

Introduction to Syntonic Phototherapy

Larry Wallace, O.D., Ph.D.
F.C.S.O.

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Historical Roots

- Blue and Sun-Lights, 1876; General Augustus Pleasanton, Blue stimulated the body's glands , UV could kill bacteria
- Blue and Red Light. 1877, Dr Seth Pancoast: red and blue glass to accelerate or relax the nervous system

Historical Roots

- The Principles of Light and Color, Edwin Babbitt, M.D. 1878 : laws, science, philosophy, chromo-therapies, water
- Oculo-Physical Therapy for Optometry, 1930, Jack Kurtz
- Specto-Chrometry Encyclopedia, Dinshah Gadiali, 1933: color as chemical potencies, force fields, chakras

Historical Roots

- Harmo -Chrome Therapy, Carl Loeb, M.D. 1939: light as nutrition for cells
psych-physical model, stimulate under-activity
- Chrome-Orthoptics, William Henning, O.D., 1938: palliate, stabilize, Rx lenses and prisms
- Secret of Light, Walter Russell, 1947, Electrical universe of rhythmic interchange

THE SYNTONIC PRINCIPLE
HARRY RILEY SPITLER, D.O.S., M.D.
1941

Syntonic Phototherapy

- Syntonic phototherapy is defined as the application of specific light frequencies (color) into the eyes to restore syntony or balance in the autonomic nervous systems which is crucial in supporting visual function
- Often imbalances in the sympathetic or parasympathetic nervous system create vision problems that can be addressed by treating them at their source with light

Principle of Syntonic Science

- A fundamental, primary, or general law or truth from which others are derived.
- Light effects are physical, chemical, physiological, and psychological
- Based on the retinal-hypothalamic and subcortical pathways (non visual tract)
- Biophysics underlies bio-chemistry



HARRY RILEY SPITLER

1941

THE SYNTONIC PRINCIPLE

1. LIGHT BY WAY OF THE EYES
2. CONSTITUTIONAL TYPES:
PYKNIC, SYNTONIC, ASTHENIC

Theory

Bodily health

Inherent electrical and energy systems

Physiology of eye for ocular pathology

Ocular function

Emotional centers

Syntonic Phototherapy Effects

Physical : bones, organs, tissues

Chemical: neuroendocrine

Physiological : nerves, energy, metabolism

Psychological : emotions, the mind

Conditions Treated

- **Brain Injury: Stroke, Severe and Mild TBI**
- **High fever, toxemia, hypoxia, emotional trauma**
- **Pregnancy and birth insults**
- **Headache & Eye Strain**
- **Strabismus**
- **Amblyopia**
- **Eye Pathology: Glaucoma, ARMD**
- **Attention, Learning & Reading Disability**

Conclusions of The Syntonic Principle

There exists a close relationship between light frequency incident into the eyes and :

1. their responses: Treating through non visual tract for a wide range of visual disorders
2. rate of cellular and tissue growth with light stimulating mitosis from the Pituitary. Cell is focus of light's impact

Principles

- 3. Physical development: bio-types and their modification via the midbrain and pituitary. Constitution affects light effects
- 4. Mass body potentials: electro-magnetic charge within the cell and between organs, ie eye(+), liver (-), driving biochemistry through ionization

Principles

5. Development of the biotype, modifying by epigenetics hormonal changes and ANS from light environment, direct current changing EMF, posture, functional tendencies for health and disease
6. Action currents leaving the brain: light frequency affecting EEG's, and overall brain energy

Principles

- 7. Functioning power of the pituitary: master gland directing systems overall hormonal actions in system interactions
- 8. Reproductive cycles: The ANS and Hormonal periods for pregnancy, PMS
- 9. Dynamic tension of branches of ANS : It has a unique rhythms

Principles

10. Secretion of hormones by all co-acting and antagonistic endocrine glands with the pituitary, the ganglion cell receptors for melanopsin. The neuro-endocrine hormones are the keystone of the body's regulation
11. Light frequency and the restoration of health. All cells and systems are frequency driven

Principles

- 12. Degree of nerve irritability ,thus modifying reflexes, affecting oxygen, blood flow, and Ph on a local level and sensory motor function via the thalamus , trigeminal and cranial nerves
- 13. Bodily health: hot/cold, red/blue, +/-,ANS balance, adjust nerves and spinal system , balance emotions through biophotonic regulation and communication

Principles

- 14. Nerve impulses from the eye and the state of tension in the ANS affect motor reflexes
- 15. Vitamin A content and the degree of dark adaptation. Low frequencies build charge to decrease leak of potential and decrease ionization for treatment of amblyopia and increase Vitamin A

Principles

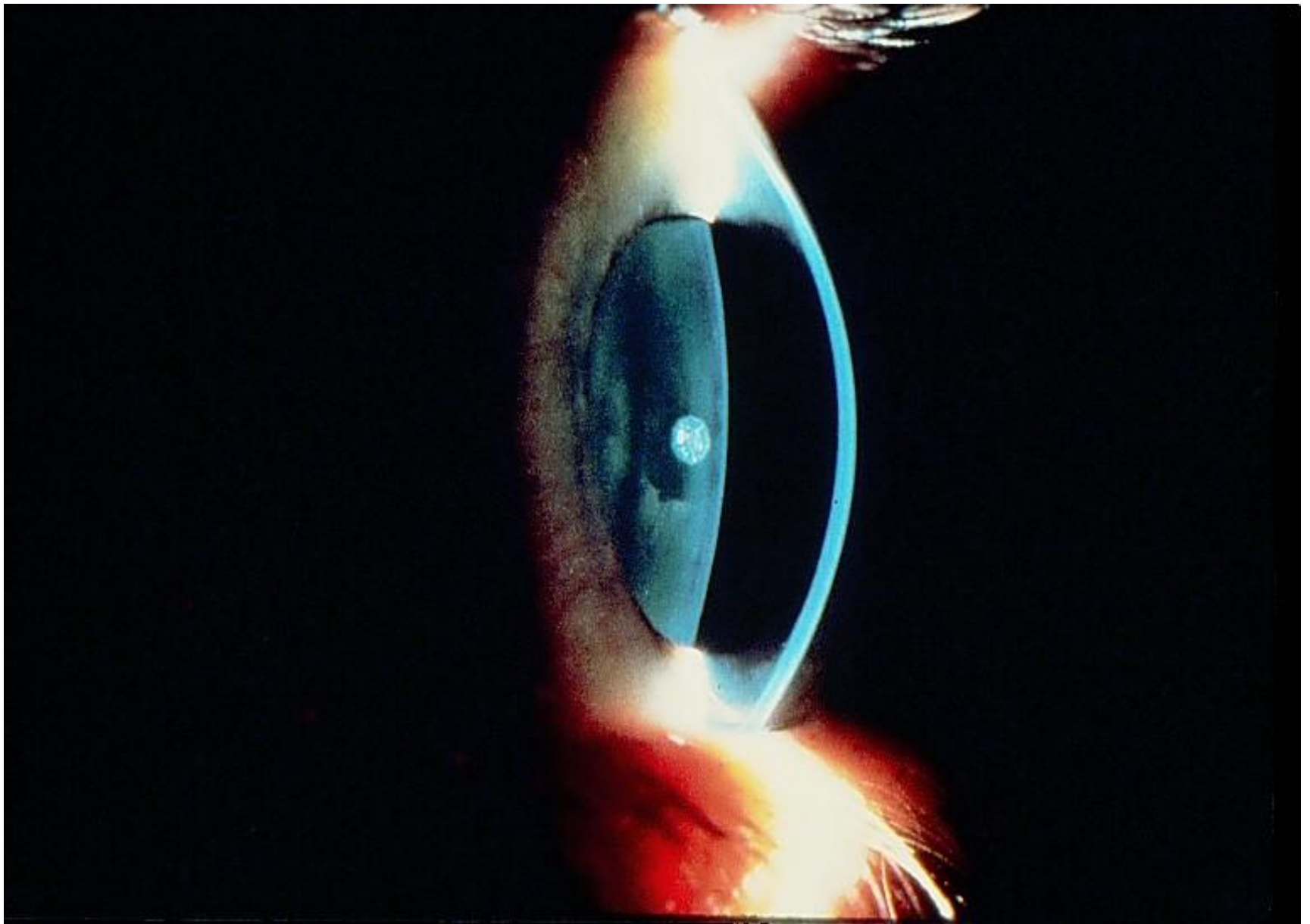
- 16. Perception of pain: change nerve tonus and anemia in brain pain centers in the thalamus
- 17. Relative response of smooth and striated muscles by changes in ANS. Such as the sympathetic stimulating the adrenals to affect ability to affect muscle contraction and endurance

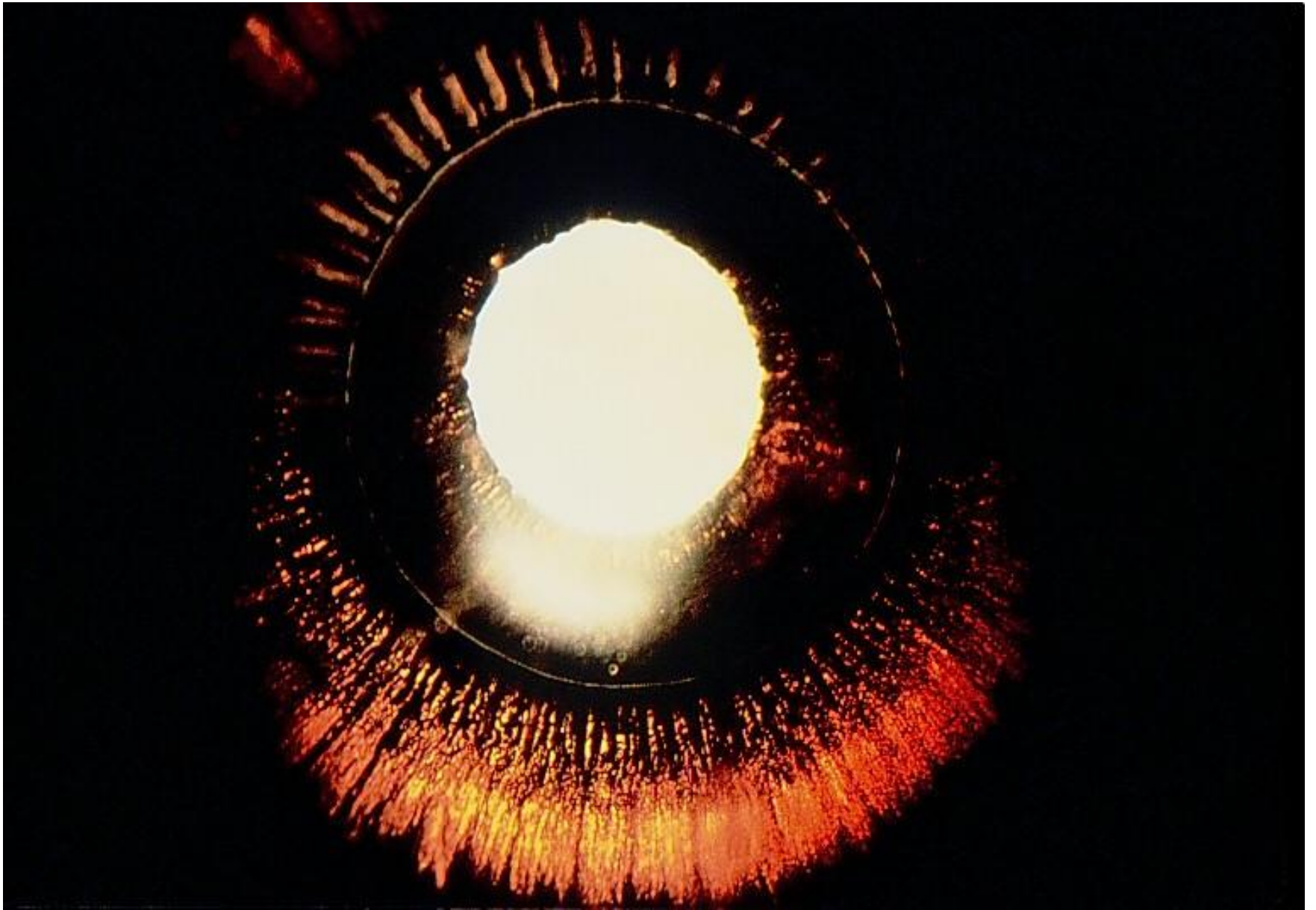
Principles

- 18. Produce Syntony of the ANS and integration of visual function
- 19. The ability to live depends on the syntony of the ANS in acute and chronic illness and this attainment of balance may be aided by light frequency in the eye.

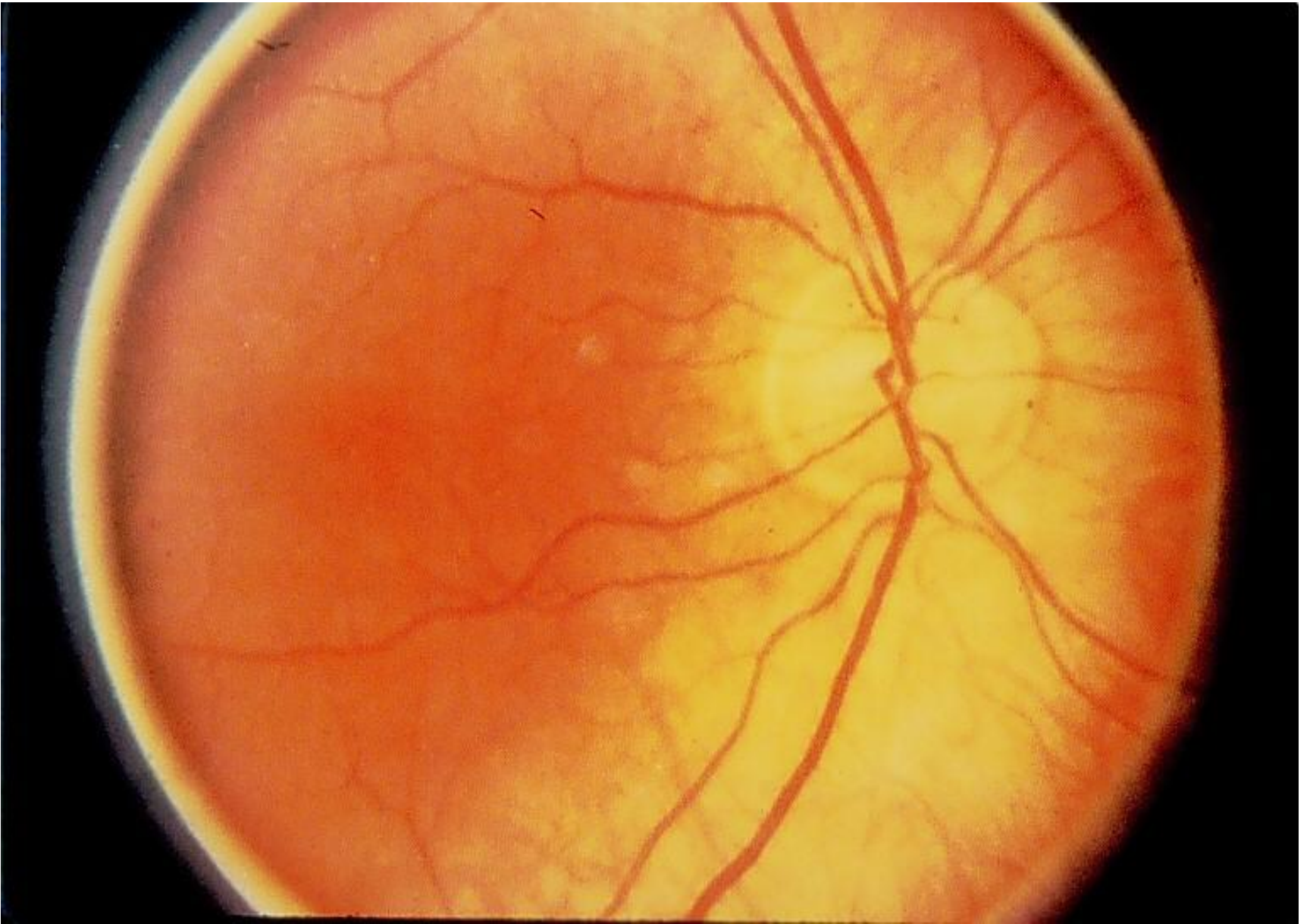
Syntonic Effectivity

- 3067 individuals were Synonized by Dr.Spitler for visual dysfunctions and cataracts
- Over 90% responded
- Over 80% had effective changes







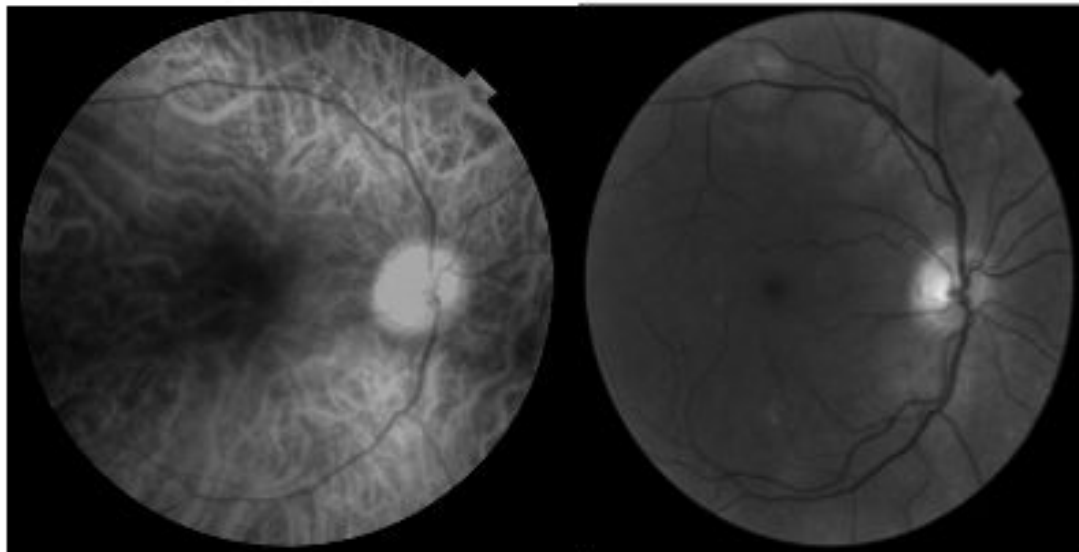




Light as Therapy

Blood flow into eye is approximately
80% choroid – 20% retina

Large Choroidal vessels compared to large retinal vessels of same eye



Photographs taken by Geoff Shayler with Topcon TRC NW6s

The Choroid

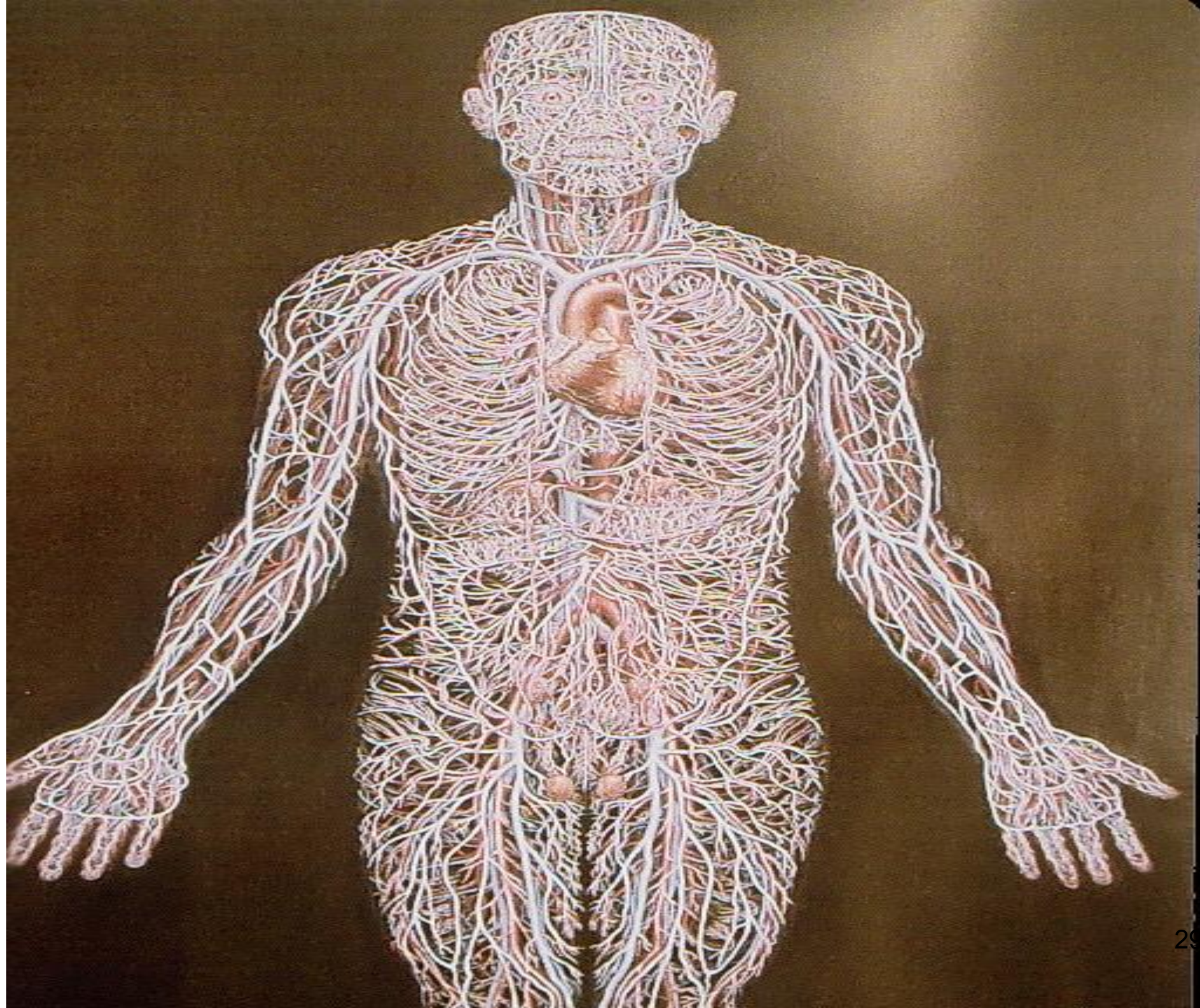
Functions: nourish and waste removal into the lymphatics

Thermoregulation with melanin

Changes in thickness change fovea for accommodation / emmetropization

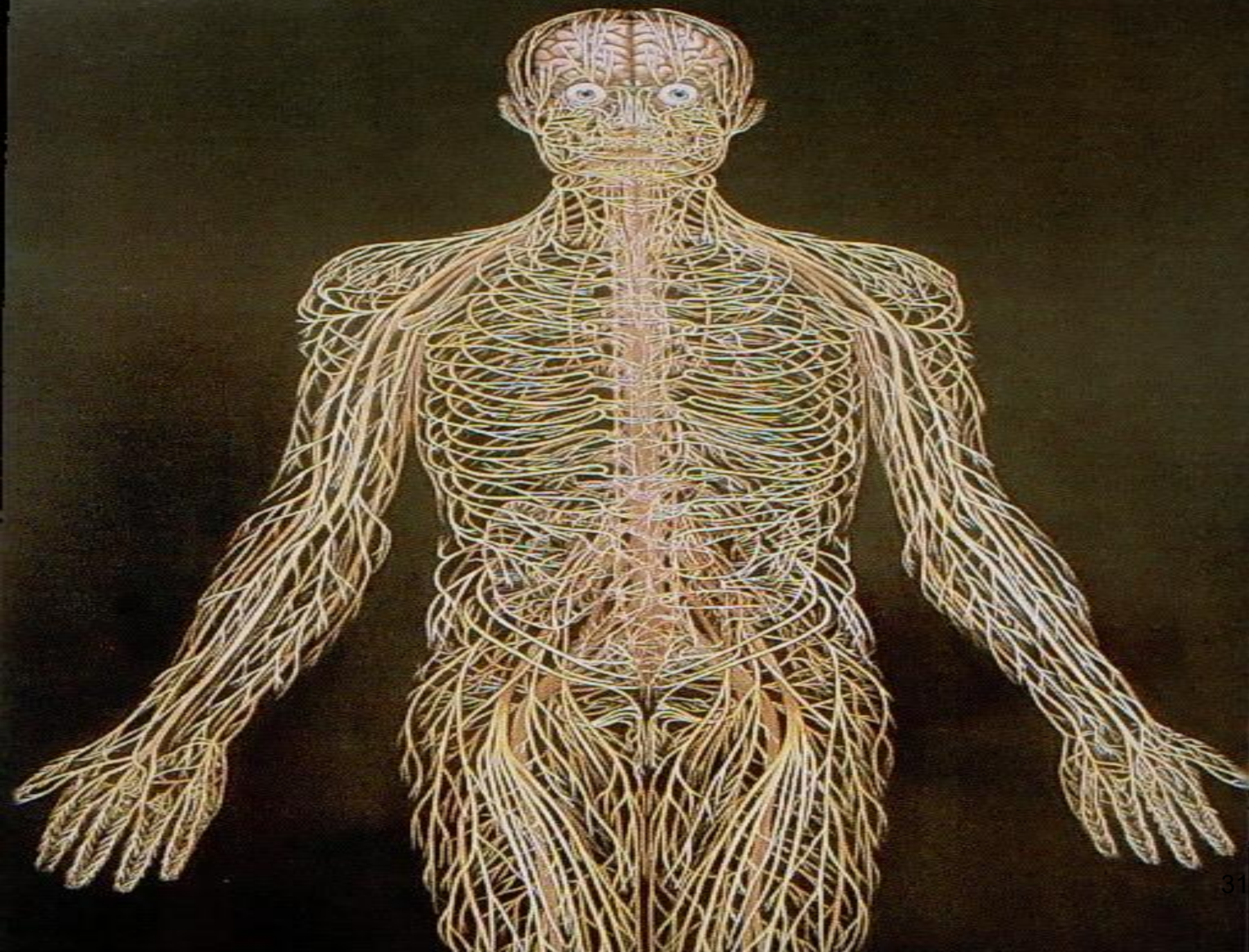
Intrinsic neurons controlled by the ANS

Hormonal secretions



Cell Function

- Trillions of cells in the body
- 50 milion cells created per second
- Every cell has 100,000 biochemical reactions per second
- How could this be coordinated by chemistry or nerve pathways ?
- Coordinated by light through water ,facia, tubulins within the nerves



