# Breakthrough:
# Clues to Healing with Intention

By William F. Bengston, Ph.D., author of *The Energy Cure,*
*and Keynote speaker at this years Healing Touch Worldwide Conference*

*We are very fortunate to have Dr. William Bengston, PhD, (author of numerous publications and texts, and one of the keynote speakers at our Annual Worldwide conference in August), offer us a reprint of this Edge Science Magazine, no.2, January/March 2010 article describing the start to his career in energy healing, his early research and what this means to those of us who do healing work. As a novice researcher myself, I appreciate the pioneering work that Dr. Bengston and those like him are doing to open doors to understanding the mystery of "the work", its mechanisms, how it can/should be researched. I am particularly thrilled by the support of some key Healing Touch Program principles—namely "intention before technique" and "effortless effort" found in the article! Enjoy!*

-Kathy Moreland Layte, MScN, HTCP/I-Co-chair
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A very long time ago, soon after I graduated with a B.A. in sociology from Niagara University, I met a man who claimed he had only recently discovered his own psychic abilities. At the time, in 1971, Bennett Mayrick was a house cleaner. He had held a variety of jobs before I met him, including floor installer, professional singer, etc. Basically, he was a jack-of-all trades. Since I don't naturally default to belief, I asked him if I could test his claim. He not only agreed but also actually welcomed the opportunity as he proclaimed himself a skeptic. And so a partnership was born.

I began in the usual way, by giving him objects that belonged to various people and had him describe their character, surroundings, and events in their lives. I admit to having been impressed by his readings, even as I wondered if there might be an element of self-delusion in all of it. And so I dragged him around to people who claimed to be experts in such matters. We went to the American Society for Psychical Research in Manhattan, to the dream lab at Maimonides Hospital in Brooklyn, and such. I found these experiences to be quite frustrating, as the experts didn't seem to have their methodological acts in order. And so I, a fledgling researcher in the early stages of graduate training, began to design double blind tests that were far more rigorous than anything the "experts" had prepared for us. In short, Bennett passed these tests with flying colors, and I wondered what to do next.

That problem didn't last long, as one day while we sat in a kitchen talking about this and that, I had a flair up of chronic lower back pain that had made me give up a swimming scholarship. Off the cuff, I asked him to put his hands on my back and take away the pain. He thought I was crazy but tried anyway. About ten minutes after he put his hands on me, the pain went away.

And decades later, it still hasn't returned. If this was hysterical suppression of symptoms, I'll take it!

All of this was before the "new age" boom, when alternative healing practices became widespread even if not accepted by the medical community. I watched Bennett put his hands on person after person and saw much that I myself would never believe had I not witnessed it. Some ailments responded poorly or not at all. Warts, for instance. There was no effect at all on warts, and to this day I consider that to be a clue even as I continue to be flummoxed by what it means. On the other hand, cancer responded almost immediately, and the more aggressive the cancer the faster it seemed to respond. The only failures with cancer were with those who had had radiation or chemotherapy. I suspect this is another clue, which might mean that healing does not mix well with therapies that kill.

After watching many dozens of healings, I began to get frustrated. Sure, the cures were amazing, but the complexities involved in clinical cases made them too fuzzy for my sensibilities. Did a cure result from the hands-on treatment, the extra vitamin C that the patient took, their personality type, or something else? I needed to know.

And so with a friend named David Krinsley, we decided to take the healing phenomenon into the lab. At the time David was

chair of the geology department at Queens College of the City University of New York, and I was a fledgling instructor at St. Joseph's College in New York, doing graduate work in sociology, specializing in criminology, the sociology of religion, and statistical modeling. David was in a position to call in some favors so he solicited the head of the biology department to devise a test that would be airtight. One of the chair's department members had been doing mice studies on a particular form of mammary adenocarcinoma that is 100 percent fatal within 27 days of injection. The model itself was so well understood that statistical studies of lifespan were routinely done, even as no mouse had ever lived past 27 days. If we could even get our mice to live closer to the 27 day mark, that would be strong evidence of a healing effect. If a mouse were to live to day 28, well, then we'd own the world record.

Our original intent was to have Bennett do the treatments, but circumstance had him back out at the last minute. We were then left with cancer-infected mice and no healer. Rather than cancel the experiment, David convinced me to act as substitute healer. By that time I had spent a great deal of time watching, testing, and also assisting Bennett in some healing cases. And so, seeing no alternative, I reluctantly (and without much confidence) agreed.

