



Abstract

An outcome study was conducted to gather information on the use and efficacy of the NES miHealth device for use in research, training and marketing purposes. The aims of the study were as follows:

- which conditions show the greatest response to the miHealth device
- the optimal length of time for a particular setting, for each condition and function
- whether on-body or off-body is more effective and for which conditions
- how long the effect of the treatment lasts
- what type of adverse reactions (or healing reactions) are experienced

In all cases, an average reduction of the symptoms of over 60% was experienced. After the second therapy session, even more participants – 93% – reported a significant improvement in their condition.

Subjects with chronic conditions were also looked at separately and 85% of them reported an immediate positive effect from the therapy.

Keywords: miHealth, chronic pain, acute pain, joint issues, muscle, nerve, stress, skin, digestion, rejuvenation, beauty, sleep, memory.

Introduction

The NES miHealth is a portable hand-held wellness device designed to be used as a complement to the NES Health range of therapeutic products. The miHealth contains three different therapeutic technologies: PEMF (pulsed electromagnetic field therapy), bio-electrostimulation and NES informational field correctors.

This large-scale outcome study was conducted to assess the efficacy of the NES miHealth device prior to the market launch of the product. Certified NES practitioners were recruited to take part in this outcome study that was conducted over a 6-month period. For each patient who received NES miHealth therapy, a record was kept of the exact protocol used, including the choice of NES miHealth programme, length of session and whether the device was applied on, or off-body. Additionally, a detailed report on the effect the device had on the client's symptoms was completed (using a 1-10 scoring system) for each of the 251 study participants receiving NES miHealth therapy.

Method

Practitioners recruited subjects from their own client base. Consent forms and online self-assessment questionnaires were administered. Additional data such as concurrent medication and lifestyle and dietary changes were recorded.

Subjects

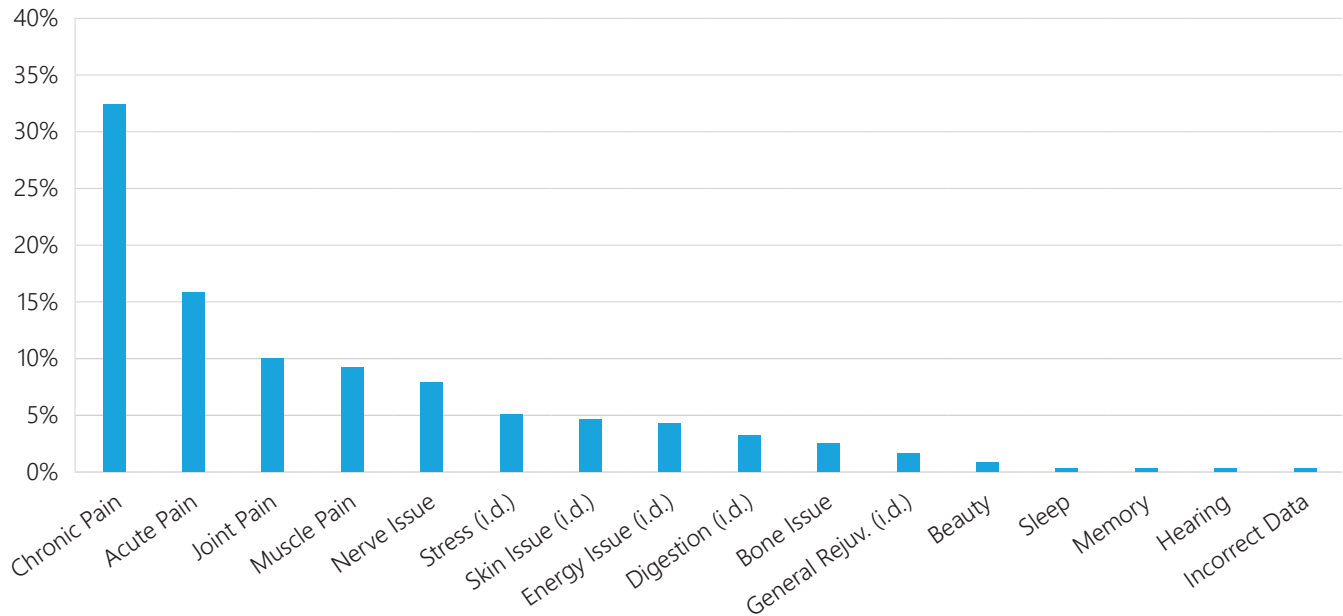
In total, 367 individual case studies were reported. Of these 268 successfully completed the follow-up questionnaire. Male and female subjects. Age range 18 and over.

Exclusion criteria: pregnancy, mental illness, pacemakers.

Results

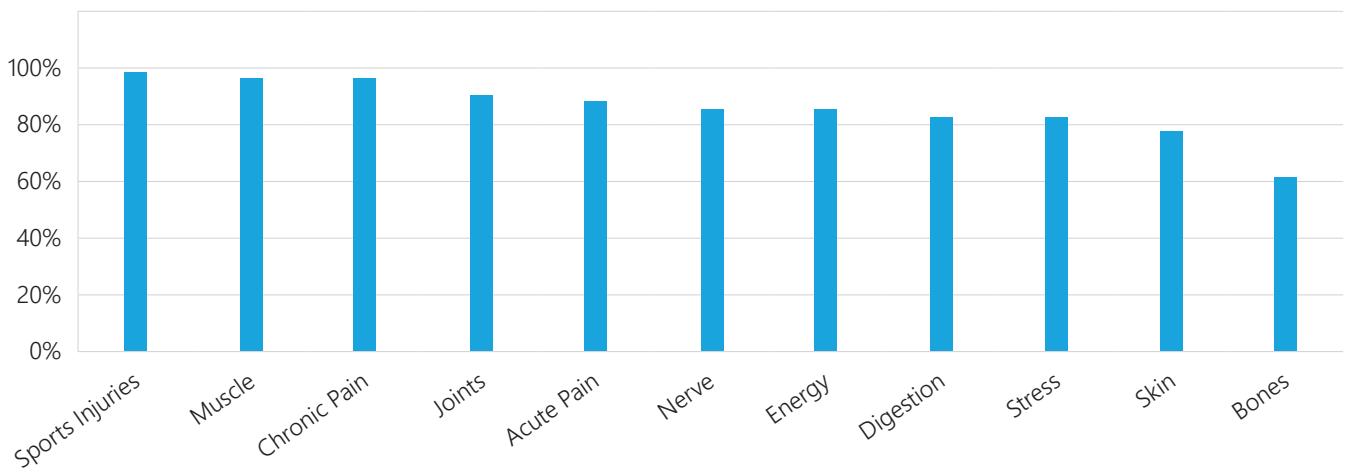
Main issue at initial consultation: As is clear from the data, the most common symptom was chronic pain followed by acute pain. This is to be expected as most physical conditions are associated with some level of pain. Also, the first training covered the use of this function. Joint and muscle issues were also high on the list reflecting the practitioner's perception that the miHealth device has an affect on these more physical complaints.