Energy and Information

- Biophotons embed energy and information in energy traps which are released for physiological function and communication
- Light travels through liquid: blood, plasma, structured water, and the liquid crystal matrix.
- Electro= energy, Magnetic=information
- Information-energy is paired as a trap complex; shape in cellular matrix;energy as bio-chemical : DNA/ Mitochondria

Photobiology and Photobiomodulation

- American Society for Photobiology
- Mechanisms of action of light from molecular biology to cells and tissue
- Low level lasers and LED's
- Treatment from wound healing, detoxification, neuro-rehab, treating inflammation, infection, and DNA repair
- Quantification of the photic energy and the biochemical response : locally

Chromophores

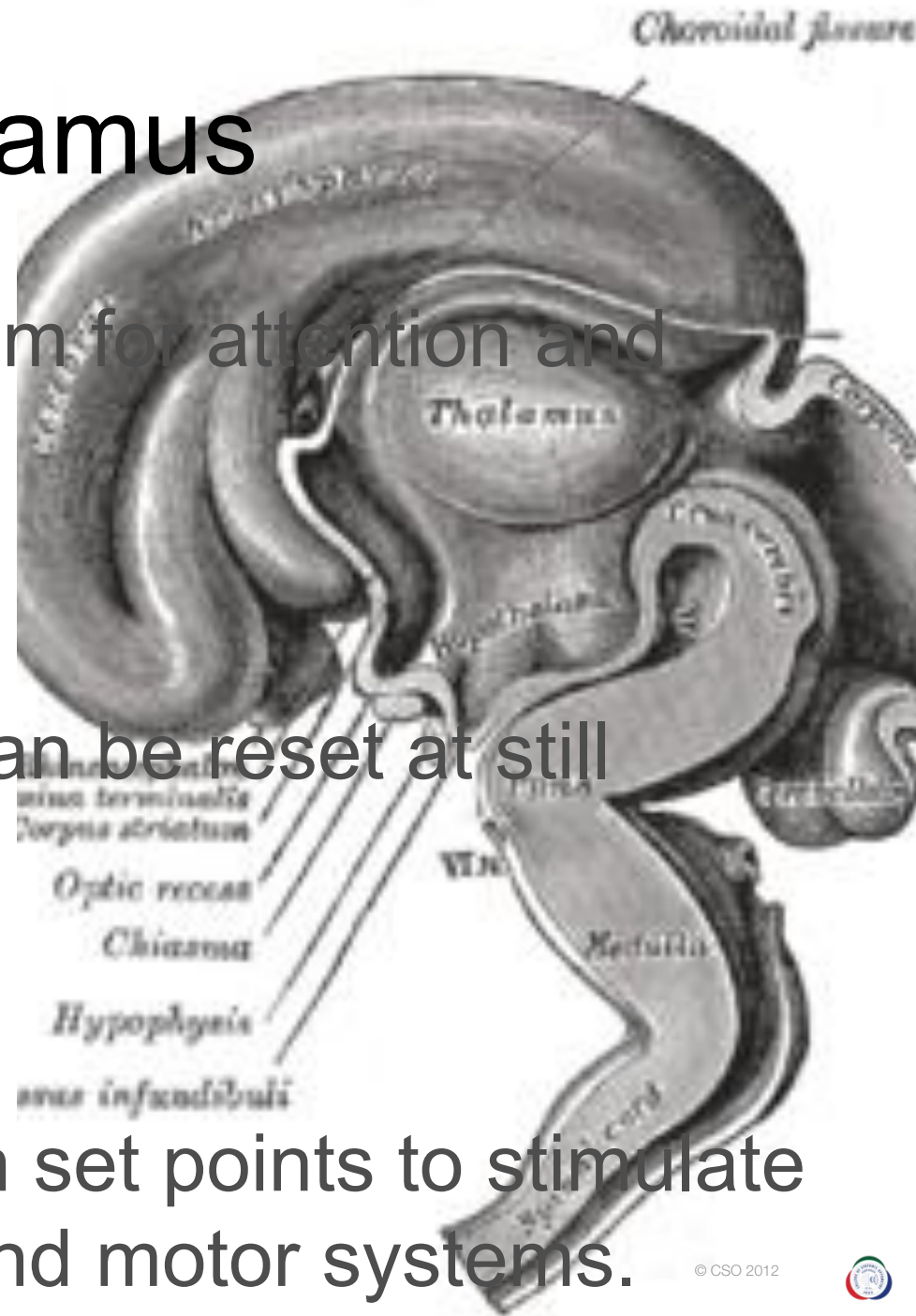
- Cytochromes throughout the skin, tissues, blood
- Photons are absorbed and regulate biological and biochemical reactions such as oxygen consumption , and production of reactive oxygen species (free radicals), and nitric oxide .

NO, Hypothalamus, and the Pituitary

- **The pituitary gland receives extensive NO-ergic innervation from the hypothalamus.**
- **NO modulates secretion of major pituitary stress hormones such as prolactin, luteinizing hormone, CRF, vasopressin, and growth hormone**

Thalamus

- Acts as gating system for attention and arousal.
- Electric discharge can be reset at still points
- Light frequency can set points to stimulate or inhibit sensory and motor systems.

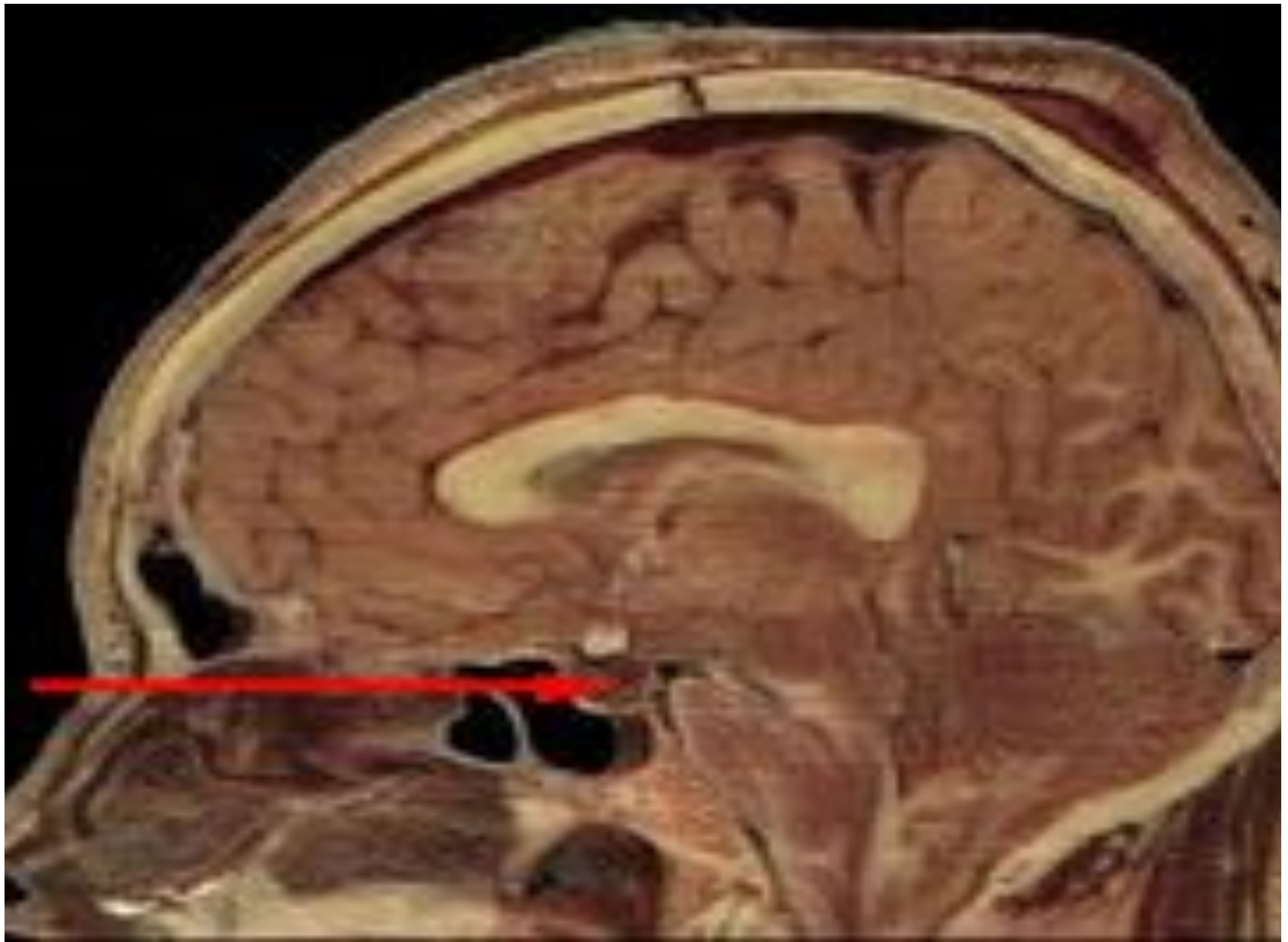


Thalamocortical Connection

Dysrhythmia : Top -down vs bottom up, neurological and psychological effects and disorders

Nine major and thirty subnuclei for networking to executive function, auditory, dorsal attention, salience, sensory motor, lateral and medial visual networks

Networks also with basal ganglia and hippocampus with cortical regions



Hypothalamus

Continuous with the pituitary

Regulation:

Enteric ANS: GI, digestion and metabolism

Respiration

Heart rate

Emotions ,sex drive

Body temperature, sleep cycles

Immune function

Hypothalamus

Continuous with the pituitary

Regulation:

Enteric ANS: GI, digestion and metabolism

Respiration

Heart rate

Emotions ,sex drive

Body temperature, sleep cycles

Immune function

Theory

Spitler's 21 principles

The select application of visible light

Frequencies to balance:

- Sensory motor systems

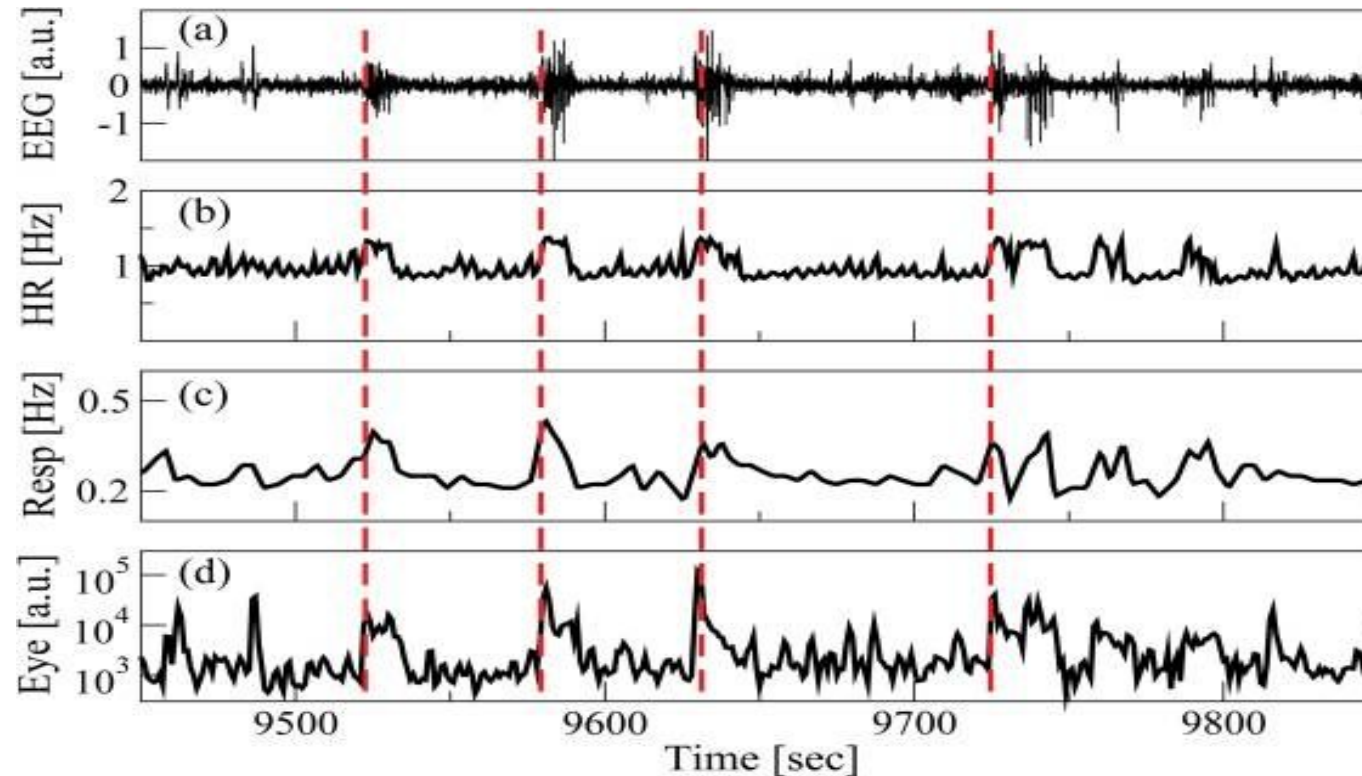
- Endocrine systems via pituitary

- Pineal and hypothalamus

Network Physiology: How Organ Systems Dynamically Interact

- “Network Physiology aims to develop theoretical framework and a system-wide network approach to understand how horizontal integration of physiological systems, each with its own complex structure and mechanisms of regulation, leads to global behavior and distinct physiologic functions at the organism level”. *

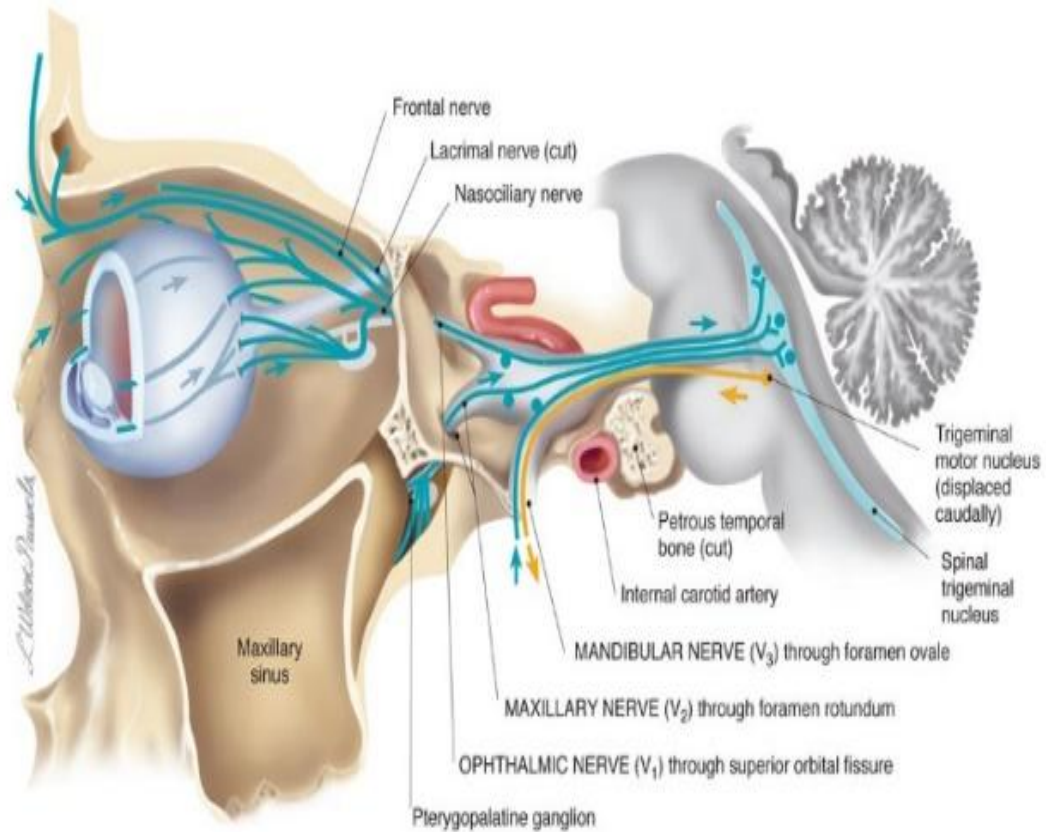
Communicate by Frequency



Structures

- Structural coupling with environmental stimuli changes connectivity by cybernetic feedback loops driven by auto poieis to create new pathways.
- The environmental inputs trigger change but does not direct it.
- No one part defines the “whole”
- Connectivity can change with every perception such as emerging vision each moment.

Pathways

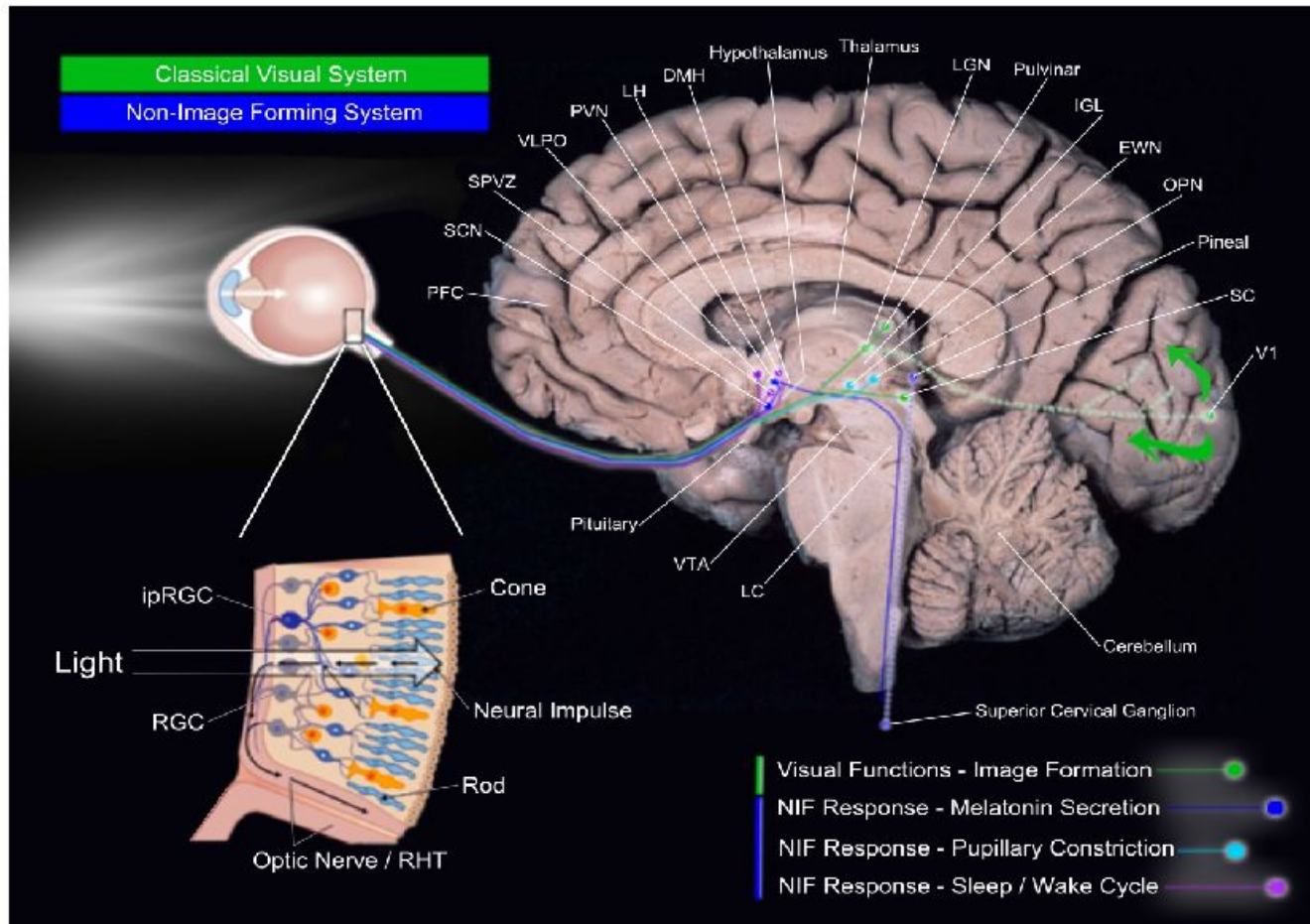


5th Cranial Nerve

- [Trigeminal nerve has relationships with the different systems:
- Reticular activator system (the system that helps us to react to an aggression) RAS
- Limbic system
- Postural system
- Neck muscles, MLF
- Spinal cord, VSR
- Oculo-motor or occlusion

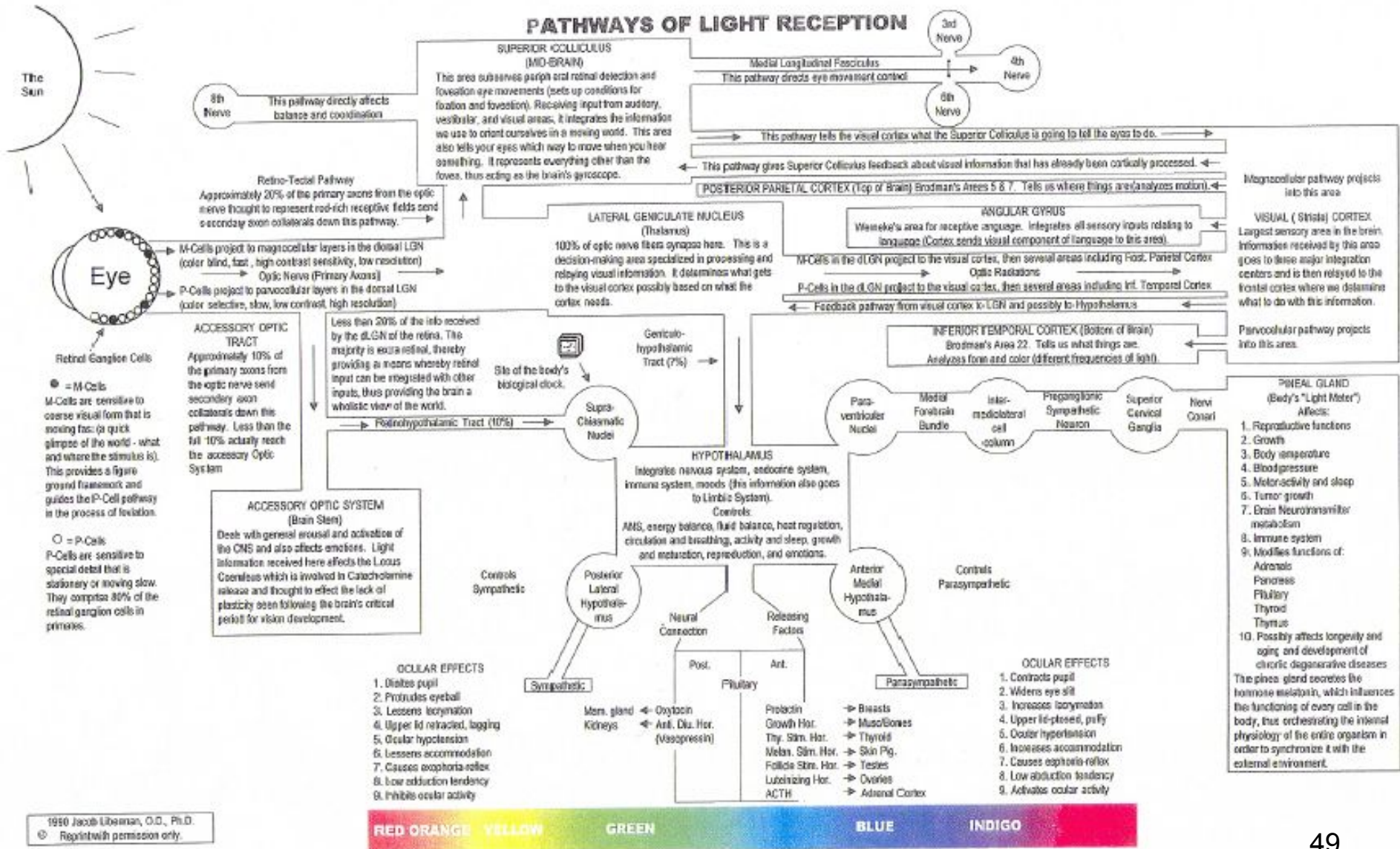
THE AUTONOMIC NERVOUS SYSTEM

Light-Sensitive Brain Networks of the Classical and Non-Image-Forming Visual System



PFC prefrontal cortex,
 SCN suprachiasmatic nucleus,
 SPVZ subparaventricular zone,
 VLPO ventrolateral preoptic nucleus,
 PVN paraventricular nucleus of the hypothalamus,
 LH lateral hypothalamus,
 DMH dorsomedial nucleus of the hypothalamus,
 LGN lateral geniculate nucleus,
 IGL intergeniculate leaflet,
 EWN Edinger-Westphal nucleus
 OPN olivary pretectal nucleus,
 SC superior colliculus,
 V1 primary visual area,
 LC locus coeruleus,
 VTA ventral tegmental area,
 ipRGC intrinsically photosensitive retinal ganglion cell,
 RHT retino-hypothalamic tract.

