

Can dowzers detect maximum zones of severe chronic diseases?

A small pilot study with two dowzers

by Dr. med. Reimar Banis

In the course of many decades in which I, as a naturopathically oriented doctor, have cared for chronically ill people, energetic tests have revealed geopathic stress in hundreds of patients. In the vernacular one speaks of "earth radiation", a physically still not yet clear objectifiable anomaly of locally localizable radiation fields, among others those of the earth's magnetic field. Geopathies are potentially dangerous in case of permanent exposure and can, according to my experience, but also that of numerous colleagues such as the biological cancer doctor Josef Issels (1) or the biological dentist and physician Helmut W. Schimmel (2), cause lasting damage to biological systems. Many chronically ill people have an earth radiation exposure. If one removes this, one has removed an important obstacle to healing as a therapist.

Determining Earth Radiation

Typical symptoms of geopathy such as sleep disturbances, exhaustion, pain, tension, nightmares, bruxism and the like can sometimes be absent, but are also ambiguous, so that one has to rely on energetic test procedures when making a diagnosis. If the patient is exposed to earth radiation, test ampoules with similar vibration patterns will respond in approximately every third to fourth patient. I used to use Silicea D60 (vegatest method) for this purpose, and now, when applying Psychosomatic Energetics (PSE), I use the test ampoule Geovita®, a homeopathic complex mixture which has proven to be very reliable. During controls of the home bed place by experienced dowzers I experience an almost complete agreement with my test suspicion.

If I have a suspicion of geopathy on the basis of my testing and anamnesis, I recommend the patient an experienced and reliable dowser to have his bed place examined and then to locate a neutral sleeping place on which he should sleep in the future. A good dowser is able to determine with high probability a maximum zone in a patient's bed, which corresponds with the patient's complaints and illnesses. For example, a good dowser will determine the most damaging earth radiation zone in the head area in the case of a brain tumour, whereas in the case of a prostate carcinoma it will be in the pelvis.

Patients are generally advised not to tell the dowser about their illness in advance and not to leave any treacherous utensils, doctor's letters, guidebooks and such like lying around. The accuracy of experienced and good dowser when determining maximum zones is according to my experience almost one hundred percent. In several hundred cases I have experienced practically always only bull's-eyes when setting the maximum zones with about half a dozen different dowser. I have tried to statistically prove this experience, which is always surprising both for me and for the patients involved, in a small pilot study, which I would like to present in the following. It goes without saying that the aim of the study is not only to highlight the outstanding abilities of some dowzers, which is remarkable in itself, but also to point out the unclear but probably very important role of geopathy in the pathogenesis of many chronic diseases.

Study design and results

In spring 20130 I published a call for papers in a professional journal. It is about the question whether maximum zones of severe chronic diseases such as a clearly localizable cancer of dowzers at the patient's bed place can be reliably determined, for example as a zone in the breast area in case of breast cancer. If both the geopathic maximum zone and the respective disease segment are in agreement, the dowser has worked correctly. I have distinguished five zones where the dowser should make a cross at the geopathic maximum zone after his examination of the bed: Head, neck, chest, upper abdomen, pelvis.

A precondition of the study is, of course, that the dowser had no knowledge of the disease until the time the maximum zone was determined. I have had this ignorance confirmed on a form signed by the dowser concerned. In addition, I requested a photocopy of a current doctor's letter or hospital discharge report from the dowser's clients in order to establish a maximum zone, which I also assigned to one of the five body segments.

If one of the five segments is selected at random, the probability of hitting the "right" segment is 20%. As a physician, I determine the "right" segment by defining the head of a meningioma, for example, as the affected and therefore only important segment, which may be geopathically burdened, for example. After one year I have 13 protocols from two dowsers, 12 from Dipl. Ing. Hans Zürn /Überlingen, who is considered in professional circles as one of the most experienced and best dowsers in Germany, and 1 protocol from Dieter Garten from Steina, also an experienced dowsers. For this purpose, I have specialist reports or clinical reports of all the protocols, which I compared segmentally with the verdict "yes" (agreeing) or "no" (disagreeing) with the respective dowsers' findings.

If one of the five segments is selected at random, the probability of hitting the "right" segment is 20%. As a physician, I determine the "right" segment by defining the head of a meningioma, for example, as the affected and therefore only important segment, which may be geopathically burdened, for example. After one year I have 13 protocols from two dowsers, 12 from Dipl. Ing. Hans Zürn /Überlingen, who is considered in professional circles as one of the most experienced and best dowsers in Germany, and 1 protocol from Dieter Garten from Steina, also an experienced dowsers. For this purpose, I have specialist reports and clinical reports of all protocols, which I have compared segmentally with the verdict "yes" (agreeing) or "no" (disagreeing) with the respective dowsers' findings.

