Dr. Mercola: Welcome everyone. This is Dr. Mercola. So we’re here to start, and I’m just delighted that you’re able to participate in our first teleclinic seminar with Gary Craig, who is the Founder of EFT, and he’s going to be discussing his background. But I wanted to give you a little bit of history about my experience with EFT and how I came to first use EFT.

I learned energy psychology techniques. One of the first, and most prominent one, was Thought Field Therapy, and that was developed by Dr. Roger Callahan in the early ‘80s, and I learned that in the late ‘90s and was very excited about it because of its potential. But when I started to use it in my office on a practical basis, I found that it was relatively time consuming and cumbersome to get consistent results; so I abandoned it after a few weeks of using it. But then several years later, when I was teaching – actually, not teaching, but participating – in an NST, Neurostructural Therapy, course, I met another student there, who was an acupuncturist/pharmacist from Canada, who encouraged me to consider EFT, and I’m so glad I did because it really has been one of the most profound and useful tools I’ve ever encountered in my medical experience. If I could only use one tool, or be restricted to using one tool, there’s just no question in my mind that, that single tool would have to be EFT because it’s one of the most effective treatments and systems I’ve ever seen to address the underlying stresses that contribute to almost all physical diseases.

So I’m very excited to participate in this system that can help you start to learn some of the basics so that you can apply it to yourself personally, and even more excited to have the Founder of EFT, Gary Craig, with us so that he can explain to
everyone how to use it in an effective format. So Gary, why don’t you give a little history of yourself and take it from there.

**Gary Craig:** Sure. Well, like you, Dr. Mercola, I learned the basics of this from Dr. Callahan, and also like you, I’ve found it somewhat cumbersome to use, since my background is not one of being a psychotherapist, although I’ve been fascinated by the field since I was age 13. I’m an engineer, and I took a look at this process. You know, we need to take this apart and put it back together again in a more simplified, refined way. So that’s what I did, and found it works better, actually, than what I had learned previously from Dr. Callahan. That is not to denigrate what he was doing. I think he needs great accolades for all of this. But my way of refining it ended up being a manner, a way of using this, which was highly useful for people, as you found, Dr. Mercola. You don’t even need to be a professional therapist to use it. It is designed for the layperson; the beautician in Iowa who has a headache can certainly use this and use the Basic Recipe, which we will teach here, very well.

So I began using it, and I started off just, I simply thought that I could put this out, and we’d have 30, 40 people using it, and I could retire, and maybe people would just call me and ask me for some supervisory work. Well then, it turned out [laughter] we’re over 100,000 currently. So it’s really grown. But anyway, here we are now with lots of people using it worldwide.

**Dr. Mercola:** Gary, would you say that it’s safe to say that EFT is probably the most commonly used energy psychology technique?
Gary Craig: Oh, yeah. Of all the various energy psychology techniques out there, EFT is larger than all of them put together, at least as far as the number of people using it.

Dr. Mercola: That was my understanding, but I wasn’t sure. Well, maybe you can go into a little more of your history and how you started teaching it and your experience with it. If you could expand on that a little bit more, it would be great.

Gary Craig: Sure. I began giving workshops in it. At first, we were lucky to have five people show up, and some of those were our friends and relatives. Most people looked at it askance, with great, skeptical eyes. Little by little, gradually though, as people started using this and letting it get into their belief system, it’s grown and grown and grown, and now, our audiences are in the hundreds, and we do that rather easily. We also have people giving workshops themselves throughout the world. So it’s grown on that basis.

Dr. Mercola: Excellent. So with this introductory teaching event that we’re having today, what would you think is reasonable for the listeners to expect to achieve from their participation?

Gary Craig: Well, what we’re going to do is give everybody the basics, and when we’re done, all the listeners here should be able to take these basics and apply them to themselves, to their family members, to friends and things like this and get a good percentage of results; much higher than you would if you didn’t know how to do this. In many cases, they will find that they will get results, like, headaches, for example, that may just go away much better than using Tylenol or some other kind of medication.
for it. Emotional issues - they’ll just simply fade – that have been bothering people for years.

That doesn’t mean everybody will get a hundred percent of everything they try. There are some sophisticated uses that go along with this, and there are some cases that are more complicated than others. But what they will get is the Basic Recipe, how to use it, some sophistication along with that, so they can go forward and use this in everyday practice.

I must emphasize though, this is going to be introductory. You’re really going to learn the basics here. The basics are simple; anyone can learn them. We have sixth graders, 12 year olds, that are using the Basic Recipe effectively. But if you really want to get into using it in sophisticated ways and put it through its paces, we have some DVDs that are on our website. I’ll mention that now; emofree.com (spelled e-m-o-f-r-e-e).com. Emofree stands for emotional freedom. These resources are yours to peruse, and with them, you can get more and more sophisticated with what you can do with this process.

**Dr. Mercola:** Excellent. Well, can you expand on some of the different items and problems that people can use this technique for?

**Gary Craig:** Sure. One of the striking things about this is that it can be used for any, and let me underline, any, emotional or physical issue you can name. I have yet to find one where I would say, “Oh, you can’t use it for that”. We’ve had results on just about anything that’s come across. That doesn’t mean we’ve cured everything right out of the box in one session, in a few minutes. But we almost always get some kind of result with just about every issue, and some of them, as I said before, will take more
sophisticated uses of this. But what’s striking about that is, we had been conditioned by Western healing techniques to think that for every ailment we have there’s a specific remedy for it. For example, as I mentioned, a headache, you tend to think, well, aspirin or Tylenol or something like that. We’ve been conditioned like that. If you have depression, we are conditioned to think, well, okay, we need Prozac or we need Zoloft or some other kind of medication, and on it goes. We’re used to saying, well, okay, I have ailment X, and you look around for remedy X for that. We’re breaking out of the box here because we have the same tool, the same basic idea, is used for everything, emotional, physical or otherwise, and that’s one of the most stunning finds here.

**Dr. Mercola:** It’s certainly a stark contrast to the conventional medical paradigm that seeks to use drugs and surgeries as the primary tools and solutions for almost all of the diseases.

**Gary Craig:** Yeah. I know.

**Dr. Mercola:** It’s a lot more expensive, and there are a lot more complications, side effects and risk.

**Gary Craig:** Sure. And that’s one of the difficulties people have when they first come across EFT because they’re so conditioned with the other beliefs that they just don’t realize all they can do with this. I’ve had some people who will get completely over a phobia, for example, and they’ll get over it in minutes. No longer are they afraid of going up high. In fact, they even enjoy the experience. But then, they’ll turn around and not realize they could also use it for grief or for a backache or for anything else that may be bothersome, because they just don’t realize they can do that. It takes quite a bit of
training and quite a bit of experience with this before you really get that we can use this on just about everything.

**Dr. Mercola:** Yeah. I think that’s a really powerful statement, and one that almost can’t be repeated too often.

**Gary Craig:** Um-hmm.

**Dr. Mercola:** Because as you mentioned, it’s such a startling contrast to our traditional approaches, that you can use it for almost anything, and it doesn’t hurt to try, especially since it only takes a few minutes.

**Gary Craig:** Sure. And it doesn’t do much in the way of harm. You know, you’re just sitting there tapping on various parts of your body. I mean, how harmful is that? We’re not taking medications. We’re not invading the body with surgeries or anything like that. Anyway, quite remarkable.

One of the things I’d like to emphasize to our listeners is that my way of presenting a clinic like this is to do it in a customized way, which means I’d love to hear your questions as we start to unfold this process. So if you’ll call in, that way, I’ll know what I’m not covering as well as I could or where I might expand, so I can customize this to you, and I’d love to hear from you just to talk to you. I enjoy the communication with an audience. So let me just encourage you to start calling in anytime you wish if you have a question.

Another thing I want to mention, Dr. Mercola, is we have this syllabus, which you put forward, and I think most people probably have that in front of them; it’s downloadable from your site. I’m going to be following that syllabus here through it, but not necessarily in the order that is there. This syllabus is sort of my notes for things to
cover, and I may find that I’ll shift from one subject to another in time, but they’ll all get covered.

The other thing that I will emphasize to the listeners is you should have the EFT Manual. It would be helpful if you had it in front of you. That was one of the downloadable things you could get as you registered here for this teleclinic. Starting on page 20, that’s where the Basic Recipe starts, and that’s going to be the centerpiece of what we’re going to do a little bit later here. So you might want to just have that page available, or that section available, starting on page 20.

One thing I’d like to do, Dr. Mercola, is expand a little bit on your earlier question about what one could expect. I’m presuming that the audience we’re talking to is in two categories. One is basic newcomers to this process, and the other are people who’ve been around this who would like to get some clues, just by listening in, as to how to present EFT to others. But for the newcomers that we have, let me suggest that once you use, or learn, this Basic Recipe, we find newcomers easily get a 50% success rate when they start using it, even though they don’t have much sophistication with it. But let me describe what I mean by that. If you were to go down to, let’s say, a shopping mall, and just take a cross-section of your locality, with normal people walking around, and take ten people and ask them, “Well, what bothers you right now?”, and they’ll say, “Well, you know, I have a breathing problem” or “I’m angry at my boss”, and all these things are going on, and you were to apply EFT there, knowing nothing more than your Basic Recipe, 50% of those people, easily, will either have a complete cessation of that issue within a few moments, a few minutes of using EFT, or they would have a noticeable improvement.
Now, once you get more sophisticated with this, then that number goes up to 80%. It goes up to 90%. I’ve done this for entire audiences of people, and I didn’t even know what they were dealing with - they just picked their own issue – and with enough thoroughness, we’re getting 90-95% of people that report noticeable results. So that’s the kind of power here. But I do want to emphasize that to get to the higher levels, you really need our DVDs and advanced training over and above this introductory teleclinic.

**Dr. Mercola:** Yes, and we also have additional teleclinics coming up that this will be a primer for, and this training would also serve as a useful tool for participation in those teleclinics.

**Gary Craig:** Sure. It’s like a foundation, I think.

**Dr. Mercola:** Right. Absolutely.

**Gary Craig:** One of the interesting things, also, that we can do with EFT is we can deal with sports performance, business performance, sales performance and things like that, which may not seem to be like a physical or emotional ailment, but indeed, you ask any major athlete if they could do any better still – I’m talking about the best in the world – and they’ll all tell you, “Yes!” And if you ask them, if you get underneath all that and ask them, “Well, what’s keeping you from your doing any better still?”, well, they won’t tell you it’s a physical thing. They’ll say, “It’s in my head. It’s the mental part of the game. It’s the emotional part of it”. There are some of these sports teams that give huge salaries to sports psychologists to help out with the mental side of the game, and yet, EFT can run circles around conventional psychology that’s being used in the sports area. So that’s one of the huge areas that we can use this for.

[cross-talk]
**Dr. Mercola:** I think it’s also particularly useful for the goal treatments. Personally, EFT has been most powerful in my own life for that, since I've been relatively healthy and not a professional athlete. That has been enormously useful for achieving a whole variety of different goals that I’ve sent for myself, and successfully implementing them.

**Gary Craig:** Sure.

**Dr. Mercola:** So I'm really excited about that potential.

**Gary Craig:** Well, you also use it with your patients for dieting issues. It’s one thing to talk about getting the right diet, because that will solve a lot of areas all by itself, as you well know.

**Dr. Mercola:** Right.

**Gary Craig:** But getting them to actually not eat the chocolate cake [laughter] and so on, the nachos and all the stuff they shouldn’t be putting in their body, is another thing still. You use it to help people with their dieting. Do you not?

**Dr. Mercola:** Oh, I absolutely do use it routinely for that purpose.

**Gary Craig:** Um-hmm. An interesting thing is EFT will often work where nothing else will. We find that it's very difficult for someone, let’s say, from the medical profession who has been trained in one direction, to take a look at what we’re doing here and be able to explain or comprehend what’s going on. An example of that would be lactose intolerance; people who cannot consume milk products. There’s not supposed to be the necessary enzymes in the body, for those who have this problem, to digest that. And yet, we’ll do EFT, and darned if they’re not able to consume these products without having all the gastrointestinal problems and so on. We do that with
carpal tunnel. We do it with migraine headaches, and it goes on and on and on, the kind of things that “aren’t supposed to happen”, from a medical point of view.

