

I feel good!

HOW **Y**  **U** CAN
FEEL A WHOLE LOT BETTER & LIVE LONGER

Shared with you by the Founders of
JAFFE-MELLOR TECHNIQUE

Dr. Carolyn Jaffe, DOM, L.Ac., ND, Ph.D.
Judith M. Mellor, RN, C.Hrb.

Something To Think About



There is a story that eludes to humans having once lived to be as old as 900 (normal life expectancy)

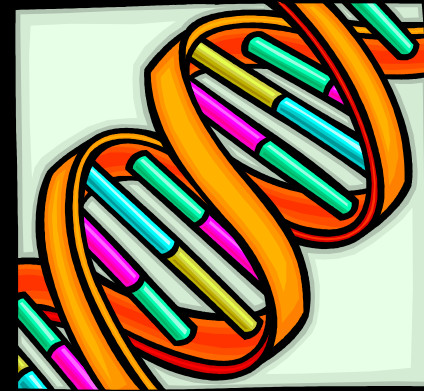
This story further suggests that men and women were still bearing progeny in their 600th year

Not only was the libido intact, but the ability to reproduce was as well

Perhaps this is not just a story, but a glimpse into our genetic history which has become so altered by negative influences, that we thrill at the prospect of living to 100.

The enemy of our body/mind/spirit came in the forms of war, fear, anger, poor food choices, lack of exercise, global warming, etc. These in part have been tainting the once pristine DNA, overtaxing the immune system, and adding to disease, senescence & early aging.

DNA Genetic Memory



- Every time our body has to make a new cell a molecule of DNA has to divide itself in half, leaving the cell temporarily with no intact DNA
- Bathed in a swirl of biochemicals, the two new cells rebuild themselves into two replicas of the original molecule
- 3 billion genetic bits of information are replaced in perfect precision, exactly as it was found in the original cell
- An estimated 6 trillion chemical reactions take place in our body every second

**The same speck of DNA
controls them all!**

A Glitch in the Record

In the old days music was embedded on a vinyl record and played out using a needle that ran along its grooves.

It wasn't uncommon for the record to scratch, which kept the needle jumping and halted the music from playing on.

Overlapping data is continually being assessed for safety by all body systems.

This data is embedded as part of the permanent record and either acted upon immediately or stored for use if needed at some later date.

Just as the memory of a lemon provokes salivation, or looking at an appointment card for the dentist increases heart rate (learned experiences), perverse data will be embedded causing “glitches” that can **“stop the music from playing on”**.

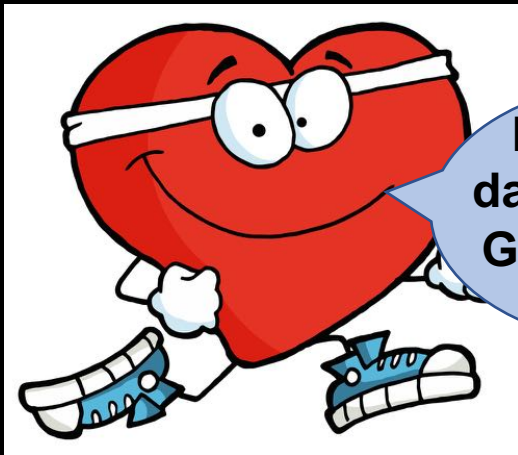


*The presence of cells that do not submit to apoptosis and are no longer mitotic (SENESCENCE), promote a **relapse in cell repair and rejuvenation**. This also initiates immune chaos and synthesis of toxic products, i.e. cytokines.*

APOPTOSIS

is a regular, pre-programmed process of the cell taking an active part in its own death.

- It's needed to maintain a normal turnover & balance in cell multiplication.
- Apoptosis is necessary for balanced bodily functioning



It's been 120 days, I gotta go. Glad I was able to help!



Cell death is a healthy, essential routine of all life. It's how babies develop fingers and toes in utero, and how tadpoles lose their tails and become frogs.

Cells should surrender to pre-programmed apoptosis or they will become senescent cells.

**AVOID
ZOMBIES!
LIVE LONG &
PROSPER!**



These “zombie” cells will not divide, or support the tissue family they were once actively a part of.

Instead . . .

- they emit a range of potentially harmful chemical signals
- they encourage nearby healthy cells to enter the same senescent state

Causing . . .

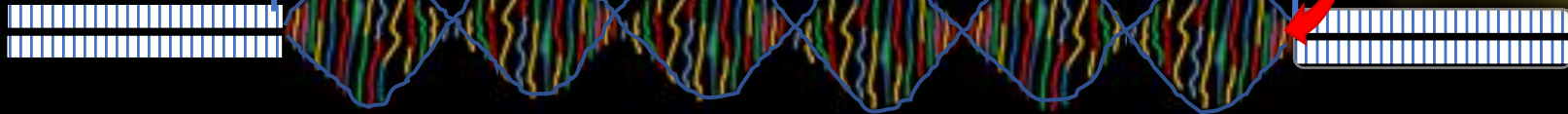
- reduced tissue repair
- increased chronic inflammation
- increased risk of cancer and other age-related diseases

Each time a DNA copy is made, it fails to capture info located at the end.

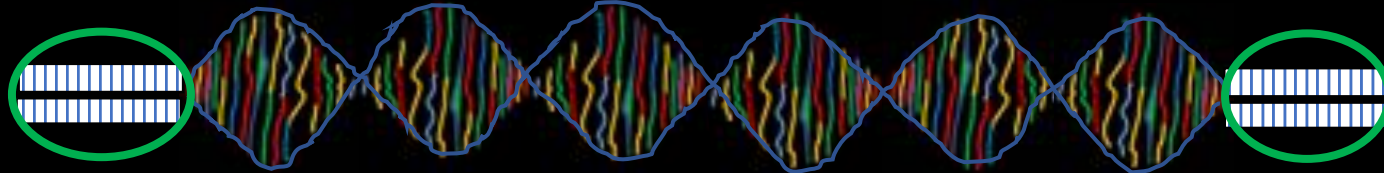
Telomere at each end of each DNA strand

All the DNA is in this section

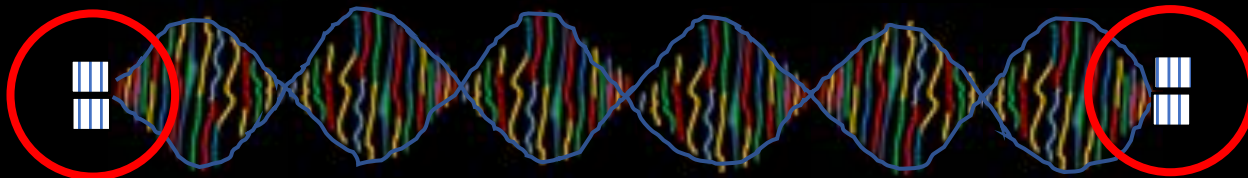
Telomere at each end of each DNA strand
Acting like a cap on each end of a shoelace, telomeres protect DNA from damage during the copying process.



