

to each leg, and magneto magnetic energy is applied to a malfunctioning body part, there is an observable and measurable voltage and current increase or decrease from the normal electrical flow through the legs, which increase or decrease is attributable to the bioelectrical interaction which takes place. The dashed lines in FIG. 9 outline an alternative method of the present invention in which electrical current flow changes are monitored. The currents and voltages can be readily recorded to give an indication of the existence of a malfunctioning body part. To briefly expand on this alternative indicator, it should be appreciated that when the north or south pole magneto magnetic energies are applied to a body part, there is a bioelectrical interaction between the bioelectrical energy of the body at that location and the applied magnetic energy with a resultant flow of measurable current and voltage. When the body part is normal, i.e., not malfunctioning, the measured current and voltage can be considered the norm for that body part. It has been observed that the bioelectrical properties of each and every organ, gland and other body part differ from those of all other body parts—i.e., the bioelectrical properties are distinctive. It has also been observed that when an abnormal condition or malfunction exists there is a distortion of normal bioelectrical activity at the affected body part. This distortion is measurable by measuring the current and/or voltage flow resulting from the interaction of the body energy at the affected body part with the magneto magnetic energy of the applied pole. The magnitude of the measured flow in indicative of the severity of the abnormality. Thus, an increase in negative bioelectrical potential compared to the norm, is noted at the site of a bone fracture. As the bone heals, the magnitude of this negative potential decreases and returns to normal.

The bioelectrical interactions which take place are evident when sufficiently sensitive measurements are properly made. It has been found that proper measurements can be made by applying electrodes to the lower extremities of the body under examination and by utilizing conventional high gain, filtered, band pass amplifiers to record the bioelectrical changes in nerve and muscle voltages and currents which result from applying a magnetic pole to a body part. A useful readout may be obtained by the use of a meter display or a suitable strip recorder system. Inasmuch as the reflex reaction time to the applied magnetic energy is only a few microseconds, it is necessary and desirable when making diagnostic evaluations to use a delayed time readout system to provide an extension of the time base.

Both the north and south magnetic poles have been found to be effective in detecting malfunctioning body parts in human and animal systems when properly applied thereto. Application of the energy emanating from a magnetic pole does not necessarily mean contacting the body part, i.e., the organ, bone, etc., affected, although contact is desirable where practical, but rather implies placing the body part to be scanned in sufficiently close proximity to a known strength magnetic pole that the energy reaching the part can be ascertained by conventional calculational techniques. Generally, the closer the body part to the magnetic pole the lower the energy of the pole source need to be since magnetic energy at any point has been found to vary inversely with distance from the point to the magnetic source. However, since in most cases pole contact or substantial pole contact with the body part can be accomplished, the magnetic energy of the source can in

such a case be considered to be approximately the magnetic energy applied to the system.

The magnetic energy applied, in each case, may depend upon a number of factors, including the size of the patient and the location of the body part to which the magnetic energy is to be applied. However, 300 to 10,000 gauss measured at the scanned body part has been observed to be the practical useful magnetic energy range. Above 10,000 gauss, magnetic saturation considerations affect the response. Below 300 gauss, there is generally insufficient stimulus to obtain a realizable response. Generally speaking, magnetic field energies at the body part in the range 500–1500 gauss is preferred and is suitable. For example, a 1200 gauss magnet can pass its north or south pole energies through about 15 to 18 inches of body mass, thus enabling the energy of such a magnet to reach virtually any body part in the average person (up to about 200 pounds) when the magnet is applied to either the front or the back of the body. A typical 1200 gauss permanent magnet, such as an Alnico Magnet No. 5, weighs less than 1½ pounds and is therefore easily carried. For large patients weighing more than about 200 pounds, it is recommended that a 2000 gauss magnet be used where it is desired to reach a body part deep within the body's mass. Such a magnet offers a 20-inch depth of penetration field. The duration of magnetic energy application depends, of course, upon the strength of the applied field. However, for magnetic pole energies within the disclosed range, the time of application is generally unimportant since the physical or electronic manifestation of a response to the applied field appears virtually instantaneously, i.e., within a few microseconds.

The following Examples are illustrative of the practice of the present invention:

EXAMPLE I

Patient was a white male, age 56, of average body weight. The south pole of a 1200 gauss cylinder magnet was applied to the right kidney area of the back in accordance with the procedure set forth hereinbefore. No change in leg length was observed. The magnet was moved to the left kidney area of the back. It was noted that there was an observable 1-inch apparent shortening of the left leg.

Conclusion — Left kidney is malfunctioning or diseased. Conventional medical follow-up testing confirmed the diagnosis.

EXAMPLE II

Patient was a negro male, age 16, of average body weight. The south pole of a 1200 gauss cylinder magnet was placed against the patient's left ear with no observable change in leg length. The south pole of the magnet was next placed against patient's right ear. There was an observable apparent shortening of the right leg of about 1-inch.

Conclusion — Right ear is diseased or damaged in some fashion. Conventional medical follow-up testing revealed a right inner ear infection.

EXAMPLE III

Patient was a white female, age 54, who was internally injured in an accident. The south pole of a 1200 gauss magnet was used to scan the patient's body. A ¾ inch apparent shortening of the right leg was observed when the magnet was placed in the area of the right kidney.