Usually, everything is done quickly, although some things take more sessions than others. It’s often long lasting. In fact, if something “comes back” – I’m speaking here primarily of the emotional issues – if an emotional issue comes back; it usually does not because that particular issue came back because another aspect of it showed up that makes it seem like it came back. Let me give you an example of that. I had a case here a while back – this was a few years ago – actually of a lady that had a trauma from an accident, and so I asked her what bothered her about the accident. She said, “Oh, the headlights, the headlights! I can still see the headlights coming at me”. And so we went tap, tap, tap for the headlights, using EFT, and I then asked the wrong question. I said, “Well, how is the accident now?”, and she said, “Oh, it’s no better! It’s no better!”, and I said, “Oh, okay. Well, what’s going on?”. She said, “The screams in the car! I can still hear the screams in the car”. Well, see, that’s a different aspect than the headlights. I asked her about the headlights, and she waved those off like they were nothing! [laughter] Okay? But yet, here came the screams in the car; to her, it’s the same thing. And so that would be an example of something that “comes back”, but it really didn’t come back. It means there’s a piece of it we didn’t take care of in the first place, and that, again, has to do with the sophistication of this.

One of the nice things about this is that it can be self-applied. That is not to suggest that you’ll never need a psychotherapist or a doctor or anything else again. I’m not suggesting that at all because there are some sophisticated uses here, where somebody else’s experience can be vital. But for a lot of things, if you just learn the
Basic Recipe and apply it, oh, marvels happen, and we have reports upon reports upon reports on our website, as you well know.

**Dr. Mercola:** Well, absolutely, and I’ve had hundreds and hundreds of our own patients, and we use it as a mandatory participation in patients in our own clinic, that they are required to go through this process because most all health challenges are related to this.

**Gary Craig:** Sure.

**Dr. Mercola:** And the results that they will achieve, not only with the therapist, but by themselves at home, are really just quite profound and remarkable.

**Gary Craig:** Um-hmm. Well, with that background and foundation in mind, I think maybe we ought to, I want to, get into a little bit of the theory of EFT. I want to get to the Basic Recipe.

**Dr. Mercola:** I have one more question on the preface to the introduction and the background.

**Gary Craig:** Sure.

**Dr. Mercola:** There’s a large number of patients I have in my clinic, and then also that come to the website, that have a fundamental Christian perspective, and there have been many people who question how EFT might integrate with that philosophy, and I’m wondering if you can just share your insights on that.

**Gary Craig:** Well, I happen to be an ordained minister myself, and it’s my view that EFT actually enhances just about any spiritual pursuit you can find. The reason I say that is, behind just about any spiritual discipline that I’ve ever come across is the fundamental nature of personal peace, forgiveness and this kind of spiritual awareness.
that is the goal of many of these things. So if you’ll think about it for a moment, if one has a spiritual goal of forgiveness, it’s one thing to say, “Well, okay. I forgive my abusive father”, for example. It’s one thing to say that, but to really have it happen, that’s a challenge, and so when we come along with something like EFT, which can assist the area of actually having forgiveness – and it does that by way of taking all the sting out of any abusive issues that may have happened in that example – you end up, when you don’t have that sting, it’s so much easier to yes, forgive, to yes, look at it through a different set of glasses and to yes, have more spiritual awareness about it. So I consider EFT actually to be a stepping stone, a step ladder, if you will, towards God. Properly used, it’s a way to enhance just about every spiritual discipline I’ve come across. Does that answer the question well, or would you have me expand on it?

Dr. Mercola: No. I think that’s a very good response, and I think it would help many of our listeners put that into a better perspective.

Gary Craig: Okay. Alright.

What I’d like to do now, with all that foundation behind us, is to get into a little bit of the theory of what EFT is, and then I’m going to get right to that Basic Recipe. And again, anyone who has questions and wishes to call, please do.

EFT, as we mentioned before, can challenge the belief system. But as you may recall, many decades ago, the whole field of acupuncture was really looked down upon, even though it had been used in Eastern societies for like, 5000 years. But here in the Western part of the world, ah, it’s a little strange. They stick needles in these invisible little meridians, [laughter] or whatever they happen to be. It was pretty well looked down upon. But little by little, gradually, it has now taken hold, and there are even
departments in Western hospitals now that specialize in acupuncture. And what EFT is, is an emotional version of acupuncture, except that we don't use needles. Instead, we stimulate certain meridian points on the body by tapping on them with our fingertips.

I’m going to give an analogy here, if I can. It’s one I’ve used before, and you’ll find it in the EFT manual, and that’s the idea of, when we’re having an emotional issue, there’s really like a short circuit in our system. Let me use the example of a television set. If the energy in that television set – that is the electricity – is running normally through it and you turn it on, you'll see a normal picture, and you'll hear normal sound. But if I were to take the back of that television set off, and then take a screwdriver and sort of drag it through all that electronic spaghetti, if you will, in the back of it, I’m going to disrupt the free flow of that energy, and you’re going to see a distorted picture and hear static for sound. That’s the equivalent of what happens in the human system when we have a negative emotion, anger, for example, or fear, for example.

Let’s take somebody with a phobia, someone, like, I mentioned before, like with a height phobia. You get up high, or maybe you see a snake or a spider or something like that, and you have an irrational fear response to it, like a very panicky thing. What’s really happening there is when that phobic item comes into your awareness, there’s a disruption, or a “zzzzt”, as I call it, a short circuit in your human television set, and that is what you’re actually seeing. That’s a new discovery as far as psychotherapy is concerned because before we came along with this, people always thought, well, it was just the thought or something did it. So psychotherapy tried to rearrange that thought somehow through weeks and months and years of therapy that was not often that successful.
But here, with this new discovery, whatever the emotion is that you’re having within a negative area, it’s a short circuit in the meridians, the energy that’s flowing through your body. If we can balance that while you are tuned in to whatever the issue may be, then the problem goes away. As long as you don’t have that short circuit, you don’t have the problem. An example would be: I don’t happen to have a height phobia or unusual fear of heights, and if I got up on top of The Empire State Building with someone who did have such a phobia, there’d be two people there, and one person would be going bananas, they would be very panicky, and I would be sitting on the top saying, “Gee, look at all the little cars down there”. The difference between them is, one person is having that “zzzzt” going on. And so, with great frequency, we’ll sit there and start using EFT and tapping on his meridian points, and they straighten out, and these people could not get upset about their fear of heights, in this example, if they tried. They couldn’t get upset about a past memory, that may be a war trauma or a sexual trauma or an accident trauma or something about guilt and grief and things like that which are unnecessarily besetting them. Once we take care of that disrupted energy system, that “zzzzt”, if you will, and ….. it properly, people can’t get upset about. I don’t care how they try. I’ve had people try to do it. I’ve had people hold snakes in their hand, go to the top of a building, and relive painful memories, etc, and these things have all the impact of walking through a shopping mall. So that’s about it. So we really take the sting out of that. But it’s that “zzzzt”, you know, that metaphor that I want to use, is really quite important as a foundational idea, although metaphoric.

The other thing I think is really important to recognize is that the basis of this has been in our lap, not only for 5,000 years because of the Chinese. In the ‘20s Einstein
came up with his various theories. I mean his famous equation, \( E=mc^2 \), for those of you who are not physicists, basically means that everything is energy. *Everything* is energy. The water you drink is energy. The telephone you’re holding in your hand is energy. Everything is made up of energy, and the various scientific disciplines, over time, have been picking up on that, particularly quantum physics, and making great strides. But the one area of science that just basically ignored it has been the Western healing sciences; they’ve just simply ignored it, and as a result, when we come up with EFT, which is of course, based on energy, it seems so strange, and yet, it should be commonplace. It should be. It’s a very obvious thing, that it should be very commonplace. Einstein gave us this years ago, and we’re just now coming around the corner, using it, and so some of the results we’re having that seem so stunning should not seem that way. They should be old hat, and eventually of course, they will; they will be routine as these ideas finally become part of the world’s belief systems.

With that in mind, unless you, Dr. Mercola, or anyone else has comments or questions on that.

Alright. Great. Well, let’s go on with the Basic Recipe because that’s the fundamental piece here. These are the mechanics of how EFT works, and I would again invite our listeners to turn to page 20 of the EFT Manual. That would be the page that is numbered 20. If you’re looking at a PDF file on your computer screen, you may see a different number there for the page number. But I’m talking about the page number of the actual page itself, page 20. The top of the page is entitled, *The Basic Recipe*.

Now, the Basic Recipe has a few parts to it; so I want to go over some of those. The first part of it is what I call the Setup, and the analogy I give there is, we need to
take the issue we’re going to deal with and set it up for the system. It’s something I call a Setup because it’s like setting up bowling pins. If you set the bowling pins up correctly and then you roll the ball down the alley correctly, you should be able to knock them all down. But you need to have the pins set up. If they’re just all in disarray, they’re not going to be set up. And one reason we have to set them up is because of a phenomenon that goes on with this process called psychological reversal, and you might want to make a note about that because it’s fundamental in this whole process.

Let me back up a second and talk about an example of what a psychological reversal would be. Its essence is that there are times when you’re trying to address an emotional issue, where you have a built-in resistance you may not even be aware of. Example: Let’s say someone wishes to quit smoking, and they can sit there and give you a long list of reasons why they should quit smoking. “It’s bad for my health”. “I don’t smell good when I do it”. “It costs money”, and so on and so on and so forth.

QUESTION:

Dr. Mercola: Carol, hi.

Carol: Hi. I was wondering if you could do EFT for eyesight. As I’m getting older – I’m over 60 – my near vision is not as good, and I have to use glasses. And I understand that that’s usually caused just by not being able to relax those muscles.

Gary Craig: Well, sure. I’ve had a number of experiences where EFT has enhanced people’s eyesight. I’ve had many times where I’ll be in a workshop, and people will come up and say, “Well, does it help with eyesight?”, and I’ll do this little quick thing with them, just as an example, and let me just mention it to you. I’ll have them take a book, and they’ll take their glasses off, and I’ll have them hold this book at a
certain level place away from their eyes, where they can’t quite read it; they can’t quite make it out. And then, they’ll do a round or two of EFT, and we’ll have them put the book back in the same place, and now, they can read it. That’s interesting.

The other thing I will mention to you is, I was invited into the office of an optometrist here about a year ago, and he had four of his clients that he wanted me to work with, all of whom were vision clients, of course, for an afternoon. What I did there was rather than aim EFT specifically at their vision issues, I instead aimed it at emotional issues they had. Now, let me tell you why I did that, because it’s important for vision. The eye - and Dr. Mercola can expand on this too if he would like to – the eye is very sensitive, and it’s got zillions of little nerves and little blood vessels, the capillaries, muscles and these kinds of things. Being a very sensitive part of the body, it is easily prone to be affected by our unresolved emotional issues, our guilt, our anger, our traumas, etc, and when we relieve those, one would expect better vision.

Now in this example I had with this optometrist and his four clients, he took measurements of these people’s eyesight before and after our session, and so I dealt with all the various emotional issues. They got a lot of movement on those emotional issues, and then he took a look at the vision measurements, and they increased an average of 30%. That’s interesting.

**Carol:** Yeah. So can you just do it on emotional issues in general, or do you have to know what the issue is?

**Gary Craig:** Well, that’s where some of the sophistication can come in, and we’re teaching the basics here. But just with the basics, Carol, if you just use the Basic Recipe and say, “Even though I’m not able to read this book at this distance”, to use...
that example, and just do some tapping there, you ought to be able to have, at least temporarily, some improvement in your vision. Then if you keep doing it, you’re likely to improve it more. When you get into the emotional areas, you can just start making a list of your own emotional issues that you may have, and say, “Even though I remember the time when my mother rejected me when I was in the kitchen at age eight”, for example, and keep on with those things, you will likely find your vision will be one of the benefactors of that.

Dr. Mercola: I’d like to just respond there too, Carol.

Gary Craig: Sure.

Dr. Mercola: As Gary said, this is really an introductory session to learn the basics and the fundamentals of how to do EFT. But we’re going to have specific applications, future teleclinics which will revolve around those, and this is one that we will absolutely be having in the future, and actually, it is a very comprehensive course, and it’s of personal interest to me, and I’ve actually used these types of tools to restore the vast majority of my near vision, and basically, virtually, throw away my reading glasses. They do work, and there are more techniques and tools in addition to the relaxation, say, that EFT does. There’s some simple exercises that are really good adjuncts, and when combined with tools like EFT, they can resolve that near-vision loss.