## A Skeptic as Healer

I used healing techniques that Bennett and I developed through introspection, trial and error, and simple intuition. The techniques are completely belief-free and involve a process of extremely fast visualization of a series of personal images done in conjunction with the laying-on of hands, in which the person tries, with as little effort as possible, to feel an energy flowing out from the palms of his or her hands. The images each person uses are generated by a personal list, prepared prior to the experiment, of 20 outcomes wanted in his or her life, specific goals that involve their own health, ideal jobs, material aspirations, or other people. Each item on the list is translated into an image that represents the achievement of that particular goal. These personal images are then memorized and the prospective healer practices cycling through them in a kind of mental filmstrip loop. This technique, rather than slowing down brain activity through some sort of meditative technique, actually speeds up brain functioning and activity through the rapid visualization. At the same time the hands on technique is done in a very detached manner on the assumption that focus or belief would only get in the way. We can actually carry on normal conversations and even read while running the mental filmstrip loops doing the hands-on techniques.

For an hour a day I placed my hands around the cage of six mice, wondering how in the world I had come to this. Here I was, a skeptical researcher suddenly saddled with the task of treating a cancer that is always fatal.

Since neither David nor I had any precedent in what we were doing, we naively suspected that if the treatment was to have any success then either the mice wouldn't develop tumors or the tumors would be slow to grow. To our initial consternation, neither scenario occurred. Within a few days, palpable tumors developed on the mice, and I was discouraged to say the least. My initial reaction was to cancel the experiment, put the mice out of their suffering, and call it a day. David urged otherwise, especially since he had gone to a great deal of trouble to set up the experiment. And so I continued the daily treatments even as the tumors grew larger.

Any remaining hope I had disappeared as the tumors developed blackened areas on them. I saw this as the beginning of the end. Then, the blackened areas ulcerated and the tumors split open. Again I urged that we do the ethical thing and end the experiment. But the biology chair noticed that the mice still had smooth coats and their eyes remained clear, and he wondered why they were acting as though perfectly healthy.

Then, in the final stages, the mice tumors simply imploded without any discharge or infection of any sort; it was a full lifespan cure. We were stunned. Here was a skeptical healer and a presumably non-believing group of mice that had gone through a novel pattern of remission to full cure in a mouse model without precedent of a cure.

## Let's Try That Again

What to do next? Obviously replication. Even then it occurred to me that if this healing phenomenon were to have any practical use, it needed to be independent of any individual. Plus, I was pretty burned out from the emotional rollercoaster of the experiment. And so I insisted that David, the biology chair, and two non-believing student volunteers submit to being trained in the healing techniques. The only requirement for inclusion in the experiment was that the volunteer healers not believe that healing was possible. I actually went through several students in

my screening process to find the strongest levels of skepticism. Clearly I am not into faith healing.

In fact, I'm quite sure that positive attitude isn't necessary to do healing. Certainly belief isn't either. Speculatively, I think there is a possibility that belief can hinder healing effects, as believers have a tendency to insert themselves into the process because they have a stake in the outcome (the same reason healers can't generally heal themselves). Healing is effective to the extent that the ego is removed. I also think that ritual (all ritual, really) destroys the thing that it is trying to reproduce. In healing, ritual blocks the "flow" of healing. People get very mad at me when I say this. And so in speculative hindsight, I unintentionally may have loaded the deck in my experiments by working only with non-believing clean slates.

The four skeptical "volunteers" then replicated what I did, and we got essentially the same results. All of the mice were cured. I then moved the operation to St. Joseph's College where I was working, and with the chair of the biology department there did experiments three and four with other skeptical volunteers. In those experiments we also tried injecting the mice with twice the dosage necessary to produce a fatal cancer, tried multiple injections, and even tried re-injecting them after the experiment was over. But the mice remained immune to future injections throughout their two-year lifespan.

We have now done ten experiments on mice at five different institutions, including two medical schools. Eight of those experiments involved the same mammary adenocarcinoma, and two of them used methylcholanthrene-induced sarcomas, which are not quite as aggressive. Though these experiments achieved healing across the board, the intricacies of the results are complex and, frankly, quite puzzling.

## Control Group Cures

Among the more interesting complications is that under certain conditions, our untreated control group mice also went into remission. If the control mice were housed in a different building than the experimental mice, they always died on schedule. But if anyone who knew the healing techniques came into a room where the control mice were housed, the infected mice who were still alive went through the process of remission of blackened area to ulceration to tumor implosion to full lifespan cure. At first this was extremely annoying, as conventional scientific analysis takes success to mean that there was a greater effect in treated verses untreated groups. But if the untreated control mice also got cured, then there were no differences for us to report! At first we simply relied on the fact that the mice we were working with always died when injected with cancers, and so we already knew what should have happened with our mice. All of them should have died. But since mice from both groups were getting cured, we knew we had another clue. It was just a very difficult clue to interpret.

