

can do Limbic drainage from Pelvis Consciousness
Process Centers on Limbic system

Limbic System

Introduction

With the limbic system: knowing that part of the diagnostic process is Mapping and NFP, if it inhibits a lot of the other process centers, etc. then you know you have a problem with the limbic system. If you think that someone can have the limbic system mapping positive and not have behavioral problems, that's just not possible. When you're assessing and treating these subcortical structures, keep in mind that after you treat the person, they have to go home. It's about life and what's happening in their life and what are they doing to their life. With the limbic system, you're always looking at behaviors, stress level, organ function. If your limbic system was off, not well balanced, you could have someone with chronic total body fibromyalgia and maybe it's because they have toxicity in their tissues but also just because their limbic system is firing. Do you really want to go in with MFR first if their limbic system is firing? It's a systems problem, not just a regional problem. When you have the subcortical piece there, you can always make that differentiation. Are you going to get anywhere if you first go in through the MFR door? Think of parasympathetic and sympathetic imbalances. Think of chronic disorders and disabilities. It would be about stress levels in any systems. It's about survival. The limbic system comes up in absolutely everyone today. Before September 11th, maybe people could have suppressed it. But today, it's not possible with all the news today about Osama, the Iraq war, etc. It's about inbred protective modes. The limbic systems today are going to be more and more firing and causing more and more pulmonary disorders and digestive problems and visceral problems that were not so common yesterday.

There are only so many times that you can say that you won't watch tv and read the newspaper. You can't just lock yourself in your home and if you did, your limbic system would fire even more because then you are really in hiding. You really cannot just leave it. We suggest to you strongly that you get used to looking closely at the limbic system. Depending on who your patient population is, we suggest that you start to pull in more and more material on how to affect the limbic system. Consider the Limbic Reaction Response course and the Adrenals course and Letting Go of Fear.

How To Use Process Centers with the Limbic System

1. The left side is about an excess of negative energies
2. The right side is about a depletion of positive energies
3. Often limbic system motility is affected by Process Centers
4. Often Process Centers are affected by the anatomy, physiology, mechanics, and energies of the limbic system.

(L) Sided energies too much bad energies (excess of negative addict co-dep dysfunction system)
(R) Sided depletion of good -hope, consciousness

Limbic System Hand Placement / Access Anatomy

(Netter 106b)

To access the limbic system, placing a hand at the following (optional) areas:

*— look for the deep
mobility upside
down ♀.*

1. Along the length of the parietal bones
2. Lateral to the length of the sagittal suture, superior to the limbic system

While palpating the limbic system at these anatomic sites, connect the limbic system to the following: Synchronizers, Hypothalamus Regulation Mechanism Sites, and Reference Point. They will facilitate the Limbic System Cranial Process Centers.

The limbic system is a group of neural structures. There is a right and left limbic system. There is reciprocal motion between the right and left sides. Each side has the following neural structures:

1. Mammillary body
2. Columns of fornix
3. Body of Fornix
4. Crura of Fornix
5. Fimbria of Hippocampus
6. Hippocampus
7. The Commissure of Fornix is the interface between the two bodies of the fornix. (The amygdaloid bodies are part of the basal ganglia, and are situated close to the hippocampus.)

Limbic System Motilities

The limbic system has reciprocal motion between the right and left sides. There is a 3-planar motility: sagittal plane motility is 75%; coronal plane motility is 20%; transverse plane motility is 5%. There are 3-4 cycles per minute.

There is a very close inter-relationship between the limbic system and the basal ganglia. The limbic system has a range of survival mode through ecstasy mode. The basal ganglia are the motor defense. The basal ganglia are the extra-pyramidal tract. Therefore, they defend via influence on the autonomic nervous system tissues and structures. Sympathetic dysautonomia is a prime example of basal ganglia dysfunction, yet the basal ganglia receive the knowledge to incorporate defenses from the limbic system. When there is no requirements for defense, because the limbic system is in ecstasy mode rather than survival mode, then the basal ganglia are supportive of "parasympathetic dominance".

Often the basal ganglia and limbic system tissues are adhered and there is difficulty in differentiation of mobility and motility. This is not a healthy situation.