It has to do with the restoration of the optics because the eye, in many ways, is like a camera, and these muscles, the external muscles of the eye that are typically thought to control the movement of the eye, also change the shape of the globe of the eye and can cause, if they’re tense and tight like almost everyone is as they get older, then that can cause this near-vision loss, and EFT is a very useful tool for helping
resolve that. So it's very exciting, and I think that even beyond this, I think; I'm convinced from what I've reviewed that probably over 95% of the people who are currently wearing glasses do not need them, and this includes even people who have had their lens or lenses surgically removed. So it's very powerful.

**Carol:** Wow.

**Gary Craig:** So we're just beginning, I think, Carol.

**Carol:** Okay. Alright. Thank you.

**Gary Craig:** I do want to emphasize again that for those who would like to get into the more sophisticated areas, you know, there's a lot of material that will help you on our website; DVDs and other forms, and that's [www.emofree.com](http://www.emofree.com).

**Dr. Mercola:** And you also might want to mention to sign up for the newsletter. Gary’s newsletter comes out a little less frequently than mine, about every five days, but it's an enormous wealth of information, and it's one of the few newsletters I read all the time.

**Gary Craig:** Yeah. And you can also subscribe to that just by going to our [www.emofree.com](http://www.emofree.com) website.

QUESTION:

**Gary Craig:** Mr. Lewis, hello.

**Mr. Lewis:** Hi. How’re you doing this morning?

**Gary Craig:** Good.

**Mr. Lewis:** My question was, and I'll start off with a statement first. I've actually gotten your DVDs and have been using them for myself because I went through a year and a half struggle with anxiety attacks, and have pretty much gotten myself through
that, except I have one last issue, which is a driving issue, where I can’t get in my car and actually drive comfortably. And I’ve been using your techniques while I’ve been driving, which seems to help, but I never get down to a zero. Let’s put it that way. I’m usually somewhere around a one or a two level. And I was wondering - because you’ve mentioned about doing this repetitiously - can I do this at home? Because there’s probably a bunch of different issues in relation to driving that I haven’t hit on yet.

**Gary Craig:** Um-hmm.

**Mr. Lewis:** And I’m sort of having a hard time getting myself to figure out what those issues are.

**Gary Craig:** Okay. That’s an area where maybe the use of a specialist in EFT could help, or somebody outside of you, that can help you with that. Let me ask you: You get down to ones and twos when you’re driving?

**Mr. Lewis:** Yeah.

**Gary Craig:** That’s compared to what on a ten-point scale? Nines and tens?

**Mr. Lewis:** No. Now, I’d say it’s probably more like sixes and sevens.

**Gary Craig:** Originally, was it higher than that though before you ever did any tapping?

**Mr. Lewis:** Oh, yeah. It was probably a 20. I couldn’t even get near my car.

**Gary Craig:** Okay. But now, you can drive and you can get down to a – I don’t want to put words in your mouth – but you can get down to an achievable, a reasonably comfortable one or two?

**Mr. Lewis:** An *uncomfortable* one or two.

**Gary Craig:** Oh, okay.
Mr. Lewis: I think I’m still fighting it at that point.

Gary Craig: Alright. Well, to me, that means you’ve got more to do. That’s what we call these, *aspects*, and one of the things, I mean do you actually tap while you’re driving, or do you pull the car over or what?

Mr. Lewis: No. I do it while I’m driving.

cross-talk

Mr. Lewis: It scared my wife a few times, but.

Gary Craig: Okay. Why don’t you write this down, if you would. We’re not able to do this now because of the nature of this teleclinic.

Mr. Lewis: Sure.

Gary Craig: But answer this question for yourself when you’re driving: What does this remind me of? Let me just give you some examples that might take you in the proper direction. It could remind you of some other form of panic you had when you were much younger as a child. It could remind you of an unsafe situation you had a long time ago. It could remind you of an accident you’d had previously. Are you with me?

Mr. Lewis: Yes. Whatever; it could be layers and layers of things.

Gary Craig: Yes. It’s: What did this remind you of? See, if you keep tapping on something and you get headway, but not all the way down, that’s usually a clue that you haven’t found the real issue yet, and oftentimes, that real issue is further back in time than the one you’re dealing with now. It’s like you’re reflecting off of something that happened a long time ago. So what does this remind me of? Sit down and make a list of all the things that either it does remind you of, or even *could* remind you of - these are specific events in your past – and then use EFT on those, and chances are if you’ve
been able to discover some of those, then when you go to drive, there will be less and less of the problem.

**Mr. Lewis:** Okay.

**Gary Craig:** Does that help?

**Mr. Lewis:** That helps quite a bit. Yes.

**Gary Craig:** Okay. Alright. Great.

**QUESTION:**

**Steve:** Oh, hi.

**Gary Craig:** Hi, Steve.

**Steve:** I have two short questions. I have a granddaughter, six years old; smart kid, but very hyper, can’t get her to stay still, concentrate, you know. Anything I should do to help her with it? And then, if I’m tapping with the right hand on one side of my head and I want to change to my left hand, does it make any difference?

**Gary Craig:** No. It doesn’t make any difference which hand you use. That doesn’t make any difference at all. As far as the hyper youngster, I’d probably have to know more about that, and more than I can probably handle, given the nature of this particular call. However, have you done EFT when the child is hyper?

**Steve:** No. She’s seven years old, my wife says. We just started ourselves. I’m trying to use it on my sore right hip, which I’ve had for about 12 years.

**Gary Craig:** Okay.

**Steve:** And so we want to try it on her.

**Gary Craig:** Well, the first thing to do, in my experience, is to simply sit her down and try it when she’s being hyper, and notice what happens. Chances are, she’s
going to relax. Now, does that mean it will necessarily cure it forever? Well, only time will tell. In my experience with these kids that are hyper and sometimes diagnosed as being ADHD, is the term, what actually causes that is they’re very sensitive to some form of food or a substance they come in contact with. It could be sugar. It could be wheat. It could be the soap residue on their clothing, that kind of thing. And if you tap, they get noticeably better, but then it just sort of shows up again. I’d start looking for an external cause to that, that is irritating her system all the time.

**Steve:** Right.

**Gary Craig:** I hope that helps.

**Steve:** Well, the parents think that it might be sugar.

**Gary Craig:** Yeah.

**Steve:** But would it be better if I tap or does she tap or she affirms?

**Gary Craig:** You could do it either way.

**Steve:** Okay.

**Gary Craig:** And sometimes, the child is so hyper, if you will, and so hard to get along with and deal with and so squirmy, is a better way to put it sometimes, that you need to do it surrogately, and that’s another one of our sophisticated uses that you can learn about on our DVDs and so on. But you could just mentally tap yourself as though you were her. There’s a connection between us. That gets back to some of the spiritual things we talked about earlier.

**Steve:** Uh-huh. What I meant was: Should I tap her? Or, in other words, I affirm as well as tap for her?
Gary Craig: Yeah. You could tap yourself in her behalf if she’s so squirmy she doesn’t want you to touch her. Now, do we have the same results with that? It’s not as consistent, but boy, we certainly get enough reports to really open your eyes. We get some very impressive reports by doing it surrogately. But again, that’s getting into a more technical side of what we’re doing.

Steve: Okay. Thanks a lot.

Gary Craig: Okay, Steve. One more question for now, and then I want to go back, if I can, to the outline here, and then we’ll come back to questions.

QUESTION:

Gary Craig: Hi, Angelina.

Angelina: Hi. I’m a massage therapist, and I’m working towards becoming a naturopath, and so I do a lot of energy work. Could, say, somebody who has been. I’ve had a few clients, when I’ve worked on them, and when I get down towards their hips or their low back, their low back hurts worse than it’s ever hurt in their life, like a steel rod’s being rammed through their back. Could tapping help in this instance, when they’re going through an emotional trauma while they’re getting a massage or a therapeutic treatment?

Gary Craig: I need to have a little more expansion on your question. You’re doing massage and then this problem occurs?

Angelina: Uh-huh.

Gary Craig: How did the emotional issue get involved? Are you doing emotional work with your massage?
Angelina: Well, I do energy work, and sometimes, emotions do come up, and I'm wondering if maybe the tapping processes would help with that, because I know some of them have mentioned that they've had abuse in their childhood, and I'm kind of thinking it's working into those chakras and meridians in that area.

Gary Craig: Oh, I got it. Yeah. Absolutely, Angelina. I have endless experience with the idea of an emotional issue showing up in the body physically; I mean, endless. And we will start dealing with the emotional issues, and the physical issues start to fade, and that's particularly true with the back. I've seen that over and over and over again. That doesn't mean they're going to have or get a hundred percent on that. But it's very high, and it's very likely that you'd get some results though.

One of the things that I've often talked to massage therapists about, since they're usually dealing with the spine as part of the massage, is, let's say, the client is laying down, and you're doing their massage to relax. If you can engage them in a conversation about some troubling emotional issue they've had in the past, as an example, and then while they're talking about it - see, they're tuned into the problem - then you can start tapping or massaging these various meridian points as part of your massage, and the odds of you getting some relief on that emotional issue are very high, and the odds of that giving you more permanent relief for that person's physical ailments is also reasonably high.

Angelina: Um-hmm.

Gary Craig: Does that help?
**Angelina:** It makes a lot of sense because I truly believe that we have the energies from these traumas that settle in certain areas of our body; like physical abuse. Not being able to speak out, that hits the throat.

**Gary Craig:** Yes.

**Angelina:** And then they, I’ve had a couple that they started crying and felt like somebody was choking them. I’ve even had that. [laughter]

**Gary Craig:** Yes. And we’re getting a little ahead of ourselves here, but if you knew the Basic Recipe when that happens, you would just simply, right at that moment, say, “Oh, even though I feel like I’m choking right now”, tap, tap, tap, tap, tap, and the likelihood is that that choking sensation is going to fade.

**Angelina:** I’m writing really fast. [laughter]

**Gary Craig:** Okay. Yeah. The uses you can have here are endless, and you’ll get this facility sooner or later, and after a while, you’ll try it on just about anything that shows up.

**Angelina:** Well, thank you very much. I think that pretty much covers that question.

**Gary Craig:** Okay. Great, Angelina. Thanks. And for the moment, I want to get back to psychological reversal and the Basic Recipe, and we’ll invite questions here in just a few more minutes. But I do want to make sure I cover this. In fact, let me do this. I’m going to go through the Basic Recipe, and let’s not have any more calls until I finish the Basic Recipe, and then we’ll open it up because that would be an ideal time for questions of almost any kind because then we’ll have the Basic Recipe in our laps.
So we were talking about this item of psychological reversal, and I was talking about the person who was smoking cigarettes and had lots of reasons why they would like to quit smoking. They can make a list of them. If you were to muscle test somebody, and that, for example, is when somebody holds one of the arms out at right angles to their body and holds it rigidly, and you push down on the end of it; normally that will be strong. But if you have them say a statement like, “I want to quit smoking”, and then you push down on that arm, they lose strength, and that arm will go down much more easily. It’s like their system has become incongruent. It’s told a lie within itself. That’s strange, because in this particular case, they really do want to quit smoking for all the reasons they gave you. Yet, when they say, “I want to quit smoking”, that’s incongruent within their system. It is not really a true statement. And so they are actually reversed on what they consciously want. It’s really interesting. So this is one of the things that Dr. Callahan has brought forward. It was learned by him from other folks, but he had named it the psychological reversal, and that’s a little correction; that’s what this setup is about.

What it does is automatically gets that resistance, if you will, out of the way for what we happen to be dealing with. So it works the following way: I’m going to have you locate a point on one of your hands, and it’s called the Karate Chop spot, and what you want to do is, if you’re right handed, you’ll want to locate this spot on the other hand, the left hand. If you’re left handed, you’ll want to locate it on the right hand.

So what you do is you is – and I’m right-handed, so I’m looking at my left hand - and that spot on my left hand with which I would do a karate chop, that is, it’s between the top of the wrist and the base of the little finger, that fleshy spot in there, that, we call the Karate Chop spot. If you would just take two fingers of your dominant hand, my right
hand in this case, and tap consistently at about this pace [Gary Craig tapping at approximately 20 taps per 5 second period] while you say the following words, you will then be completing the Setup, and you will get psychological reversal out of the way, so the rest of the process can work. It’s just like setting the bowling pins up. You need to get that out of the way if it’s there, and you do this whether or not you know its there because it’ll take care of it.