I worked on this problem for a long time until I realized that perhaps one of the basic assumptions of experimental methods might just be incomplete: that separate groups are independent. If that assumption of independence between groups can be violated, then perhaps I could account for the control mice that went into remission. Perhaps all the mice were somehow resonantly bonded with each other. Our colleagues in physics are certainly used to entanglement, or what Einstein famously called "spooky action at a distance," but only on a microscopic level. As far as I know, entanglement has only been shown to about 100 or so atoms, certainly fewer than the number of atoms in a mouse. Yet we were getting similar effects in complete biological organisms. I wonder how many other labs might have experienced resonant bonding between their experimental and control groups, and mistakenly concluded that their experiments were not successful and dismissed their findings? (This is called a "type II" error – thinking that nothing significant happened when in fact it did.)

## Placebo Effects

A few years back I was giving a talk on this possibility at the 2003 Paris meeting of the Society for Scientific Exploration when a group from a lab in Freiburg, Germany, jumped up excitedly and said that I may have solved the placebo problem. I expressed gratitude to them for saying that, but I also said that I didn't know what the problem was. Like many people, I assumed that the placebo phenomenon was simply the power of suggestion, and that doctors, for example, might prescribe an inert pill that could produce real effects in a patient because of that suggestion.

But after the conference, I began to look into placebos a bit more, and what I found astonished me. The idea that a placebo could produce real physiological effects was unthinkable in medicine 50 years ago, but by now medicine recognizes that placebos do work, even as the mechanism by which they work

and the circumstances under which they work remain a mystery. Yet, in fact, it turns out that placebo effects increase over time to the point where up to 80 percent of the effects of drugs can be mirrored in placebos. The strength of this effect has made it difficult for drug companies to prove that their new drugs work, as the gold standard of double-blind, placebo-controlled trials often end up mimicking the effects of the real drug in the control groups that only get placebo.

I began to speculate that perhaps this was happening to my mice. While they were not technically getting a placebo, the fact that the untreated mice kept getting cured was obviously suggestive. Perhaps the same process was at work. Perhaps experimental and control groups aren't as independent as we once thought, and just as people taking an inert pill respond as if getting an active substance, my control group mice were responding as if getting an actual healing. Could it all be connected? If so, we have to do some serious re-thinking of the assumptions of classical experimental design. Perhaps a treatment given to one group is also a treatment given to all groups? I've designed a sequential series of experiments to tease out what percentage of the placebo effect is due to suggestion and what percentage is due to resonant bonding, but I've yet to get funding or a lab to carry out the work.

The placebo/resonant bonding problem has also given me pause about whether healing can indeed be taught. I once thought that since I taught non-believers my healing techniques and they then went on to cure mice that otherwise would have surely died that I had demonstrated that my techniques were learned and effective. Now I'm not so sure. Think about it: if we have an experiment where five volunteers are trying to put their cage of mice into remission, even if only one person is able to do it then perhaps all the mice will be cured anyway and each volunteer will assume that he or she is the one who produced the cure. This is a daunting problem. In one experiment I was treating numerous cages of mice for different lengths of time trying to figure out what is the minimum dose necessary to produce a healing, and in one of the cages I never saw the mice but only held water that was fed to them. At the end of the experiment all of the mice were cured. Should I conclude that treated water can cure cancerous mice, or was it perhaps due to resonant bonding of all of the mice so that a treatment given to one is a treatment given to all? I'm still not sure of the answer.

## Where Should We Go From Here?

All of this work is in the early and preliminary stages, but at this point there are some conclusions that can be made with relative certainty, and some conclusions that are a bit more tricky. The largest category, of course, is the enormous list of things we don't know. There is certainly plenty of research that needs to be done.

The most unambiguous conclusion is that cancer can be cured in experimental animals. Even a doubter such as myself has to throw in the skeptical towel after ten experiments. At this point we have only tested two types of cancers, and it remains to be seen whether different cancers respond differently to healing techniques.

All of the cured mice lived their normal lifespan of two years. After the initial cure, subsequent re-injections simply had no effect on the mice. This strongly suggests that an immune response is somehow being stimulated in the animals. If that is the case, perhaps the stimulated immune response can somehow be transferred to an animal that has not received the healing treatments. In fact, after one experiment was over and I was no longer involved in the day-to-day business of the animal labs, some cells were taken without my knowledge from the mice going into remission and transplanted to fully infected mice just to see what would happen; the transplanted cells seem to have in turn cured the fully infected mice. This suggests we might have the potential for either a literal or metaphorical vaccine that could reproduce the healing without the healer. Is there an immunologist who would be willing to take on this work?

What are the correlates of healing, in the healer, the healee, and the surrounding environment? We have undertaken other experiments to find answers to such questions.