Pathways of Light



SYMPATHETIC ACTIONS

DILATES PUPILS

INCREASES TEARING

INCREASES INTRA-OCULAR PRESSURE

DECREASES ACCOMMODATION (FOCUSING)

URNS EYES OUTWARD

DECREASES MUCUS, SALIVA AND DIGESTION

DECREASES ARTERIAL DILATION

INCREASES PULSE RATE

INCREASES BLOOD PRESSURE

INCREASES BLOOD SUGAR

SYMPATHETIC ACTIVATIONS

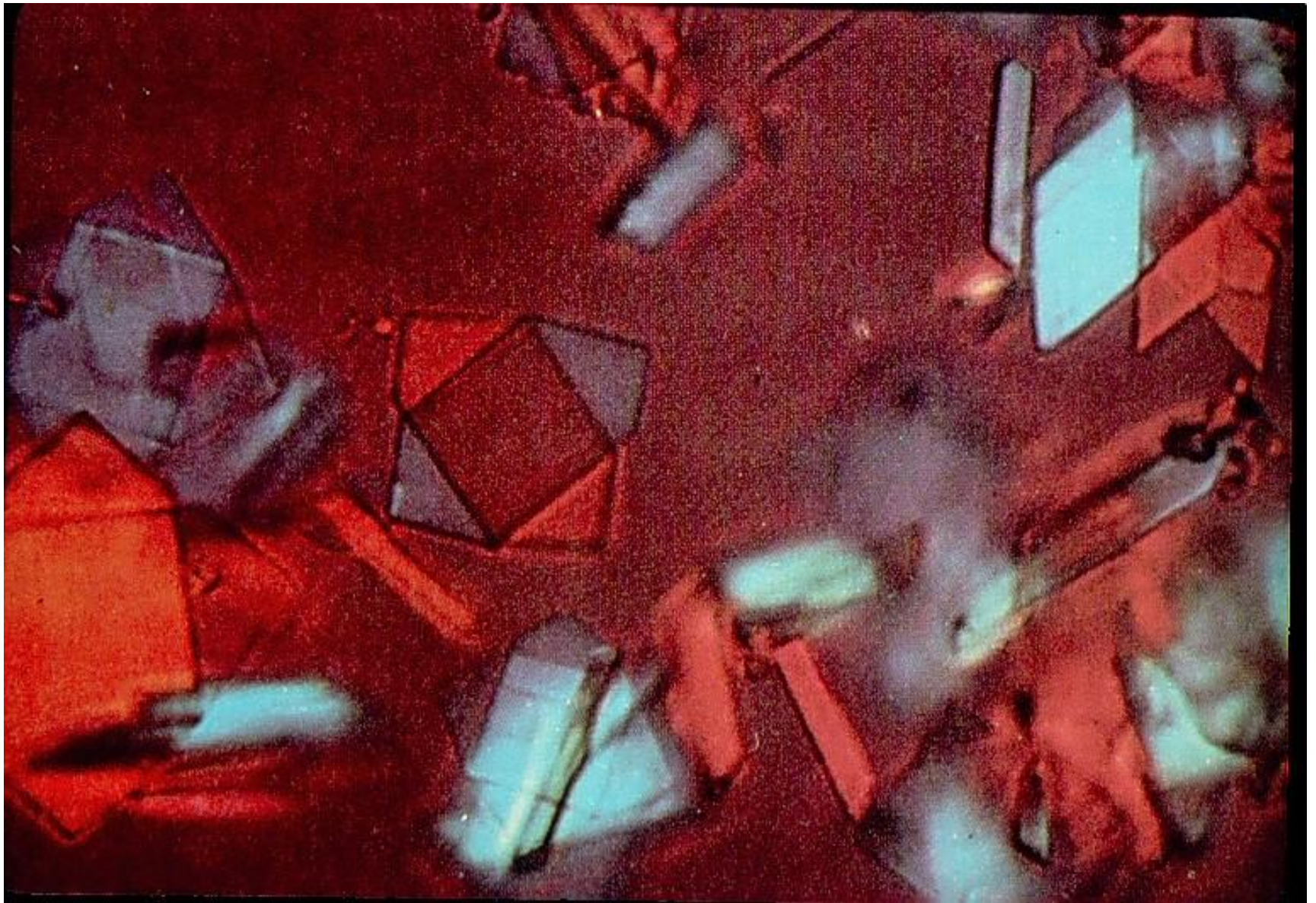
THYROID

ADRENAL MEDULLA

PITUITARY

GONADS

MUSCLES



PARASYMPATHETIC ACTIONS

CONTRACTS PUPILS

DECREASES TEARING

DECREASES INTRA-OCULAR PRESSURE

INCREASES ACCOMMODATION (FOCUSING)

URNS EYES INWARD

INCREASES MUCUS, SALIVA AND DIGESTION

DECREASES PULSE RATE

INCREASES ATERIAL DILATION

DECREASES BLOOD PRESSURE

DECREASES BLOOD SUGAR

PARASYMPATHETIC ACTIVATIONS

PARATHYROIDS

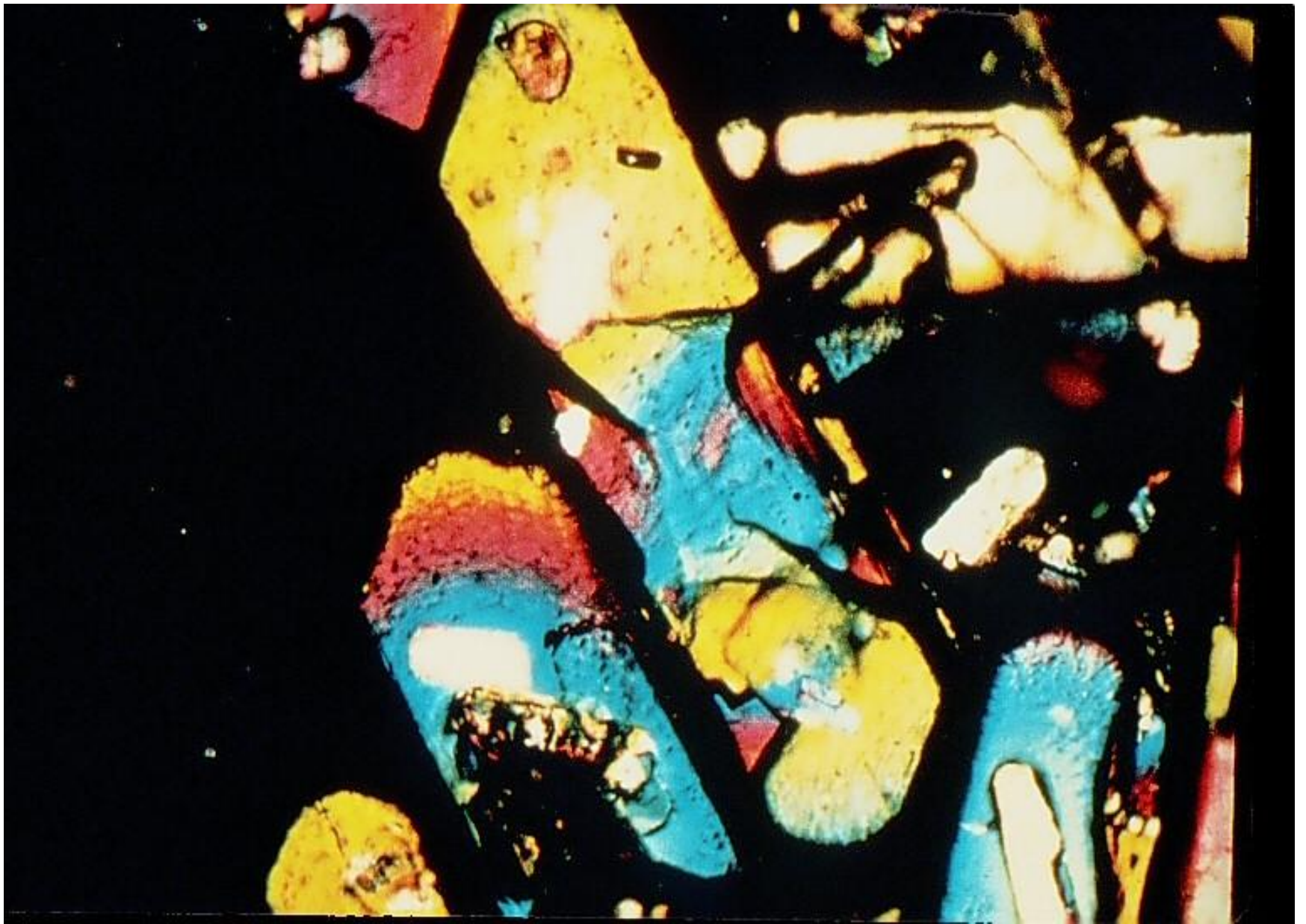
ADRENAL CORTEX

DIGESTIVE TRACT

LIVER

PANCREAS

SPLEEN



Autonomic Rhythm

- The ANS system is not antagonistic but complimentary
- It is frequency driven and can be seen in real time with pupil responses and heart rate variability.
- The sympathetic and parasympathetic wax and wane with sensory and motor responses ,seeking balance to external and internal stimulus

Parasympathetic	Sympathetic
Originate in cranial & sacral nerve ganglia (craniosacral)	Originate in thoracic & lumbar nerve ganglia (thoracolumbar)
Direct blood flow to the digestive tract & support of organ function	Direct blood flow to skeletal muscles
Direct blood away from skeletal muscles	Direct blood away from the digestive tract & support of organ function
Support central circulation, venous flow, the heart, & inner-flowing emotions	Support peripheral circulation, arterial flow, the capillary beds (isorings), & outer-flowing emotions
State of rest & recuperation, eating & sleeping, storage of energy	State of alertness & activity, awake & stimulated, utilization of energy
Basic ground of being, core of energy, undifferentiated whole	Pathways of flow, channels of energy, discernment of individual parts
Primary relationship to front of body, pre-axial, flexor, adductor, & internal rotator muscles (Simultan. Condensing Yield—condensing & folding)	Primary relationship to back of body, post-axial, extensor, abductor, & external rotator muscles (Simultaneous Expanding Yield—expanding & unfolding)
Inner focus, self-orientation	Outer focus, other-orientation
Perception of darkness, weightedness, & depth	Perception of light, lightness, & superficial
Affinities to blood, organs, pineal gland, & feeling	Affinities to cerebrospinal fluid (CSF), nerves, pituitary gland, & sensing

A.N.S. Control: Frequencies for Local and Nonlocal Effect

1. Coupled reciprocal mode – reciprocal inhibition
2. Coupled non reciprocal mode – mutual antagonism –
coactivate or coinhibit
3. Uncoupled mode – unilateral activity
 - i.e. Sympathetic: increases exophoria, relaxes accommodation
 - Parasympathetic: increases esophoria, stimulates accommodation

ANS Actions

- Reciprocal : balance board, build or discharge energy for homeostasis in the face of constant internal and external stimuli
- Unilateral : Poly-Vagal System: The Vagus nerve dampens the sympathetics for empathy
- Hyper-activation or inhibition to both branches

Body Psychotherapy

- Sympathetic arousal build charge which must be released or opposed by the Parasympathetic
- Body protects itself by muscle tension
- Too much tension reduces breathe, venous circulation, repressed motions: leading to anxiety, anger, fear.
- Over Parasympathetic leads to depression and lack of muscle tone.
- Seen in eye motor function: chronic vs. acute

Repression

- Inhibited sympathetic arousal can become isolated with anxiety left in the nervous system: Autonomic Splitting
- Ultimately leads to physiological and psychological dysfunction and pathology

Autonomic Dyscontrol

- Splitting
- Unstable
- Antagonism
- Hyper-activation or depression

Hyperactive Responses

- Loss of ability to respond to stimuli without excessive reactions: pain , numbness, rigid or flaccid muscles, ADD ,ADHD, freeze response
- Splits in mental and motor systems
- Syntonic Phototherapy is in vital in neuro-optometric rehabilitation to stabilize the ANS

Mathematical Model of the ANS

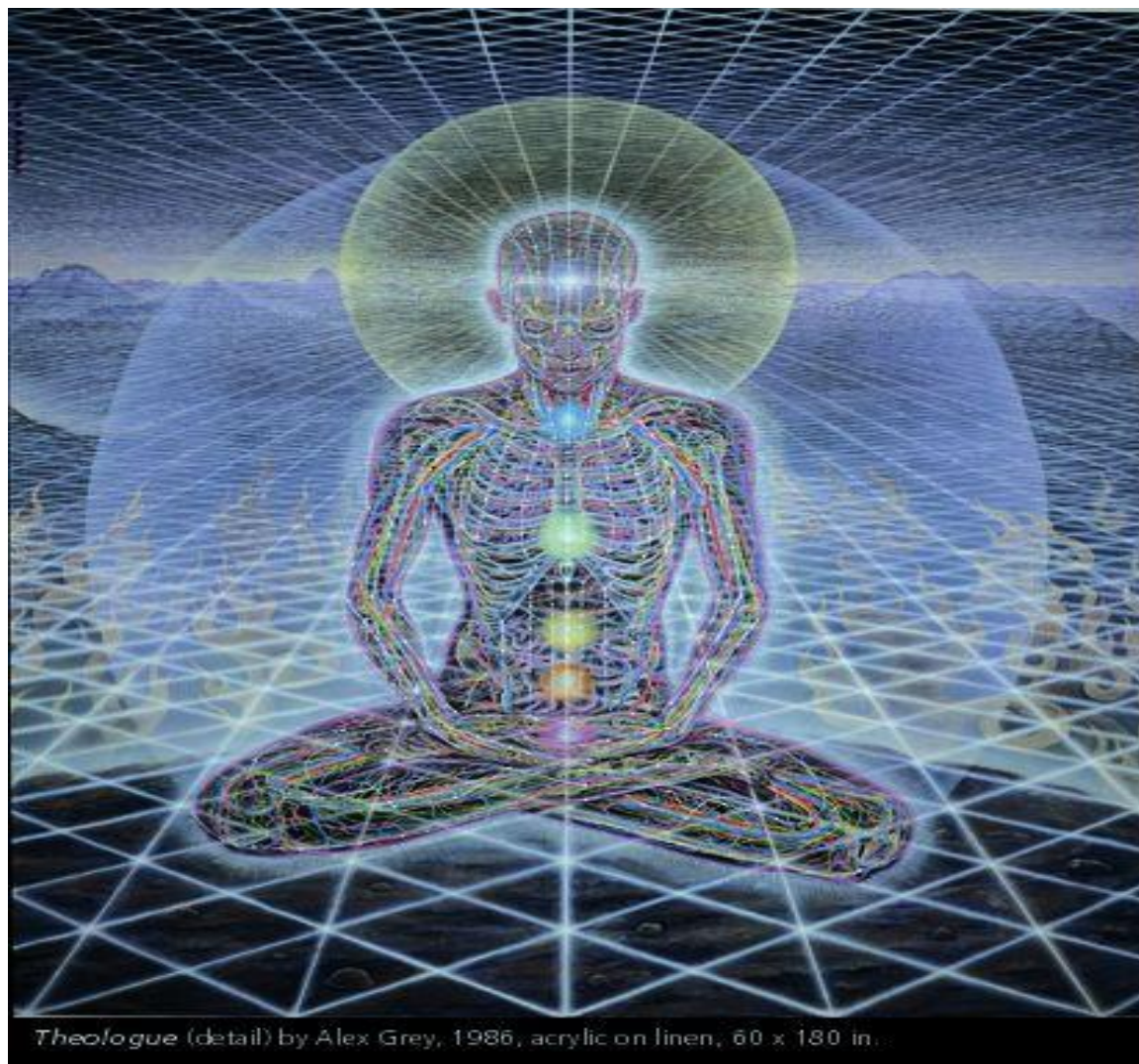
- Virtual Scanning Technology invented by Dr Grakov and elaborated by Dr Ewing
- Technology diagnoses and treats based on visual perception and the reactions within the body to color
- Reactions in the brain to light allows for a mathematical model of the ANS as the main neuro-regulatory system for homeostasis

The Role of Color Vision

- All disorders affect color vision: defects in both the DNA and protein expression at a molecular level releases bio-photons which regulate cellular communication via electron transport chains
- Color perception is used in elaborate algorithms that measure : blood glucose and pressure, temperature, sleep, acidity, digestion, osmotic pressure, posture
- Scans are produced that treat over 100 disorders.

The Complexity ANS Models

- The Autonomics show a complex and layered energetic system
- Balance or homeostasis results from coordination within physiological networks and then co-ordination between a multitude of networks
- The ANS appears to be the chief regulator via the nerve and endocrine organs.



Ocular Function

Eleven frequencies to treat binocular and sensory motor conditions

Visually related, attention and memory disorders

Accommodation and convergence problems

Ocular pathology

Asthenopia and headaches

Closed head injuries

Visual field constrictions and defects

Modern Syntonic Optometry

History: head trauma, fever, ear infections,
toxicity, stress

Pupil: Alpha Omega

Motility: Jerky, erratic

Modern Syntonic Optometry

Analytical: Constricted findings, loss of sensitivity, low recoveries

Visual Fields: Generalized constrictions of form and color in kinetic testing, enlarged blind spots.

The Pupil

One of the most sensitive measures of ANS activity

- Window to the Soul
- Portal of energy for Reception and Projection
- Portal through which we interact with our world
- Non-verbal Communication and strong emotional indicator.
- Reception of nutrition



Reactions

Alpha-Omega Pupil

Part 1



- An Alpha Omega Pupil is the abnormal re-dilation of the pupil during direct, constant light stimulation.
- Unique to the practice of Syntonics
- First suggested as a term by Dr. Paul Johnson in 1934.
- The abnormality is brought to normalcy with phototherapy treatment
- There is an inverse relation between the size of the functional visual field and the length of time of re-dilation of the pupil

Testing Standards In Measurement Alpha-Omega Pupil

- John Pulaski 2006 -



Observation and Recording of AO Pupil

- Time to release
- Amplitude of release
- Reactions after initial release – fluctuations
- Change in response with repeated stimulation
- Sensory reactions – tearing, pain, etc



Grading Standardization

Alpha-Omega Pupil

- John Pulaski 2010 -



GRADE	RELEASE Time	FLUCTUATION	AMPLITUDE
Normal	≥ 7 seconds	Trace	Trace
1+ AO	4-6 sec	Moderate	Mild
2+ AO	2-3 sec	Marked	Mild-Moderate
3+ AO	1-2 sec	Mild-Moderate	Moderate
4+ AO	<1 sec	Mild	Large



The alpha omega pupil function



To administer, the test, a penlight is pointed directly at the pupil of the right eye while the patient fixates a distant non-accommodative target.

Normally when the sympathetic and parasympathetic systems are in balance, the pupil will constrict and maintain that initial constricted size for about 15 seconds if the light is not varied.

With an Alpha Omega pupil the pupil will constrict and then start to dilate back again. The quickness and amount of dilation will depend on how dominant the sympathetic system is over the parasympathetic.

I usually record the size of the pupil before the light is directed at the eye, the size to which the pupil constricts, the number of seconds before the pupil starts to dilate and the size dilated back.

A pupillary exam should include the determination of size, shape and position of the pupils under standardised (light and dark) room conditions for your office

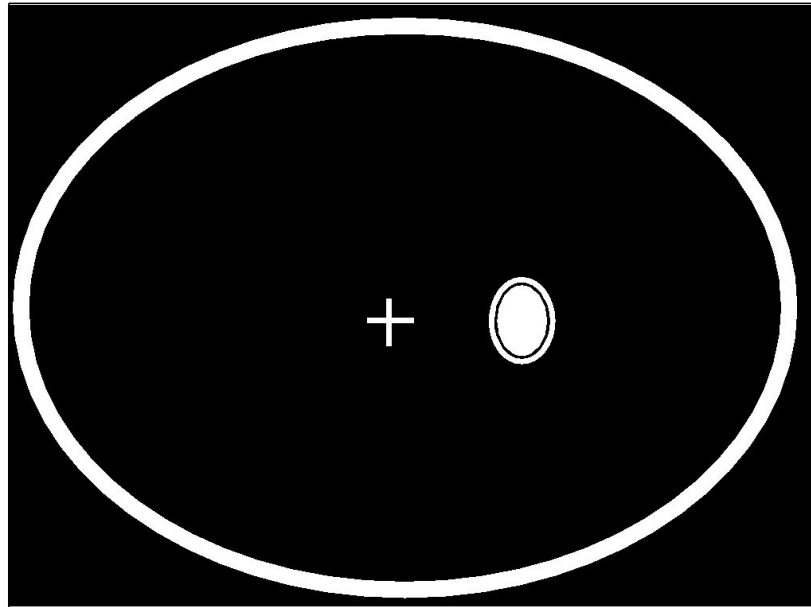
Spitler and Kretchmer

- Asthenic-Pyknice-Syntonic as ANS dominance
- Personality-Facial & Body Signs-Functional Tendencies-Elements-Dominant Frequencies
- Mental and physical dominance
- Balance by activation or inhibition of sympathetic and parasympathetic
- Facial characteristics for action and eyes for the mind
- Facial changes over time: mouth, jaw

Nascentization

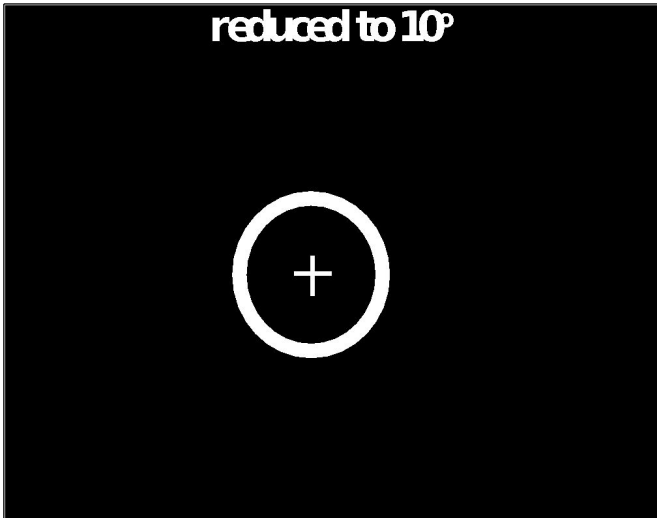
- To disrupt chronic adaptation and disorganize to create new regulation
- To make susceptible or increase sensitivity to the therapy
- Historically put red on non-dominant eye for nonlocal cases
- Use red or blue to break suppression and increase motor responses

NORMAL VISUAL FIELD



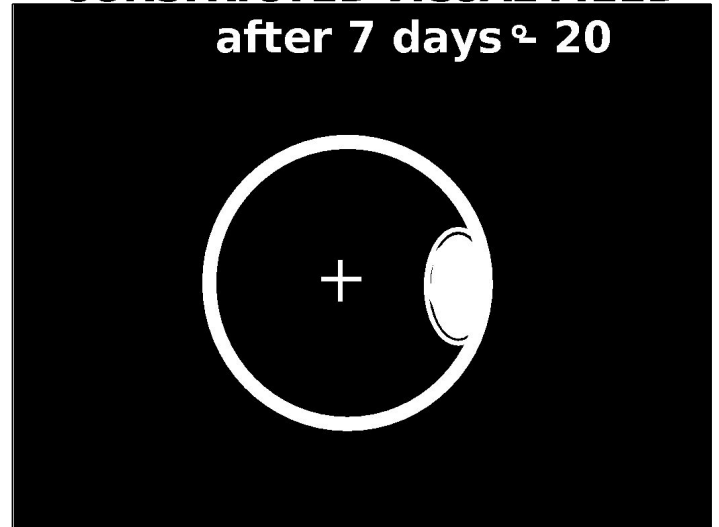
CONSTRICTED VISUAL FIELD

reduced to 10°



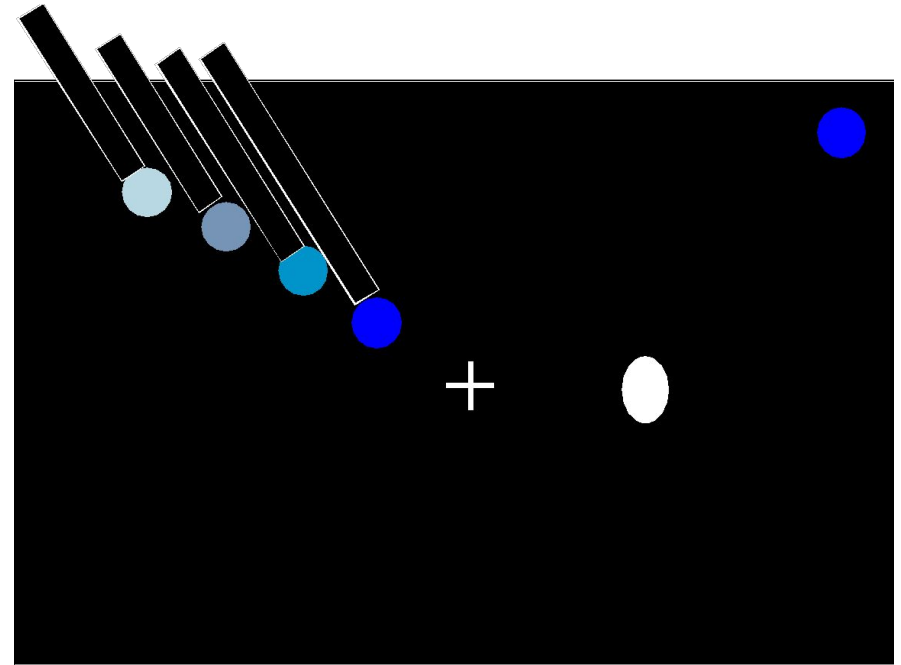
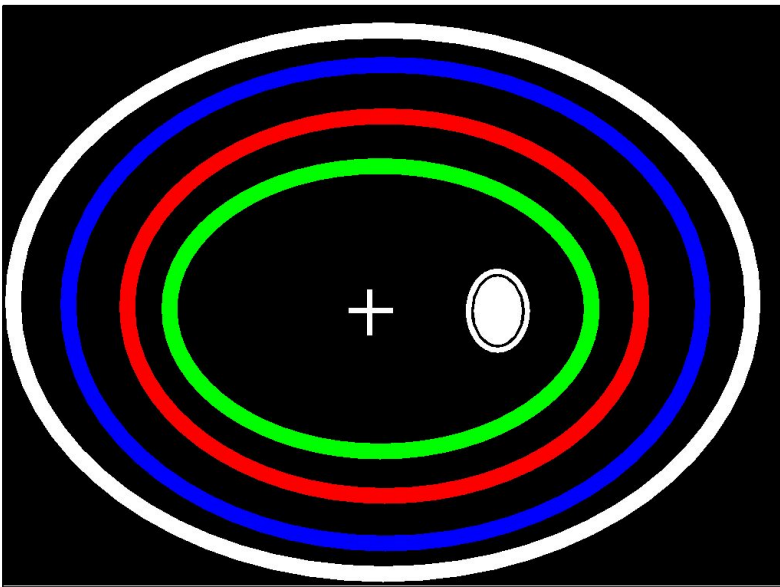
CONSTRICTED VISUAL FIELD

after 7 days ≈ 20°



Color Visual Fields

NORMAL COLOR & FORM FIELD



Kinetic Visual Fields

Visual Field on Campimeter



Color Fields

- Measure disturbed function due to stress, trauma , and toxicity.
- Green: focal infection, grief, anger, bitterness, loneliness.
- Red: Systemic or organic disorder, insecurity, overindulgence, abuse of self
- Blue: Heart and Adrenals, Thymus, energetic representation of feeling and emotions , spirit, self knowledge.