- You tap that Karate Chop spot, and you say the following words: “Even though I have this __________”. And we’ll put a blank in there, and you just call it “problem” because that blank could be, “Even though I have this fear of heights”, “Even though I have this anger at my brother”, “Even though I have this backache”, and so on. You’d fill it in with whatever the issue is. So you tap, tap, tap like this. “Even though I have this, and we’ll call it ‘problem’ for the moment, I deeply and completely accept myself”.
- And you do it again, as you continue to tap. [tapping] “Even though I have this problem, I deeply and completely accept myself”.
- And then a third time, “Even though I have this problem, I deeply and completely accept myself”.

That’s what we call the Setup. Now, if you look at the manual, we always do that. I talk about doing that three times. In practice, I often only do it once. But that’s because I have a lot of experience with this. Better for beginners to do that three times. And all you’re doing there is really taking any resistance that may be there from this underlying psychological reversal and putting it aside for a moment so that it doesn’t get things in the way. So that is called the Setup.
The rest of it unfolds in a manner which I tend to call, a ham sandwich. A ham sandwich, you know, has two pieces of bread and some ham in the middle. But each of the pieces of bread are going to be called The Sequence, and The Sequence is just a series of tapping points which we’ll go through.

And then we’ll do something called the 9 Gamut, which I will discuss with you, and that is the ham in the sandwich, and then the final piece of bread is repeating this sequence again.

So with that in mind, what we would do is, let’s say we’re dealing with a headache. The problem is going to be a headache. So we started our Setup with, “Even though I have this headache, I deeply and completely accept myself”, while tapping the Karate Chop spot.

Then we’re going to start with the first part of that ham sandwich, which is the Sequence, and we’re going to go through this point by point, and these points are all shown for you on the pages starting on page 22 of the EFT Manual, 23 and 24, and then there’s some on 25 and so on. But those pages actually show you where these points are. But the first part we’re going to use is called the Eyebrow point, which we abbreviate as EB. So you take two fingers of your dominant hand – my right hand in this case – and to locate this point, you would put them just between your eyebrows and go just either to your right or to your left just a little bit, so you’re right at the very beginning of the eyebrow, and you would tap there like this [tapping], and as you do that, you would use what we call a Reminder phrase. In this case, you would say, “This headache”, because we’re working on a headache. “This headache”. And so you tap that point like this, Eyebrow point, “This headache”.

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And then the next point is on the Side of the Eye. So you would just go over to one [outer] corner of either one of your eyes, whichever one is more convenient for you. It’s not back by the temple; it’s just right there on the corner, the bone on the outside of the eye, and you tap there, [tapping] and you would say this Reminder phrase, “This headache”.

Then you would tap underneath the eye, about a half an inch below the pupil on the bone underneath the eye, like this, [tapping], and say, “This headache”.

The next point, we call, Under the Nose, and so you would tap just above your upper lip, or underneath your nose there where that little crease is below your nose, and you would tap there, [tapping] and you would say, “This headache”.

The next point, we call the Chin point, although it's actually right in between the bottom of your lower lip and the point of your chin. It’s right in between there. And you would tap there like this, [tapping] and say, “This headache”.

The next point is called the Collarbone point. But it’s not really specifically where you’d think of a collarbone. It’s actually the very beginning of the collarbone. And what you do is you take your index finger and put it at the very base of your throat. This is to help you locate this point. You'll find a soft spot there. Right at the top of your breastbone, there’s a little notch right at the top. So you put this finger right where that soft spot is at the base of your throat, and then you come down towards your navel about an inch, and go either to your right or to your left about an inch, and that’s the point that you would tap there.

Now, if you have a hard time locating that point, there’s a much easier way to do it, which is not indicated in the manual, and that’s just to take your fist and thump right
about where a man would knot his tie, and that way, you’ll get both sides of them actually. You just thump like that, [thumping] right about where a man would knot his tie, and you’ll get both of those; an easy way to do that.

The next point is going to be what we call Under the Arm. It’s actually on the rib cage, and it’s about four inches below, on either side of the body, four inches below the armpit. You put your fingers in the armpit, and then you would go down about four inches. For a male, it’s about even with the nipple, and for the ladies, it’s where the underarm panel of her bra goes around the side, right in the middle of that. So if you’ll just tap with two or three fingers right on that spot, that is called Under the Arm, and you would say, “This headache”.

On each of these points, you will say, “This headache”, or “This whatever the problem may be”.

There’s another point on the body, before we get to what we call the Finger points, which I’ll mention to you. Actually, it’s a liver point, is what it’s called. For the males, it’s about one inch right underneath either one of the nipples. So for men, they would tap one inch below. For the ladies, because they’re constructed differently, it is where the underskin of the breast attaches to her chest wall. So if you lifted up the breast, where the skin of the breast attaches to the chest wall, that would be the point. It’s the approximate equivalent of where one inch below where the male nipple would be. So you would tap there like this [tapping] and again say, “This headache”.

By the way, I’m taking a little time to talk about all this. Once you get it down and have learned this, it takes about a minute to do the entire Basic Recipe.
Let us continue on now. We’re going to do some finger points. There are some points on the fingers. So if you would, take your non-dominant hand – in my case, that’s my left hand – and hold it in front of your body so that the palm of the hand is facing your chest. That would put the thumb at the very top. So if you would look at the thumb, you will notice the side of the thumb that’s facing you, and the next point, called the Thumb point, is located right on the side of that thumb, even with the base of the nail. So you would tap right there, [tapping] and you would say, “This headache”.

The next point is in the very same place, but on the index finger, the very same side of the index finger as you were doing with your thumb; the side that is closest to your face, or closest to your nose, for example. So you would tap there, even with the base of the nail, on that side of the index finger. [saying, “This headache”]

And then there is the middle finger, and you would tap on the same place there, that is, even with the base of the nail on that side of the finger that is facing your nose, or closest to your nose. So you’d tap there. [tapping]

And in each case, you’d say, “This headache”.

Then you skip the ring finger, and you go to the baby finger, and you’ll tap on the same place there, right even with the base of the nail on the side of that finger that is closest to your nose, as that hand is located, as I mentioned to you. You go like this, [tapping] and say, “This headache”.

Now, there’s one more point, and we call it the Gamut point, and that, I’ll bring up why it is here in a moment. That is located as follows: What you do is make a fist with your non-dominant hand, and you’ll see your big knuckle sticking up, the largest base knuckles there. If you will put your index finger of your dominant hand – my right hand in
this case – right in between the baby finger knuckle and the ring finger knuckle and move back towards the wrist about a half an inch, you’ll find a little soft spot in there. That’s called the Gamut point, and what you want to do is tap that one, [tapping] that Gamut point, just tap that consistently.

Now if you had a hard time finding it, [Gamut point] there’s an easier way to do that, and that is just to take your dominant hand – the right hand in my case – and slap across the back of your hand; that way, you’ll get not only that one, but some other meridians as well. Just slap across the back of it, and that will get them.

So what we’ve done now, is we’ve, except for this Gamut point, we have done the sequence, that is, the first piece of bread on this sandwich. So let’s go over the process as it exists so far.

- We start off with the problem, which we are going to call “headache” at this moment.
- And one of the things you need to do, actually, to begin this, is you need to take your headache and assess how serious it is on a scale of 0-10. Now, let’s just say, our headache is an 8. So we start off with an 8.
- And then we’ll do the psychological reversal part, the Setup.
- We will tap that Karate Chop spot.
- We’ll say, “Even though I have this headache, I deeply and completely accept myself”, as we are consistently tapping the Karate Chop spot, continuously throughout. You’ll do that three times.
- Then, you will tap. Start out with the ham sandwich, the first piece of bread, the Sequence.
- You will start with the Eyebrow point and you’ll tap that, and you’ll say, “This headache”.
- Side of the eye, “This headache”.
- Under the eye, “This headache”.
- Under the nose, “This headache”.
- Chin point, “This headache”.
- The collarbone point, “This headache”.
- Under the arm, “This headache”.
- Below the nipple point, “This headache”.
- Then, you will do the finger points. The thumb point, “This headache”.
- The index finger, “This headache”.
- The middle finger, “This headache”.
- The little finger, “This headache”.

That’s the first Sequence. Now, once you get that down, that Sequence is the same for the last part of this process as it was for the part I just gave you. That’s because both sides of that ham sandwich we’re talking about, those two pieces of bread, are identical.

The last point to use is called the 9 Gamut Point. Now, I have to interject something here. The 9 Gamut was something that was developed with the original Basic Recipe. It is something I think everyone should learn. It is not something I use much anymore, by the way. I do a much shorter version of all of this, which I’ll get to after we’ve covered the basics here. But I want to talk about the 9 Gamut now because
this process needs to be learned, just so you have the whole basics down, even though you may not use it that much. And that would be to just tap on that Gamut point, which, for the purposes of this phone call, to make it easier, you can just slap across the back of your hand consistently, and when you do, you’re going to do nine different things with your eyes and your voice. This is a brain-balancing technique that is thrown into the process. All of these parts, which can seem a little complicated on the phone call, but they’re all listed for you; quite easy. So I just want to take you through it now.

But, if you tap across the back of the hand, and the first thing you do is:

- You close your eyes while you continuously tap across the back of your hand like this [tapping]. You’re continuously tapping.
- You close your eyes while you continue to tap.
- You open your eyes while you continue to tap.
- You close your eyes again while you continue to tap.
- You open your eyes and roll them around in a circle, like you’re looking around the number of a clock.
- Then you roll them the other direction, all the time, you’re tapping continuously.
- Then you hum *Happy Birthday*; That’s to get your creative mind involved. [humming the tune, *Happy Birthday* for a few seconds] Like that. Just a few bars.
- Then you count to five; that’s to get your logical brain involved; 1-2-3-4-5.
- Then you’ll hum again. [humming *Happy Birthday* for a few seconds], all the time, tapping.
And that’s the 9 Gamut. Now, I realize that I’ve gone on and on here, and it may be somewhat difficult to follow me exactly, especially if you’re not looking at the pictures in the EFT Manual. However, if you look at the EFT Manual and go through all of this, you will see that it all falls into place quite nicely.

So the Basic Recipe now, looks as follows:

- We start off with the Setup.

- And you tap the Karate Chop spot continuously as you say, “Even though I have this you fill in your own blank, ‘this problem’, but we’re using ‘headache’ here”. So, “Even though I have this headache, I deeply and completely accept myself”. You do it three times.

- Then you tap on each one of the points in the sequence, as I mentioned before, each time using what we call the Reminder phrase, “This headache”; that’s to remind your system that you’re still working on this.

- Then you do the 9 Gamut.

- Then you do another one of the Sequences while you tap while saying the Reminder phrase, “This headache. This headache”.

And that’s it. Even though that took me quite a while to unfold that for you, once you get it down, that’s one minute’s worth, and that is the Basic Recipe. Once you have that down and know how to use that and have it memorized, you can do this process and apply it to virtually any physical or emotional ailment you can name.
Alright. That’s a lot of stuff, [laughter] and I apologize for going on, but it was necessary.

**QUESTION:**

**Gary Craig:** Dr. Jones, hi.

**Dr. Jones:** Hi. I could ask you a thousand questions. But just as a matter of technique, you didn’t talk much about the soft spot.

**Gary Craig:** Are you speaking of the *Sore* spot?

**Dr. Jones:** Yes. You went to the Gamut, and in your manual, you said you thought you had slightly better results using the Sore spot, as opposed to using the Karate chop point.

**Gary Craig:** Yes. I eliminated doing the Sore spot in this particular teleclinic for two reasons. One of them is it’s a little harder for people to find when we’re trying to do it verbally. Secondly, even though it is listed in the manual as being slightly more effective, it is so much easier to do the Karate chop, that I really don’t do the Sore spot much anymore, even though that can be effective.

I have found over time, that the most important part of this process, when you get into its sophisticated uses, is not whether or not you use the Sore spot or the Karate chop spot; it’s whether or not you’re truly finding the real issue. That becomes much more important in getting results than whether or not you choose the Karate chop or Sore spot. So I have eliminated the Sore spot here. For those who want to read about it and use it, you’ll find it in the manual. I thank you for that question because it was a good one.
Dr. Jones: You just read my mind. The energy is working. That just brought me to my next question. Two patients – I’m actually doing hypnotherapy and nutritional counseling – I have two patients. One has been dealing with a separation issue from family members, friends and all of that, and there’s some difficulty with getting down below a 5 or a 6. Now, is that because I’m not getting to the other issues? In other words, do I have to go to a specific issue in their lives? For instance, a daughter’s leaving, and there’s anxiety. And this doesn’t seem to be, the way I’ve worked on it with her, it doesn’t seem to be getting to the point where I want to get with her. Is that relevant? Somebody else asked that issue about the driving a car.