Main issue at initial consultation



As is clear from the data, the most common symptom was chronic pain followed by acute pain. This is to be expected as most physical conditions are associated with some level of pain. Also, the first training covered the use of this function. Joint and muscle issues were also high on the list reflecting the practitioner's perception that the miHealth device has an affect on these more physical complaints.

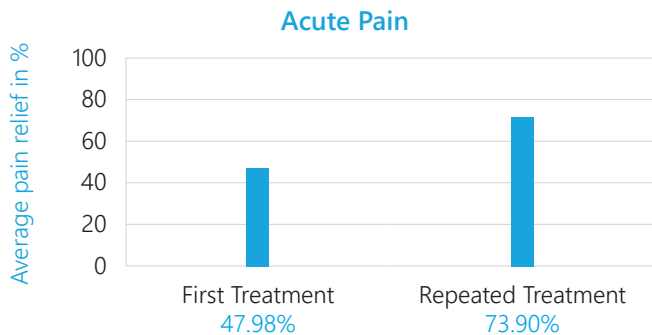
% positive effect of first session



However, regarding the average pain relief/issue improvement, best results can be seen for acute and 'Chronic pain' followed by 'Joint' issues with promising trends for muscle pain, energy issue, stress and general rejuvenation.

Acute Pain

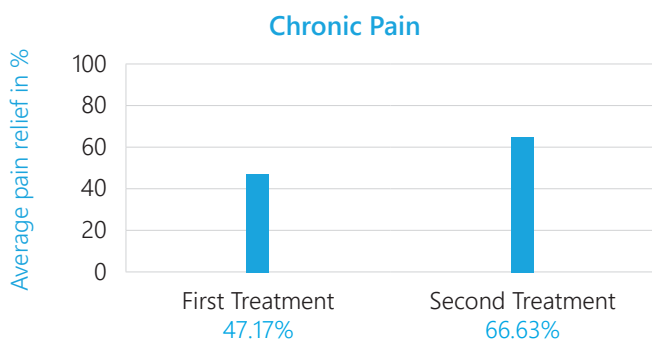
A total of 58 patients were treated initially for acute pain and 36 of them had repeated treatment for the same issue with the following results regarding average percentage of pain relief after the initial treatment and total relief after repeated treatments, respectively. With this number of subjects, the results can be considered as significant.



Chronic Pain

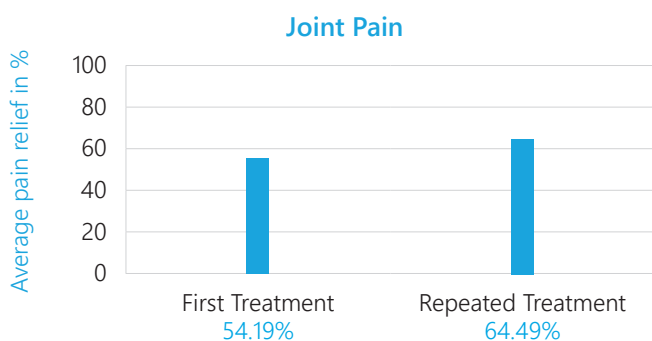
A total of 123 patients were treated initially for chronic pain and 90 of them had repeated treatment for the same issue with the following results regarding average percentage of pain relief after the initial treatment and total relief after repeated treatment, respectively.

With this sample size, the results can be considered very indicative.



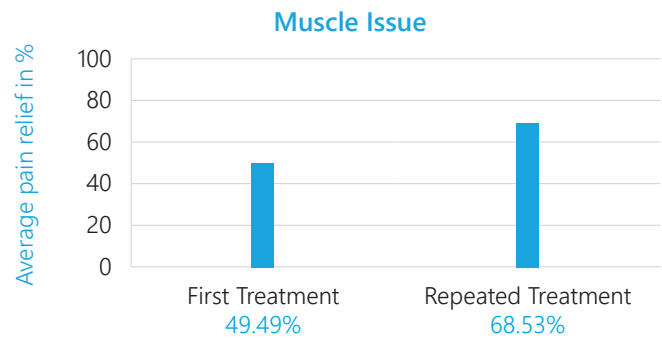
Joint Pain

A total of 38 patients were treated initially for joint issues and 27 of them had repeated treatment for the same issue (results shown in the graph above). With this sample size, the results can be considered relevant.



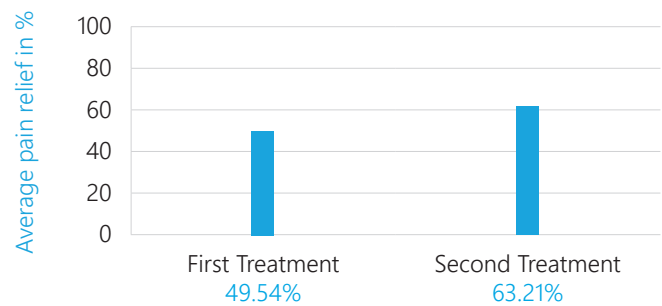
Muscle Issue

A total of 34 patients were treated initially for muscle issues and 13 of them repeated the treatment for the same issue with the following results regarding average percentage of pain relief after the initial treatment and total relief after repeated treatment, respectively.