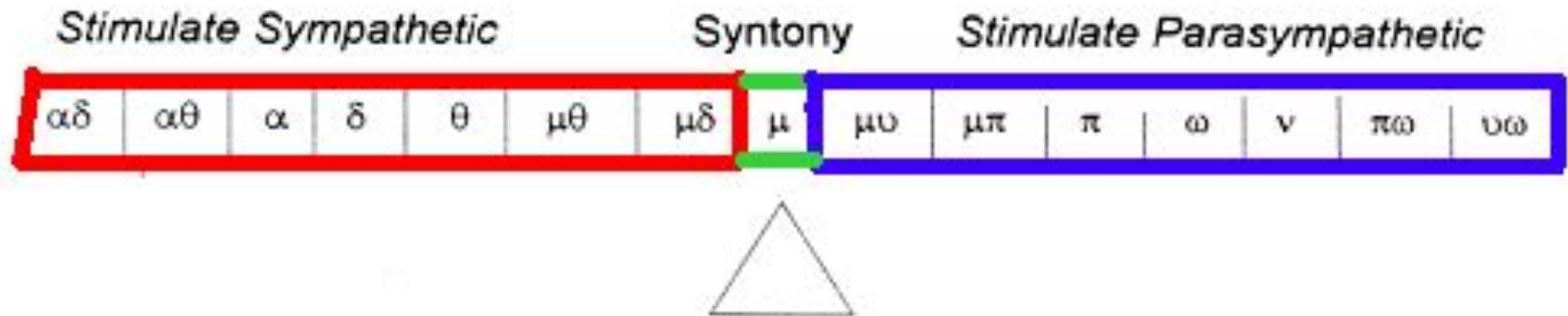
Color Fields, Intoxication, and Reading Disability

- Sarah Cobb, Journal Editor, Journal of Optometric Phototherapy
- Dr's Webb and Brombach wrote as early as 1924 of enlarged blind spots in reading disabled children, with slow fixation, word recognition, perception all limited by central field constrictions.
- Toxicity first depresses the color fields , then form fields and spectral sensitivity

Effects of Filters

Red (sympathetic)	Sensory stimulant
Orange	Motor stimulant
Yellow	Intense motor stimulant
Green	Equilibrator for physiological balance
Blue	Sensory depressant
Indigo	Motor depressant
Violet (parasympathetic)	Intense Sensory depressant

Balance Board – general considerations



Red end of spectrum= sympathetic stimulation

Blue end of spectrum= parasympathetic stimulation

RED

STIMULATES SENSORY NERVOUS SYSTEM

LIVER BUILDER AND STIMULANT

INCREASES BLOOD COUNT

INCREASES CIRCULATION

CAUSES EXPULSION OF DEBRIS THROUGH SKIN

GREEN

CEREBRAL EQUILIBRATOR

PHYSICAL EQUILIBRATOR

PITUITARY STIMULANT AND EQUILIBRATOR

GERMICIDE, DISINFECTANT, ANTISEPTIC

STIMULATES REBUILDING OF MUSCLES AND TISSUES

VIOLET

SPLEEN BUILDER AND STIMULANT

DECREASES MUSCULAR ACTIVITY, INCLUDING HEART

LYMPHATIC GLAND AND PANCREAS DEPRESSANT

PROMOTES PRODUCTION OF LEUKOCYTES

TRANQUILIZER

"WHEN THE BODY IS IN A NORMAL CONDITION, IT MAY BE ABLE TO FILTER OUT FROM THE WHITE LIGHT (OR SUNLIGHT) WHATEVER COLOR VIBRATION IT NEEDS. HOWEVER, IF A PERSON IS NOT IN NORMAL HEALTH, THE NECESSARY COLOR MUST BE SUPPLIED."

- C.G. SANDER, 1926

Disease

- Disease or disharmony is an imbalance between : hot/cold ,red/blue, electro+/electro- , the ANS and alkaline /acid
- Color and electromagnetic therapy can restore these balances

Light Power

- Stimulates inherent healing power
- Reconditions whole eye
- Addresses constitution
- Protects the eye
- Strengthens retina, EOM, photoreceptors, optic nerve

Treatment

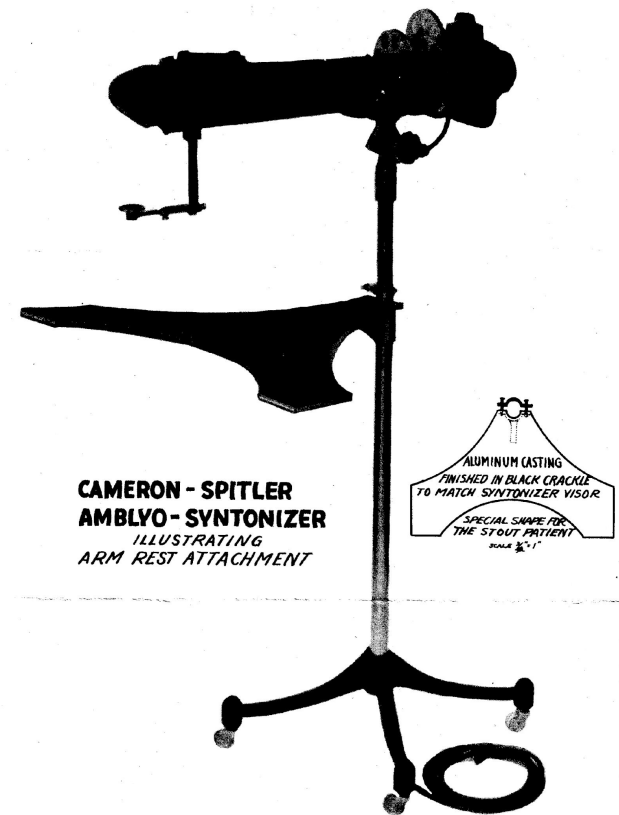
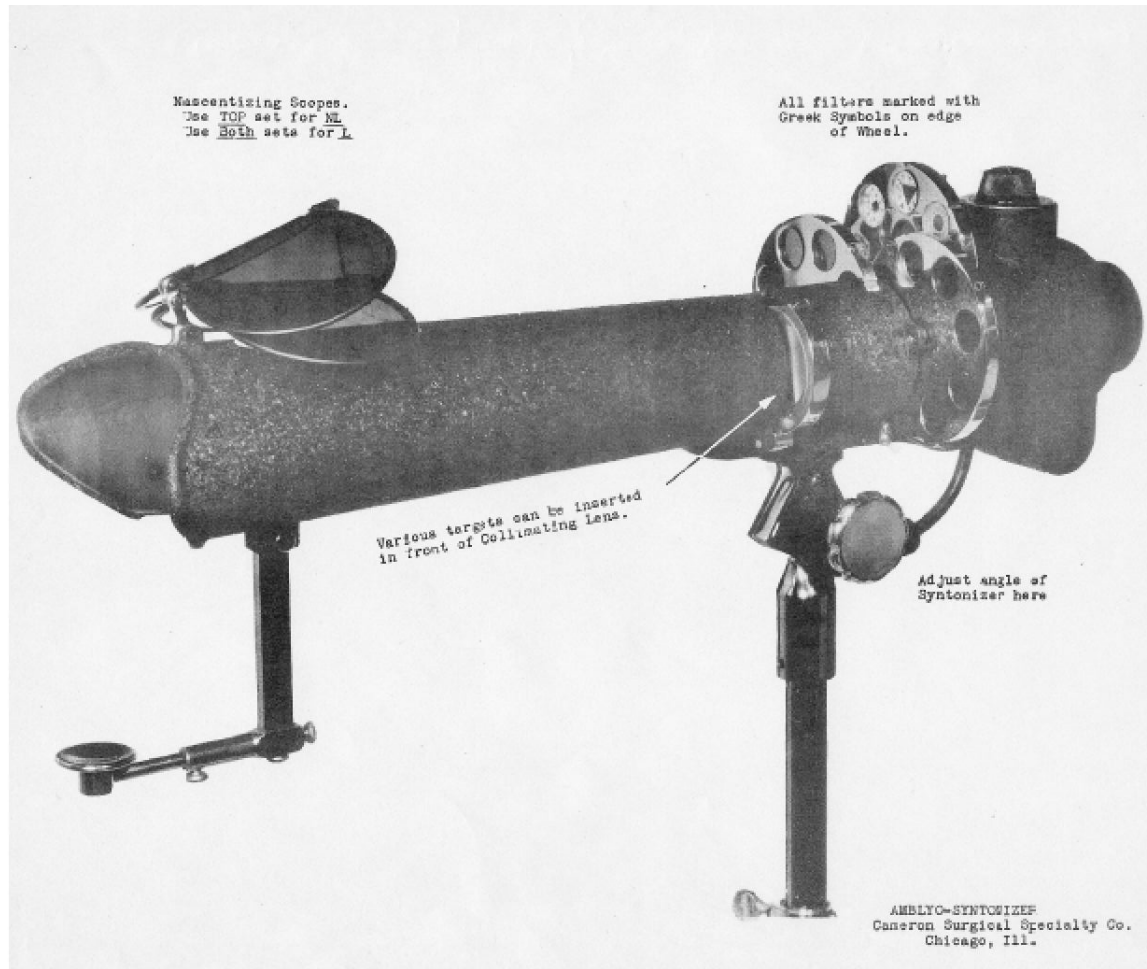
Filter combinations for 20 minute duration

3-5 Times per week

20 Sessions

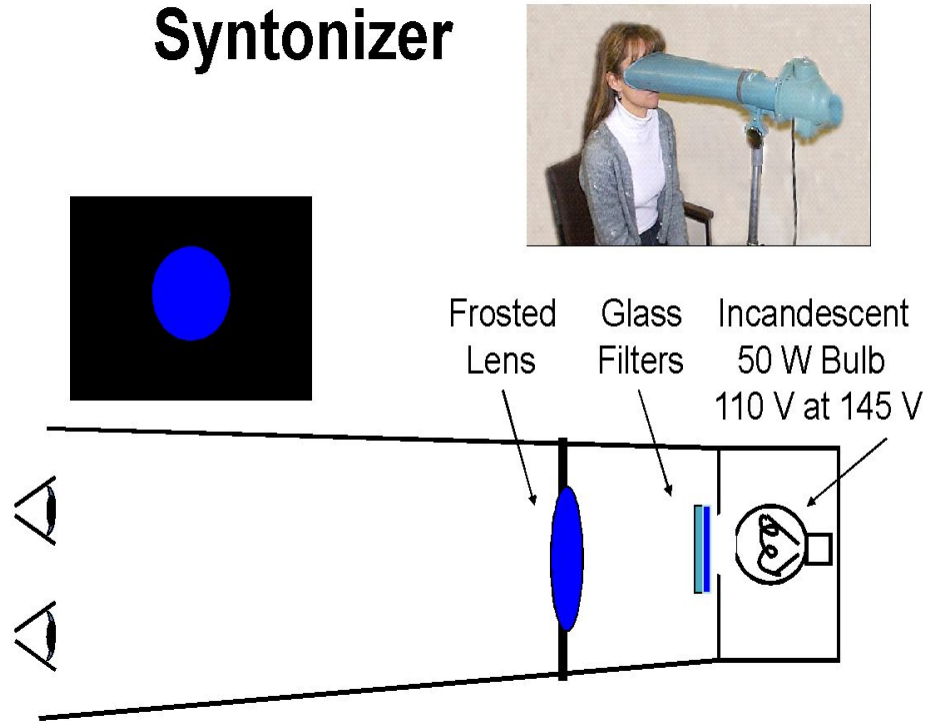
Progress evaluations including analytical tests and fields every 6 to 8 sessions.

Original Syntonizer



The original

Syntonizer



ARNDT'S LAW OF PHYSIOLOGY

"MILD STIMULI WILL EXCITE PHYSIOLOGICAL ACTION, MODERATE ONES WILL FAVOR IT, BUT STRONG ONES WILL RETARD THE ACTION OR ABOLISH IT ALTOGETHER."

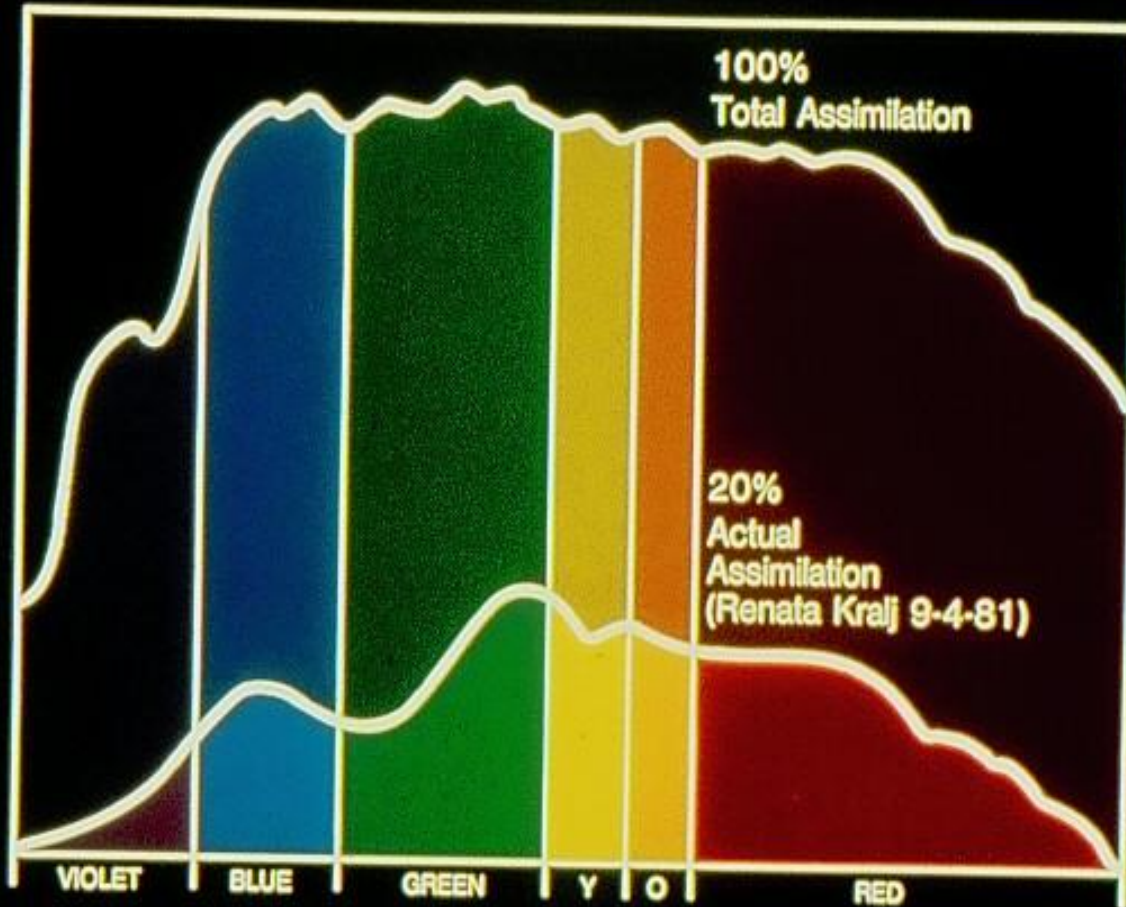
Instruments

- Syntonizer: Built by Cameron in the 1920's
- Downing: Photron Light Stimulator
- Liberman: Spectral Sensitivity Trainer
- Searfoss: Photon Wave
- Ryberg : Monochrome Dome
- Multi-sensory: Bolles, Martel's Sensora
- Syntonizers by Dr.'s Grebevksi and Curtis

Spectral Assimilation



Spectral Assimilation Deficiency



Visual Field
(Renata Kralj 10-9-81)





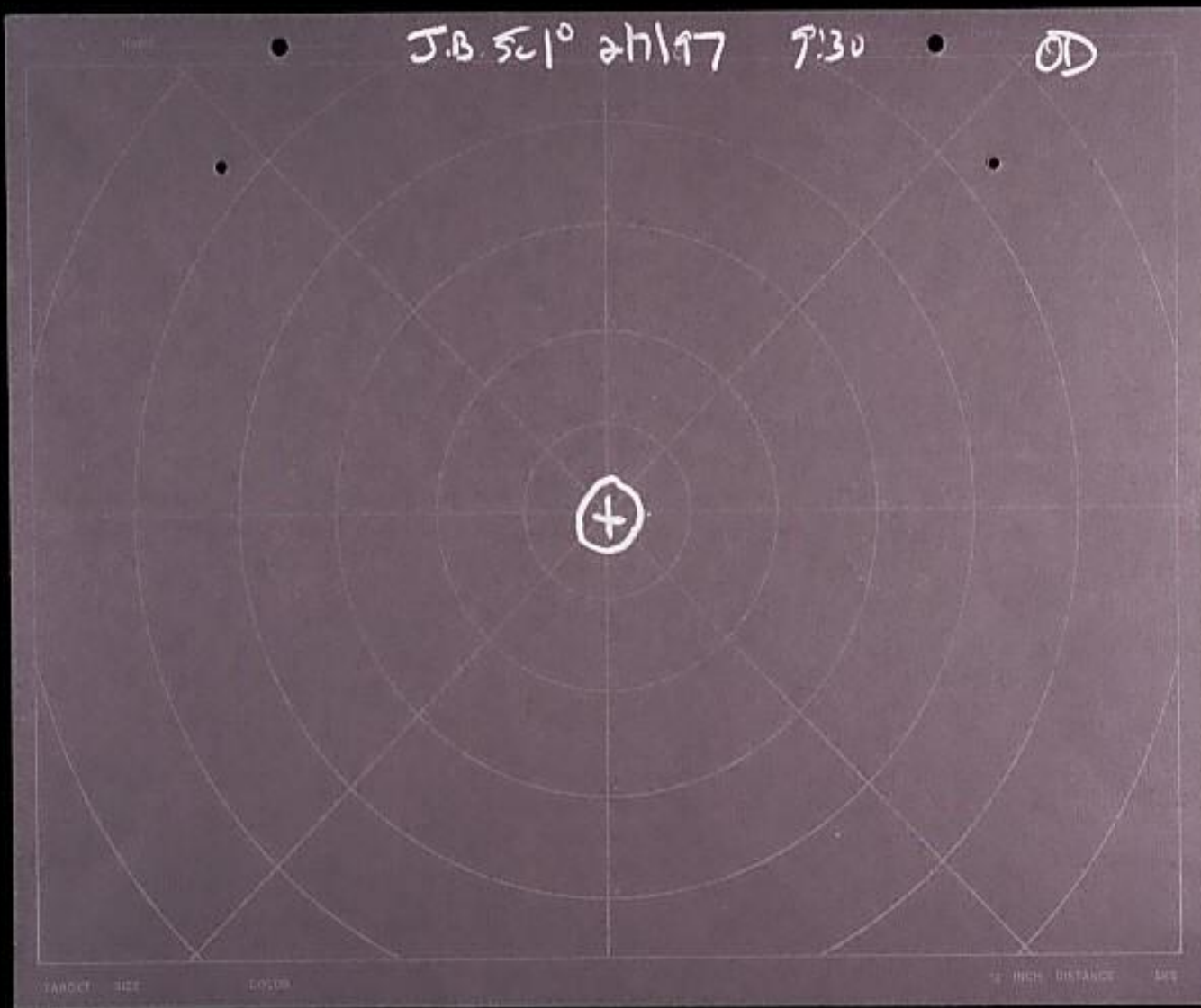
Visual Field

(Renata Kralj 9-14-81)



Case illustration

- Female child age 6 who was failing in school and could not learn to read.
- Severe hyperactivity and very aggressive
- A history of toxic exposure by mother during pregnancy
- History a continual head banging on a daily basis
- Diagnostic exam revealed very constricted visual fields, poor fusion, tracking and accommodation



Treatment

- Treated with 10 minutes of ruby light followed by 10 minutes of yellow green light 3 times per week for 20 treatments .
- Ruby in Syntonic therapy is an emotional stabilizer.
- Yellow green is a detoxifier and physiological stabilizer

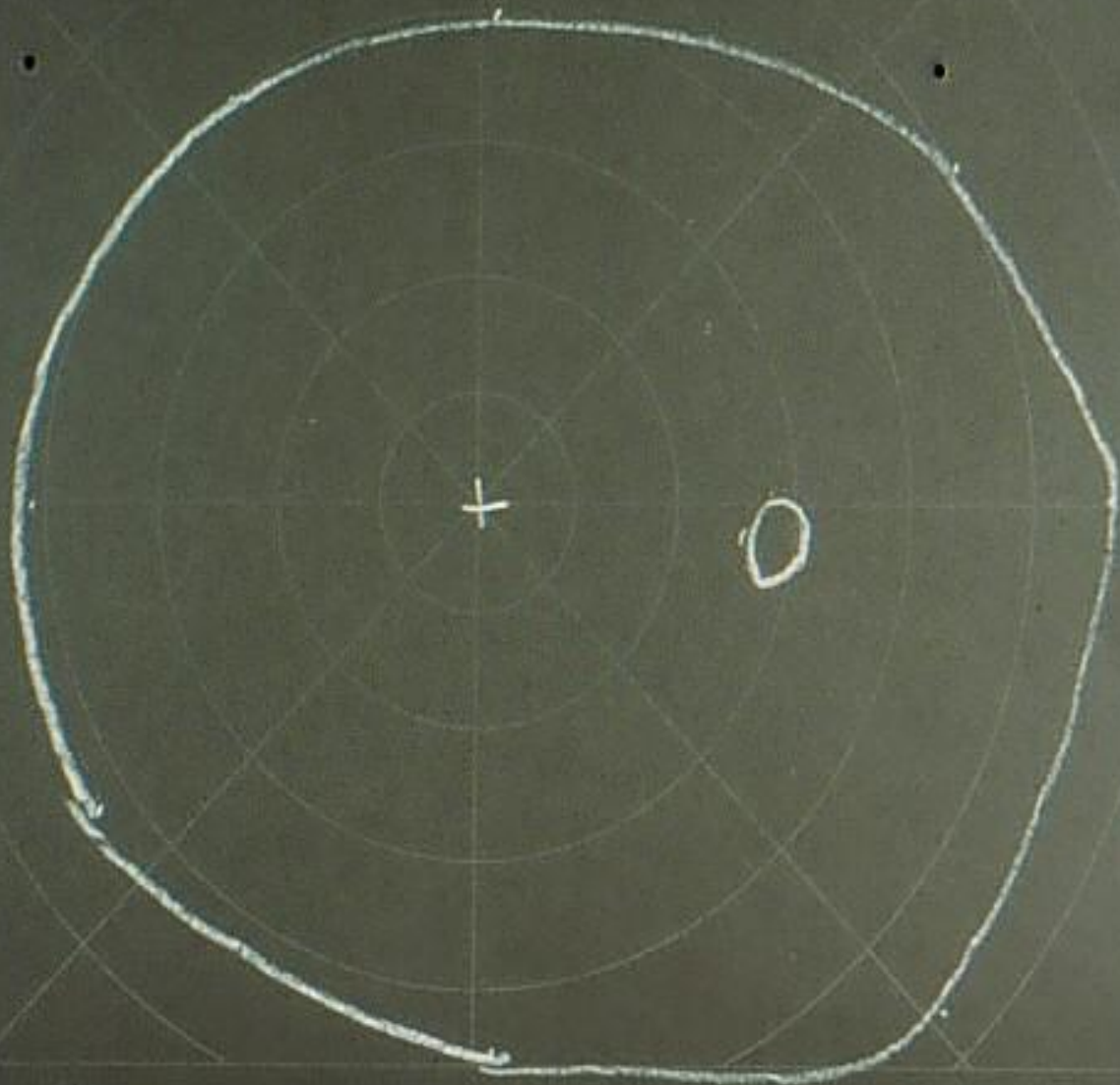
RV

$\Sigma 1/2$

5-21-97

230

Q



Outcome

- Visual fields have expanded and normalized, visual skills WNL
- The hyperactivity was gone and she began to read and school performance was up to grade level
- She began gymnastics with great enthusiasm
- Parents were thrilled to have their daughter be a loving and gentle child

BASIC SYNTONIC SYNDROMES

“Lazy Eye Syndrome”



(Convergence Excess)

Red-Orange Alpha/Delta $\alpha\delta$

amblyopia, eso, poor accommodation

“Chronic Syndrome”



Yellow-Green Mu/Delta $\mu\delta$

physiological, toxic, neuroendocrine, chronic imbalance, allergy

“Acute Syndrome”



Blue-Green Mu/Upsilon $\mu\nu$

recent head trauma, high fever, inflammation, anoxia,
swelling, headache, monocular diplopia

“Pain Reliever”



Indigo Upsilon/Omega $\nu\omega$

pain, headaches, asthenopia, exo

“Emotional Fatigue”



Ruby Alpha/Omega $\alpha\omega$

poor coping, mood swings, $\alpha\omega$ pupil, frustration, adrenal fatigue

Two New Syndromes (Collier)



"FIGHT-OR-FLIGHT SYNDROME"

OMEGA-N ΩN

Extreme fatigue or hyper-irritability. Most frequently seen in children with Learning Problems, Social Problems, ADHD, ADD, and Stress-Related Gross & Fine motor problems.