We lose a bit of telomere at the end of each DNA replication cycle.



A cell has 60-70 cell divisions (Hayflick limit) before telomeres get too short, and then the important DNA coding comes at risk of damage.



Once the telomere gets too short to protect the chromosome from possible damage, the cell initiates a DNA DAMAGE RESPONSE!

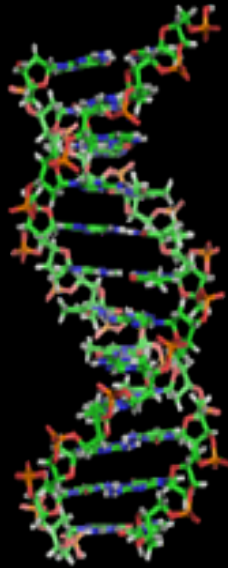


HAYFLICK . . . STOP DIVIDING !!!

- The innate intelligence of the chromosome instinctively gives up the ability to continue to divide.
- It wants to prevent any further shortening of this chromosome or cause any further damage outside of itself.
- But . . . if immune responders are not efficient or for some other reason the impaired cell in that tissue evades the expected martyrdom . . .

**IT TRANSFORMS INTO A
SENESCENT CELL!**

Senescence is like a Double Edged Sword



Senescence begins when it reaches the pre-programmed Hayflick Limit.



Senescence is result of internal damage. Cell doesn't want to replicate and pass tainted coding on to daughter cells.



Because senescent cells are no longer mitotic, they shut down cells that could become cancerous.

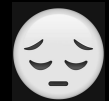


Infirm cells usually self-destruct via apoptosis that issue inflammatory signals that attract, and should destroy them.

BUT, AS WE AGE . . .



Our tissues have less mitosing cells & more senescent cells in them.



Reduced ability to repair, **increased inflammation.**

The surrounding tissue gets polluted with signals provoking inflammatory products that were **supposed to be occurring for short-time benefit only!**



- Inflammation is part of the normal repair response for healing
- Essential in keeping us safe from bacterial and viral infections and noxious environmental agents,

NOT ALL INFLAMMATION IS GOOD!

- When inflammation becomes prolonged and persists, it can become damaging and destructive.
- Inflammation must be tailored to the initiating stress and resolved in a timely and controlled way, to avoid pathology associated with chronicity.

Senescent cells are linked to age related disorders like cataracts, osteoarthritis, COPD, Alzheimer's, cancer, autoimmune disorders, allergies . . .



JMT™ TECHNIQUE

Health Restoration System

**The Neuromodulating,
Bioenergetic Resolution For
Disease, Allergies,
Pain Syndromes,
Emotional Disharmony**

**Presented by
Jaffe-Mellor
Associates, Ltd.**

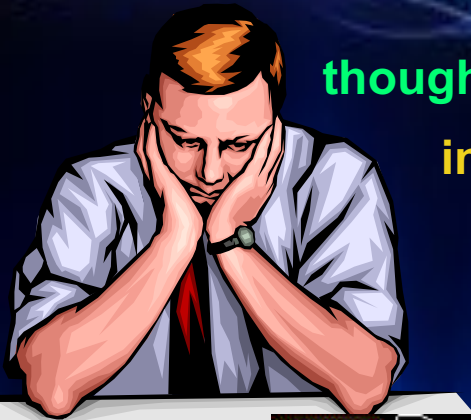
Researchers and Developers

**Dr. CAROLYN JAFFE, DOM., ND (c),
Ph.D.**

JUDITH M. MELLOR, RN, C. Hrb.

in spirit as awareness

UNIVERSALLY ALL EXISTENCE IS ENERGY



thought and inspiration

in magnetism and gravity as a force field

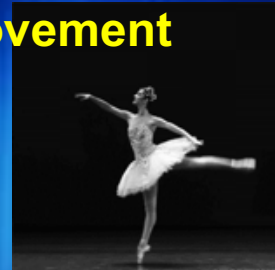
in energy exchange as communication



sound



movement



in electricity as current



light



weather



physically as molecular mass



sensation



color

growth & development

Energy is electromagnetic & electrical before molecular



Energy is the Universal Language

it is the natural language
of every cell in the body.

all responses are energetic

all impulses are sent by energy

Health is either an energetic frequency that is compatible with all
forms of life, or it is perverse, incompatible . . . **DIS-EASED**

Therefore, it is logical and imperative to make
corrections in the body/mind by communicating on
an energetic level that is familiar and in harmony
with all aspects.

Assessing the Situation

- All energies are evaluated for safety
- If the “energies” are **ACCESSED** as safe, the ANS, in concert with all the other systems, will modulate to maintain homeostasis, and in fact, will incorporate anything that will be of benefit to the host systems:



- These “energies” will symbiotically aid in creating new energy that is complimentary to the human

But, if anything is **PERCEIVED** as harmful, the I.S. will be activated - - causing some internal damage & creating unfamiliarity within the body

IMMUNE SYSTEM STRESSORS THAT CAN **CAUSE ILLNESS**

overuse of synthetic drugs and antibiotics

emotional stressors

environmental pollutants

food additives, sugar, sugar substitutes

processed foods

electronics, microwaves

mold

CT, PET scans

GMO foods

microorganisms

second hand smoke

allergens

animal products adulterated with hormones

vaccinations

pollution

mercury fillings

smoking, alcohol, recreational drugs

cooking at high temps

fluoride

pesticides

aluminum

mammograms

geopathic influences

x-rays

Stress, Stress, Stress





When the internal mechanisms of the body are inundated by unfamiliar energies that alter function, afferent and efferent signals are received & transmitted in inappropriate ways.