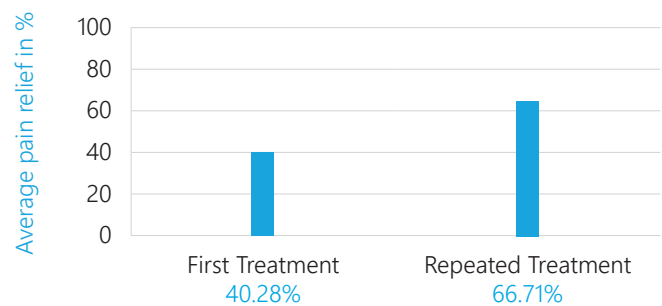


With this sample size, the results can be considered relevant. Other treated issues have been evaluated as well, but the number of treated patients is low, so that only trends can be observed. Positive trends could be observed for the following issues.

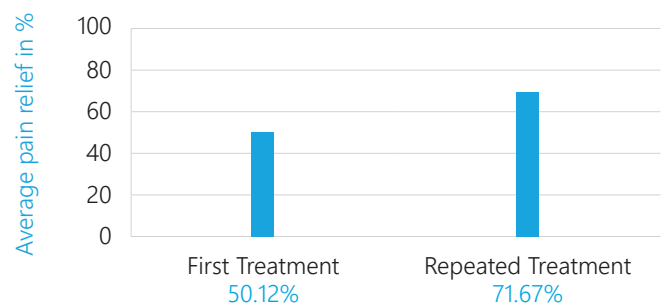
Stress



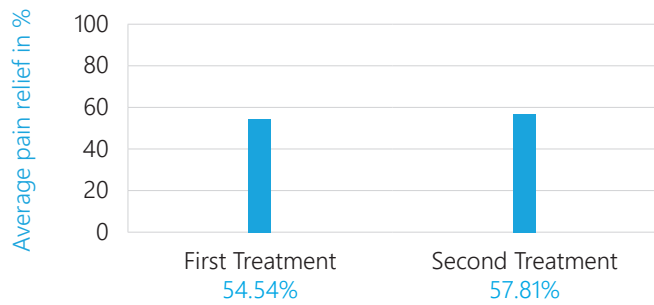
Energy Issue



General Rejuvenation



Digestion



The treatment results for patients having nerve issues, skin issues and bone issues are not as positive as the results for the above-mentioned issues.

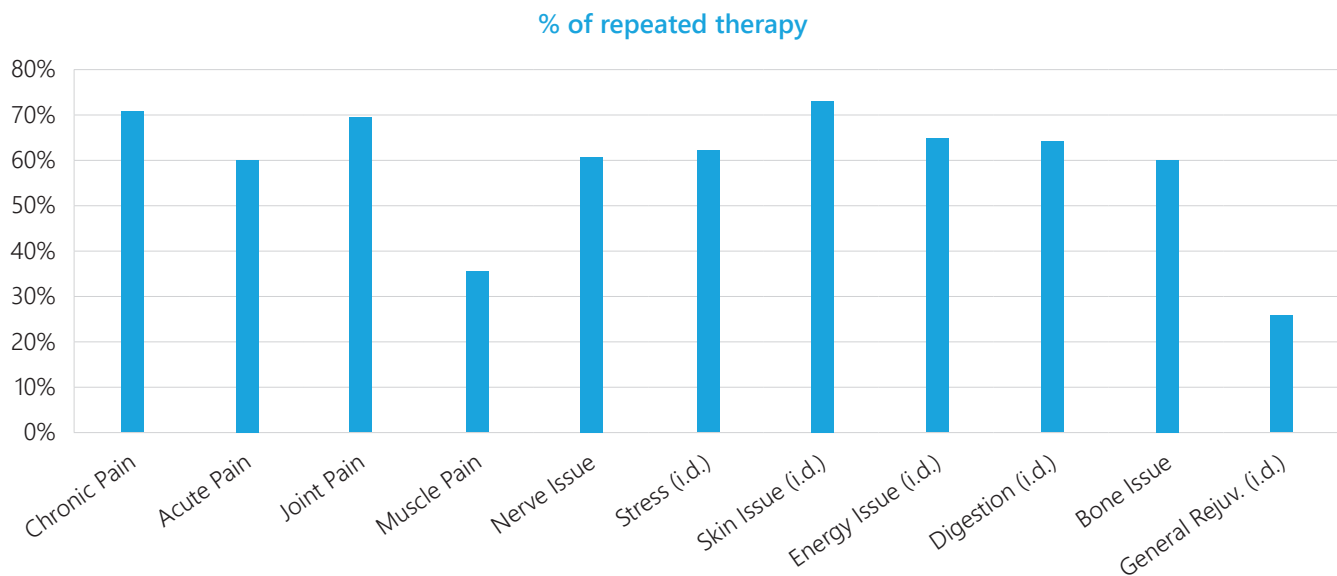
Effect of the therapy on beauty, sleep and memory could not be evaluated due to a low number of treated patients.

To obtain more indicative results, further tests should be carried out for the issues that showed positive trends and relevant results.