"HYPER-HYPO" SYNDROME



PI-OMEGA ΠΩ

Hyper- or Hypo- phoria or tropia at far and/or near (often only at near). Look for head-tilt. This individual may also exhibit extreme fatigue or hyper-irritability.

Syntonic Syndromes

Mu Upsilon / Blue Green Syndrome (Acute):

Pain swelling, needing palliation, parasympathetic

Mu Delta / Yellow Green Syndrome (chronic):

Glandular imbalances, toxemia, needing physiological balance

LEMON

"CHRONIC ALTERNATIVE"

PROMOTES HEALING IN PERSISTENT DISORDERS

DISSOLVES BLOOD CLOTS

EXPECTORANT

BONE BUILDER

BRAIN STIMULANT

THYMUS BUILDER AND STIMULANT

MILD DIGESTIVE SYSTEM STIMULANT

Syntonic Syndromes

Alpha Omega / Red Indigo Syndrome (emotional Fatigue):
Stress and emotional trauma

Alpha Delta / Red Orange Syndrome (Lazy eye):
Esotropia amblyopia, requiring higher sympathetic arousal

MAGENTA

EMOTIONAL EQUILIBRATOR

Syntonic Syndrome



Alpha-Delta ($\alpha\delta$) Syndrome - Convergence Excess Syndrome

- Description: for an individual who is cross-eyed or has amblyopia. This person may be parasympathetic dominant, exhibit over-flexion; body and eyes turned in.
- Symptoms include: reduced acuity in one eye, uncoordinated movement (781.3), poor depth judgement, head tilt/turn, diplopia (368.3), Loss of peripheral vision, tunnel vision.
- Diagnostic factors include: esotropia (378.00), amblyopia (368.00), esophoria (378.41), suppression of binocular vision (368.31), field constrictions (368.45), abnormal retinal correspondence (368.34), deficient vergence abilities (368.33), subnormal accommodation (367.5), excess calcium in ocular media, low thyroid (mental sluggishness, listlessness, slow pulse, weight gain, low metabolic rate).



Syntonic Syndrome



Alpha-Omega ($\alpha\omega$) Syndrome - Emotional Fatigue Syndrome

- Description: for an individual tending toward emotional exhaustion, mood swings, over stress, negative emotional affect, visual stress, frequently seen in children. This individual may also exhibit extreme fatigue or hyper-irritability.
- Symptoms include: photophobia (368.13), transient blurred vision (368.12), asthenopia (368.13), abnormal fatigue (780.7), headache (784.0), dizziness (780.4), frustration, allergies, asthma, fluid retention.
- Diagnostic factors include: Alpha-Omega pupil response, low breaks and recoveries in ductions, especially adduction (368.33), fatigue exophoria (378.42), adrenal exhaustion, pelvic or sexual tension, reduced ocular motor skills (794.14), subnormal accommodation (367.5) in myopia, constriction of visual fields (368.45), constriction of blue color field, heart involvement, hyperthyroid (mental) hyperactivity, weight loss, rapid pulse, tremors, high metabolism).



Affect Regulation in the Origin of the Self by Alan Shore

- The neurobiology of emotion
- The ANS and its neuro hormones wire the chemical events that mediate behavior
- The frontal orbital cortex is command center with the ANS coupled with dual limbic pathways : poor ANS regulation results in compromises the immune function, peripheral vision and brain electrical coherence, P.T.V.S.

Syntonic Syndrome



Pi-Omega ($\pi\omega$) Syndrome – Hyper-Hypo Syndrome

- Description: for an individual tending toward emotional post traumatic with head-tilt component and social exhaustion, mood swings, over stress, negative emotional affect, visual stress, frequently seen in children, males after trauma or high stress circumstances and females with hormonal complaints and irregular menstruation's. This individual may also exhibit extreme fatigue or hyper-irritability. There is always a vertical phoria component involved, it can be for far or/and near.
- Symptoms include: photophobia, transient blurred vision, asthenopia, abnormal fatigue, headache, dizziness, vertigo, motion sickness, frustration, allergies, hormonal disorders, auditory exclusion, tunnel vision, shaking.
- Diagnostic factors include: Hyper- or Hypo phoria for far and or near, often only for near, Alpha-Omega pupil response, low breaks and recoveries in ductions, can be both or specifically low in abduction or adduction, fatigue exophoria, fight esophoria, reduced oculo-motor skills, subnormal accommodation, constriction of visual functional fields. Enlarged, (would you also have displaced and tilted?) blind spots, mostly different on each side. If this is the case, consider a problem or adaptation of the cervical spine. Very high or very low NPC, poor eye-movements; pursuits, saccades (over- or undershoots). A vertical and horizontal mid-line shift on the visual spacial projection star. Often a full vision screening is not possible, due to pain and or headache.



Syntonic Syndrome



OMEGA-NEURASTHENIA (ω N) SYNDROME - FIGHT-OR-FLIGHT REACTION SYNDROME

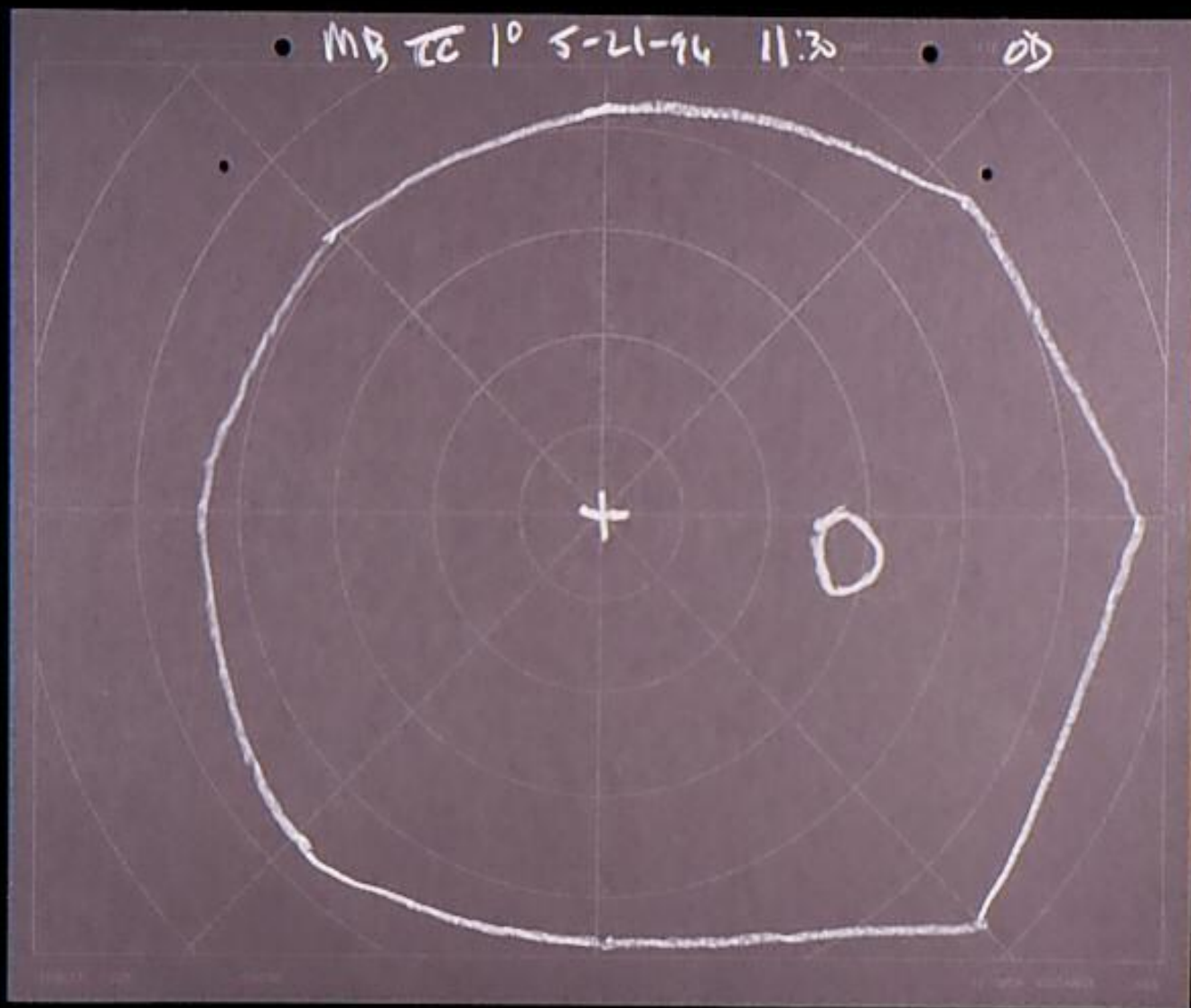
- Description: for an individual tending toward emotional and social exhaustion, mood swings, over stress, negative emotional affect, visual stress, frequently seen in children. This individual may also exhibit extreme fatigue or hyper-irritability. Mostly children with Learning Problems, Social Problems, ADHD, Concentration Problems, Gross & Fine motor problems often caused by stress or in a stress environment.
- Symptoms include: photophobia, transient blurred vision, asthenopia, abnormal fatigue, headache, dizziness, frustration, allergies, asthma, fluid retention, voice change, aggressive behaviors characteristic of externalizing disorders, such as conduct disorder and delinquency, argumentative behavior (fight), or withdrawal behaviors, tend?? and befriend behavior, substance abuse, television/computer viewing (flight). Polyvagal reaction, Auditory exclusion, tunnel vision, acceleration of instantaneous reflexes, shaking.
- Diagnostic factors include: Alpha-Omega pupil response, low breaks and recoveries in ductions, can be both or specifically low in abduction or adduction, fatigue exophoria, fight esophoria, pelvic or sexual tension, reduced ocular motor skills, subnormal accommodation in myopia, constriction of visual fields, constriction of all the functional fields less than 10° or extremely large fields 25° due to Parvo incompetence and Magno problem. Enlarged blind spot or even not measurable. Very high or very low NPC, poor eye-movements; pursuits, saccades (over- or undershoots), poor scanning. No structure, grasping (left open) and organisation on the visual spacial projection star. Often a full vision screening is not possible. Very dark reflex with cognitive nearpoint retinoscopy.

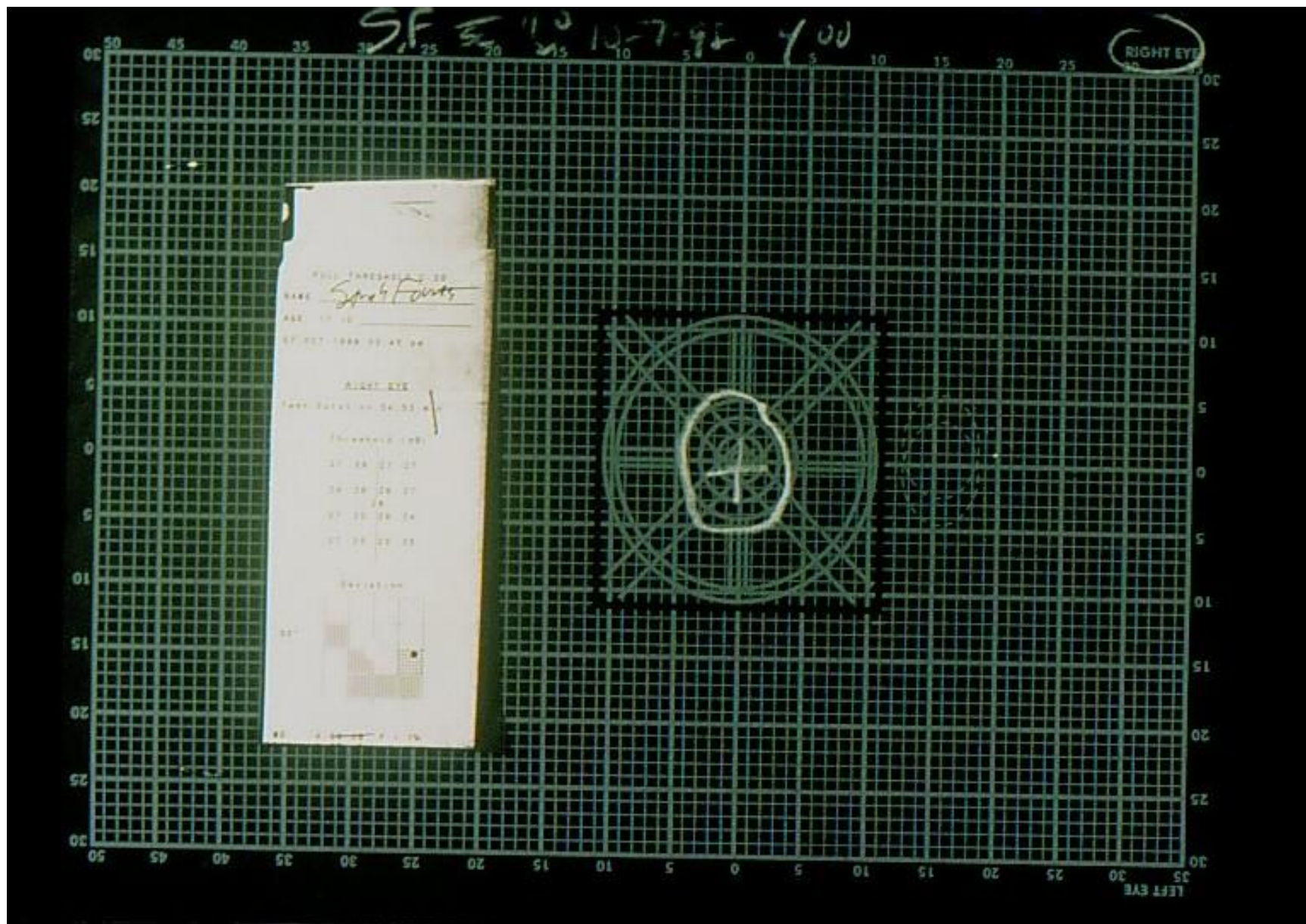


Delta(Yellow) or Theta(Orange)-Omega(Indigo) The Motor Balancer

- Motor stimulant and motor depressant
- Relaxes spasms, eases circulation, lessens pain
- Depresses vaso-motor central grey
- Relaxes ciliary or iris which may cause pain
- Delta for Asthenics, theta for Pyknics
- May act as a stimulant or depressant depending on which one is dominant
- Used often with TBI cases, can be made stronger with Delta-N



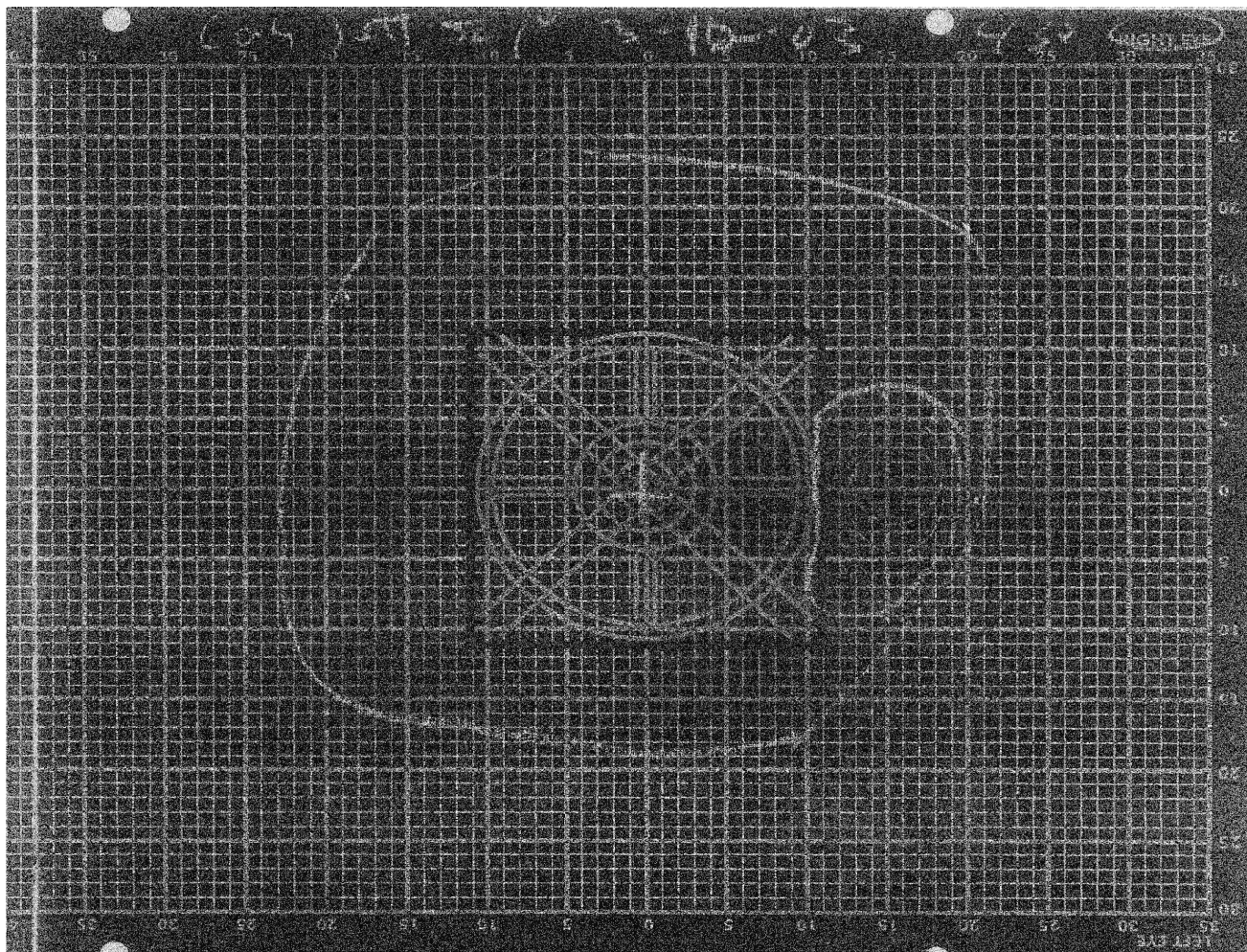




Cases

- CJ, Age 8, reading and writing problems
- Hx: blur f/n, diplopia at near, ear infections
- Dx: 20/20, npc 6"/12", A/O#4. eso f/n, pra -100, nra +100, field defects, ocular –motor deficits as seen in Visagraph
- Tx: ruby(10), yellow-green(10)

Visual field: CJ



Visagraph: CJ

c:\winvisa\rec\JEC-15-0.rec

Page 1 of 6

Reading Profile Visagraph version 4.3

Grade/Goal	Left	Right	Grade Norms	
Fixations/100 words	305	313	174	
Regressions/100 words	124	139	40	
Av. Span of Recognition (words)	0.33	0.32	0.57	
Av. Duration of Fixation (sec)	0.28	0.27	0.30	
Rate with Comprehension (words/min)	69		115	
Grade Level Efficiency	1.0			
Level of Text Read	2			
Directional Attack Difficulty	44%			
Rate adj. for Rereading (words/min)	263			
Comprehension Questions Correct	60%			
Cross Correlation	0.779			

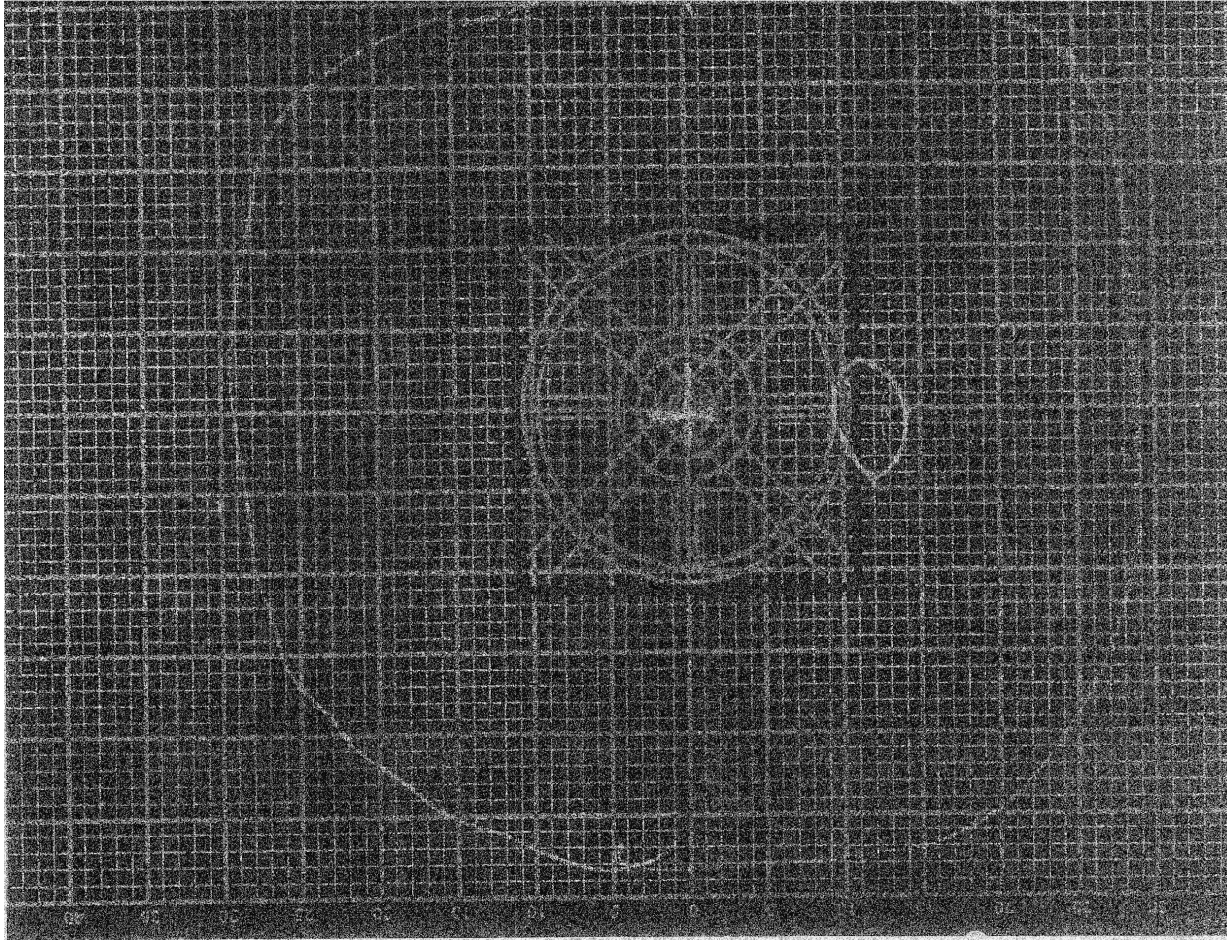
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Countable lines in text																		
Lines found																		
Saccades in Return Sweeps																		
Anomalies (Fix/Regr/Both)																		

Subject information			
Name :	jett corey	Grade:	2
Class :	Born :	Sex :	M
School :	freeville	Filename :	JEC-15-0.rec
Examiner :	larri	Recorded :	03/12/2003 18:16
		Directory :	c:\winvisa\rec