**THE RESULT IS A
BREAKDOWN BETWEEN
THE SYSTEMS AND
APPARENT SYMPTOMS**

UTTER CHAOS

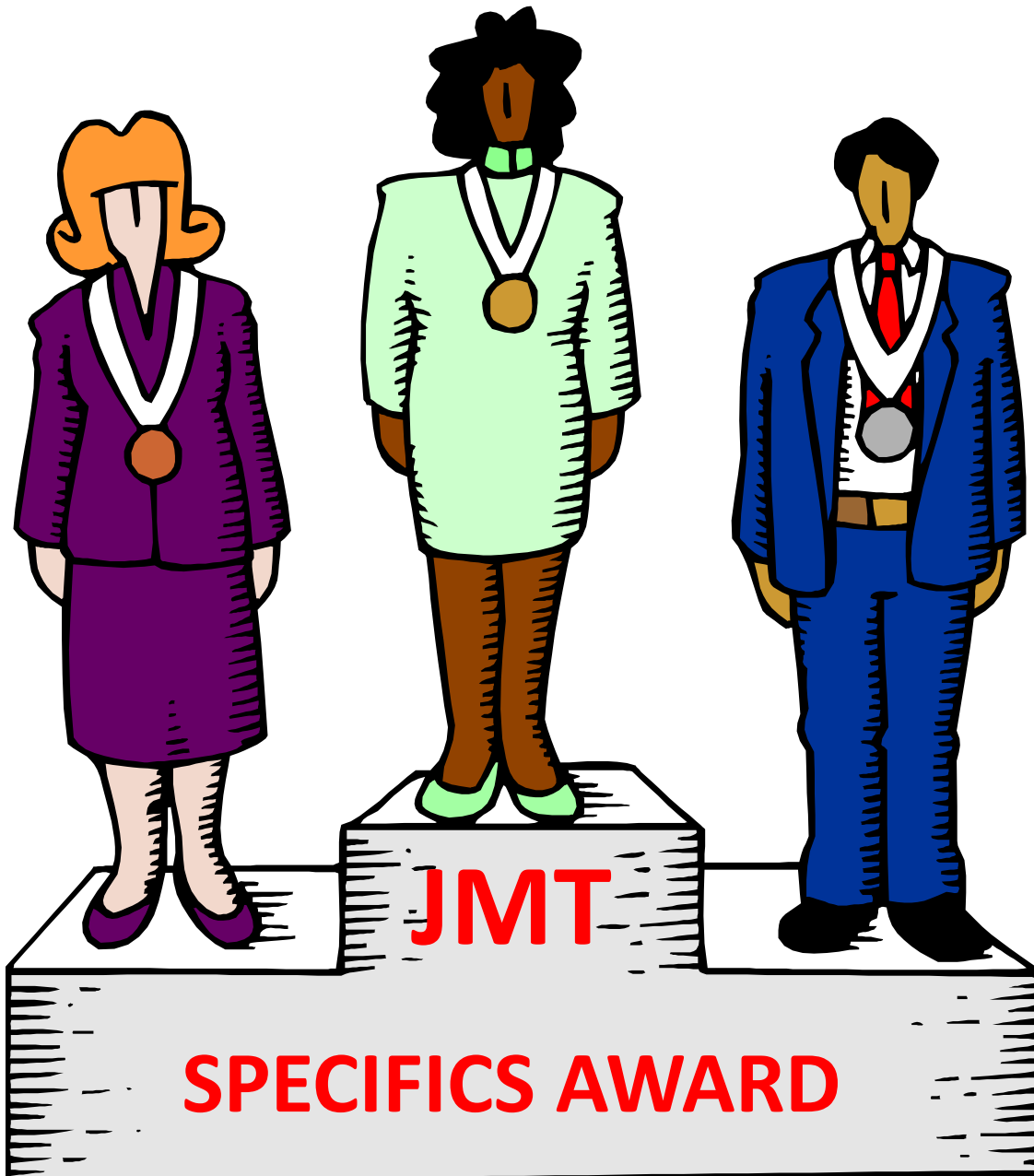


Peaceful Co-existence

- In this dimension, it appears all things on some level have the urge to survive
- Life, as we understand it, exists and co-exists with all other forms of life in this dimension
- Ingestants, inhalants, contactants, microorganisms, animals, vegetation, mineral, gasses, rodents, vectors, etc. are programmed to co-exist along with everything else on this planet

NO-THING IS HARMFUL

the harm begins when the energy of something
“other than my energy” enters *“into my energy field”*
and is *perceived as dangerous*



**“IF YOU
WANT TO
BE
TERRIFIC,
YOU’VE
GOT TO
BE
SPECIFIC”**

MVRT

MUSCLE RESISTANCE TESTING



MRT the JMT™ way requires great detective work!

**JMT research reveals that a muscle
change occurs in response to a
verbal or non-verbal *question* that is
primarily provoked by YOUR intent**

**We are “*human biocomputers*” with endless potential for storing,
analyzing, retrieving, and continually modulating**

**Because the ANS cannot verbalize about the internal environment,
MRT is a way it can communicate without words**

**By provoking the patient’s biocomputer with specific inquiries
and commands, the practitioner can increase the patient’s
innate ability to heal**

Assessing the Situation

- anything entering my energy field is evaluated for safeness.
- corporately, every cell, tissue, and system assesses the safety of all “energy” as it continually floods in.
- if the “non-human energy” is perceived to be safe, the ANS, in concert with all the other systems, will modulate to maintain homeostasis, and in fact, will incorporate anything from the “other energies” that will be of benefit to the host systems.

food

sound

visuals

sensations

contactants

thoughts

aromas

- these “energies” will symbiotically aid in creating new energy that is complimentary to the human (or animal).