Percentage of Patients Repeating the Treatment

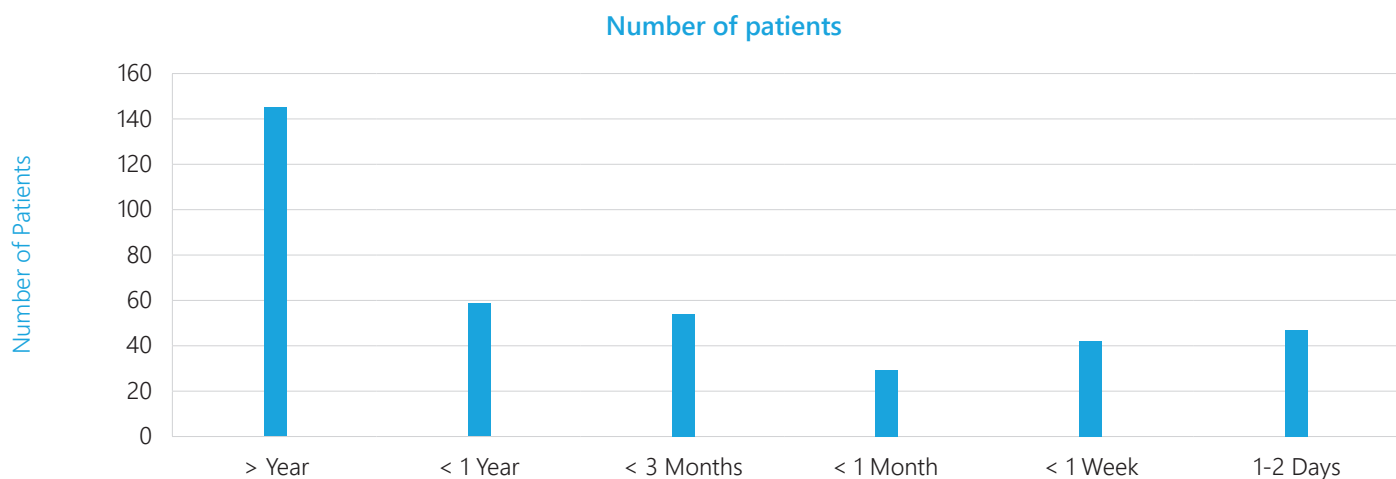
A higher number of patients with longer-lasting issues (chronic pain, joint pain) repeated the treatment than patients suffering from recent pain/issues.

The following statistical analysis regarding issue duration will uncover more precise trends. Most clients presenting for a session had had their symptoms for over 1 year (long term chronic).



Response

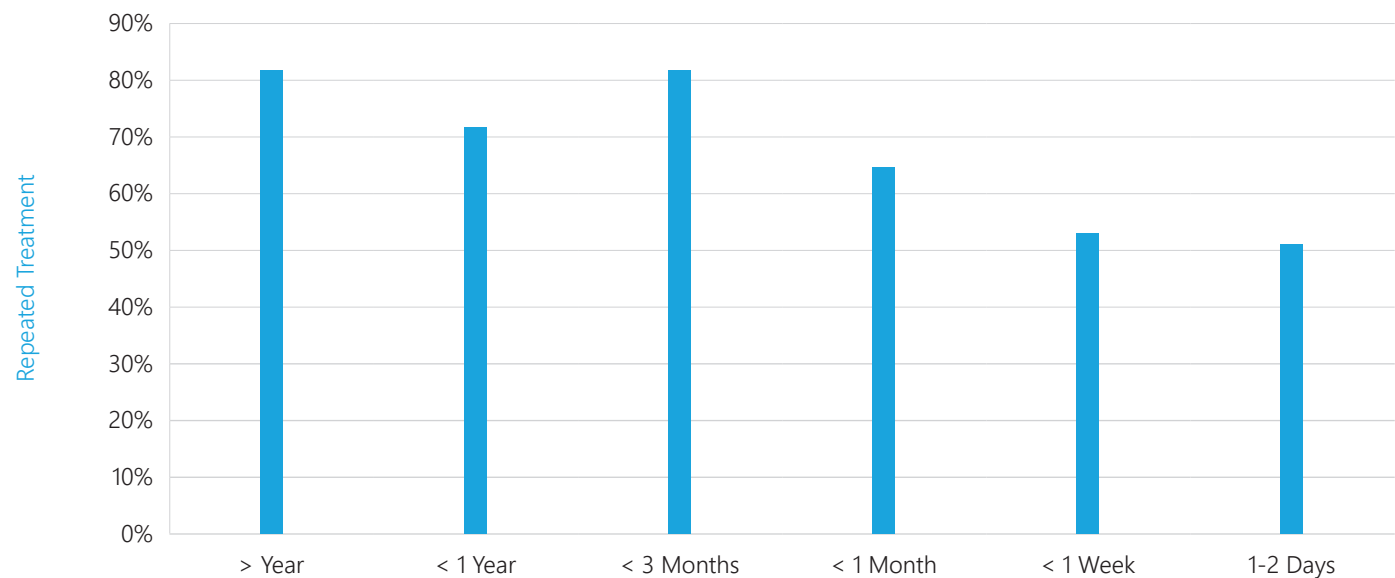
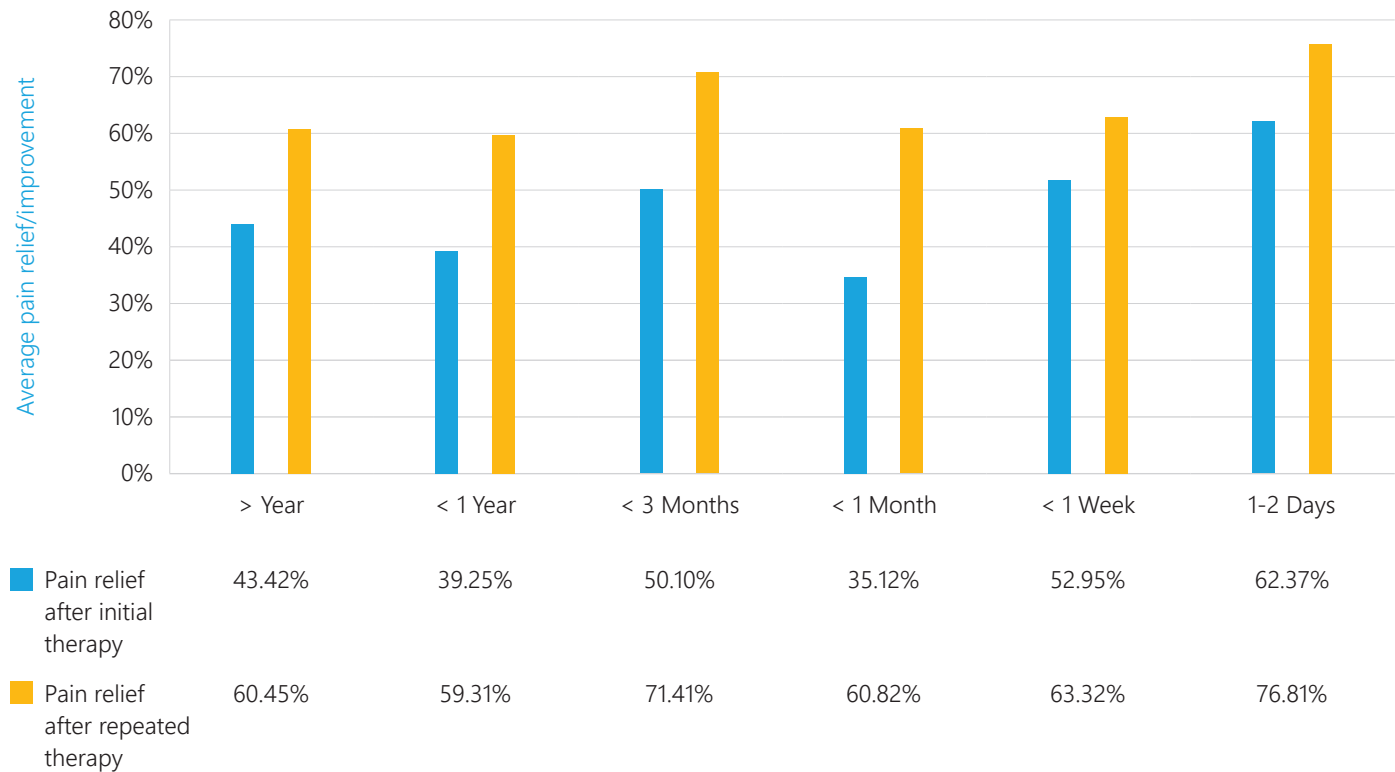
However, regarding the average pain relief/issue improvement, best results can be seen for acute and 'Chronic pain' followed by 'Joint' issues. Looking at a chart of data, it does seem that acute conditions respond positively more of the time. However, this may be due to the lower number of clients seen with acute conditions.