Text information		Countable part statistics	
Filename :	>amer_eng\1-2-15.bdt	No of lines :	7
Title :	Firehouse 2-15	No of words :	50
Answers :	Y Y N N N Y N Y N Y	Av. word length :	4.0
Norms used :	TAYLOR.NOR	No of questions :	10
		Correct answers :	6

Recording information			
Total recording time :	57.27	Duration Standard Deviation :	133 ms
Countable time :	43.45	No. Saccade Start Diff. > 17 ms:	18
Artifact time right eye :	2.95 (7%)	Events with Multiple Regressions :	7
Artifact time left eye :	2.95 (7%)	Mean Regressions in Multiple Events :	2.3
Lines found :	4		
Lines partially reread (> 30%) :	17		
Lines completely reread :	0		
Comment:			

Progress Exam: CJ



Visagraph 2: CJ

c:\winvisa\rec\JEC-16-2.rec

Page 1 of 4

Reading Profile Visagraph version 4.3

Grade/Goal	Left	Right	Grade Norms	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18																	
Fixations/100 words	162	162	174																		
Regressions/100 words	38	30	40																		
Av. Span of Recognition (words)	0.62	0.62	0.57																		
Av. Duration of Fixation (sec)	0.23	0.23	0.30																		
Rate with Comprehension (words/min)		160	115																		
Grade Level Efficiency		3.3																			
Level of Text Read		2																			
Directional Attack Difficulty		23%																			
Rate adj. for Rereading (words/min)		170																			
Comprehension Questions Correct		100%																			
Cross Correlation		0.676																			
				Countable lines in text 7 Lines found 7 Saccades in Return Sweeps 13 Anomalies (Fb/Regr/Both) 0/0/13																	

Subject information

Name : jett corey
 Class : Born :
 School : stone circle
 Examiner : larri

Grade: 2
 Sex : M

Filename : JEC-16-2.rec
 Recorded : 04/09/2003 16:39
 Directory : c:\winvisa\rec

Text information

Filename : >amer_englt-2-16.txt
 Title : Letters 2-16
 Answers : Y N N Y Y N N Y N Y
 Norms used : TAYLOR.NOR

Countable part statistics

No of lines : 7
 No of words : 50
 Av. word length : 3.8

Recording information

Total recording time : 26.62
 Countable time : 18.75
 Artifact time right eye : 0.00 (0%)
 Artifact time left eye : 0.00 (0%)
 Lines found : 7
 Lines partially reread (> 30%) : 1
 Lines completely reread : 0

Duration Standard Deviation : 116 ms
 No. Saccade Start Diff. > 17 ms: 15
 Events with Multiple Regressions : 3
 Mean Regressions in Multiple Events : 2.0

Comment:

Progress Exam : CJ

- Slight exophoria F/N, fusion WNL, Versions full and smooth, Accommodation: -250/+225.
- Reports improve reading and writing performance
- Fixations /100 words went from 313 to 162, regressions from 139 to 38, span of .32 to 62, comprehension 69wpm to 160

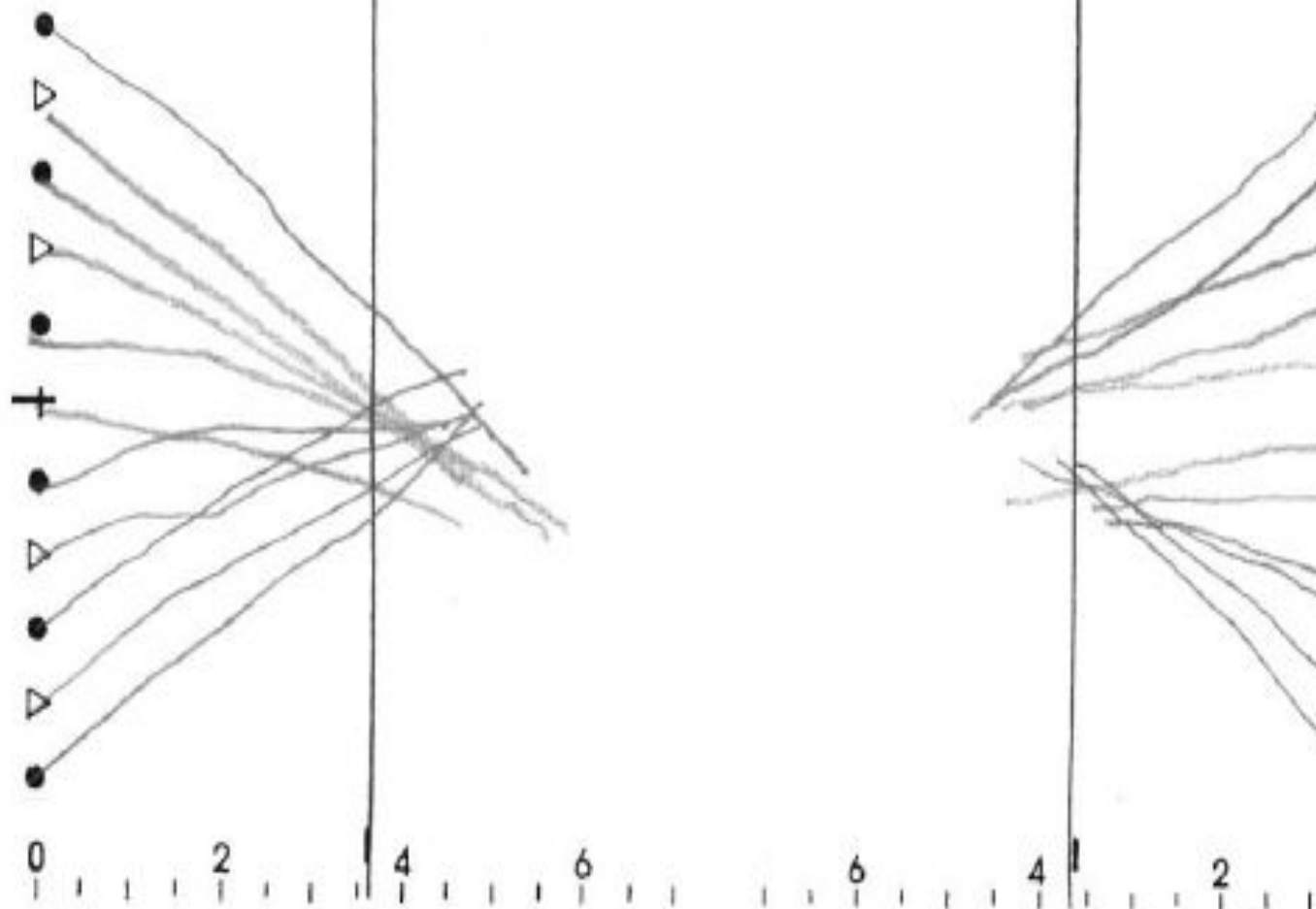
Luciano

- Hx of 4 concussions during football games/practices
- 6 visits with Rx including Dynamic Integrative Vision Therapy (Syntonics, SVI, EOM stim, dynamic balance),
- Difficulties with reading and reading comprehension
- H/A with photophobia
- Blurred vision at near with alpha-omega 3
- Findings: esophoria at near with significant accommodative dysfunction.

NAME :

Dunbar Luciano

VAN ORDEN STAR



Hess Screen Score Sheet

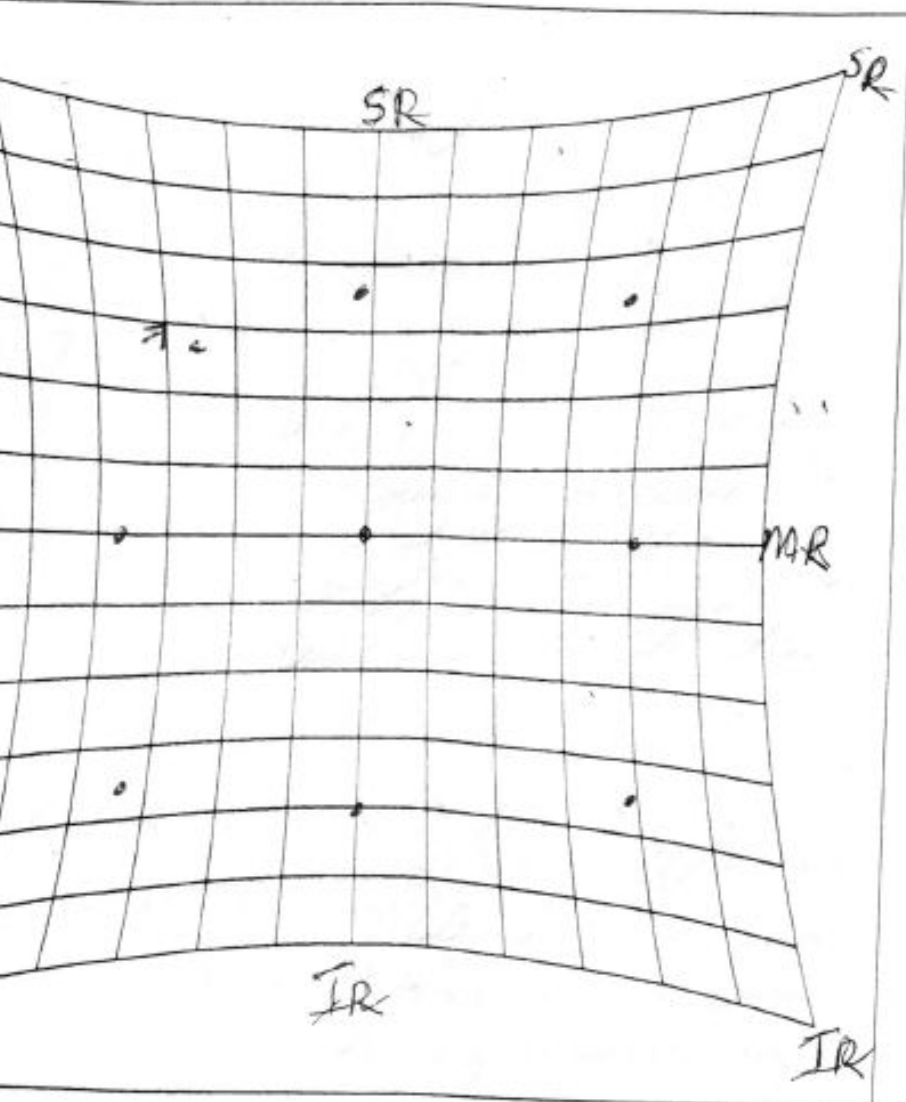
Dunbar Luciano

Field of OS

3/24/17

(green on OD)

ator: _____

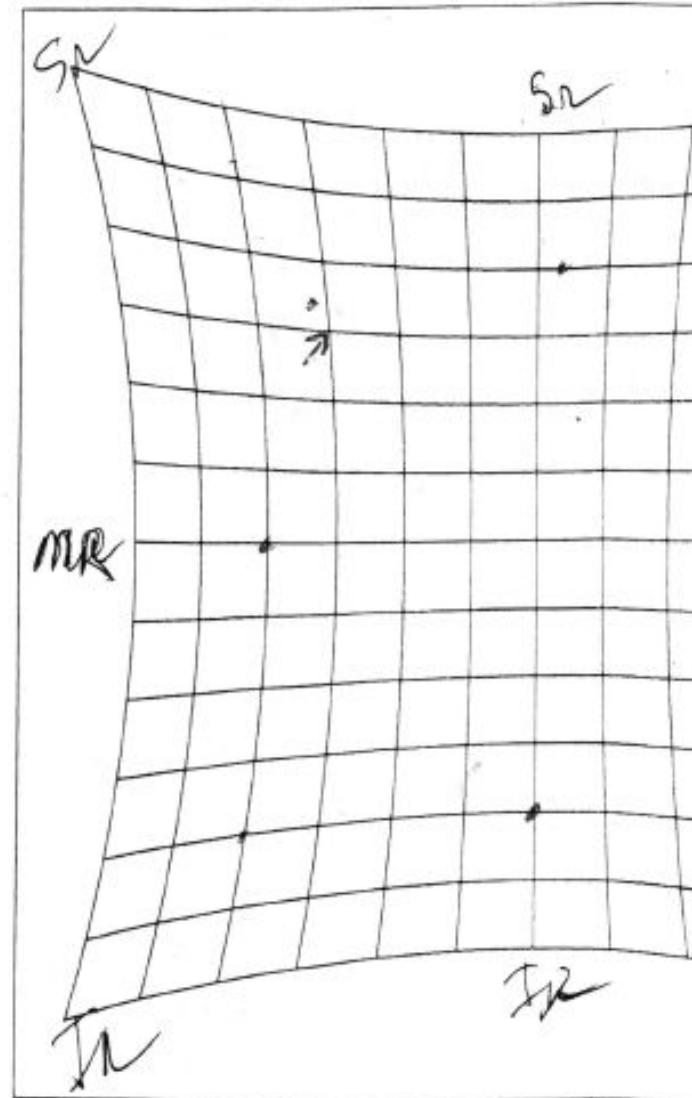


Hess Screen Score

Patient Name: Luciano Dunbar

Date: 3/24/17

Test Administrator: _____



(DB-9) Lateral Position (Far Point)	only	only	15	14	13	12	11	10 1/2	10	9	8 1/2	8	7	6	5	4	3	2	1			
(DB-4K) Fusion (Far Point)	only	only	Four, widely separated		Four, near each other		Four, close		Four, near each other		Four, widely separated											
(DB-1D) Usable Vision, Both Eyes (Far Point)			L	R	T	L	R	T	L	R	T	L	R	T	L	R	T	L	R			
(DB-3D) Usable Vision, Right Eye (Far Point)			No Data Seen Unless Left Eye Is Occluded						T	R	T	L	R	T	L	R	T	L				
(DB-2D) Usable Vision, Left Eye (Far Point)			No Data Seen Unless Right Eye Is Occluded						L	R	T	L	R	T	L	R	T	L				
(DB-6D) Stereo (Far Point)	only	only	+	○	*	○	□	□	○	+	*	+	○	*	○	□	□	○	+			
(DB-18A) Color Perception (Far Point)			32	79				23				ALL CORRECT										
(DB-14A) Color Perception (Far Point)			63	92				56				ALL CORRECT										
(DB-9B) Lateral Position (Near Point)	only	only	10	9	8	7	6 1/2	6	5	4 1/2	4	3	2									
(DB-5K) Fusion (Near Point)	only	only	Four, widely separated		Four, near each other		Four, close		Four, near each other		Four, widely separated											
(DB-15) Usable Vision, Both Eyes (Near Point)	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
(DB-16) Usable Vision, Right Eye (Near Point)	D	L	D	D	L	D	D	L	D	D	L	D	D	L	D	D	L	D	D	L	D	D
(DB-17) Usable Vision, Left Eye (Near Point)	L	D	D	D	L	D	D	L	D	D	L	D	D	L	D	D	L	D	D	L	D	D

NOTES:

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735-272

Test 5 (DB-9) Lateral Position (Far Point)	only	only	15	14	13	12	11															
Test 5 (DB-4K) Fusion (Far Point)	only	only	Four, widely separated		Four, near each other		Four, close		Four, near each other		Four, widely separated											
Test 4 1/2 (DB-1D) Usable Vision, Both Eyes (Far Point)			L	R	T	L	R	T	L	R	T	L	R	T	L	R	T	L	R			
Test 5 (DB-3D) Usable Vision, Right Eye (Far Point)			No Data Seen Unless Left Eye Is Occluded						T	R	T	L	R	T	L	R	T	L				
Test 6 (DB-2D) Usable Vision, Left Eye (Far Point)			No Data Seen Unless Right Eye Is Occluded						L	R	T	L	R	T	L	R	T	L				
Test 7 (DB-6D) Stereo (Far Point)	only	only	+	○	*	○	□	□	○	+	*	+	○	*	○	□	□	○	+			
Test 8 (DB-18A) Color Perception (Far Point)			32	79				23														
Test 9 (DB-14A) Color Perception (Far Point)			63	92				56														
Test 10 (DB-9B) Lateral Position (Near Point)	only	only	10	9	8	7	6 1/2	6	5	4 1/2	4	3	2									
Test 11 (DB-5K) Fusion (Near Point)	only	only	Four, widely separated		Four, near each other		Four, close		Four, near each other		Four, widely separated											
Test 12 (DB-15) Usable Vision, Both Eyes (Near Point)	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
Test 13 (DB-16) Usable Vision, Right Eye (Near Point)	D	L	D	D	L	D	D	L	D	D	L	D	D	L	D	D	L	D	D	L	D	D
Test 14 (DB-17) Usable Vision, Left Eye (Near Point)	L	D	D	D	L	D	D	L	D	D	L	D	D	L	D	D	L	D	D	L	D	D

Move to Near Point

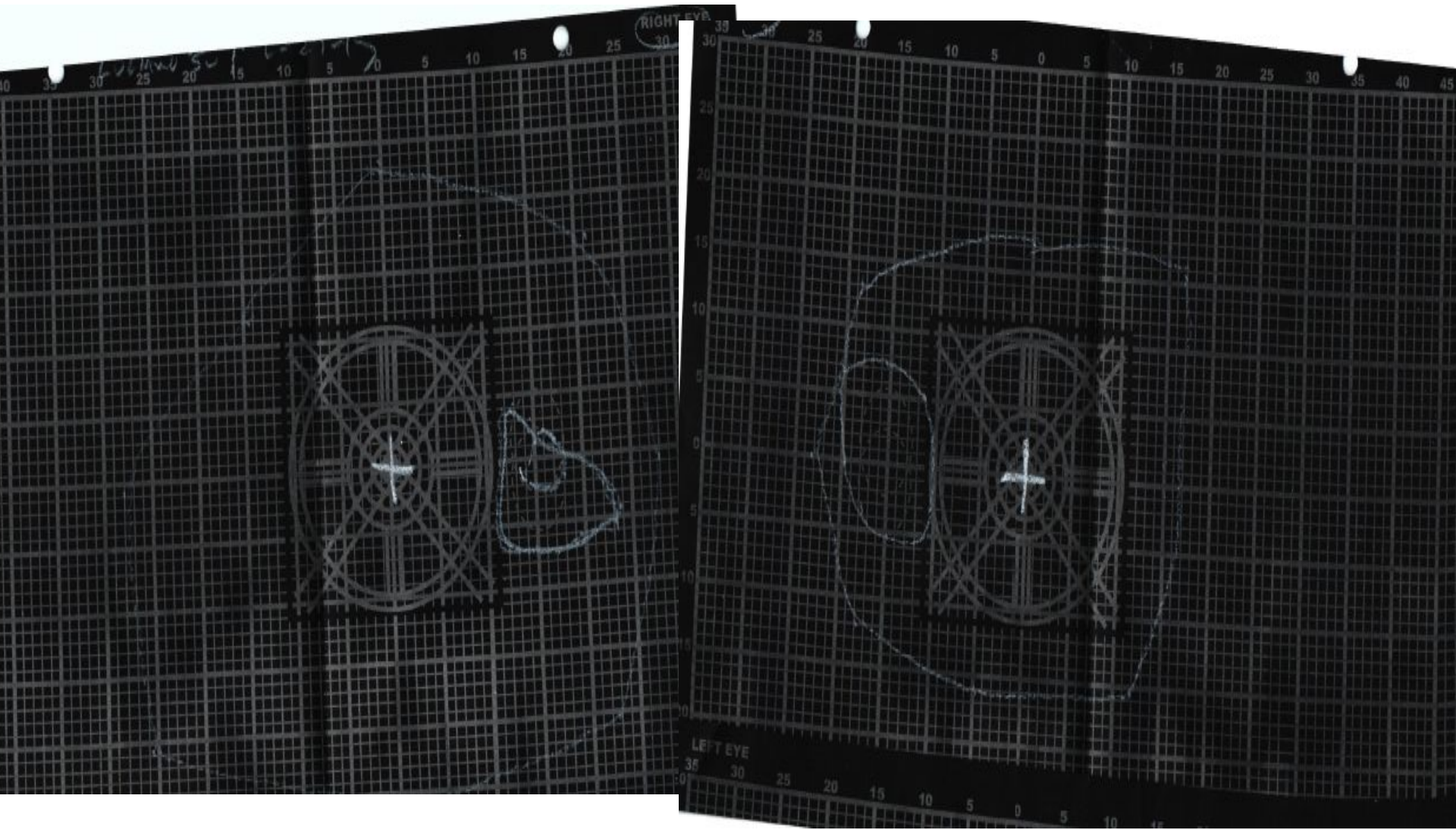
NOTES:

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Right eye
eye

2/27/17

Left



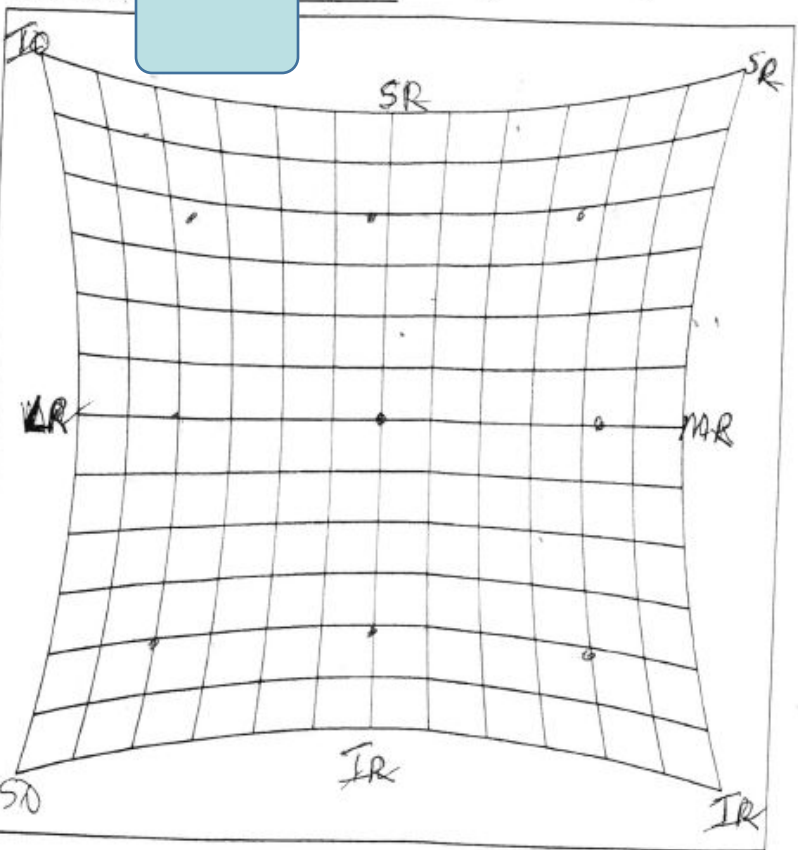
Luciano

- Decreased H/A to min
- Able to see and read road signs
- Improved reading comprehension with school work
- Binocular coordination and fusion are normal for far and near
- Accommodative function restored to normal

Date: 5/5/17

(green on 00)

Test Administrator [redacted]



Rev 1.0 0805

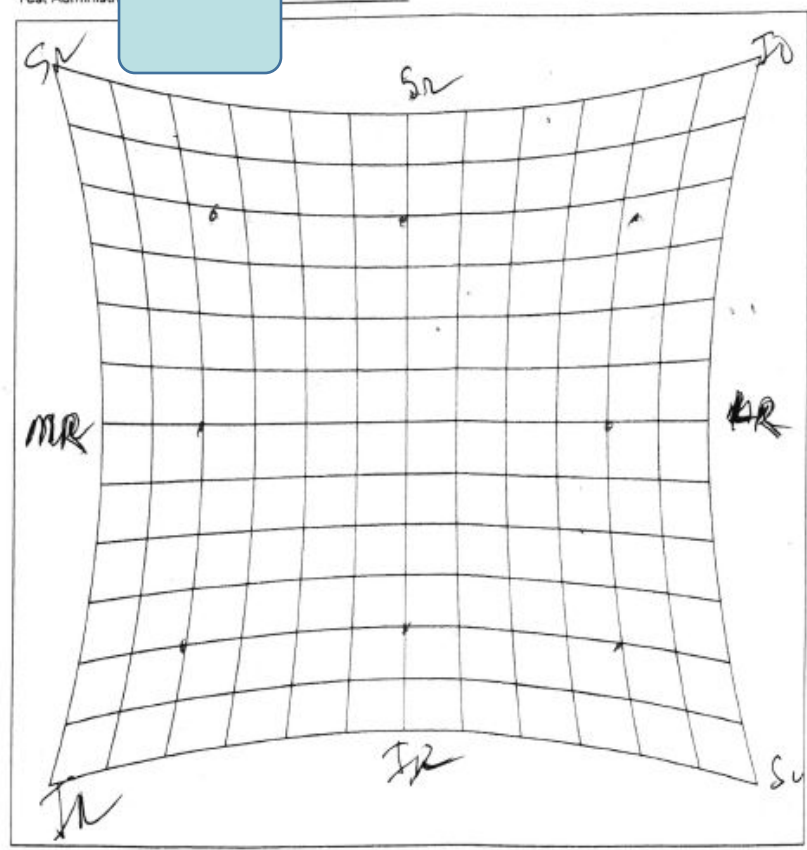
From
Richmond Products
4400 Silver Ave SE
Albuquerque, NM 87108
505-275-2406 FAX 810-885-8319

P/N 911537

Date: 5/5/17

(green on 05)

Test Administrator [redacted]



Rev 1.0 0805

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Richmond Products
4400 Silver Ave SE
Albuquerque, NM 87108
505-275-2406 FAX 810-885-8319