But, if anything is assessed as harmful, the I.S. will be activated - - causing some internal damage & creating unfamiliarity within the body



The Allergic Reaction

Might result in the excessive release of histamine, IgE, prostaglandins, and other IS components.

- The IS *may* also interpret the presence of pathogens and/or their byproducts as allergens
- Toxins can also generate an allergic response
- Substances synthesized by the body's own natural mechanisms may also provoke allergic responses
- Inherited predisposition can provoke ongoing inflammation

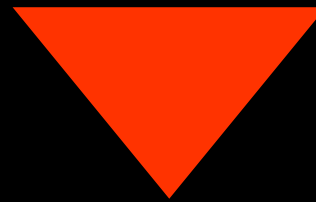


ANTIGEN

anything that can induce an immune response



In response to an antigen, the immune system calls on cells derived from a stem cell in the bone marrow causing two actions:



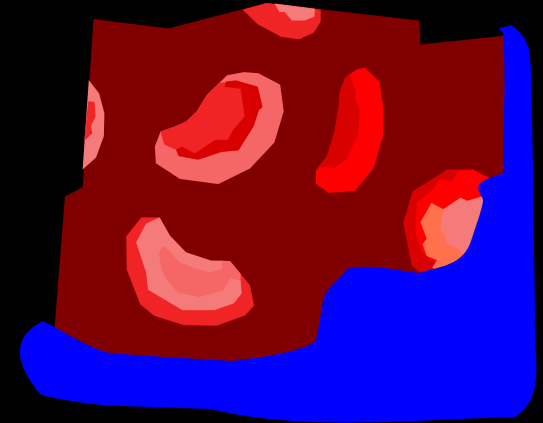
INFLAMMATION

macrophages, B & T cells, macrophage-like cells & their products

IMMUNE RESPONSE

polymorphonuclear leukocytes, mast cells, & platelets

Immune Complexes

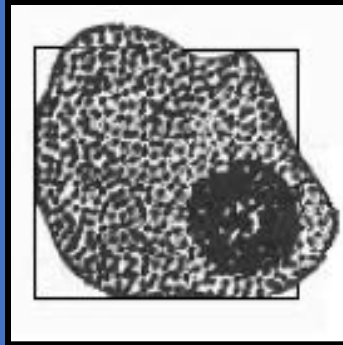


- sometimes large numbers of antigens and antibodies bind together and overload in the blood
- when the antigens & antibodies become bound to each other, they form dense tangled masses called **immune complexes**
- when these tangled masses are carried around in the blood, they are known as **circulating immune complexes**
- the tangled masses may be too large to clear fast by the scavenger garbage eating cells that keep the blood clean

Cells Involved in the Allergic Response

MAST CELLS

- not found in blood
- tissue-based
- histamine-containing granules which, when secreted, increase vascular permeability
- have surface IgE receptors
- secretion occurs when antigen binds to cell-bound IgE



BASOPHILS

- granulated white cells in the blood
- able to exit the blood stream and travel into tissues
- granules contain heparin & histamine, which increase vascular permeability, allowing inflammatory cells to enter tissues & the blood stream

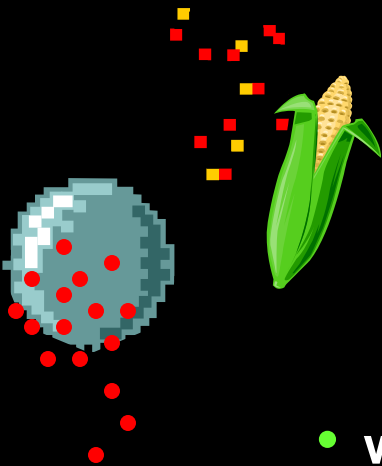


EOSINOPHILS

- eosinophils increase in the presence of parasites, especially worms
- contain cell surface receptors for IgE, which increases with parasites
- eosinophils increase during allergic reactions when IgE production is stimulated
- eosinophils can exit through blood vessel walls into the tissues



LOCAL ANAPHYLAXIS



- each IgE-sensitized mast cell is a tiny bomb that can be exploded by a particular antigen
- when the granules are released, histamine and leukotrienes flood the surrounding tissue causing swelling, redness, and itching
- **leukotrienes are far more potent than histamine** in mediating these reactions
- mast cells & basophils generate a mixture of leukotrienes. The products of both pathways act in concert to cause inflammation



BAD TO WORSE . . .

- If a toxin spreads throughout the body and triggers massive degranulation, the problem can be serious . . .

- fluid **Supposed to** the tissues
- the **be occurring** luce so the
- hea **for short-time**
- this **benefit only!**
- histamine from the granules can cause smooth muscles around the windpipe to contract
- breathing becomes labored
- in extreme cases, suffocation can occur

FEELING LOUSY AFTER SURGERY?

In the same way patients can reject organ transplants, they can also react to prosthetics surgically implanted into their bodies.

e.g. joint replacements, eye, breast, penile, & testicular implants, grafts, titanium, pace makers, surgical steel pins & plates, surgical cements, glues, & bonders, pumps, defibrillators, and dental fillings (amalgam, silver, mercury, porcelain, etc.).



Other possibilities include sensitivity to foreign materials such as, braces, contact lenses (plastic/glass), false nails, false eyelashes, wigs, and metal piercings (gold, silver, etc.).



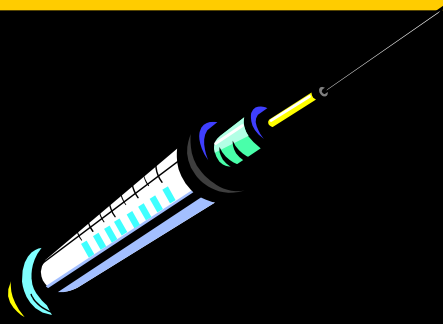
BEFORE JMT TREATMENT

- 70+ year old female
- life-long hx. of sensitivities
- multiple surgeries for arthritis
- 2.5 yr. long outbreak – itching, scaling, weeping eczema
- treated by allergists, dermatologists

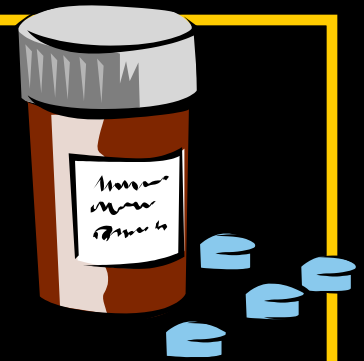


AFTER JMT

- **total 4 txs.**
- **1/week**
- **no meds**
- **no needles**



Sensitivity to Medications



Sometimes it is not the actual drug or supplement, but the dyes and fillers used in them that are responsible for the sensitivity.