Gary Craig: Yes.

Dr. Jones: Is that the same thing? And that goes to the aspects?

Gary Craig: Well, it’s similar.

Dr. Jones: Other than all the other things you talked about, like energy and the other things you mentioned in your book and manual?

Gary Craig: Yes. Well, it’s a similar issue, but thank you for the question because it allows me to answer it from a different angle still. One of the errors that I often find newcomers will make is, they will try to use EFT on too global a problem. For example, they may want to say something like, “Even though I have this poor self image”. Well, see, self image is made up of every experience you’ve ever had in your lifetime. So it’s sort of like trying to cut down an entire forest with one swing of the axe. It’s a little much.
What you need to do is to reduce that issue down to the specific events in one’s life because those are the things that make up, for example, the anxiety you’re talking about. So you said a daughter was leaving. Is that what I heard you say?

**Dr. Jones:** Well, it has to do with friends and a whole bunch of people, and I’m wondering whether or not. I think what I’m asking is, rather than saying, “Even though I have this difficulty separating from ‘Charlie’”, or whatever the person’s name is, would it be better to go back to something that preceded that earlier in life, like, an event that happened in that person’s life which then triggered something? You know, it’s a trigger. It became a trigger for all separations.

**Gary Craig:** Sure. Yeah. That would be the likely case, actually, because you go back into time, and if there was, at a younger age, a very important separation that occurred, and the term, abandonment, is sometimes used, then you need to collapse that one. That’s the one you need to collapse because once you collapse that one, then everything just spawns from that, falls into normal perspective and people don’t go over the top about these things, and they behave more normally.

**Dr. Jones:** So you wouldn’t say, “Even though I have an abandonment issue”, which is the global one? So it helps to go back to a specific issue. You mentioned something about the person driving and thinking about it. Would imaging in that person’s mind, that particular issue, be the same as saying it, or should they say it at the same time? In other words, “Even though I have this issue of”, rather than just imaging it?

**Gary Craig:** You could do it either way. Again, if you’re driving though, I think you need to use a little extra caution there.
**Dr. Jones:** I mean in terms of abandonment, a child remembers that they were left at a certain time, and being able to image it.

**Gary Craig:** See, some people are very visual, and they can image things, and they can image them very vividly, and the more vividly you can image it, the more you bring it into your system, the more prevalent the “zzzzt”, if you will, their short circuit, is for you to use EFT on. So it’s a trial and error kind of thing. There is no exact way to do some of these things. That’s where some of the sophistication comes in, and for that of course, I’m going to give this little commercial again. That’s where our DVDs come in handy on [www.emofree.com](http://www.emofree.com).

**Dr. Jones:** I bought those, but I haven’t gotten to them yet. I don’t want to take too much time. But I have somebody, a kid who can’t swallow pills.

**Gary Craig:** Yes?

**Dr. Jones:** And with the hypnosis, I have been able to find out the event. But that doesn’t seem to be making a difference, and I’ve tried this a few times now. Is that a similar thing, that there’s some aspect of it?

**Gary Craig:** Well, when you’re having him swallow the pills, or using EFT for it, what do you do? “Even though I” what?

**Dr. Jones:** “Even”. I can’t remember. “Even though I’m unable to swallow this pill”.

**Gary Craig:** Okay. And if that doesn’t work. Oftentimes, by the way, that will work. But if it doesn’t work, you’ve got to come at it at a little different angle and ask him, “What does swallowing that pill remind you of?”, and you may even be surprised at
the answer sometimes because that may be what the real issue is, what it reminds him of rather than actually swallowing this pill.

**Dr. Jones:** Okay. So have that consciously in the person. So I have to go to that particular issue?

**Gary Craig:** Yes. One of the things to recognize here is EFT works so well, so consistently, so often, that when it “doesn’t work”, we need to digest the idea that it isn’t that it doesn’t work; it’s that I haven’t found the proper avenue to address this problem, that I haven’t found the right core issue yet. That is the more useful conclusion to draw from all this because you’ll get a lot better results if you don’t give up so soon.

**Dr. Jones:** Okay. So I think that pretty much answers the questions without taking too much time. But just quickly, would that work in something like Lyme disease? Lyme disease is a bacterial infection. But would it work in the neurological issues of Lyme that may not be related to the infection? Or hot flashes in women? A whole bunch of things I see.

**Gary Craig:** Well, I don't know if I can answer that question. I certainly can’t answer it technically and medically because I don't have that kind of background. But I will tell you this. I've had all kinds of people tell me, like, from the medical profession and people who know some of these things, why we can or cannot do something, and they’ll give you a medical reason for it, and we’ll use EFT, and we’ll get results anyway. It’s one of the more stunning things here. Something is happening here that we’re not totally aware of. We’re bringing in a whole different paradigm here, and it’s going to require more reasoning, more science to get behind it. But the thing about the hot
flashes. I’ve had people with hot flashes. They go right down. I’ve had that happen with some frequency. …..

[cross-talk]

Dr. Jones: Okay. Last but not least. Does this affect serotonin?

[cross-talk]

Dr. Mercola: ….. We happen to have a medical doctor on the call. So I’d like to respond to that.

Dr. Jones: Oh, okay.

Dr. Mercola: There is no question, there is a clear connection between the emotional stressors in life and one’s functioning of the immune system, and it can have a dramatic impact on the antibody formation, cytokines and many other immunological factors. So if you are able to remove the stress, or the stressors, that are contributing to that impairment, you can dramatically improve the functioning of the immune system, and that can very rapidly lead to improvement of many types of infectious diseases, including …..

[cross-talk]

Dr. Jones: Right. Well, we know cytokines and depression are related.

Dr. Mercola: Right.

Dr. Jones: Yes. Okay. I get that then. So fine. Thank you so much.

Gary Craig: Okay, Dr. Jones.

Dr. Jones: Thanks a lot.
Dr. Mercola: I want to comment and reinforce on that great introduction you had to the whole process of the EFT tapping sequence. One of the things that really brought me to abandon Thought Field Therapy in my clinical practice was the 9 Gamut Process because that really took a lot of time, and I didn’t really see a lot of benefit. And as you mentioned, you’re not doing it yourself, and it’s been my experience that many EFT clinicians don’t. Clearly, there are some times when it is the only thing that’ll work, but for rapidly, effectively using it, I think, for myself personally, and most people we teach, we don’t incorporate that into our system.

Gary Craig: Yeah, and one thing I’d point out is if you go to www.emofree.com and you look at our website and our stories and the DVDs and everything else that are on there, you will find that I rarely use the 9 Gamut, but I do emphasize again that you learn it because there are occasions where it’s really, really important.

I had a case where I had a bunch of cancer folks in my home. They were all dealing with cancer. This was a little over a year ago. We did a lot of this tapping and didn’t use the 9 Gamut at all, and I was on my porch with one fellow who had a really strong emotional issue, and we tapped and tapped and tapped, and we weren’t making much headway, and then we used the 9 Gamut, and bingo! But it’s almost a rare event, but it does happen. That’s why it’s important to have it in your arsenal.

Dr. Mercola: I would agree, and I thought it was a point worth reemphasizing.

Gary Craig: Yes. And also I’ll point out, if you see all the materials that are on our website and all the stories there, you’ll find that when people are doing this, what they really do is a shortcut version of the Basic Recipe I just taught you. What they really do is they start tapping at the Eyebrow point. They go to the side of the eye, under
the eye, under the nose, chin point, collarbone point, under the arm and stop right there. They don't do any 9 Gamut. They don't do the finger points or anything else, and that's what I do most of the time because it's very short. It only takes seconds to do, and it usually gives you the result. And so, why do everything if you don't need it? But it's important to understand everything because there are times when you're going to want everything. So I just wanted to make sure that was pointed out.

**Dr. Mercola:** One other comment on the points that I learned from you is that basically, these points are not just the ones that you have mentioned in your book and you've just described, but they're basically all over the body. These are the ones we're using because of convenience.

**Gary Craig:** They're convenient. They're also points along these meridians that tend to be right near the surface of the skin. They're the end points, and they're very near the surface of the skin. So they're not as deep into the skin as some of the points are. So it's a little more logical to tap them. But I've had people tap other places and get results as well. So it's an interesting phenomenon.

**Dr. Mercola:** Another common one that seems to be used by many people - and I first learned about it in your course – was on the top of the head.

**Gary Craig:** Yes. …..

**Dr. Mercola:** ….. little ridiculous doing it. That's sort of the downside of that point.

**Gary Craig:** Yeah, I know. It looks a little silly, but the whole thing looks a little silly [laughter] when you get right down to it. Yeah. The top of the head, that was introduced in our second video set called *Steps for Becoming the Ultimate Therapist.*
And there are three different meridians going through there, and so I’ll often actually
start off with that. The Basic Recipe doesn’t include it because you still get the
meridians doing it the way we did it. But you can actually get three meridians at one
time by tapping the very, very top of the head.

**Dr. Mercola:** Okay.

**QUESTION:**

**Gary Craig:** Hi, Nick.

**Nick:** Hi. I’m very new at this. Is the tapping for everything? For depression as
well?

**Gary Craig:** Yeah. We’ve had great results with depression. That doesn’t mean
you have a 100% guarantee of getting beyond it. But the odds are very high that
something worthwhile will happen, including the possibility of complete cessation of it.

**Nick:** But first, you would begin with the chop, at the chopping part of your hand,
and then go to the eyebrow?

**Gary Craig:** Well, you would follow the Basic Recipe, and I would urge you to, if
my description of it here was not easy for you to follow, that you go to the manual; it’s
described there. So you would start off with depression, for example, tapping the Karate
chop spot, and say, “Even though I have this depression”, “Even though I have this gray
feeling”, or “Even though I feel so down right now”, and that kind of thing.

**Nick:** Yes.

**Gary Craig:** And then you’ll finish up with the Basic Recipe, and see what
happens. Now, chances are, the depression is going to lighten somewhat. It may even
go away. I mean it depends on the person and the complications involved. But give that a try. If it only goes down partly, just keep doing it, and see how far down you can get it. I’ve had people do this, and they go down to a zero, and they’ve just never felt so good and so on. And sometimes, that happens to be permanent. Other times, you’ve got to keep doing it.

**Nick:** Right. Well, thank you.

**Gary Craig:** Okay.

**Dr. Mercola:** If I can add a comment to that also. Depression can be a very serious illness; in fact, it can be a terminal illness. Many people die from suicide from depression. If someone is listening to this and starts tapping and does not get results, that doesn’t mean EFT doesn’t work. That means it’s probably time to seriously consider finding a professional therapist because as you can begin to appreciate, there’s an enormous amount of art that goes into this, not just the simple tapping that is going to be the solution. So Gary, perhaps you can provide a recommendation as to how one might identify different EFT therapists if one needed more sophisticated assistance.

**Gary Craig:** Well, there are therapists listed on our website, EFT Practitioner Listings, and there are also, up and coming, some EFT masters that will be on there as well. These are people who have gone through EFT and the training at its absolute highest level. So they’re available. Their contact information is all on there, and you can call. This can be done by telephone, by the way. So you can call anybody in the country, or the world for that matter, who is doing this. Investigate with them what they
do and how they do it and how they charge and so on. So yeah. You can get the help that way, and there’s lots of people, hundreds of people, on our list that do EFT.

**Dr. Mercola:** I want to highlight that point too. For myself, even though I’ve been doing EFT for many years, and have helped hundreds, if not thousands, of people, with EFT professionally, if I have a challenge, something that I need to overcome, I ….., if it’s a really serious problem, I'll get professional assistance myself, and it’s usually done on the telephone. The telephone is an enormously useful tool, and is nearly as effective as a live visit.

**Gary Craig:** I find that sometimes, it’s even more effective because over the telephone, if you’re having an issue right at the moment, and you have an arrangement where you can call the therapist, that means you can get help right now, and not next Wednesday, when you have to drive across town [laughter] to go to your appointment. So it can be more effective over the telephone than otherwise.