Average pain relief/issue improvement

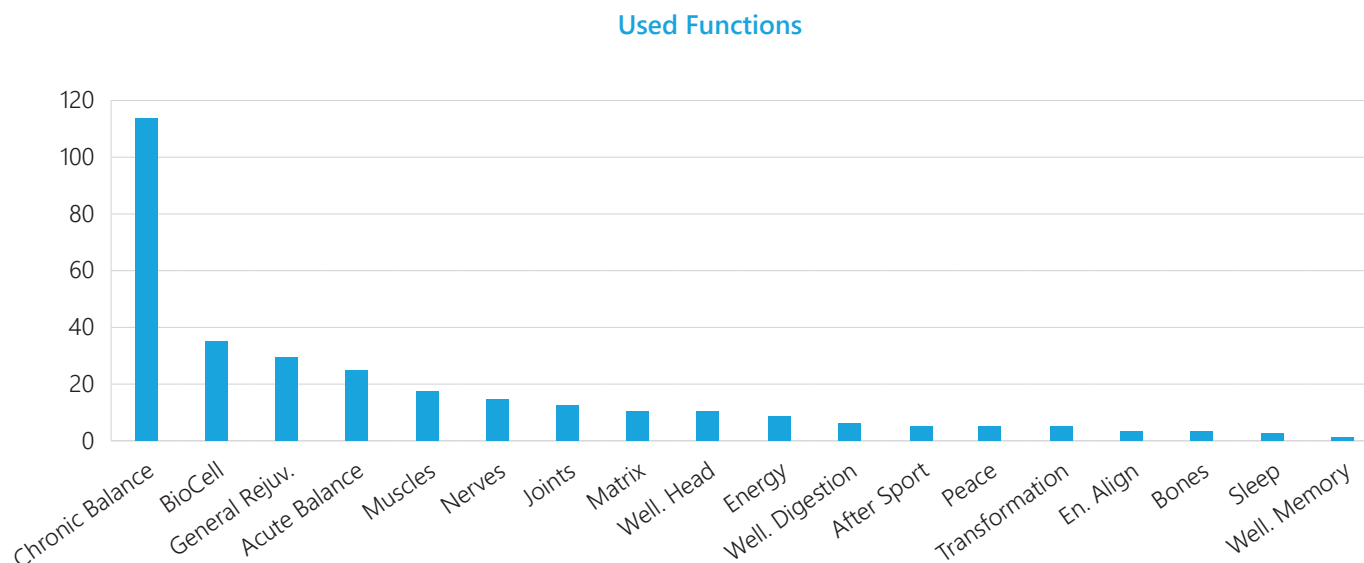
A strong effect of initial therapy for issue duration of less than a week can be observed with little improvement after repeated treatment. As for repeated therapy, a strong effect for issue duration of more than a month compared to initial therapy effect can be observed.

Effect linked to duration of issue



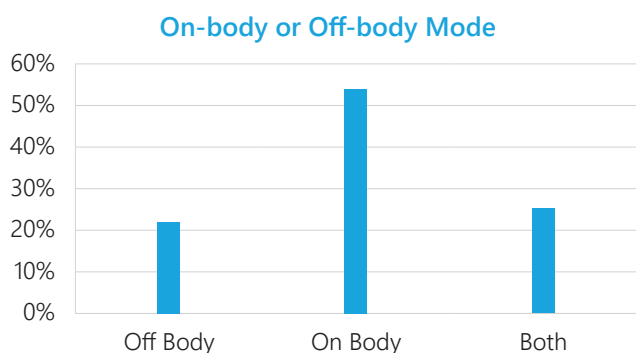
It can be seen that there is a higher percentage of patients repeating the therapy for issues with a duration of more than a month, compared to a lower number of patients repeating the therapy for issues with a duration of less than a week.