If a patient is sensitive to their medications or supplements, their body may not be absorbing them as well. This may result in vitamin and mineral deficiencies, as well as toxic accumulations in their body due to the impaired metabolism.

PONDER THIS . . .

Drug dependency can cause reactions. In this case, the body can invoke symptoms in hope to receive even more medication.

Domino Effect

- the perception that the energy is foreign will instigate action
- once action has begun (which in itself is foreign), alterations to what was previously balanced and familiar becomes foreign

quantity/quality of the
chemicals being released

die off from pathogens

the combinations of chemicals

reactions from the end organs to the chemicals

end organs where they are
being released to

the speed at which chemicals are
being synthesized

- these alterations are now perceived as foreign and acted upon, which in and of itself is now behaving in a foreign way, as are all the other cells in that specific tissue group.
- These numerous alterations are learned, recorded as memory and acted out repetitively – which again results in other patterns of disharmony and continued imbalance

Diverse insults from the past, present, and future, result in altered settings that create malfunction in all body systems, & result in toxic build-up, damaged tissues, emotional & psychological disturbances, compromised body terrain, etc.



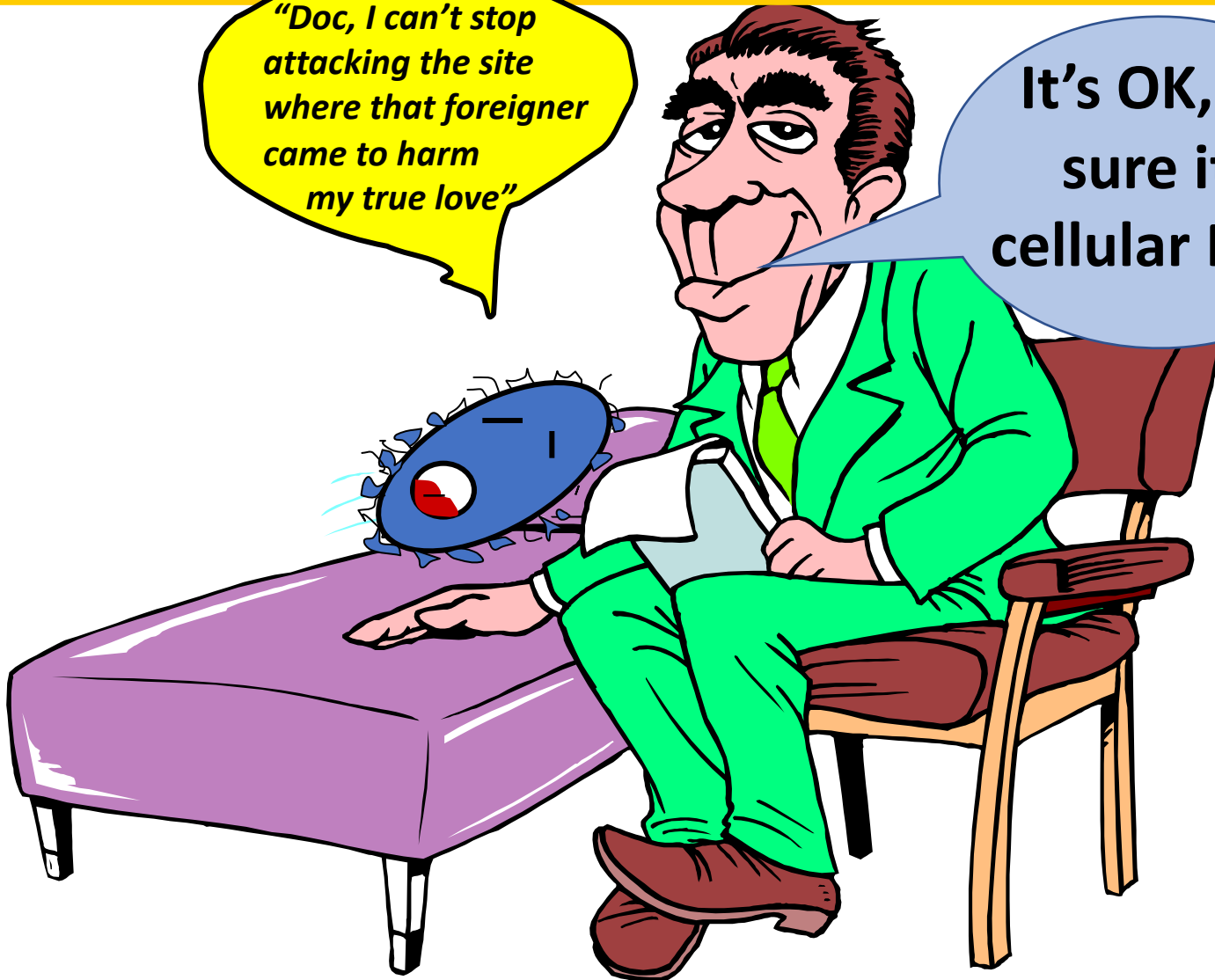
The memory of these traumatic events remain with the organism & perversely recur, adding insult to injury.



THE IMMUNE CELLS DRIVEN BY OVERLAPPING MEMORIES, CONTINUE TO ATTACK!

"Doc, I can't stop attacking the site where that foreigner came to harm my true love"

It's OK, I'm sure it's cellular PTSD



Intake: December 14, 2017

Mary R. is a 63 yr. old female

- **H.S. economics teacher**
- **6 yr. hx of painful, aching, bleeding, cracked skin on all fingers of both hands. Painful holding a pencil, or grasping a cup.**
- **Washing added to her complaints as did bending her fingers.**
- **Angry, hopeless, depressed, embarrassed**

Hx: Pt. was seen by several family MDs, dermatologists, allergists, and an immunologist. She had several blood tests and finally diagnosed for “warts”. She was warned that her condition was contagious.