**Dr. Mercola:** I agree. Good point.

**Gary Craig:** Are there questions?

**QUESTION:**

**Gary Craig:** Hi, Dianne.

**Dianne:** Yes. This kind of goes with migraine headaches and how it applies to it.

**Gary Craig:** Yes.

**Dianne:** Can it help it?

**Gary Craig:** Does it help? Oh, yes. We’ve had some cases that have just been absolutely startling. There’s a case on our website, put on there by Dr. Carol Look in New York, whose doorman, for example, in the building where she lives, had migraine
headaches; I mean serious migraine headaches. He had to lay down a good part of the
day when he had them, and so on. She just did a few rounds of EFT, and not only did
they lift, but they never came back. That’s all written up. We have lots of examples like
that.

Now, other cases of migraine headaches are more sophisticated. They’re more
complicated, and so you have to go back and start looking at emotional issues that are
unresolved from their past that will help, and so on. But the likelihood of you getting
beyond migraine headaches with this – while we can’t guarantee it – is well worth the
effort at it. There’s a substantial likelihood that you’ll either get relief or complete
cessation by using EFT.

Dianne: Oh, that would be great. I mean, I tried Botox, everything.

Gary Craig: Well, go to our website, and on our search engine – the website is
www.emofree.com – and on our search engine.

Dianne: ...... Uh-huh.

Gary Craig: Okay. Emofree; e-m-o-f-r-e-e (that stands for emotional freedom),
dot comm. And we have a search engine there, and just put in the word, “migraine”, or
put in the word, “headache”, and all these articles will come up on our website having to
do with that topic, and you can read what people’s experiences have been and how
they’ve approached it and so on. It’d be very helpful for you.

Dianne: Great. Thank you so much.

Gary Craig: Okay, Dianne.


Gary Craig: Right.
QUESTION:

Gary Craig:  Martha!

Martha:  Hi, Gary. Hi, Dr. Mercola. I have a question, or some questions. What are some signs that energy is moving? I use this for myself and also for my children recently for some exam performance, and they seemed to do a lot of yawning.

Gary Craig:  Ah, okay. Well, I've seen that before.

Martha:  Is that good or bad? [laughter]

Gary Craig:  Well, it's a sign something's happening. Isn't it?

Martha:  Yes.

Gary Craig:  Okay. Sometimes, to me, I draw various possible conclusions out of it. Sometimes, if someone is yawning, that means that they have been so emotionally tight or stressed, that when you do EFT on these “zzzts”, if you will, these short circuits start to get taken care of. By contrast, they are so relaxed that they end up doing this yawning thing.

Martha:  Um-hmm.

Gary Craig:  I had – and this is on one of our videos and our DVD set, the EFT Course - I was dealing with a Vietnam veteran, whose name was Robert, and he had a very, very intense past memory in Vietnam, where he had to actually shoot a little five-year-old boy who was coming at him with a hand grenade; not a very pleasant subject to talk about here. But he was very intense about that, lots of guilt and everything else. And we started doing tapping on it - and he still regrets it - but during the tapping, he started yawning, and I said, “Well, Robert, why are you yawning?”. He said, “Well, for the first time, this subject actually bores me, because I’ve talked about this so often, that
I’ve gotten so intense about it”. That doesn’t mean he doesn’t have regrets about it. It doesn’t mean he didn’t learn lessons and so on, but it means the sting is all gone, and by contrast, he is now yawning, and that’s a good thing [laughter] in that context.

**Martha:** My children, when he does it, I could even say the word, “EFT”, and just like, an emotion that he might be going through, and he’ll start yawning, and all of a sudden, a big smile will come across his face. And I’ll say, “Well, what does that mean?”. He’s like, “Oh, I feel good!”. I’m like, “Okay. Well, ….. through it”. …..

[cross-talk]

**Gary Craig:** Okay. [laughter] Well, you’ve done EFT with him several times, have you?

**Martha:** Oh, I’ve been doing it with them probably for the past year on sports performance and exams and ….. total anxiety for them.

**Gary Craig:** Yes.

**Martha:** I have two 15-year-old boys.

**Gary Craig:** Sure.

**Martha:** Just teenager stuff.

**Gary Craig:** And I gather you’re getting success?

**Martha:** Yes.

**Gary Craig:** Okay. Well, I’d have to actually be there and investigate this a little bit more. But from what you’re telling me, it wouldn’t surprise me to learn that, that yawn and that reaction is just something that’s sort of – well, in NLP terms, it’s called an *anchor* – but it’s just a conditioned response. They’ve gone through it so often, when you say “EFT”, whoops, here comes their response.
Martha: Um-hmm. And the other thing I’m going through is anxiety over them learning to drive because I have been involved in three major accidents in my life.

Gary Craig: Okay.

Martha: And so I’m having a tough time getting in a car with them to teach them. But I don’t want to pass that, my anxiety, on to them. Like, “Mom doesn’t trust me”.

Gary Craig: Okay. I would go back to each of those accidents you’ve had.

Martha: Um-hmm.

Gary Craig: And I would start using EFT on every little piece of them you can. I would separate it out into smaller pieces, like, the screech of tires, for example, the actual impact. I’m making this up because I ….. your accidents.

Martha: Um-hmm.

Gary Craig: And take each one of these pieces and collapse them with EFT so that you just don’t have all that anxiety anymore. The issue we’re dealing with here is not them. The issue, of course, is your response to all of this.

Martha: Correct.

Gary Craig: Okay. And so that’s where EFT is so good at it, especially if you get very specific and break it down into small pieces, that’s when it really, really works consistently.

Martha: Okay.

Gary Craig: So I’d take the accidents, and I’d ….. into smaller pieces, to the point where when you think about them, it may not be your favorite subject, but the heart doesn’t pound, you don’t get panic reactions; it’s just like you had fallen off your bicycle when you were six. You know, it hurt at the time, but you move on, kind of thing.
Martha: Right.

Gary Craig: It no longer haunts you.

Martha: Okay. And have you had luck with people who have, I believe it’s called, tinnitus, the ringing, tones in their ears?

Gary Craig: Yeah. I’ve heard it called (TIN-EYE-TUS), (TIN-EH-TISS). Yes. It happens to be one of our more stubborn issues. If you will look on our website again and put “tinnitus” in there, you’ll find, I think, there’s a fellow in Scotland, if I recall it correctly. But you’ll find articles on that. One fellow, wherever it was, has had really high success ratios with it. But you’ll want to go study his approach and so on.

Martha: Okay.

Gary Craig: But generally speaking, that’s one that has been a little stubborn, a little slower to move than other things.

Martha: Okay. Well, thank you very much.

Gary Craig: Okay.

QUESTION:

Gary Craig: Pauline.

Pauline: Hi there. Could you talk a little bit about how to use EFT for weight loss and also controlling cravings, food cravings?

Dr. Mercola: Gary, can I just interject here?

Gary Craig: Sure.

Dr. Mercola: That is going to be the topic of about four to six future teleclinics.

Gary Craig: Oh.

Pauline: Very good. I’ll be looking for them.
Gary Craig: Okay, but to just give you a highlight or two, if I may. All the weight loss programs I’ve ever seen tend to involve will power in one way, shape or form. You know, make sure you do this, that, don’t eat this, make sure you exercise at least so much, and so on. Not that that should be ignored. But one of the things that’s been missing in all of that is the emotional reasons why people overeat and gain weight. Did you have a weight issue yourself?

Pauline: My partner does.

Gary Craig: Okay. Alright. So your partner, when they go to the refrigerator, do they raid the refrigerator when they’re not even hungry?

Pauline: Well, I mean if you were to ask, I think she’d say she’s hungry. I mean I can see. It’s almost like a bear getting ready for hibernation.

Gary Craig: Yeah.

Pauline: There’s a real underlying urge that’s overwhelming.

Gary Craig: Chances are, she’s not really hungry. Chances are, what’s going on is she’s feeling anxiety at that moment because she has unresolved emotional issues; a very important concept here. She has anxiety at that moment, and she can tranquilize it by eating food. It makes her feel better for now. Does that make sense?

Pauline: It makes sense. Yes.

Gary Craig: And if when she goes to the refrigerator and does that, if you’ll look at what she eats, she does not eat lettuce and carrots. Does she?

Pauline: ......
Gary Craig: Yeah. The comfort food. It’d be the more fatty foods, if you will, the foods one shouldn’t eat, because they have this tranquilizing effect. So the whole effort with EFT and weight loss is, let’s get to the underlying emotional issues that are driving this whole thing, and once you get those out of the way, there’s less anxiety, less reason to tranquilize yourself with food, and hence, when you get to the will power part of it, it’s much easier to do.

Pauline: Yes. I see.

Gary Craig: Okay.

Pauline: There’s another component in that she’s a diabetic, and so, I think, and Dr. Mercola’s site has a great deal of information on the dynamics of that.

Gary Craig: Sure.

Pauline: But as another issue to it.

Gary Craig: Yes.

Pauline: I think it’s a little more complicated than just the emotional issues.

Gary Craig: Um-hmm. Okay.

Pauline: But could you talk about, then, how do you actually implement the technique? What would the kind of affirmation be? Or when would you institute it? That sort of thing.

Gary Craig: Well, as Dr. Mercola mentioned, that’s going to be the subject of a much larger thing.

Pauline: Okay.

Gary Craig: But I’ll just give you a very general answer. One way to approach that would be to sit down and make a list of every single event in your entire life you
wish didn’t happen; the times you did things you’re ashamed of, for example, and your emotions regarding those, the times you were rejected, or your partner was, the times you had certain fears or traumas and so on, and make this long list, and start using EFT on all of them. That’s a simplified way of going about this. As you do, not only will you have more peace in your life. I mean, this would be good to even if you didn’t have a weight issue, or your partner didn’t.

**Pauline:** Actually, I’m doing it myself for migraines; so I’m already using the technique.

**Gary Craig:** Oh, okay. Alright. Well, but if you’ll just make that long list and start collapsing them one at a time, being very specific with these various events, the likelihood is the drivers behind why one needs to raid that refrigerator and overeat and so on, they’ll start to fade. And that’s ….. There are other approaches, and that’s going to be this longer version that’s going to be a teleclinic later.

**Pauline:** Very good, and thank you. One more thing, if you could do it. Could you talk a little bit about how this actually works? You mentioned the analogy with acupuncture, and I know that you have some background in Neurolinguistic Programming. Could you go into a little more on exactly how this is working?

**Gary Craig:** Well, I really wish I knew exactly how it’s working. Our theory at the moment, which has been around for a long time, and nobody has really overturned it, is that your system has, flowing through it, energy meridians, just like blood flows through it, in a way, which is very vital to your well being, not only emotionally, but physically. So when you’re having ailments of one kind or another, emotional or physical, we need to
address the proper flow of that energy, and that’s what we’re doing with EFT. That’s as good an explanation as I can give you in this short time span.

Pauline: Well, thank you.

Gary Craig: Okay. You bet you, Pauline.

QUESTION:

Gary Craig: Saran?

Saran: Yes.

Gary Craig: Hi, Saran.

Saran: Hi. Good afternoon, Mr. Craig and Dr. Mercola. Thank you so much for sharing your time and your knowledge on this subject.

Gary Craig: Sure.

Saran: I have recently started doing a lot of reading on just the impact our negative thoughts have on us and how that may somehow create our reality. And I just wanted to know: How would I use EFT to begin to uncover some of the negative thoughts that I don’t even know are there.

Gary Craig: Um-hmm.

Saran: And sort of to use it to start attracting a more sort of abundant life.

Gary Craig: Well, do you have six years for the answer?

Saran: [laughter] Yes. I have the rest of my life, actually.

Gary Craig: [laughter] Well, the whole bit about uncovering the negative thoughts. One of the things I’ve found over time is when we start identifying our issues and start tapping, some of these negative thoughts we didn’t realize we had, they start to show up. Here come some memories that we didn’t know we had. And I have to
interject something here that’s really important. There will be some people who will do this, who have some really difficult, buried memories, if you will, that they have repressed for their own well being.

Saran: Um-hmm.

Gary Craig: And those things can come up. Now, that’s when you really want to start using a qualified therapist to help you with this, if those things start to come up and you don’t know what you’re doing on your own here, because they can get very uncomfortable and very intense. But we have been able, using EFT, to bring up some of those really important emotional issues that seethe under the surface and go unresolved. All of a sudden – we can identify it – and all of a sudden, bingo, here they come! So just doing EFT by itself will likely bring up some of these things, maybe not as intense as I talk about, but it will likely bring up some of those.

Saran: Um-hmm.

Gary Craig: What was your other question about abundance?

Saran: Well, how can I use it to begin to start thinking positively and somehow attract abundance. Because I’ve been reading a lot about how our thoughts can sort of create our reality.