Which function was used for the majority of the initial session?



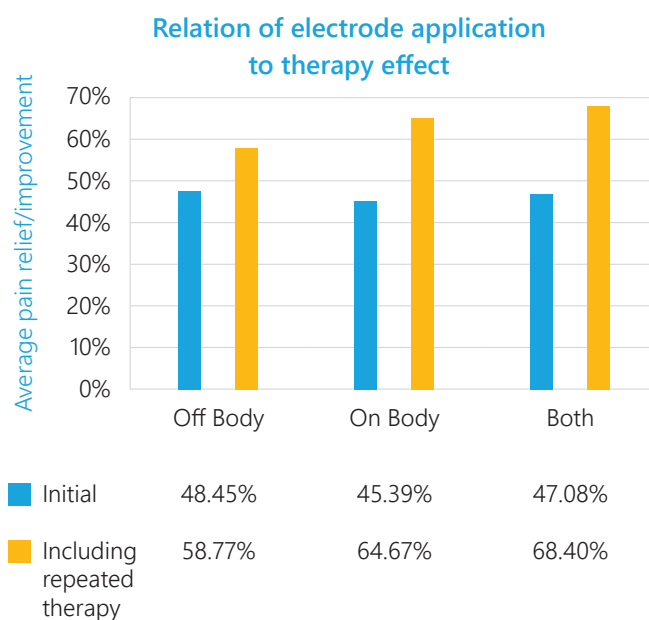
Chronic balance in the 'Physical' menu was used in the majority of cases. This may be due to the way the training focused on this function. Also, most of the practitioner's used a combination of functions, with 'Chronic Balance' being part of the protocol.

On-body vs. Off-body



As can be seen from the above graph, the 'on-body' mode was used most frequently. This may be due to the way the training was delivered. The effectiveness of the modes of treatment was similar with on-body mode being slightly more effective when the results were normalised.

The same pattern as in earlier analysis is visible where the effect of the repeated treatment shows further improvement.

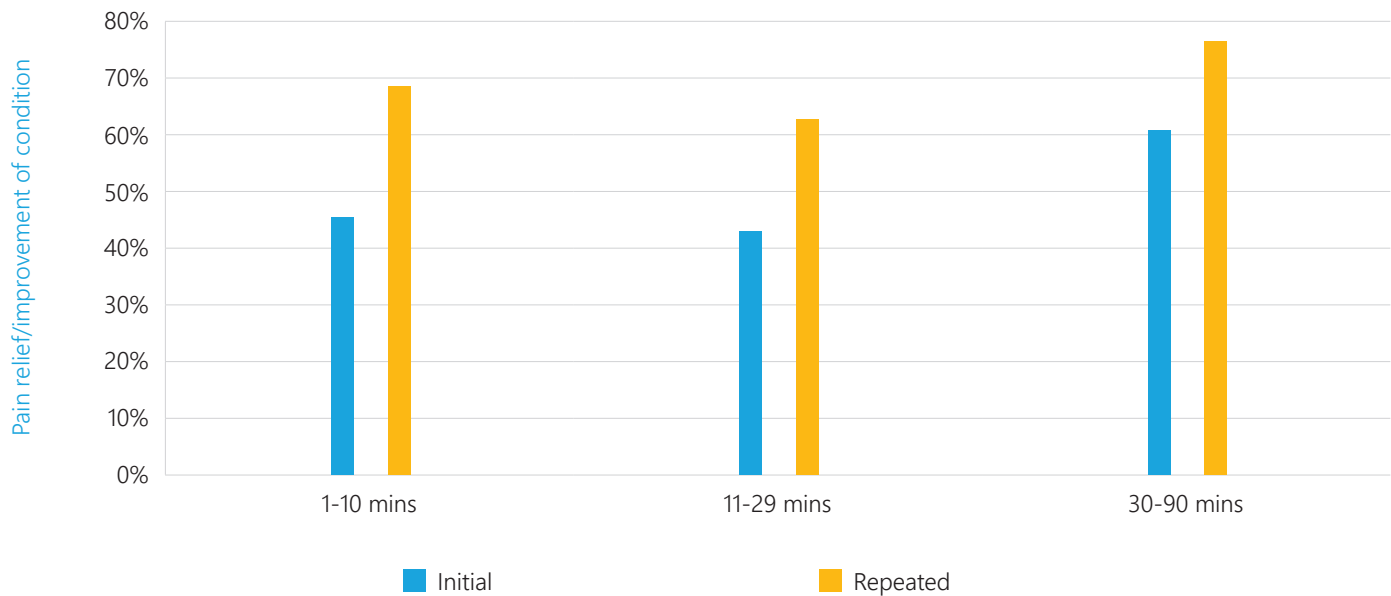


For the initial treatment, results show no difference between different ways of treatment, but for the repeated treatment, a slightly better effect is being achieved if the therapy was based completely on 'on-body electrodes' or, even better, a combination of 'on-body' and 'off-body' electrodes.

Relation of applied NES miHealth therapy duration to therapy effect

The goal of this analysis is to compare the duration of the applied therapy with the resulting effects.

Relation of electrode application to therapy effect



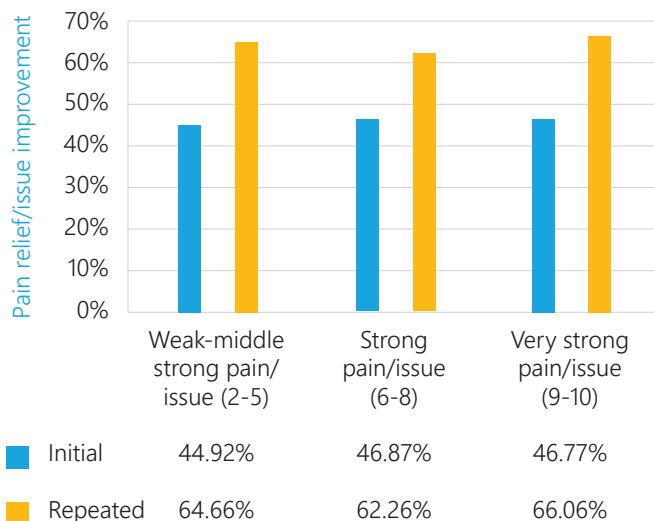
Again, the overall distribution of pain relief shows better results if the patient repeated the therapy compared to results after initial therapy. If the therapy was applied for 30-90 minutes, better overall results can be observed.