P/N 911537



Luciano

5/5/17

● KEYSTONE VIEW

COPIRIGHTED

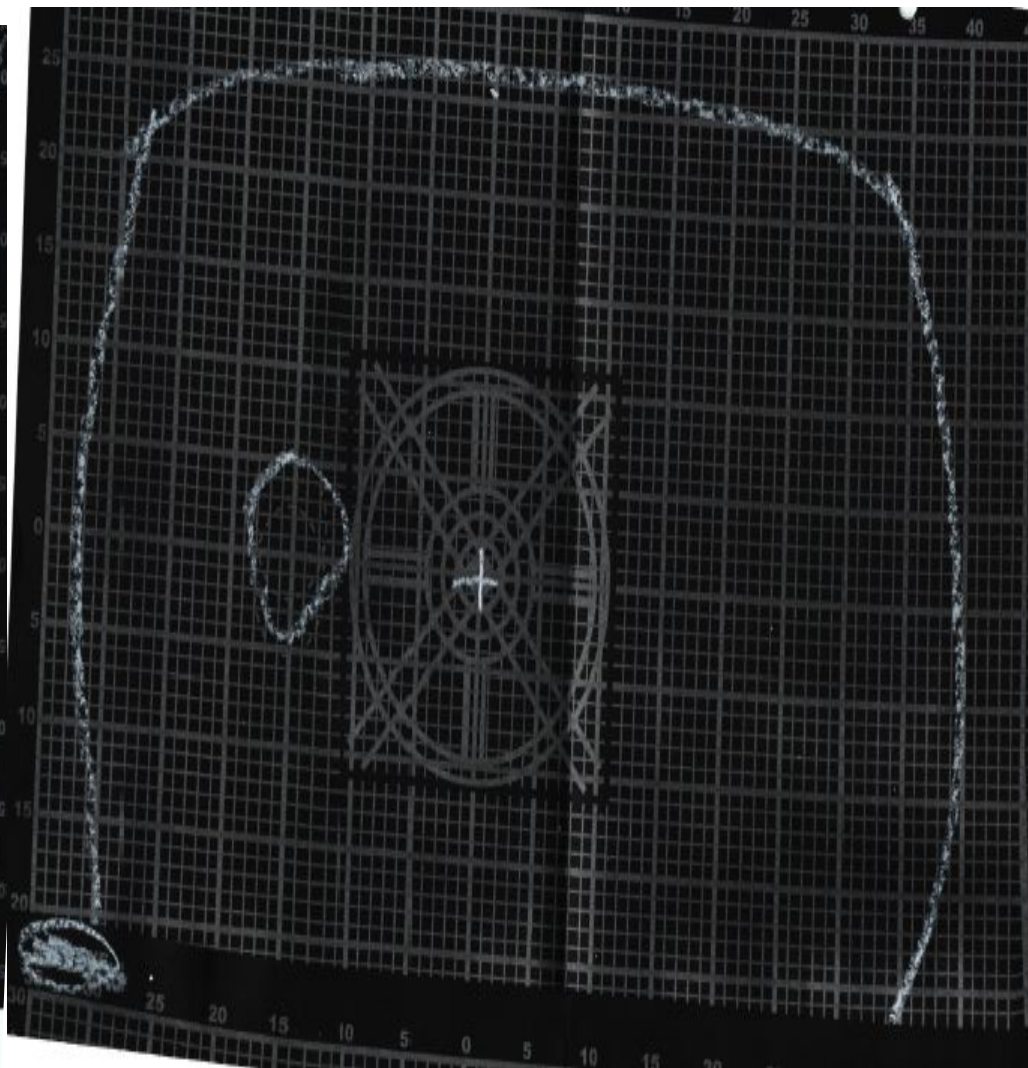
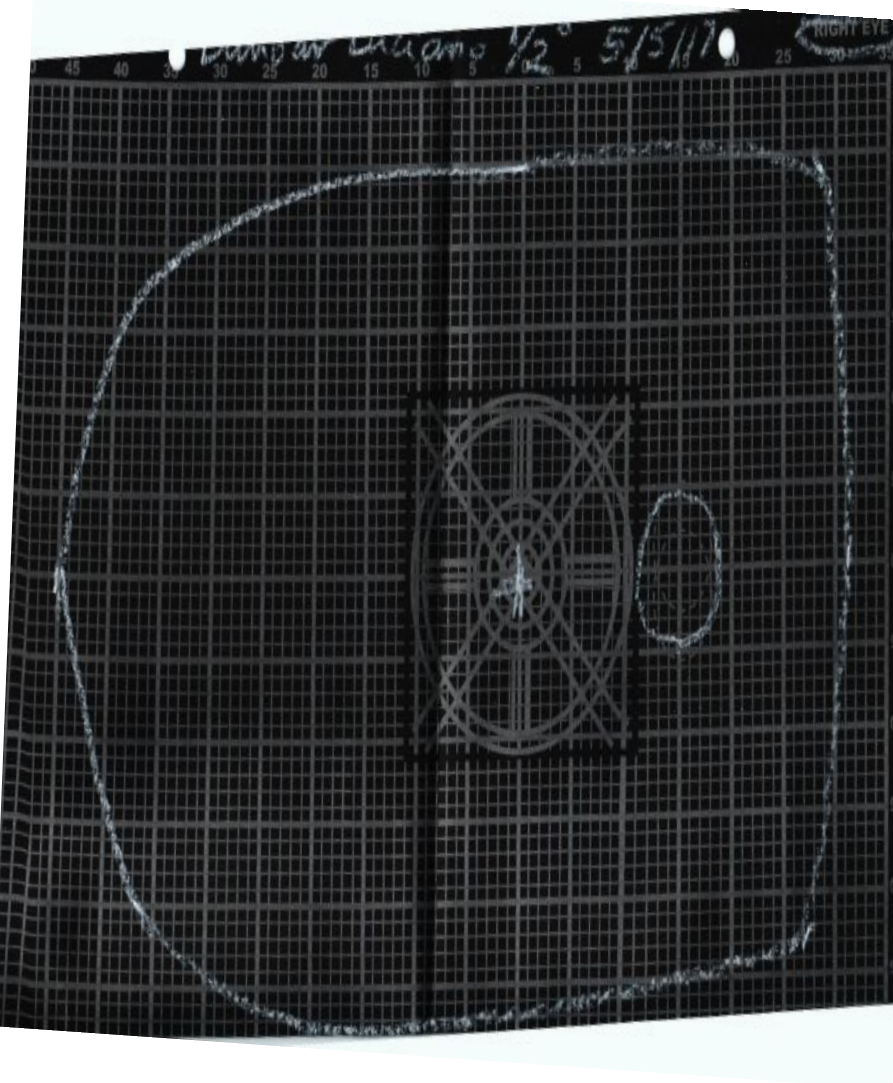


BINOCULAR BEHAVIOR PATTERN

V0 2



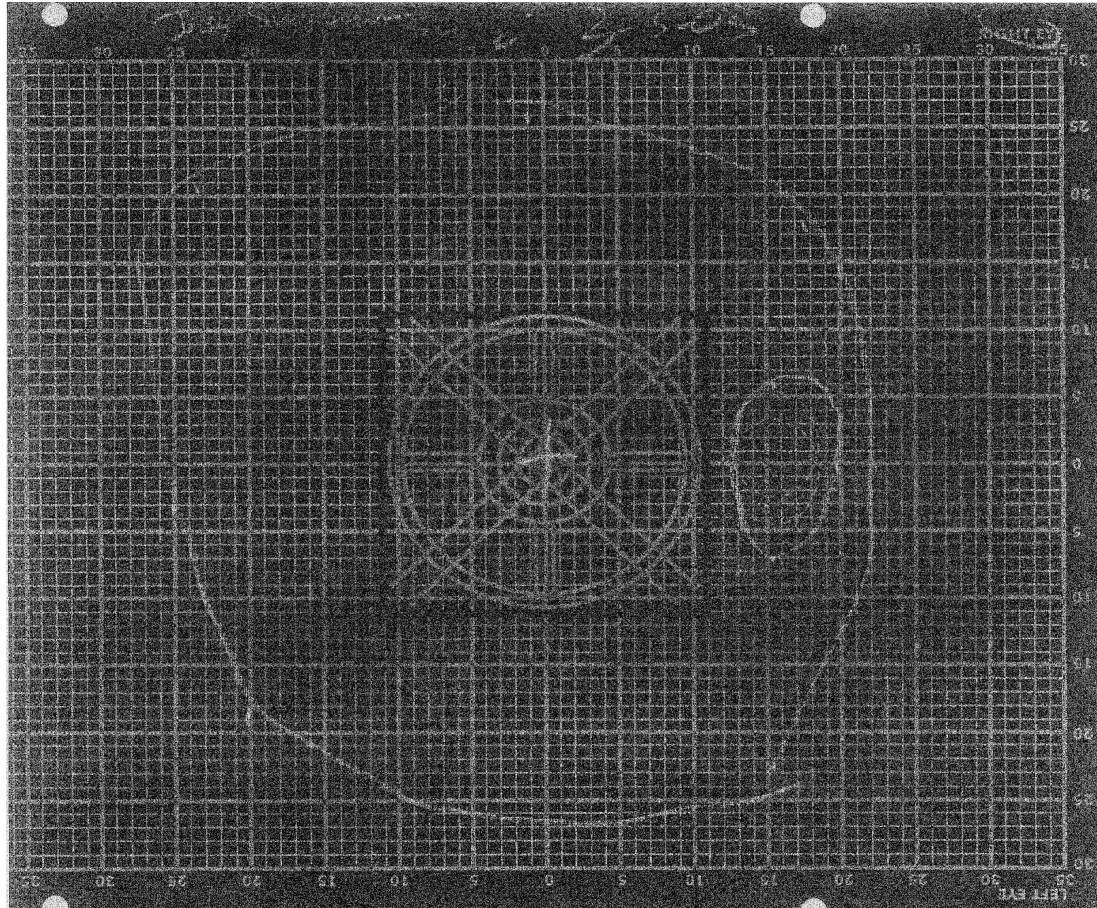
Right eye 05/15/17
Left eye



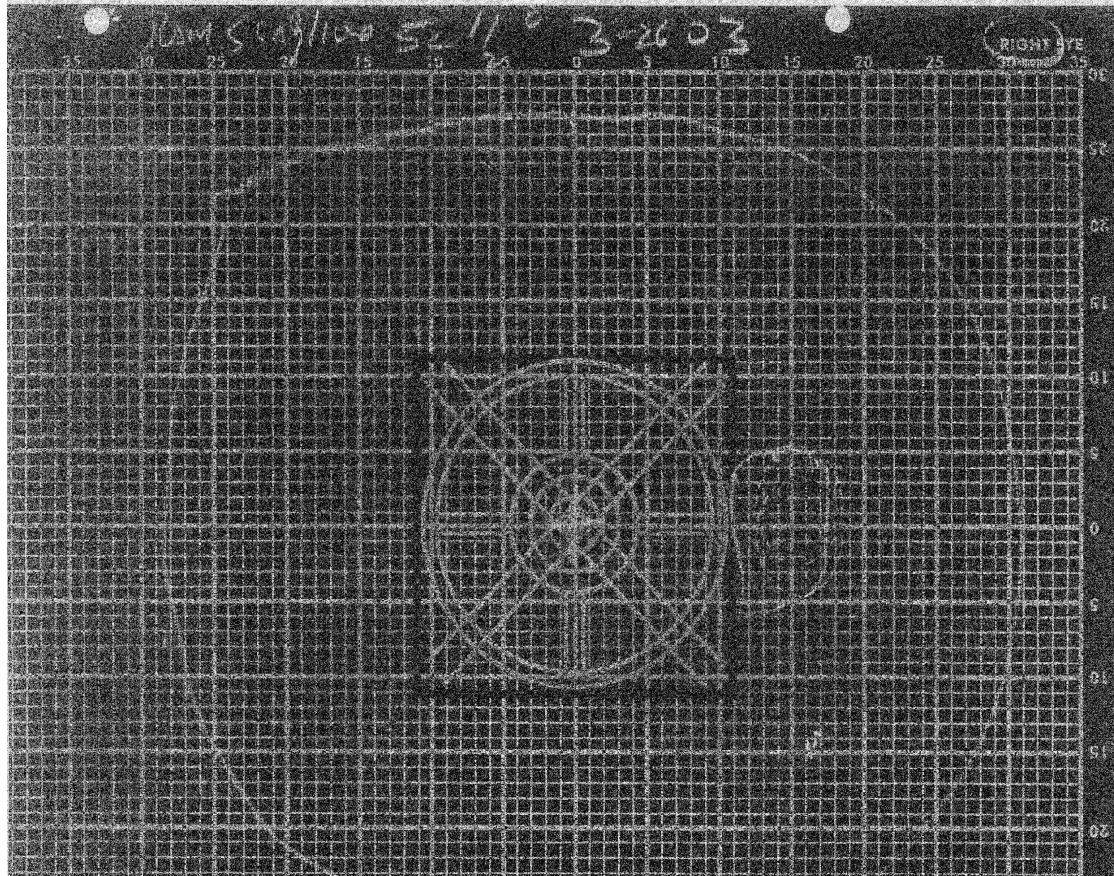
Patient JS

- Hx: age 9, headaches in school, poor tracking, reading problems, loss of place head injury age 2
- Dx: alpha-omega 3, exophoria, poor accommodation: -1.25/ +2.75, field defects, poor visagraph findings
- Tx: indigo(10) and blue-green(10)

Visual Field JS



Progress Field: JS



Visagraph 1 :JS

c:\winvisa\rec\SCJ-15-1.rec

Page 1 of 10

Reading Profile Visagraph version 4.3

Grade/Goal	Left	Right	Grade Norms	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	
Fixations/100 words	504	497	174		
Regressions/100 words	185	170	40		
Av. Span of Recognition (words)	0.20	0.20	0.57		
Av. Duration of Fixation (sec)	0.34	0.34	0.30		
Rate with Comprehension (words/min)	35	115			
Grade Level Efficiency	1.0				
Level of Text Read	2				
Directional Attack Difficulty	37%			Countable lines in text	7
Rate adj. for Rereading (words/min)	52			Lines found	9
Comprehension Questions Correct	90%			Saccades In Return Sweeps	26
Cross Correlation	0.767			Anomalies (Fbx/Regr/Both)	4/3/39

Subject information			
Name :	scaglione joe	Grade:	2
Class :	Born :	Sex :	M
School :	grotton	Filename :	SCJ-15-1.rec
Examiner :	larri	Recorded :	03/03/2003 16:47
		Directory :	c:\winvisa\rec

Text information		Countable part statistics	
Filename :	>amer_englt-2-15.txt	No of lines :	7
Title :	Firehouse 2-15	No of words :	50
Answers :	Y N Y N N Y N N N Y	Av. word length :	4.0
Norms used :	TAYLOR.NOR	No of questions :	10
		Correct answers :	9

Recording information	
Total recording time :	111.23
Countable time :	85.78
Artifact time right eye :	6.05 (7%)
Artifact time left eye :	6.05 (7%)
Lines found :	9
Lines partially reread (> 30%) :	4
Lines completely reread :	2
Duration Standard Deviation : 217 ms No. Saccade Start Diff. > 17 ms: 52 Events with Multiple Regressions : 12 Mean Regressions in Multiple Events : 2.2	
Comment:	

Visagraph 3 :JS

c:\winvisa\rec\SCJ-17-0.rec

Page 1 of 7

Reading Profile Visagraph version 4.3

Grade/Goal	Left	Right	Grade Norms	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Fixations/100 words	257	264	174																		
Regressions/100 words	79	94	40																		
Av. Span of Recognition (words)	0.39	0.38	0.57																		
Av. Duration of Fixation (sec)	0.32	0.31	0.30																		
Rate with Comprehension (words/min)	72	115																			
Grade Level Efficiency	1.0																				
Level of Text Read	2																				
Directional Attack Difficulty	36%																				
Rate adj. for Rereading (words/min)	79																				
Comprehension Questions Correct	90%																				
Cross Correlation	0.590																				
Countable lines in text																					
Lines found																					
Saccades in Return Sweeps																					
Anomalies (Fix/Regr/Both)																					
2/5/23																					

Subject information			
Name :	scaglione joe	Grade:	2
Class :	Born :	Sex :	Filename : SCJ-17-0.rec
School :	stone circle		Recorded : 04/18/2003 11:13
Examiner :	larri		Directory : c:\winvisa\rec

Text information		Countable part statistics	
Filename :	>amer_eng\1-2--17.txt	No of lines :	7
Title :	Television show 2-17	No of words :	50
Answers :	Y Y N Y Y N Y N Y N	Av. word length :	3.9
Norms used :	TAYLOR.NOR	No of questions :	10
		Correct answers :	9

Recording information			
Total recording time :	60.28	Duration Standard Deviation :	190 ms
Countable time :	41.67	No. Saccade Start Diff. > 17 ms:	27
Artifact time right eye :	1.83 (4%)	Events with Multiple Regressions :	2
Artifact time left eye :	1.83 (4%)	Mean Regressions in Multiple Events :	2.0
Lines found :	6		
Lines partially reread (> 30%) :	1		
Lines completely reread :	0		
Comment:			

Progress Exam : JS

- Fusion WNL, Smooth versions ,no headaches, Accomodation -3.50/ +4.00
- Fields WNL
- Visagraph: improved from 504 fixations /100 words to 257, regressions from 185 to 79, rate of comprehension from 35 to 72 words per minute.

J.B. 521° 27/17 7:30

00



TARGET

002

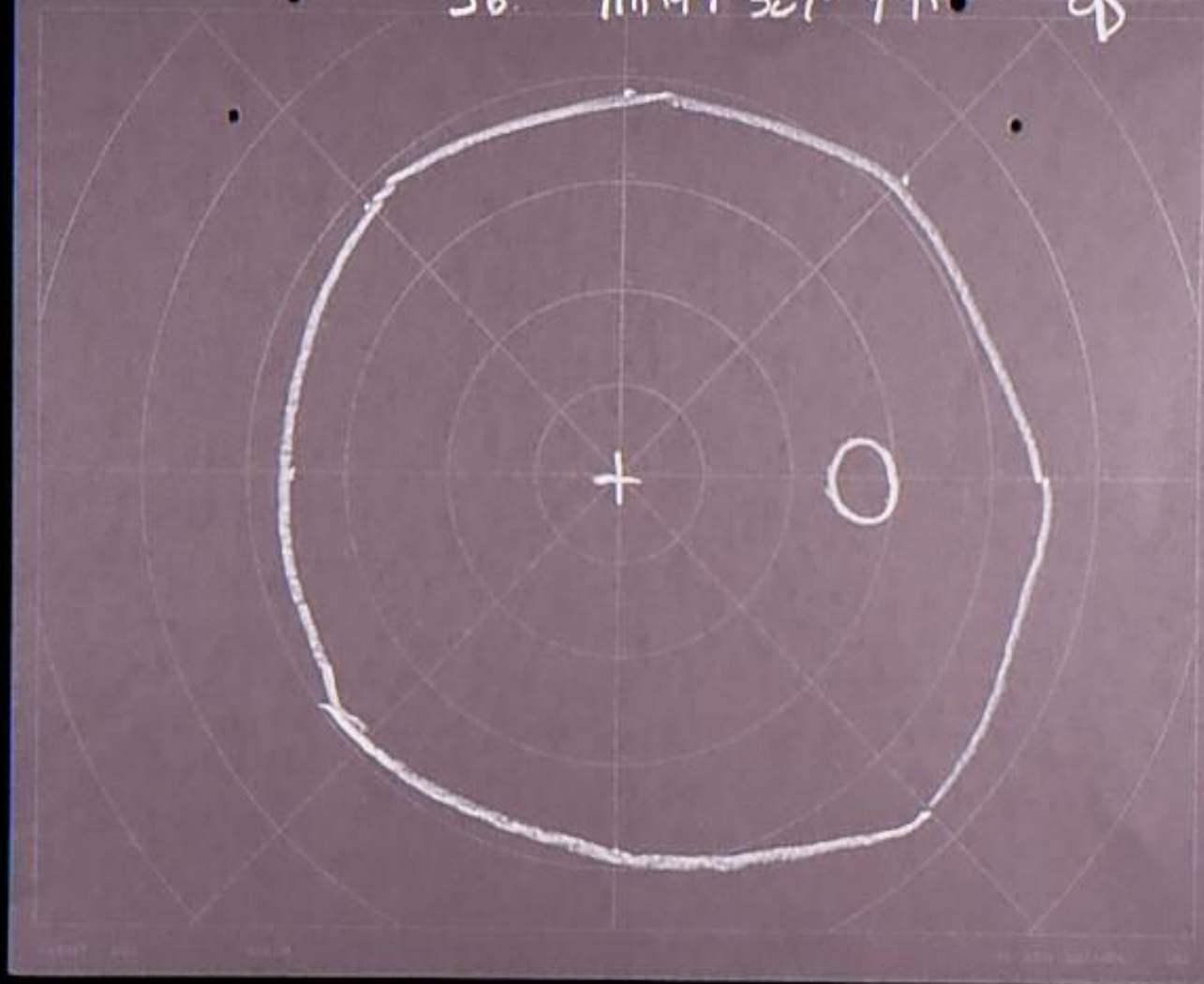
ANGLE

1/2 INCH DISTANCE

1/2

JB. 7/11/97 5210 9.45

9D



CASE NO.

PATIENT'S NAME

R.V. Age 9

1	DATE	1/18/97	TIME	10:15	TEST	STET	10:15
2	OPHTHALMOMETER						
3	REF						
4	STAT	pl-50+1to pl-100+1to					
5	REF						
6	REF						
7	REF	pl-50+1to 2/15 pl-100+1to 2/15					
8	REF						
9	REF						
10	REF	15 XOT					
11	REF	Suppression OS					
12	REF	3LH					
13	REF	18 XOT					
14	REF	(Left)					
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Hx) Diplopia, Strabismus Left XOT
 Histo of Neoptilic Alcohol / cocaine
 exposure, early Child Abuse
 Alpha Omega Pupils, hyperactive

Treatment 27 sessions of
 Indigo 10 + Blue Green 10

Outcome: doing great in school,
 NO Diplopia, hyperactivity decreased

J. LIBERMAN Syntonic Effect on Children with Academic Problems 1986

STANDARDIZED TEST RESULTS BEFORE & AFTER 20 SYNTONIC TREATMENTS

Syntonics group vs. control group

- ◆ Visual field area increased 2,916 % 14 %;
- ◆ Visual memory improved for
 - Unrelated words by 50 months vs. 13 months
 - Abstract symbols by 21 months vs. 3 months
- ◆ auditory memory by 24 months vs. 15 months

The effects of syntonic colored light stimulation on certain visual and cognitive functions.

Liberman J., *Journal of Optometric Vision Development* 17, June (1986).

J. LIBERMAN: Syntonic effect on children with academic problems 1986

TEACHERS & PARENTS OBSERVATIONS OF SYNTONIC GROUP IMPROVEMENTS

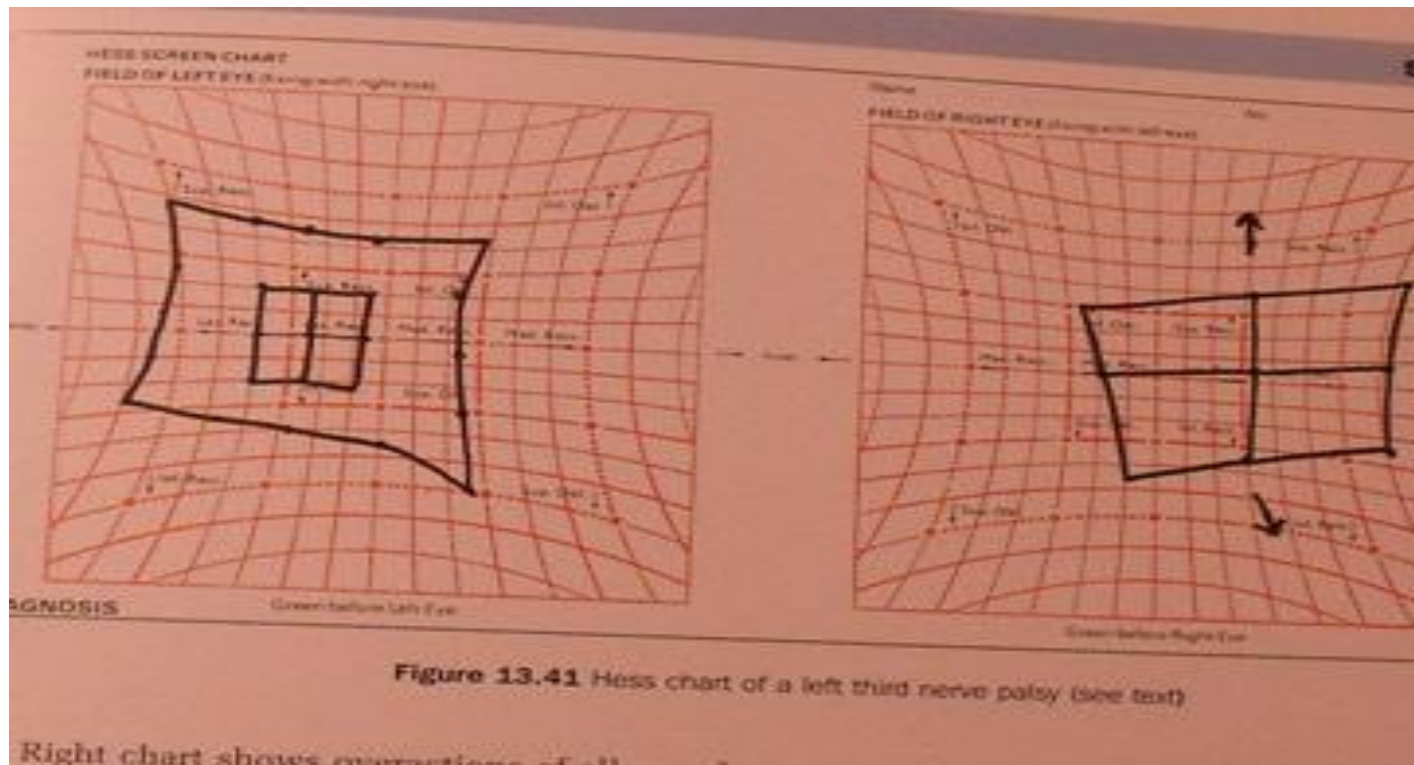
- ◆ Emotional recovery, less tension and hyperactivity,
- ◆ Greater ability to handle criticism and confrontation
- ◆ Academic scores (75% of subjects) and handwriting (40%).
- ◆ Some subjects using Ritalin for hyperactivity were able to discontinue its use.