Gary Craig: Yes. Well, one other tool I like to use, and this is described not only on our website in a writeup I have there called, The Palace of Possibilities, it’s also put in one of our DVD sets that’s available on www.emofree.com, also called The Palace of Possibilities, and one of the concepts in that is to use an affirmation. I’m going to make one up here for this purpose. Alright?

Saran: Okay.
Gary Craig: So let’s make up an affirmation that says, “I earn, easily and consistently, $500,000 a year”. That’s a nice, abundant kind of statement. Is it not?

Saran: It is.

Gary Craig: Okay. So that’s a nice affirmation. So everybody should have one of them, maybe making ….. $5 million a year. Okay? Now, the interesting thing about affirmation – and listen to me carefully because I’m going to need to expand on what I’m going to say – is that they always, always, always work. I’ve never seen an exception. But does that mean if you say, “I earn, easily and consistently, $500,000 a year”, that you’re suddenly going to be earning $500,000 a year? No. Because in most cases, that affirmation is not the real affirmation. The real affirmation is what I call, tail enders. They are the “Yes, buts”. It goes something like this: You say the affirmation, “I earn, easily and consistently, $500,000 a year”, and that’s a lie in your system. Okay?

Saran: Um-hmm.

Gary Craig: And so, what happens is your system starts coming up with other things like, “Well, you don't really earn that, and besides, if you did, you’d have to be greedy to do that because all rich people are greedy”. Okay? That would be something that is what I call, written on your mental walls. [laughter] But a belief would be set up in there, and that actually becomes the true affirmation. “In order for me to be earning $500,000 a year, I’ve got to be one of those greedy, rich people”. Okay? Or another one would be, or, “In order to make all that money, I have to work too hard, and I don't want to work that hard”. Are you with me?

Saran: Um-hmm.
Gary Craig: And so, it’s those affirmations, it’s those tail enders, I call them, that become the real affirmation, and of course, they work. They keep you right where you are.

Saran: Right.

Gary Craig: However, if you make the affirmation, “I earn, easily and consistently, $500,000 a year”, and then you listen and write down what the tail enders are, now, you have issues that you can deal with, with EFT, and you can start collapsing them, and once you start collapsing those useless beliefs, then when you start saying the affirmation, you’re going to have less and less in the way of tail enders, and the abundance you’re seeking is going to come more easily. I hope that makes sense.

Saran: It absolutely does make sense. And I just have one other little issue.

Gary Craig: Uh-huh.

Saran: One of the things that I have been doing to sort of get myself going is I routinely challenge myself, and I have set the challenge to run, to compete, in a triathlon, and I have been training. But I find, as I think somebody mentioned earlier, that with sports, a lot of the event is mental.

Gary Craig: Yes.

Saran: So how could I use EFT to help my mental game?

Gary Craig: Well, the triathlon has three events in it. Right?

Saran: Yes.

Gary Craig: Which of those would you say was your weakest event?

Saran: The swimming.
**Gary Craig:** The swimming. Okay. So one way to approach that would be to say. How far do you swim, and what’s your best time?

**Saran:** I don't know my time, but I can swim about a half a mile, and I have to swim a mile.

**Gary Craig:** Okay. So you haven’t been able to swim a mile yet?

**Saran:** No.

**Gary Craig:** Oh, I see. But you can swim a half a mile?

**Saran:** Yes.

**Gary Craig:** Okay. You can start using EFT for saying, “Even though I have this resistance to swimming three-fourths of a mile” – that’s part way there, right? -

**Saran:** Yes.

**Gary Craig:** Tap, tap, tap, tap, tap, tap. And listen to what comes up. There may be some tail enders coming up in there. They may say something like, “Oh, your body is too weak”, or “Women can’t swim that far”, or “If I swim that well, I’ll be too masculine”. See, I’m making all these up, but our systems do those kind of things. Right?

**Saran:** Right.

**Gary Craig:** And so when those things come up, you start tapping on those, just using EFT on those, collapse those, and then these emotional and mental barriers start to fall by the wayside, then of course, if you can swim a half a mile, you can swim a mile.

**Saran:** Right.

**Gary Craig:** That’s logical. Is it not?

**Saran:** Yes.
Gary Craig: Okay. So what’s really going on here is the illogical belief that you can’t do it.

Saran: Okay.

Gary Craig: And so you can use EFT in the manners that I talked about. I hope that helps.

Saran: Thank you so very much.

Gary Craig: Oh, you bet you. By the way, if I may interject for a moment, there are a couple more things here that aren’t on our syllabus, but I’m covering them as we go through these questions. So I’m just going to keep answering questions, and that will help us fill in not only what we agreed to cover in the syllabus, but anything else that seems to be pertinent here. So go ahead.

QUESTION:

Gary Craig: Dina, yes.

Dina: I have a question about my five-year-old son - he’s actually five and a half - and he’s bedwetting. I know he’s still a little young, but they said over five is when you should start working on it. So I was wondering how I could use EFT to help him with that.

Gary Craig: Well, it’s been a long time since I was a young child and wet the bed.

Dina: [laughter]

Gary Craig: So I’m forgetting at what age your “normal cessation of bedwetting” is.
Dina: Well, according to what I’ve read, and pediatricians, they say up to four or five, it’s fine, it’s normal. But then after that, maybe you should start giving them prescriptions or use an alarm, or something like that, and I’m a little ..... to do either one of those.

Gary Craig: Well, okay.

Dr. Mercola: If I could interject. I don't really believe prescriptions are ever appropriate for this.

Dina: Right.

cross-talk

Dr. Mercola: ..... and use these types of techniques to fairly rapidly and effectively overcome this problem.

Gary Craig: Um-hmm.

Dina: Okay.

Gary Craig: Bedwetting is clearly addressable though, by EFT. I think if you go to our website at www.emofree.com, and put in our search engine, the word, “bedwetting”, that you will come up with an article or two, addressing that point. But if he’s five and a half – It’s a he, you said?

Dina: Yes.

Gary Craig: Is he five and a half?

Dina: Right.

Gary Craig: This is just my own philosophy. I don't know that I would necessarily panic about it at this point, and think something's wrong. I mean sometimes, it just takes a little longer for kids to get around to it, and if you push too far, you actually
cause problems emotionally. I mean they can say, “Well, there’s something wrong with me”, and that can have more long-term effects than wetting his bed until he’s seven or something.

Dina: Um-hmm.

Gary Craig: I only point that out. But if you’d like to work on it, and you want to, you could do it surrogately, by the way. This is a way in which you don’t even have to involve him; you could just imagine you are him.

Dina: Okay.

Gary Craig: And do the tapping yourself. Now, you may or may not get results. But that may be a better avenue to go than to potentially confront him, so he might get the idea, “Oh, there’s something wrong with me!”.

Dina: Right. I didn’t want to. I didn’t know if I should bring it up, and then I would start indicating to him that he wasn’t doing well or, like you said, something’s wrong with him.

Gary Craig: Sure. But if you’d like to deal with it, or if he gets embarrassed about it or he doesn’t want to wet the bed and that kind of thing, here’s what you could do. In fact, let me give you this idea. This is something I think every parent should do for every child. I don’t care whether they wet the bed or if they have other issues. And that is, every night, when they go to bed, when you’d normally tuck them in, maybe read them a story or whatever the routine might be, ask him, “Well, what happened today in your life?”, and they may tell you they did something good, and that’s fine. But they may say, “Oh, you know, Suzie teased me”, or “I fell off my wagon, and I hurt myself”, all
those little things that happen. If you will just tap very lightly. And they tend to like it; it’s a nice touch by mother, you know.

**Dina:** Um-hmm.

**Gary Craig:** Tap lightly while they’re talking about it. They’re tuned into it, and their “zzzzts” are going on. Aren’t they?

**Dina:** Right.

**Gary Craig:** You don’t have to go into all the sophistication of the psychological reversal and all of that and the Setup and all that, even though it may be helpful in some cases. That can get in the way of doing this. Just go ahead and do the tapping while they’re talking about it. Now, when he’s talking about these things, he may well tune into some issues that are indeed behind the bedwetting.

**Dina:** I see.

**Gary Craig:** And if you collapse them, the bedwetting may go. But even if it doesn’t go, to give the child a gift of unloading all these little things that accumulate over time, and as adults, get to be mountainous. [laughter]

**Dina:** Um-hmm. Right.

**Gary Craig:** It gives them a lot of freedom. I mean it’s a terribly important thing to do. I have to emphasize that to every parent in the world. If I could have them all sitting there, I’d shake my finger at them.

**Dina:** [laughter]

**Gary Craig:** And say, “Don’t you ever let a night go by you don’t do that”.

**Dina:** Uh-huh. Okay. Well, thank you very much.

**Gary Craig:** Okay. You bet you, Dina.
QUESTION:

**Gary Craig:** Deborah, hi.

**Deborah:** Hi. I just wanted to thank you for taking my call and listening to what I have to say. It's a wonderful opportunity for me. And I'm really kind of nervous, so.

**Gary Craig:** Okay.

**Deborah:** I'm very interested in trying to make a difference for animals, and that's what I am trying to dedicate my life to doing. I'm not there yet. But I'm wondering if your technique, if I can use it to help animals, and if in fact, the training would give me some insight on how to do that.

**Gary Craig:** Oh, we have lots of results with animals, and they’re very good ones. Go to our website at [www.emofree.com](http://www.emofree.com), and our search engine. Try a variety of terms. Put in “animal” or “animals”. Put in “dog”, “cat”, “horse”, things like that. There’s been lots of results there that you’ll see. There’s one lady in Scotland who does a lot with pets. There’s an interesting article there. Put in the word, Mellie, M-E-L-L-I-E, and that will bring up an article on Mellie the cat, and this was a cat, if I recall the story correctly, that was given up on by the veterinarian, and they wanted to put the cat down, end its life. And the owner of the cat just didn’t want to part with her cat, so they invited this EFT friend to come over and do some tapping. And darned if the cat didn’t have a complete turnaround! There’s a photograph of the cat and everything on our website, and it’s leading a very happy, normal, healthy life, with a little tapping.

There have been animals that have had – like, dogs, for example – that have been very afraid of thunder and other events like that. Tap, tap, tap, and the thunder
doesn’t bother them anymore. I mean, there’s a lot of stories there. So yes, you have a whole avenue in front of you for helping animals, and I’d encourage you to do so.

Deborah: Would I be able to help my 15-year-old dog, who’s really got arthritis and is having some hard times, just even getting up; I mean, to ease her discomfort?

Gary Craig: Well, the way I answer questions like that is, certainly try it. It’s not going to hurt anything to try it. And yes, probably. Is that a guarantee? No. But you can certainly try it. There’s also an animal communicator. Her name is Laila, L-A-I-L-A, Delmonte, who has a couple of articles on our website having to do with animals. So you can put, “Laila”, in our search engine. And you’ll find articles there where she’s actually communicating with the animal and getting some sense of what their emotional issues are, and she’ll do some tapping on the emotional issues, and darned if they don’t have physical results, physical improvements, just like humans do.

Deborah: Oh, that sounds wonderful. I will definitely try that.

Gary Craig: Okay. Well, you also need to know, I mean, some of the stuff is a little more sophisticated, and that’s why you need to go a little bit beyond these basics that we’re talking about here. I’m pointing you in those directions here, and so you probably need to get some of our DVDs and so on.

Deborah: Right.

Gary Craig: You know, for more sophistication. But certainly, give it a try with the Basic Recipe. It often does a lot of work, and you’d probably just do more if you had more experience with it.

Deborah: Okay. A second, unrelated question. My husband has actually been ill, and he has been for ….. years. You mentioned that you can help another person by
trying something on yourself. He’s probably less interested in trying these techniques. But I’m wondering if there’s a way I could help him …..

cross-talk

**Gary Craig:** Yes. How well it would work, you won’t know until you try. But you could certainly – you don’t have to be in the same room with him – just pick up issues that he has. I’m going to make this up. You know, “Even though my foot hurts”, or “Even though my neck aches”, or whatever the case may be. And just start tapping yourself for him. Put the word, “surrogate” in our search engine on our website, [www.emofree.com](http://www.emofree.com), and you’ll find lots of ideas there, where people have used this rather successfully. So you’ll want to get any approach you can, and I can’t really guide you here through all of that because I don’t know enough about your husband’s circumstances. But you’ll find so many approaches, and it is certainly worth the effort to learn these approaches and try. And a lot of people will do that with people who just snicker at this process and don’t want to do it, and that kind of thing, and get results.