Mary was treated as follows by two different dermatologists:

- freezing the skin warts with liquid nitrogen
- burning warts off and laser treatments
- surgical removal of warts with application of certain drugs by injection.

NOTE: Mary tried Tea Tree Oil with no noticeable change.

December 14, 2018

INTAKE HIGHLIGHTS

Patient had additional complaints of ongoing stress, and recurring pain in her abdomen. She also experienced intermittent aching in her right shoulder blade. Ultrasound ordered previously by her family physician disclosed “sludge” in her gall bladder. She was advised to watch her food intake and/or need surgery in the not too distant future. Mary volunteered that she had arthritic pain in both knees. Mary appeared stoic and reasonably doubtful that she could be helped.

FINDINGS

A general physical was performed in addition to JMT to ascertain the underlying cause for the constant recurring warts. A blood sample was taken and also used for testing with the patient holding the sample while Jaffe and Mellor worked together provoking specific inquiries followed by MRT.

TREATMENT

JMT was performed with specific commands used to modulate the hyper-immune responses that had been synthesizing inflammatory products. Additionally, neuromodulating to reduce specific stress hormones and produce endorphins. J. Mellor, RN, prescribed herbs for emotions.



R. hand



L. hand



L. hand

**She could not wear a ring - -
too painful.**



R. hand

January 2018

FOLLOW-UP (FINGERS):

- Mary's "warts" had almost completely resolved after 3 txs..
- Mary was no longer experiencing any pain, pressure, burning in her hands.
- She could hold and grasp anything with her fingers w/o pain.
- She was no longer sensitive to water or anything touching her fingers.

FOLLOW-UP (PAIN IN ABDOMEN & SHOULDER): Greatly reduced

FOLLOW-UP (EMOTIONS):

Patient smiled often, much more communicative.

KNEE PAIN improved.

MARY WAS TREATED A TOTAL OF 5 TIMES

We saw Mary several times outside of the office. There was total resolution of symptoms in her hands with no recurrence of symptoms since that time.

She can wear a ring - - no pain.



R. hand



- **Patient able to wear ring**
- **No pain, redness, or inflammation**
- **Scaly, dry wart is gone.**



R. hand

- Patient able to wear ring
- No pain, redness, or inflammation
- Scaly, dry wart is gone.



R. hand

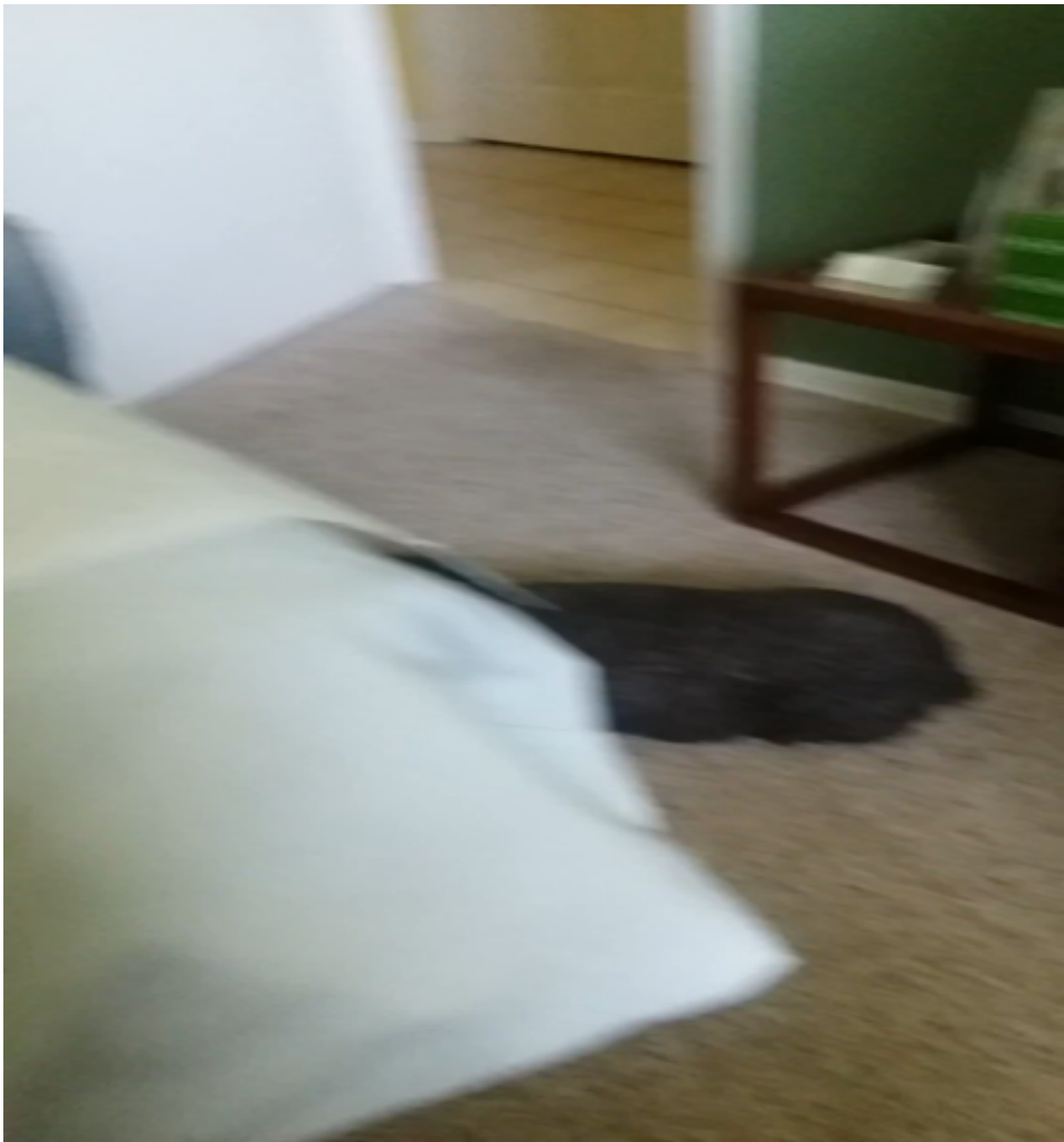
JUNE 2018

INTAKE:

Jared is a 4 year old boy who has been suffering with **chronic, recurrent eczema** covering 90% of his body since he was 15 months of age.

