- $\delta\omega$ ,  $\alpha\omega$  Alternating for arterial stimulation.
- $\mu\nu$  to dry up exudative condition, vasoconstriction ( $\delta$  solutionizes exudates)( $\nu$  attracts oxygen)

Nystagmus

- $\omega$  or  $\mu\nu$  As nerve tonic to relax EOM, also  $\omega$ N.
- Multiple causes: toxemia, motor dysfunction, tumors, intracranial meningitis, MS, CNS, heart, lung, blindness, retinitis, optic nerve pathology, amblyopia, locomotor ataxia, epilepsy, hysteria, ocular vision 2-6°, vestibular

<u>Nystagmus (cont.)</u>	0-24°, neck reflexes can interfere. Spasmodic hysterical fatigue shows blue field constriction.
	$\mu\delta$ Fields: decreased for red & green, esophoria, enclosed blind spot: as field increases, nystagmus decreases.
	N, $\alpha\omega$ Alternating, for blue field > red field > green field.
	- Swinging exercise.
<u>Oculomotor Paralysis</u>	$\alpha\delta$ , $\delta S$ , $\mu\delta$
<u>Optic Atrophy</u>	$\alpha\delta$ To decrease ionization: build potential.
	- Stimulate nerve & blood, increase electrical potential
	$\mu\delta$ Also in sequence $\mu\delta$ , $\delta$ , $\delta\theta$
<u>Optic Neuritis</u>	$\mu\nu$ For "ITIS"
	Compression of nerve from inflammation, exudates, fibrous growth in chronic stages; treat by decompression, increases tonicity of tissues. Intracranial pressure: papillitis (retrobulbar), papilledema.
	- Secondary to maxillary sinus from thyroid; also focal dental infections.
<u>Pterygium</u>	- Subepithelial vascular connective tissue from corneal epithelium and Bowman's membrane, internal medial recti: symptoms of visual stress: $\omega$ , $\mu\nu$ , or $\alpha\omega$ as fatigue symptom.
<u>Ptosis</u>	$\alpha\delta$ , $\mu\delta$ Third nerve disorder
	$\omega$ , $\delta\omega$ Blepharospasm;
	also sequence N (5), $\mu\nu$ (5), $\nu$ (5), $\nu\omega$ (8).
<u>Retinal Detachment</u>	- Separates choroid from rods & cones. Often systemic causes: anemia, TB, arterial disease, exophthalmos.
	1) Increase circulation; increase absorption of the effusion of fluid behind retina; stimulate & vitalize cells; improve nutrition; decrease watery vitreous; decrease floaters; promote "fluidification" return of jelly-like vitreous.
	2) Day one: $\nu$ , $\mu\nu$ ; next day : $\alpha$ ; $\alpha\delta$ if long-standing.
	3) $\mu\nu$ 10 treatments, then alternate with $\alpha\theta$ for 4 minutes as retina improves. The red stimulates circulation and reabsorption of subretinal fluid; green disperses turbidity. $\delta/\theta$ prevents scotoma from subretinal hemorrhage.
	$\nu\omega$ If active hemorrhage.
<u>Retinitis Pigmentosa</u>	$\delta$ , $\alpha\delta$ (Luftic) constitutional; cell function suspended, not dead. Field can expand. Treat 5-30 minutes.
	- Retinal pigment (melanin) is storage battery of energy.
	- (Spitler): $\mu\delta$ (17), $\alpha$ (2), $\mu\delta$ (5).
<u>Vitreous Floater</u>	$\alpha\omega$ To increase circulation of globe.

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