



Information given to Life-Work Potential by a Bioresonance doctor

“Please see the list below. I put A or Ai beside each item. I assume that you'd be using the kit to assist weight loss in your patients. You can use the programme 191Ai or 192A as appropriate. You simply put the ampule in the input cup and run programme 191Ai or 192 A whichever is appropriate. This is a guide only. Some of the ampules are quite straightforward considering their role in physio-pathology/endocrinology ie Leptin (A) and Ghrelin (A) and so on. But, some requires a careful and comprehensive assessment/ testing with (kinesiology/tensor/EAP/ formal blood test) to determine the need of the individual patient such as Thyroid hormones that may be appropriate to stimulate or not whilst assisting patient's weight loss.

Weight Management Test Kit

WT 01 Anandamide - Ai
May increase appetite.

WT 02 Arginine- A
An amino acid. Involved with glucose control mechanism in blood; enhances fat metabolism; involved in insulin production; stimulates human growth hormone.

WT 03 Carnitine - A
An amino acid. Major role in transferring fatty acids into cells where used as energy sources; mobilising fatty deposits in obesity.

WT 04 CART- A
Modulates the action of leptin and neuropeptide Y and so reduces appetite.

WT 05 CCK / Cholecystokinin -A
Stimulates a feeling of satiety; may regulate feeding as a “stop eating” signal.

WT 06 Corticotropin Releasing Hormone / CRH -A
Involved in the regulation of food intake.

WT 07 Cortisol / Hydrocortisone -A
The principal glucocorticoid; increases blood glucose levels by increasing cellular utilisation of proteins and fats as energy sources thus conserving glucose; stimulates liver cells to produce glucose from amino acids and fats.

WT 08 Cyclic AMP / Cyclic Adenosine-3',5' - monophosphate -A
Causes adipose cells to break down triglycerides and release fatty acids more rapidly; stimulates thyroid cells

to secrete more thyroid hormone.

WT 09 Dipeptidyl Peptidase IV -A
Arrests biological activity of GLP1 and Substance P.

WT 10 Epinephrine/ Adrenaline - A
Slows digestion, increases blood sugar.

WT 11 Exendin (9-39) - Ai
Reduces glucose levels; competes for the same brain receptors as GLP1 and so blocks the effect of GLP1 and stimulates appetite.

WT 12 Galanin - Ai
Stimulates the appetite.

WT 13 Ghrelin - Ai
Increases appetite; may be a hormonal link between stomach, hypothalamus and pituitary and so regulate energy balance; regulates growth hormone secretions; may signal to the hypothalamus when an increase in metabolic efficiency is necessary.

WT 14 Glucagon - A
Raises blood sugar levels by accelerating breakdown of glycogen into glucose in the liver, converting other nutrients into glucose in the liver, and releasing glucose into the blood – opposes the action of insulin.

WT 15 Glucagon-Like Peptide 1/GLP1 -A
Stimulates production of insulin; inhibits production of glucagon and gastric emptying; reduces appetite; lowers blood glucose in people with diabetes.

WT 16 Glucocorticoids -A
Conversion of non-carbohydrates into energy.

WT 17 Glycogen - A
The principal carbohydrate storage material in the body; plays an important role in controlling blood sugar levels.

WT 18 c -A or Ai
Involved in converting glycogen to glucose.

WT 19 Glycogen Synthase -A or Ai
Involved in converting glucose to glycogen.

WT 20 Growth Hormone Inhibiting Hormone / Somatostatin -A
Inhibits secretion of insulin and glucagons and slows absorption of nutrients from the gastro-intestinal tract.

WT 21 Human Growth Hormone / Somatotropin -A
Helps to maintain muscle and bone mass and promote healing of injuries and tissue repair; speeds up the breakdown of liver glycogen into glucose; excess production may cause diabetes mellitus.

WT 22 Insulin -Ai
Decreases blood sugar levels.

WT 23 Leptin -A
Released by fat cells as they synthesise triglycerides; reduces appetite; non-insulin dependent diabetes.

WT 24 Melanocyte-Stimulating Hormone / MSH -A
Suppresses appetite.

WT 25 Neuromedin B -A
Involved in blood glucose control; suppresses the appetite.

WT 26 Neuropeptide Y -Ai
Stimulates appetite; causes increased storage of ingested food as fat; reduces energy expenditure.

WT 27 Orexin B - Ai
Generated when blood sugar levels drop, so acting as a trigger to eat.

WT 28 Pheylalanine -A
An amino acid. Precursor of tyrosine and therefore dopamine, norepinephrine (noradrenaline) and epinephrine (adrenaline), so affects blood sugar levels and fat metabolism; necessary for thyroid; involved in weight control.

WT 29 Prostaglandin E2 / PGE2 -A
Acts on adenylate cyclase to enhance the production of cyclic AMP.

WT 30 Protein Tyrosine Phosphatase / PTP1B -A
Inhibits signalling of leptin and insulin1; may explain resistance to leptin and insulin; likely to be important in obesity and type 2 diabetes; drug research now being carried out to find drugs to inhibit PTP1B.

WT 31 Reverse T3 / 3,3',5'-Triiodothyronine - A
Reverse T3 and T3 are secreted in an inverse relationship allowing the thyroid to adjust the amount of thyroid activity; blocks the action of T3 by binding with the receptor sites.

WT 32 Serotonin - A
Decreases carbohydrate cravings; provides a feeling of fullness; enhances mood.

WT 33 Thyroid-Stimulating Hormone / TSH - A
Stimulates thyroid gland to produce its hormones.

WT 34 Thyrotropin Releasing Hormone / TRH -A
Stimulates anterior pituitary to secrete TSH.

WT 35 Thyroxine / Tetraiodothyronine / T4 - A
Converted into T3; increase rate at which cells release energy from carbohydrates.

WT 36 Triiodothyronine/T3 -A
Regulates metabolism by stimulating carbohydrate and fat breakdown.

WT 37 Urocortin Inhibits appetite.

WT 38 Val-Pro-Asp-Pro-Arg -A
Research on rats indicates that this is an appetite suppressant.

Pathology/Histology Kit

the healthy tissue should be given to patient as 192 (A) , pathological ones colitis etc should be given as 191 (Ai) as part of the treatment.