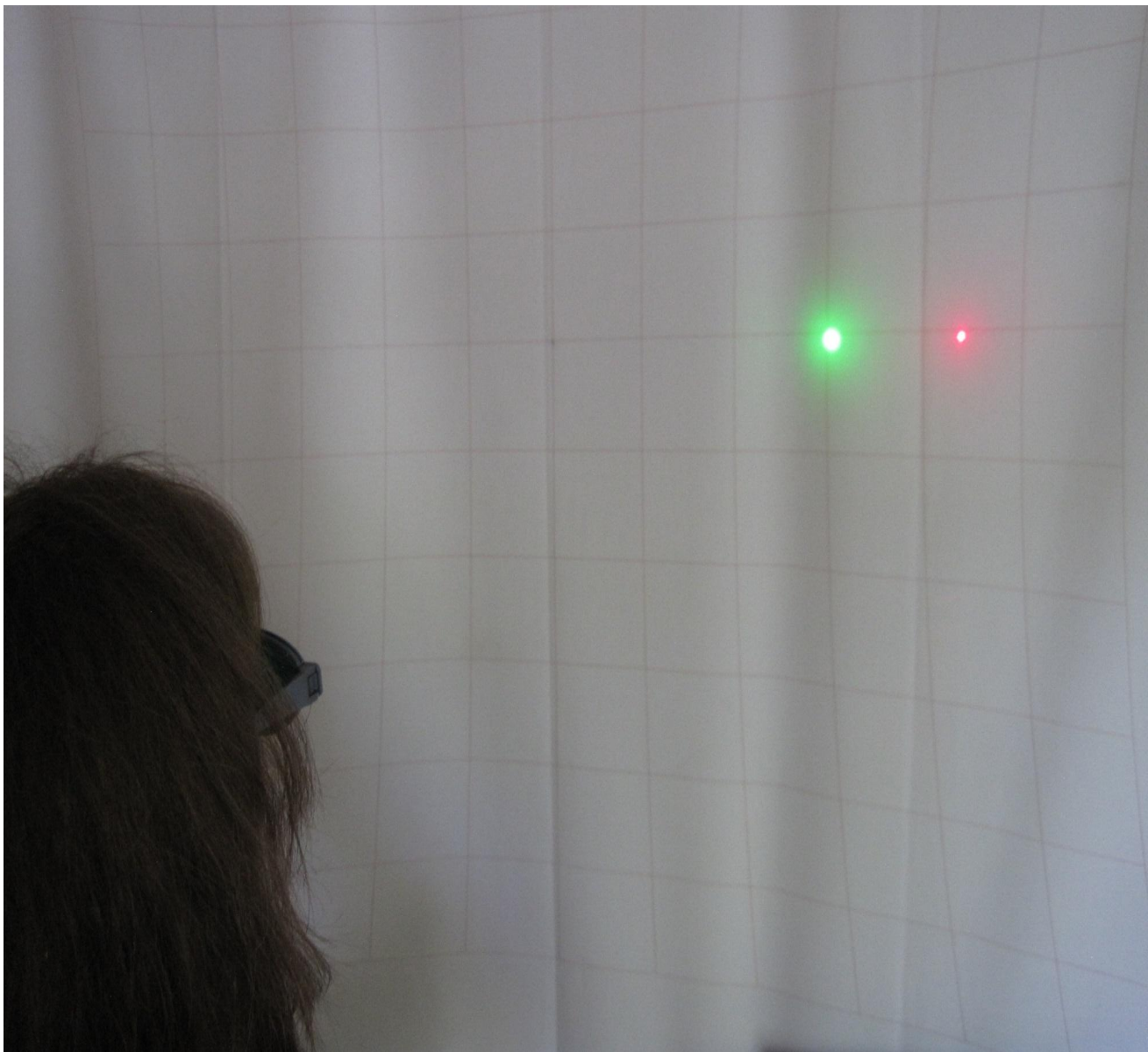
Liberman J. "The effects of syntonic colored light stimulation on certain visual and cognitive functions," Journal of Optometric Vision Development 17, June (1986).

Focal Syntonics

- Application of Syntonic colors at the insertion point in each intraocular muscle and to influence each cranial nerve.
- This also results in shifting the cranial bones, dura mater from the occipital bones to the base of the spine.
- Postural shifts and restoration on balance is frequently seen

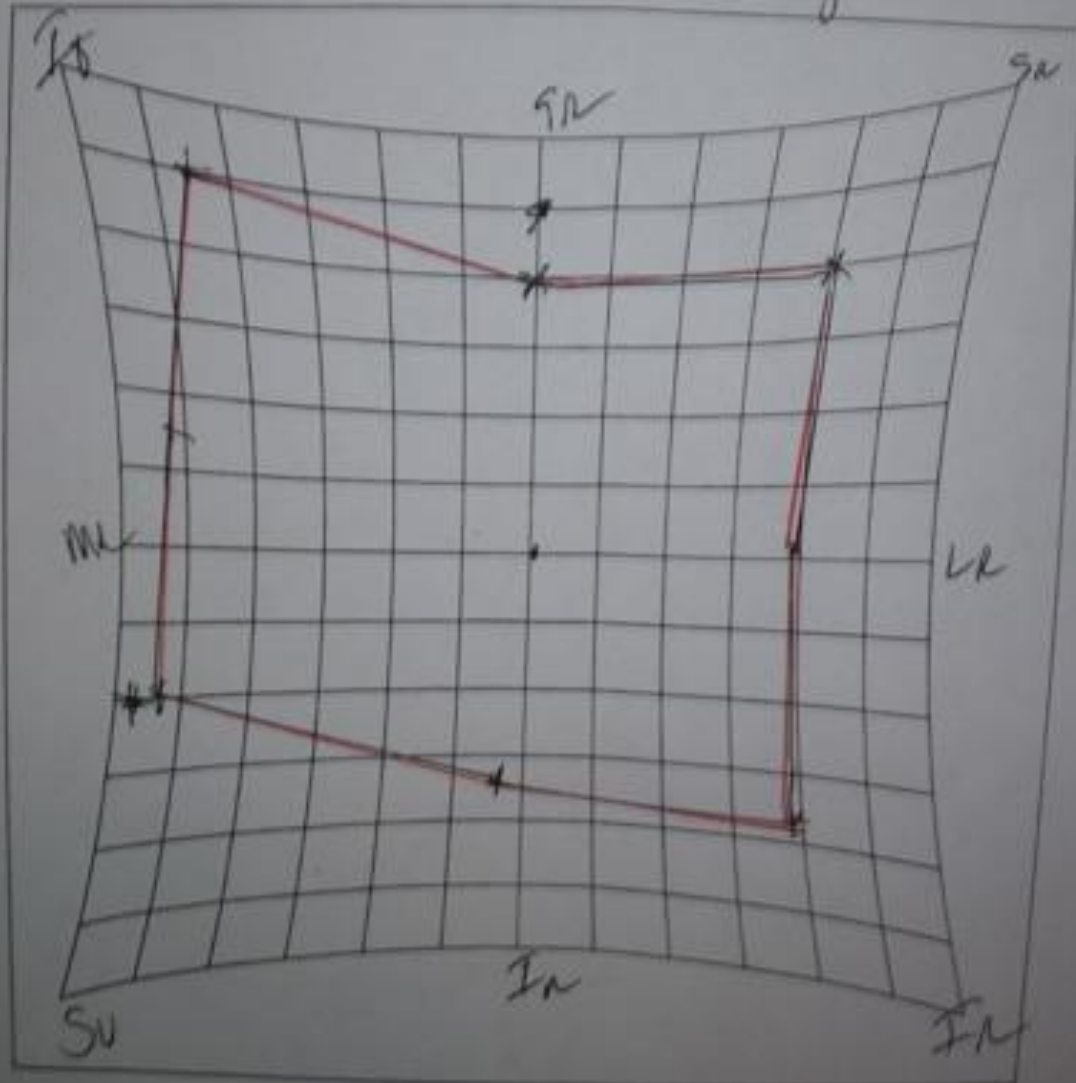
Hess Test





Test Administrator: _____

Field vs
Jura von 18

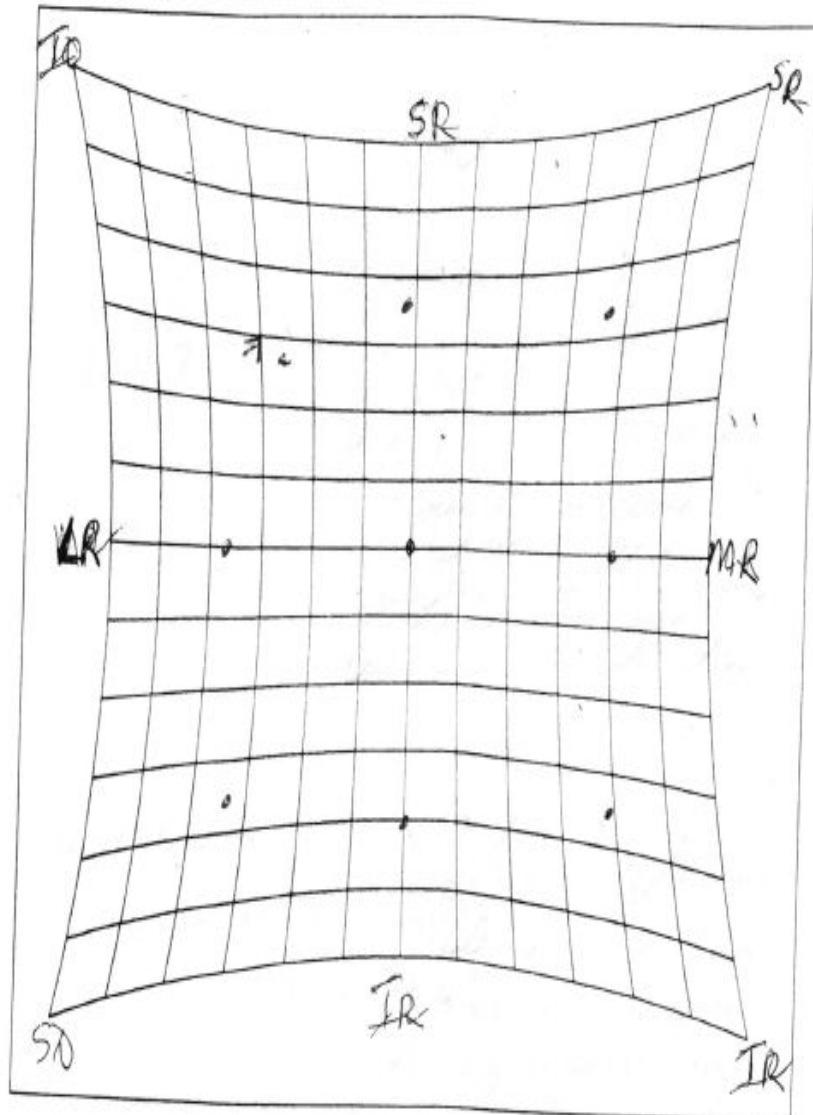


Right SO and Left SR



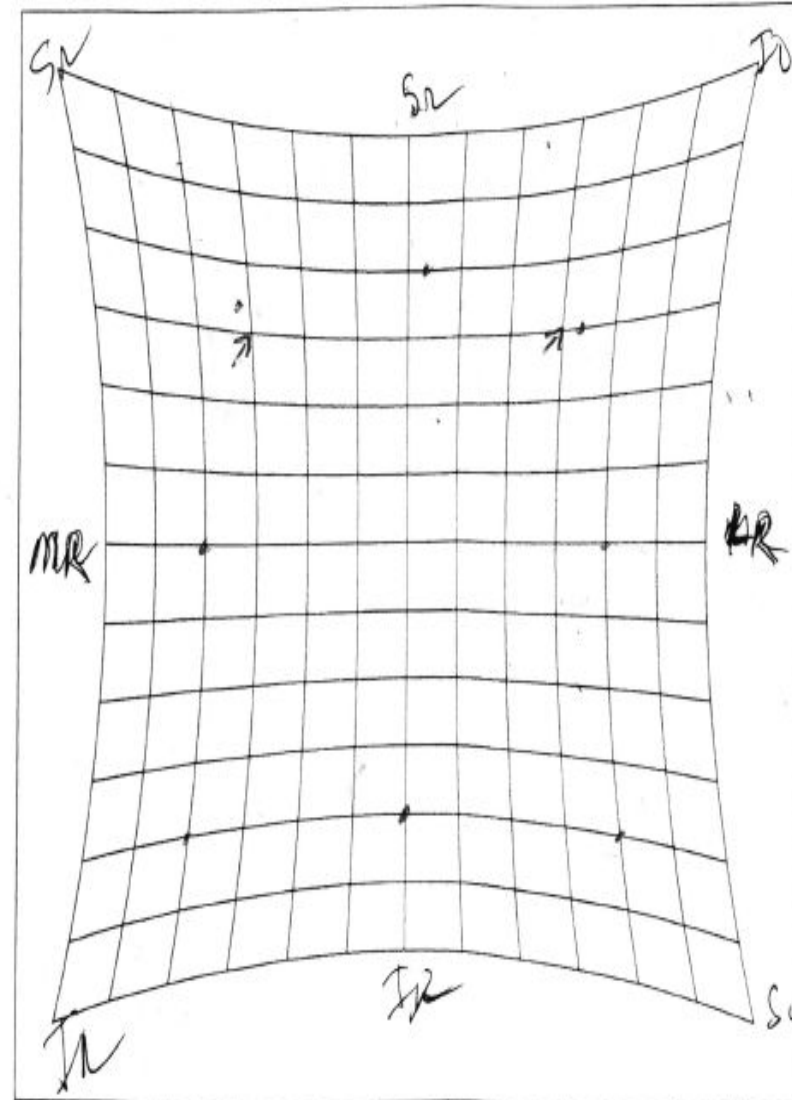
Hess Screen Score Sheet

Patient Name: Luciano Field of OS
 Date: 3/24/17 (green m OD)
 Test Administrator: _____



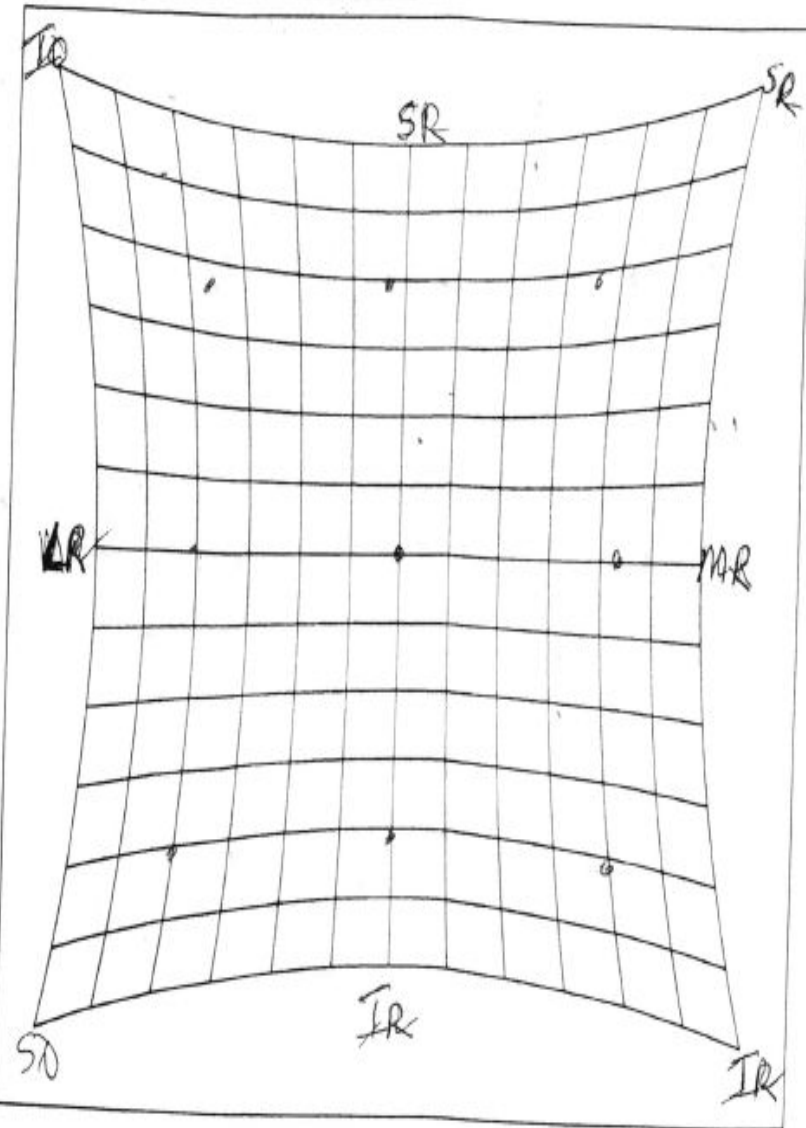
Hess Screen Score Sheet

Patient Name: Luciano Field of OS
 Date: 3/24/17 (green m OD)
 Test Administrator: _____



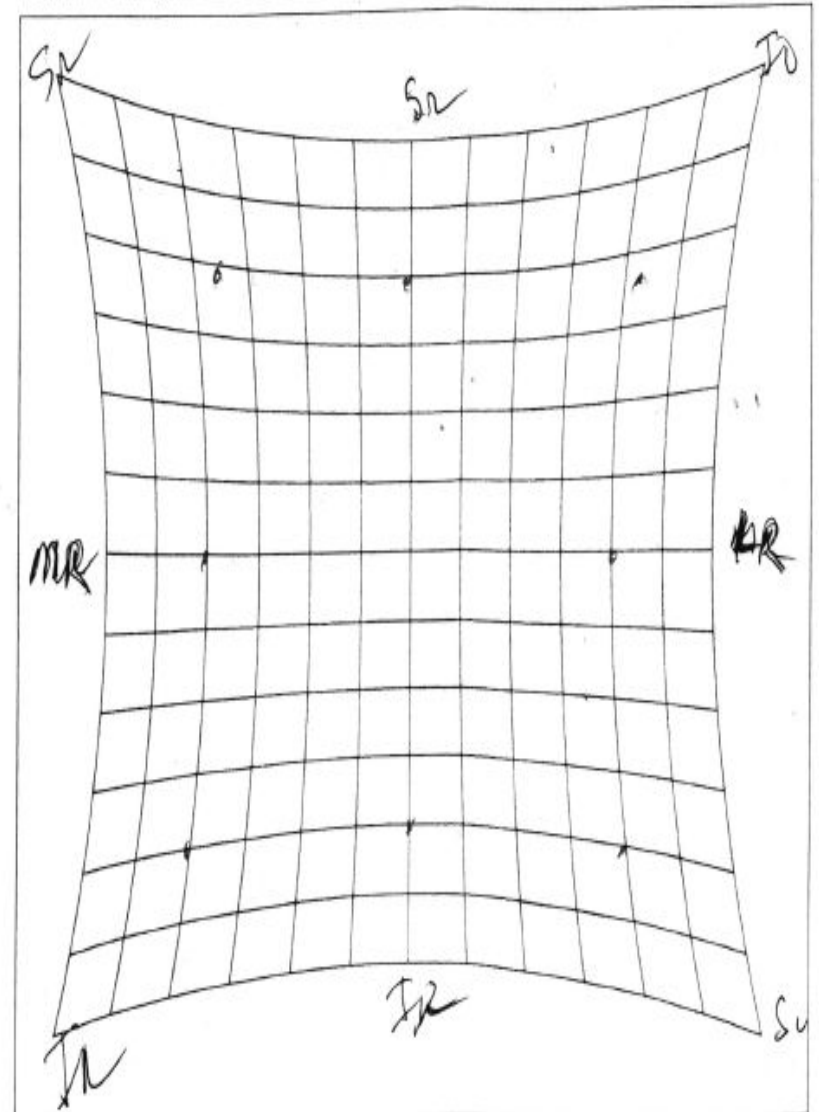
Hess Screen Score Sheet

Patient Name: Luciano Field of OS
 Date: 5/5/17 (green OS)
 Test Administrator: _____

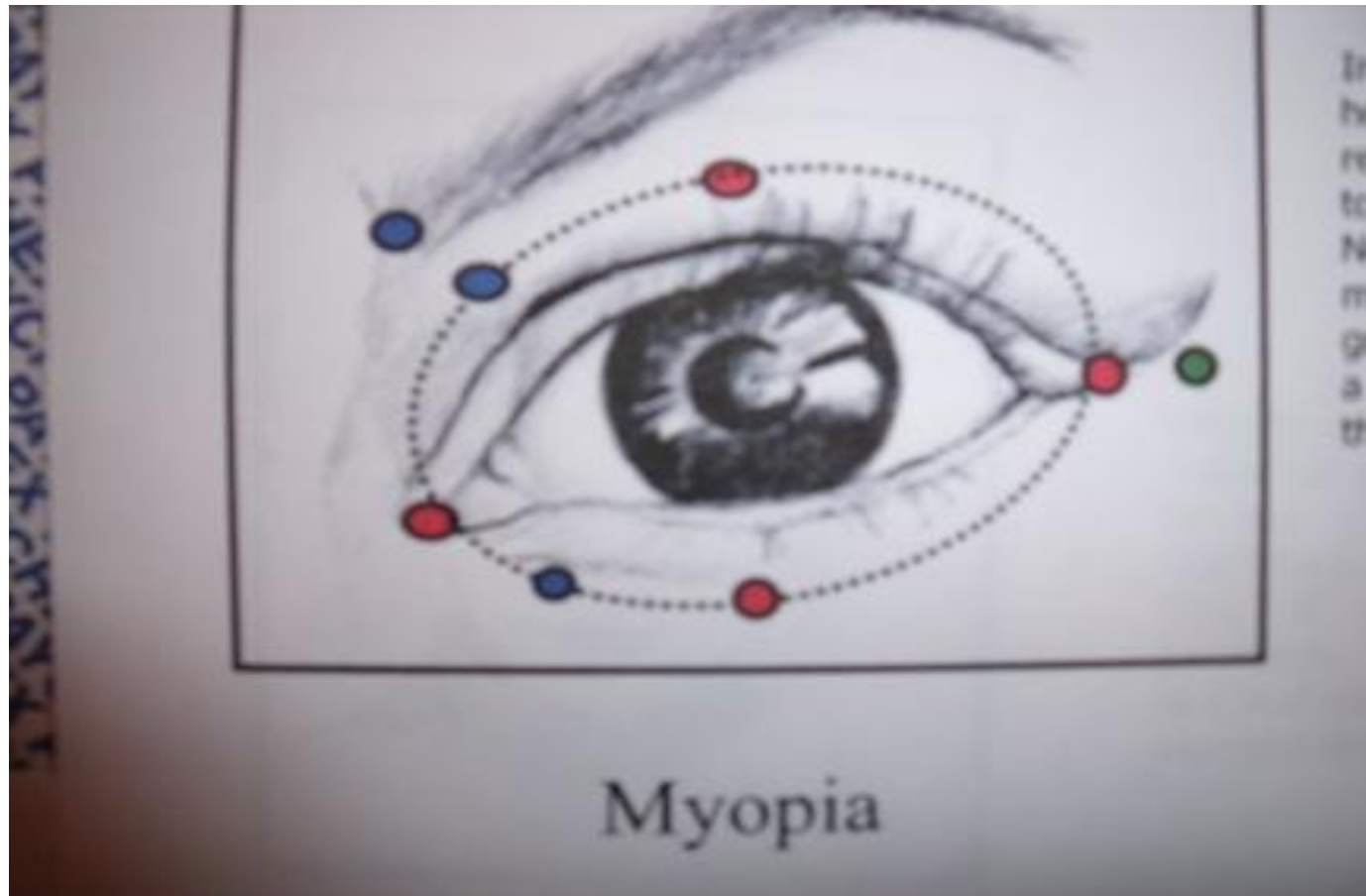


Hess Screen Score Sheet

Patient Name: Luciano Field of OS
 Date: 5/5/17 (green OS)
 Test Administrator: _____



Common Points for 30 seconds



Reading References

- The Syntonic Principle , Harry Riley Spitler, D.O.S. ,M.D., 1941
- The Blue Book, a basic introduction to Syntonic Optometry from CSO: www.cso.org
- Conference tapes and videos produced by DigiVision Media