Relation of therapy effect to pain strength/issue significance

The goal of the analysis was to compare the effect of NES miHealth therapy in relation to issue/pain strength.

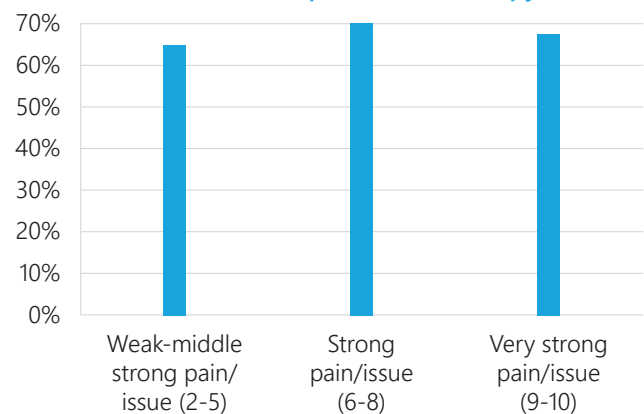
No significant differences could be established. There is a similar effect of the therapy to any kind of pain or on the improvement of any treated issue. Nevertheless, the best effect can be expected treating very strong pain or high-issue significance.

Relation of therapy to pain strength/issue significance



The following chart shows the percentage of patients who repeated the therapy in relation to pain strength. No significant differences can be seen.

Patients that repeated the therapy

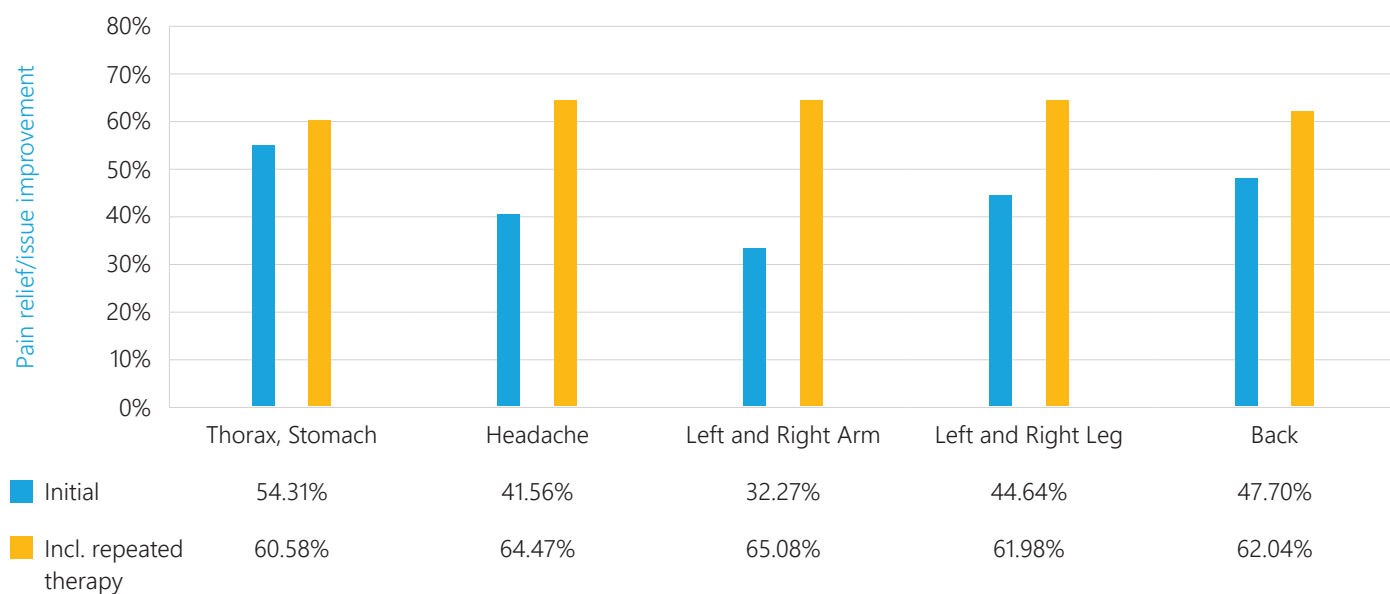


Effect related to specific locations of pain

5 body areas have been analysed:

1. Chest (thorax) & stomach
2. Head
3. Arms
4. Legs
5. Back

Effect of therapy on specific areas

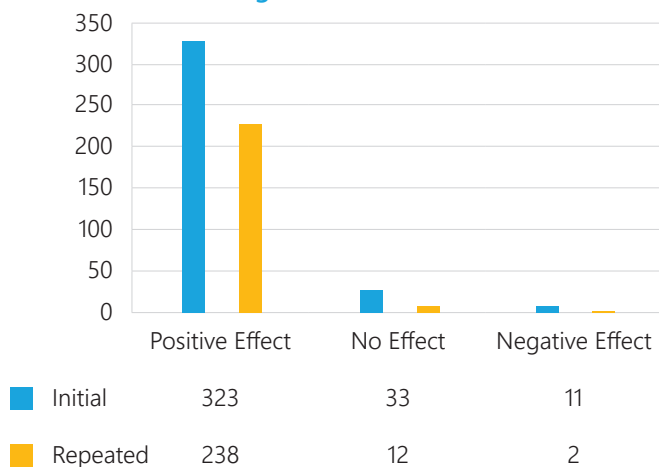


Best results of the initial therapy can be seen for issues with a location on chest and stomach area with notable effects on issues on legs and the back. All areas show significant improvement in total, after repeated therapy with the best results for issues located on the left and right arm.