Margaret Moga and I have done three mice experiments on mammary cancer at her lab at Indiana University Medical School, and while going through the usual routine of hands-on healing, also strategically placed geomagnetic probes to test whether there might be some interesting environmental correlates to the healing. And so we examined DC magnetic field activity during hands-on healing and distant healing of mice with experimentally induced tumors. And, in fact, during the healing sessions we observed distinct magnetic field oscillations adjacent to the mice cages beginning as 20-30 Hz oscillations,

slowing to 8-9 Hz, and then to less than 1 Hz, at which point the oscillations reversed and increased in frequency, with an overall symmetrical appearance resembling a "chirp" wave. The waves ranged from 1-8 milligauss peak-to-peak in strength and 60-120 seconds in duration. We speculate that this evidence may suggest that bioenergy healing may be detectable with DC gauss meters.

About three years ago, independent researcher Luke Hendricks contacted me about my research with the mice. Luke is interested in both brain research and the practical applications of healing. He approached Jay Gunkelman of Q-Pro Worldwide, a leading authority on EEGs, about conducting experiments on brain correlates of my healing techniques. We met at one of Jay's labs in Phoenix to look at interpersonal coupling or connectivity between healer and healee pairs using advanced signal processing approaches and instantaneous EEG phase coupling.

Our results showed harmonic frequency coupling across the spectra, followed by EEG entrainment effects between individuals, and then by instantaneous EEG phase locking. In other words, the healer and healee developed synchronized pattern in their EEG's. These results suggest the presence of a connection between the healer and healee through a pattern of harmonics consistent with Schumann Resonances. If these data hold in subsequent tests, we may have isolated at least one connectivity mechanisms underlying healing.

But the questions go on and on. What happens when healing occurs? Do different healing techniques produce different results? Can healing be "stored"? Are placebo effects instances of resonant bonding? At this point, frankly, we're not sure yet of the proper questions to ask.

And mainstream science and medicine has not exactly been supportive. My history of research has generally followed obtained at other labs, and the researchers there take on a "oh yeah, well you couldn't get those results here" approach. When the mice get cured in the first experiment at any lab, it is usually taken as a gauntlet by lab personnel that they can thwart future positive results. Then, when the second experiment also produces full lifespan cures, it is often followed by head shaking and proclamations to the effect that this is the most amazing thing they have ever seen. But when I suggest further research, there is always some reason that the work cannot continue at that institution. When I suggest that it is my goal to reproduce the remissions without the healing techniques by using either the blood of cured animals or some correlate to the healing, my suggestion is usually met with intense skepticism that such a thing might be possible. I will, nonetheless, persevere.

## Healing Humans

The eight hundred pound gorilla in the middle of the room is the question of whether any of this works on people. It is unambiguously the case that increasing numbers of people around the country are seeking out alternative and complementary medicine, which at this point in time must be classified as a growth industry. There are any number of schools of healing, workshops on healing, and practitioners of the various alternative-healing arts. But do they work? Surely the practitioners will swear by whatever it is that they do. But my non-systematic experience is that very few practices are rooted in rigorous data. That is not to say that they don't work; it is only to say that there are too many anecdotes out there not matched with empirical testing.

As I noted at the beginning, my experimental work grew out of clinical observations and my frustrations at not being able to isolate what works and why through clinical observation. Certainly people have been taught my techniques and applied them to people with some interesting anecdotal results. But to a researcher anecdotes are simply not enough.

At what point will there be enough evidence to do a controlled study on people? I don't think the question has a clear answer. While my passion is in the lab, I would certainly be open to some clinical trials. It's difficult to determine if the methods we've used are really complementary to the current crop of conventional treatments. Complementary or not, the difficulties of carrying out successful clinical trials are greatly compounded. I don't yet know how to solve this problem. I do know that it is a problem worth pursuing.

**For Further Reading:**

Luke Hendricks, William F. Bengston, Jay Gunkelman, "The Healing Connection: EEG Harmonics, Entrainment, and Schumann's Resonances," *Journal of Scientific Exploration*, submitted.

Margaret M. Moga, William F. Bengston, "Anomalous DC Magnetic Field Activity during a Bioenergy Healing Experiment," *Journal of Scientific Exploration*, forthcoming.

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About the author:

William F. Bengston is a professor of sociology at St. Joseph’s College in New York, and President of the Society for Scientific Exploration, an international group of scientists who investigate anomalies. His areas of specialization include research methods and statistics. For twenty years, Dr. Bengston has been doing research into anomalous healing and has numerous publications in the Journal of Scientific Exploration, the Journal of Alternative and Complementary Medicine, and Explore. In addition, he has lectured widely throughout the United States and Europe. His research has produced the first successful full cures of transplanted mammary cancer and methylcholanthrene induced sarcomas in experimental mice by laying-on-of-hands techniques that he helped to develop. He has also investigated assorted correlates to healing such as geomagnetic micropulsations and EEG harmonics and entrainment.

**William Bengston will be a keynote speaker** at this years **Healing Touch Worldwide Conference** in San Antonio, TX on August 25th-28th. Click here for more details.