According to the data, the "hit rate" of the dowsers is 92.3 %, if one takes into account the unfortunate, because misleading, result of a systemic nervous disease running over four segments (in one patient an amyotrophic lateral sclerosis). Although no clear segment assignment was possible for the clinical picture, I included it in the analysis, although it affected the result somewhat, which would otherwise have been 100%. The 95% confidence interval of the "hit rate" is [64.0 %; 99.8 %]. This includes the probability of identifying the correct body segment by pure chance of 20% not. Thus the "hit rate" of 92.3% is significantly higher than 20%.

What does this result mean?

Doubters will suspect that segment localization is a matter of very subtle sensory perceptions of the dowser or quite banal forms of unwanted knowledge, such as accidental disclosure of the diagnosis by the patient and his relatives. Since I can judge the seriousness of both dowser's opinions, I do not consider the second counter-argument to be valid. Because I have achieved comparable accurate results even in decades experience with patients who had strong doubts and who did everything possible not to reveal anything to the dowser, I do not consider the counter-argument of secret prior knowledge plausible.



It is also unlikely that cancer sufferers will radiate something ominous into the bed, which the dowser will then perceive in the same way as a sniffer dog. Mr. Zürn told me that some patients had moved their bed before the examination, but he was unaware of this and could not recognise it by prints on the floor or anything like that.

During his bed examination, Mr. Zürn lays out inch bars (see *picture*), the intersection of which corresponds to the maximum zones.

If the displaced bed was then pushed back to its original position, the geopathic maximum zones coincided with the disease in question. This clearly contradicts the thesis of any kind of disease emanation, which would reveal the respective strain to the dowser.

In my opinion, the study shows that good dowsers are very likely to be able to determine the geopathic maximum zones at bed locations, even without knowing anything about the respective disease. Even if dowsing is unfortunately generally considered dubious and unscientific today, my experiences as a doctor speak clearly against it: good dowsers do indeed achieve realistic and impressively accurate results. The bad reputation has other reasons, which I have discussed elsewhere (3).

Furthermore, since the small pilot study confirms my experience of more than 30 years, but also corresponds to that of other therapists, it seems very unlikely that the impressive study result is merely a coincidence. But if these are real phenomena, what does the result mean in concrete terms from a medical perspective? If geopathic maximum zones can be found in the majority of all cancer patients, as the results in Table 1 clearly show, the conclusion is obvious that the two are related.

Geopathic zones, probably depending on the respective genetically determined robustness, are to be classified as contributory causative factors of many chronic diseases. Therefore it seems to be urgently necessary to investigate this important source of disease scientifically. Until this is done and usable results are available, self-help seems to be advisable. From my point of view as a doctor, I advise to have the bed examined by a good dowser in case of poor sleep quality and other suspicions. If Figure 1 The dowser Dipl. Ing. Hans Zürn examining the bed On the bed, disturbed zones have been marked by bars.

previous occupants have suffered from a serious chronic illness or have possibly died, the bed should not be placed in the place where the previous owners became ill.

Conclusion

In a small study with 13 test persons, who were examined by two dowsers, the question was investigated whether maximum zones of earth radiation can be associated with local severe chronic diseases, if both are assigned to one of five body segments (e.g. earth radiation in the pelvis for prostate cancer). A precondition for this is the dowsers' ignorance of the respective disease, which can most probably be assumed, but should be further investigated in later studies under laboratory conditions.

In 12 submitted protocols, the geopathic maximum zone and local disease were in agreement, in one case of a systemic nervous disease no segmental assignment was possible, which was judged to be a non-conformity. From a statistical point of view, the result speaks against pure coincidence, since a confidence interval of 95% was exceeded, so the result must be considered significant.

It seems plausible what further studies must clarify that earth radiation has a contributory causative effect on numerous serious chronic diseases.

It seems conceivable that in the future, beds of cancer patients and healthy prospects of dowsers will be examined in a double-blind study to dispel doubts about the possible prior knowledge of dowsers. In principle, basic research on the physical nature of geopathogenic zones and studies in sleep laboratories should also be undertaken to investigate a location dependence on sleeping places postulated by dowsers.

Evaluation: Dr. rer. medic. Silke Lange, graduate statistician, Witten (Ruhr). The study was financed by the International Society for Psychosomatic Energetics, a non-profit professional association based in Switzerland (www.igpse.ch). Thanks at this point to Dipl. Ing. Hans Zürn and Dieter Garten for their cooperation!