Does the effect of the treatment last?

When the client comes back for the follow-up session is the symptom reduced or at the same level as when they started?

Number of patients with positive, negative or no effect



Number of Initial consultations: **367**
 Positive effect at Initial: **323 (88%)**
 Negative effect at Initial: **11 (3%)**
 No change at initial: **33 (9%)**

The average percentage of issue improvement before the next therapy is 25%.

Conclusion

The immediate overall conclusion from the study was that the vast majority of clients benefitted from NES miHealth therapy, with many reporting a significant improvement in their conditions after a single session.

With regard to the severity of the symptoms, no significant difference was observed between results on initially low-level symptoms and initially high-level symptoms.

In all cases, an average reduction of the symptoms of over 60% was experienced. After the second therapy session, even more participants – 93% – reported a significant improvement in their condition.

In the study, clients with chronic conditions were also looked at separately and 85% of them reported an immediate positive effect from the therapy.

If you are interested in learning more about NES Health solution and the benefits of informational healthcare, please visit our website at www.neshealth.com

Reference

Author	Title	Journal
PEMF: technology in NES miHealth		
Varani K	Effect of low frequency electromagnetic fields on A2A adenosine receptors in human neutrophils	Br J Pharmacol. 2002 May; 136(1):57-66
Varani K	Alteration of A3 adenosine receptors in human neutrophils and low frequency electromagnetic fields	Biochemical Pharmacology Volume 66, Issue 10, 15 November 2003, Pages 1897-1906
Hansen E.C.	The effect of Electromagnetic Fields on Blood Circulation	Eur J Phys Med Rehab 1993, Vol 3; No1:13-17
O'Kane C.A.J.	The use of Elmedistraal (PEMF) treatment to accelerate healing, reduce pain and oedema in hyper acute peripheral soft tissue injuries. A double-blind randomised study	Dated 11 June 1998. Data held by manufacturer
Kenkre J.E., Hobbs F.D.R. et al.	A randomised controlled trial of electromagnetic therapy in the primary care management of venous leg ulceration	Family Practice, Volume 13 No.3 (1996) pp 236-241
Nilsson L. et Al.	Effect of PEMF vs. placebo on distal microcirculation and release of CGRP in diabetic patients with critical ischemia	Data held by manufacturer
Rena T.	Routine use of Elmedistraal PEMF in Frederikstad, Norway	Dated 22 January 1998. Data held by manufacturer
Ganesan K	Low frequency pulsed electromagnetic field—a viable alternative therapy for arthritis.	Indian J Exp Biol. 2009 Dec;47(12):939-48
Sutbeyaz ST	The effect of pulsed electromagnetic fields in the treatment of cervical osteoarthritis: a randomized, doubleblind, sham-controlled trial	Rheumatol Int. 2006 Feb;26(4):320-4
Binder A	Pulsed electromagnetic field therapy of persistent rotator cuff tendinitis. A doubleblind controlled assessment	Lancet. 1984 Mar 31;1 (8379):695-8
Basset, C.A.L.	Beneficial Effects of Electromagnetic Fields	Journal of Cellular Biochemistry 51:387-393 (1993)
Weintraub M.I.	Pulsed magnetic field therapy in refractory carpal tunnel syndrome: Electrodiagnostic para meters—pilot study	Journal of Back and Musculoskeletal Rehabilitation 18 (2005) 79–83

Author	Title	Journal
--------	-------	---------

Bioelectrical Stimulation: technology in NES miHealth

Cadossi, R. Setti, S.	Low-frequency pulsed electromagnetic fields in orthopedic practice: Bone and cartilage repair	Clinical Biophys., IGEA SpA, Carpi, Italy Aug. 2011
Ahmed, I, Vojisavljevic, V and Pirogova, E	Design and development of an extremely low frequency (ELF) pulsed electromagnetic field (PEMF) system for wound healing promotion	FMBE Proceedings 39, Berlin, Germany, 26 -31 May 2012, pp. 27-30
Kloth, L. C	Electrical Stimulation for Wound Healing: A Review of Evidence From In Vitro Studies, Animal Experiments, and Clinical Trials	(2005) The International Journal of Lower Extremity Wounds, 4(1), 23-44

Imprinting and Water memory: principle of Infoceuticals

Benveniste; Thomas Y, Schiff M, Belkadi L, Jurgens P, Kahhak L	Activation of human neutrophils by electronically transmitted phorbolmyristate acetate	FASEB Journal 13 (1): 33-39(2000)
Davenas, E; Beauvais, F; Amara, J; et al	Human Basophil degranulation triggered by very dilute anti-serum against iGE	Nature Volume: 333 Issue: 617 6 Pages: 816-818 DOI: 10.1038/333816a0 Published: JUN 30 1988

Luc Montagnier:

In 2009, Montagnier published two controversial research studies which, if true, "would be the most significant experiments performed in the past 90 years, demanding re-evaluation of the whole conceptual framework of modern chemistry."

Luc Montagnier, Jamal Aissa, Stephane Ferris, Jean-Luc Montagnier, Claude Lavallee	Electromagnetic signals are produced by aqueous nanostructures derived from bacterial DNA sequences	Interdisciplinary Sciences: Computational Life Sciences June 2009, Volume 1, Issue 2, pp 81-90
L. Montagnier, J. Aissa, E. Del Giudice, C. Lavallee, A.Tedeschi, and G. Vitiello	DNA waves and water	http://arxiv.org/PS_cache/ arxiv/pdf/1012/1012. 5166v1.pdf

Random Event Generators/Frontier Science: technology in NES ProVision

Robert G. Jahn, Brenda J. Dunne	Margins of Reality: The Role of Consciousness in the Physical World	ICRL Press (6 April 2009)
------------------------------------	---	---------------------------