At the time of this intake Jared was being seen on a regular basis by his family physician, allergists, dermatologists, and a pulmonologist. He was on a daily regimen of steroids and at the showing of the following video, his father points out that the symptoms are usually much, much worse than what we are viewing. He points out that the symptoms are so bad when he is not on a steroid, that he fears his son will go blind as the inflammation affects both eyes; especially when he is outdoors.

Jared is despondent throughout the intake as opposed to the follow-up video when he is responsive and “acting” like a little boy should act.



AUGUST 2018

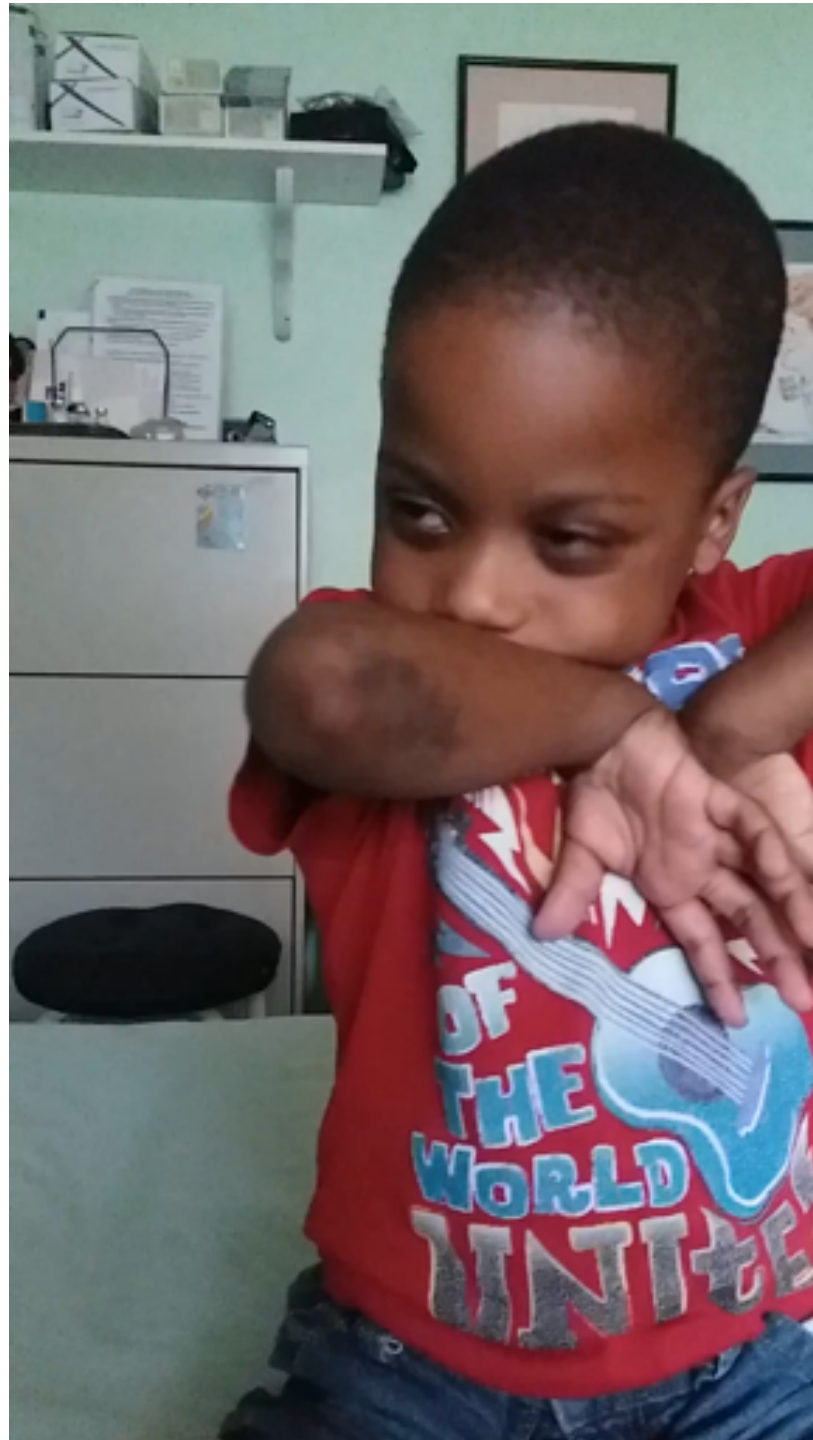
FOLLOW-UP: Jared was seen once a week for a total of 7 txs,

OBSERVATION: Jared is responsive, and quite active. His symptoms are greatly reduced. He is talkative and alert to questioning.

PARENT RESPONSE: Mark is Jared's father. When questioned about his son's progress, he says Jared is doing "Great" as compared to where he was before JMT treatment.

CONCLUSION: All symptoms completely resolved with no recurrence to date as per phone follow-up 6 months later.

JMT was the only treatment used. There were no meds of any kinds, no injections, no topicals. Jared was taken off of all drugs and remains asymptomatic with no recurrence of any symptoms.



AUGUST / SEPTEMBER 2018

INTAKE: Jan G. is a 43 year old stay at home mom who has been struggling for at least 2 years with a severe, unrelenting, skin condition that has never been specifically diagnosed. She had been seen by her family physician, dermatologists, and two retired neighbors who had been physicians. Biopsy findings were negative.

COMPLAINTS: Recurrent facial outbreaks, fatigue, see-saw emotions.

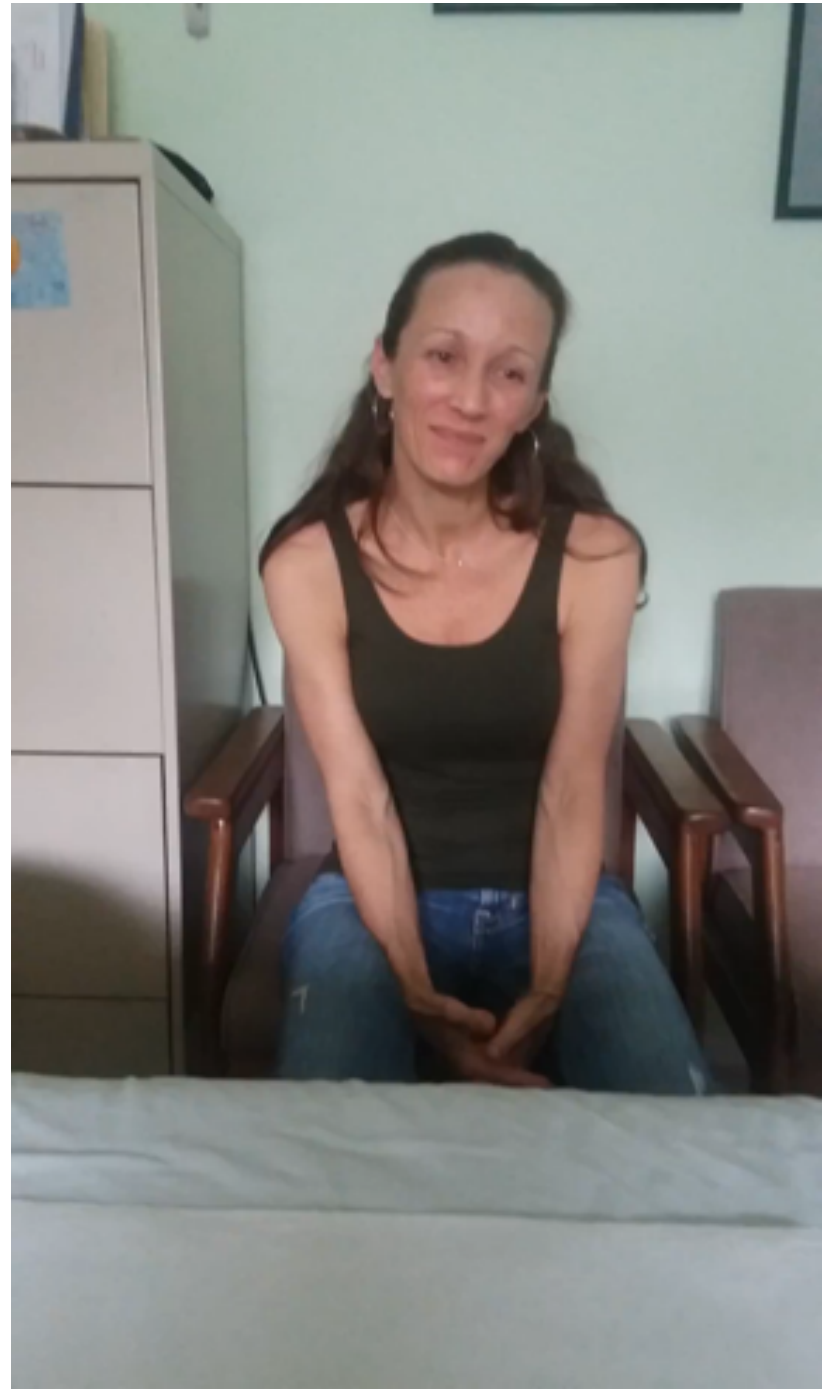
MEDICATIONS: Topical steroids, antibiotics, OTC meds,

The following video demonstrates quick and very satisfactory results following 2 JMT treatments.

OBSERVATION: Jan's outbreak was arrested almost immediately. Inflammation was curtailed. Emotions were observably calm and relaxed. Patient remarks that she has not felt this comfortable before.

JMT HAS AN ALMOST 100% SUCCESS RATE WITH PTSD

< August 11 12:43 PM >



DISORDERS RESPONDING WELL TO JMT

Rheumatoid arthritis, Osteoarthritis

Fibromyalgia

Lupus

GERD, Crohn's Disease, IBD, colitis

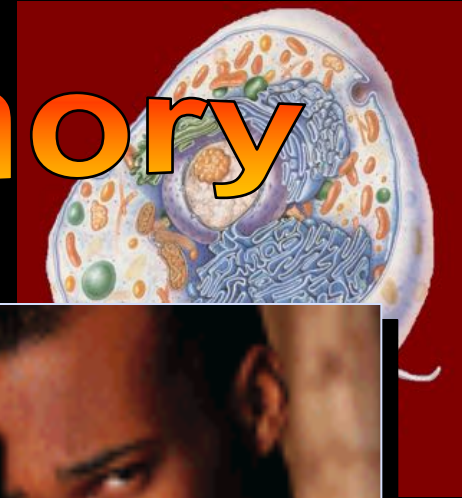
Myasthenia Gravis

Migraines

PTSD

Asthma, all allergies

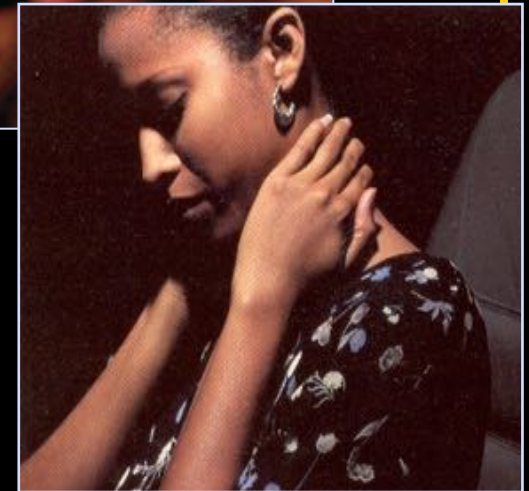
Cellular Memory



Trauma, in any energetic form will be interpreted by the body as an insult.

These “trauma-triggers” impact negatively on normal cells, tissues, organs, glands, and systems.

The recorded negative energy of the insult will inadvertently result in perverse data and dysfunctional behavior, which will be stored and played out over and over again.





*It has been our pleasure
sharing some of our
knowledge with you.*

*We sincerely wish you the
Best of Health and
Contentment*