**Deborah:** Alright. Thank you so much.

**Gary Craig:** Okay, Deborah.

**QUESTION:**

**Aleta:** My question is really, I would like to hear your ideas on business application or sales. I’m in sales, and I have started with a new company, and it’s very exciting. It’s very dynamic, and I know all about it. I know what I need to do. But procrastination certainly seems to be. It’s like, I feel like I don’t know enough about it to really talk to people. So I hold back. So I’m not really sure how to apply that in a
business sense, and I had read where Dr. Mercola had great success using this
technique with building his presence on the web.

**Gary Craig:** Um-hmm.

**Aleta:** And so I would really like to learn more about that.

**Gary Craig:** Well, what might interest you is, that I’ve addressed this. There’s probably six hours in which I addressed business issues directly. It’s *EFT Specialty Series 1*; it’s one of our DVD sets on www.emofree.com.

**Aleta:** Okay.

**Gary Craig:** So that would be one avenue for you. But I just wrote down something that you said so we can maybe walk down this avenue a little bit together here. You said something about, you don’t go forward. You procrastinate because you don’t know enough yet. Is that what you said?

**Aleta:** Right.

**Gary Craig:** Alright. Now, let me ask you something logically, Aleta. Is the fact that you don’t know enough, is that a logical reason to procrastinate?

**Aleta:** No.

**Gary Craig:** Okay. It’s illogical. I’m not poking fun at you; that’s just what our systems do.

**Aleta:** Your question is good. It hit home. But no, it’s not.

**Gary Craig:** Okay. It’s not logical because there’s lots of things you do where you don’t know enough yet. And by the way, is there any topic that anyone knows enough about yet? You know? [laughter] I’m pretty good at EFT, but I still don’t know enough about it yet.
Aleta: I see.

Gary Craig: Are you with me?

Aleta: Right.

Gary Craig: Alright. So the thing is, is to pick up that little sentence and take that apart. And what are the beliefs behind that? What are the specific events in your life that lead you to believe that you can’t go forward until you know enough yet? And maybe – I’m going to make this up – your father would say – this is totally made up, okay – your father might say, “Well, if you can’t do it absolutely correctly, don’t bother doing it at all”.

Aleta: Yup.

Gary Craig: Okay. That, and things like that, start to impinge upon, or start to be the foundation for, “I don’t know enough yet; so therefore, I hold back”, and those are all EFTable issues. In this theoretical example I just gave, if the father would say that, you would go back to a specific event where your father said that, and you would, on a scale of 0-10, kind of assess the impact that had on you. And maybe that was at age seven. I don’t know. Tap, tap, tap, tap, tap. Use EFT on that until it’s a ludicrous statement that your father said.

Aleta: Right.

Gary Craig: And I don’t mean just logically ludicrous. I mean you emotional respond to it with a giggle.

Aleta: Yeah.

Gary Craig: Okay? And then, you’ve collapsed at least some part of that. Haven’t you?

Aleta: Yes.
**Gary Craig:** And so that’s what we need to do with all this, is start reducing these things down to their fundamental pieces, and then start applying EFT. When you do the EFT, its success ratio starts to go up and up and up with this kind of sophistication.

**Aleta:** Okay. Well, I think part of my problem has been, too, to even identify what that issue might be. If you would ask me, I’m not sure I could have said something like that. But, I mean, that is something, quite frankly, that was so.

**Gary Craig:** Yes.

**Aleta:** But I never thought about it.

**Gary Craig:** Well, yeah. And you can get a lot of good ideas. I’ll tell you, we have a video set among our several video sets, called, *Borrowing Benefits*, and let me suggest this to you because what *Borrowing Benefits* is, it’s based on a discovery that I think would be helpful for you here and all the listeners as well. It’s basically a discovery that I could bring you up in front of an audience, and we could deal with your issues, use EFT on them, and everybody in the audience would pick out their own issues, different than yours.

**Aleta:** Right.

**Gary Craig:** And they would tap along as though they were you.

**Aleta:** I see.

**Gary Craig:** And what happens is, as long as they follow directions, and the directions are given very specifically on this, the success ratio there starts to approach 100%. I mean, it’s really phenomenal. And what happens is on this video set, there are 13 different sessions that I’m doing with people, and all kinds of different issues, and
we’re coming at it from all kinds of different angles and approaches. And what happens is, you sit there, and while you have a hard time yourself, picking up on these concepts that we were talking about earlier, by yourself, when you sit there and watch these videos, these concepts start to show up because you draw your own parallels from all these other things other people are doing. And the bottom line here is, we’re not that far apart, even though our issues seem different, because there’s a lot of parallel between them. So that’s called Borrowing Benefits, and I would really recommend that to you.

**Aleta:** I’ll do that. Thank you.

**Gary Craig:** Because you could just sit there, develop your own issues, and you’d be surprised when it comes up, just by watching these things.

**Aleta:** Yeah. I will take advantage of that. Thank you.

**Gary Craig:** Okay. You bet you, Aleta.

**QUESTION:**

**Gary Craig:** Kathy!

**Kathy:** Oh, thank you Gary and Dr. Mercola, for giving us your time today.

**Gary Craig:** Sure.

**Kathy:** You talk about, in the syllabus, getting into areas where we shouldn’t go.

**Gary Craig:** Oh, yes. Thank you.

**Kathy:** What do you mean?

**Gary Craig:** Thank you, thank you, thank you.

**Kathy:** Uh-huh.

**Gary Craig:** I did not mention that, and I really should. I will send kisses and adulations your way for this question. Okay [laughter]
Kathy: [laughter] I’ll take them. [laughter]

Gary Craig: [laughter] Okay. Sometimes, newcomers will get so enchanted with what’s going on, and they will watch some of these things occur. They erroneously think they can do things that they’re not really prepared for yet, and they may want to go where “they don’t belong” - and I’m going to exaggerate for a moment – and that is to go into a psychiatric ward, where you’ve got people with very psychotic issues that are very ill, going in there, waving their fingertips, thinking they’re going to solve everything. I’m not suggesting here that tapping and EFT couldn’t be a major help for those people. In fact, we have had good results with things like schizophrenia, for example. But for a newcomer to go where they don’t belong, it really shouldn’t be. So to do things with your friends, etc. Your intuition will often tell you where you should go, and someplace you don’t belong. Somebody’s really emotionally fragile and that kind of thing. Leave that one be. That’s for the professionals to handle. So yes. Please, please, please, use this and try it on lots of different things, but don’t go where you don’t belong.

Kathy: Okay. So you’re not talking about our own personal use.

[cross-talk]

Gary Craig: No. But I will say, for your own personal use, if in fact, you or someone listening in, has known fragile issues, better probably to use this in the presence of someone who’s got more experience here.

Kathy: Okay. And then, my other question is: You talked about a masters program.

Gary Craig: Yes.

Kathy: Is there a certification program?
Gary Craig: Well, if you go on our website, you’ll see what this masters program is about. There’s a whole list of what it takes to become one, what the requirements are and so on. So I would just refer you to that.

Kathy: Okay. Thank you.

Gary Craig: Okay. Just go to our search engine and put in the word, “masters”, and that’ll bring it up.

Kathy: Very good.

Gary Craig: Okay?

Kathy: Yes, sir.

QUESTION:

Gary Craig: Carter?

Carter: Hello, Gary.

Gary Craig: Hi.

Carter: Thank you for taking time today.

[cross-talk]

Carter: I have a question for you. I’ve started doing my due diligence in reading, and I’ve actually just downloaded the Palace of Possibilities, and so I will read all the material. But I was wondering if you could speak to us a little bit about any ideal conditions that we should try and put ourselves in when we perform EFT. First of all, in terms of, like, with the Chi Kung practice, it’s better to do in the morning. Is there any specific time of day or – I know this sounds strange – but, before meals or after meals or something else? And then my second question was: How do you personally use this in your daily life?
Gary Craig: Okay. Well, let me take the first question: How and when, and the environment in which it works. Right?

Carter: And should we be seated or laying down or?

Gary Craig: I have ignored all of those things which seem to be important with other disciplines. EFT is so different that it’s sometimes a mistake to try to overlay it with other beliefs from other areas. Probably the most ideal time to do EFT is when you’re actually having a problem. When the headache is really upon you, or when you are so angry at some circumstance, where it's causing your heart to pound and that kind of thing. So rather than be in some calm place, actually, what you’re looking for is when these energy disruptions in your body are in fact, front and center. And what better time to have that, than when you’re having an emotional reaction? Let me give you an example. I will deal with people in my workshops. Let’s say somebody may be on stage working with me, and we’re really just joking around and having a good time and having some patter, some verbal patter going on, etc, and then some topic will come up, and they will just start crying, and they’ve just tuned into something, and they are unable even to tap for themselves, they are so beset by whatever it is. When that happens, a lot of people will say, “Oh, my goodness. We better calm this person down or make him relax or something”. I say, “No”. I say – my little do-gooder inside me says – “Oh, we got the big one up! It’s here right now!”. And maybe the person can’t even articulate what it is. But what I do is I start tapping right then because there, there is the problem. It’s front and center. So I’ll just simply tap up and down the body, tap up and down the body, and I will keep going until they finally sigh, which is a sign of emotional relaxation, and they come out of it. And quite often, when we do that,
we’ve collapsed some big issues. Sometimes, they’re not even able to articulate them, but they tell me months later that things that used to bother them don’t bother them anymore. I hope that answers your question because I don’t think there is an ideal environment. Or I should say it differently. If there is an ideal environment, it’s when somebody’s really upset about something.

**Carter:** Okay.

**Dr. Mercola:** Gary? I’d like to offer another possibility that has a lot of practical application.

**Gary Craig:** Sure.

**Dr. Mercola:** I think many people are possibly like me and have a tendency to complain at times. One of your recent posts in your newsletter described a process that’s enormously beneficial, and that is that every time you find yourself complaining, you should actually be tapping through the process.

**Gary Craig:** Yeah.

[cross-talk]

**Dr. Mercola:** …. that eventually, you stop complaining about that issue.

**Gary Craig:** Yeah, because the energy receptors are up right there, and you tap, tap, tap, and what tends to happen is you tend to get more rational about things. You’re not so emotional about them. You see them in a different perspective, and you quit whining! [laughter]

**Dr. Mercola:** [laughter] It works.

**Gary Craig:** Sure. Was there something more, Carter?
Carter: Just share with us how you, and perhaps Dr. Mercola, use this in your personal lives.

Gary Craig: Okay. Well, I’m going to give you an unexpected answer here. I don’t use it myself specifically for a lot of things, and that’s basically because I was raised in a very, very fortunate way. I was very privileged when I grew up in that I had a mother that absolutely doted on me. And so I didn’t experience the abuses and the rejections and things that so many people had, that they’ve accumulated for so long. Now, that doesn’t mean I don’t have issues. That doesn’t mean I never tap. I will tap for some physical things, yes. Every once in a while, I’ll get all worked up and angry about something, and I’ll start tapping. Yes, yes. But from an ongoing point of view, I don’t have that many things to unravel. That’s just – I’m not bragging about that – it’s just it’s a gift I was given by the way I was raised.

However, I will mention something to you, something that’s really important. When I was, this was 1976. I was having some back problems, probably from playing too much football. I was 36 years old at the time. And it was causing numbness in my legs, and I went to an orthopedic surgeon, and he said that my L5-S1 disc had degenerated, and instead of being a 10 in size, it was a 7, and it would eventually just gradually get to a 6, a 5, a 4, 3, you know, a 2, and I’d eventually beg him for an operation. That’s what he told me.

And so indeed, as the years went by, my back did get worse, and around the early 90’s, when I started to learn tapping, I started doing tapping, not for my back problem, because I just thought that my back problem was going to unfold that way, but I tapped for lots of other things for other people because I was doing workshops on
these things. I just kept tapping. ..... tap. I was just tapping in general, rather than specifically, and little by little, my back got better. [laughter] And I had my back x-rayed a while back, and instead of being the 2 or 3 it should have been by now, it actually increased. It's an 8½ instead of being a 7. It actually regenerated. It was supposed to be one of those things that doesn’t happen medically. So yes, I have tapped in ways, but not in the standard ways others do. That’s a long answer to your question, but I hope I gave you some perspective.

Carter: Um-hmm. Thank you.

Dr. Mercola: And I’d like to add my comments to that too. I was not raised in as fortunate a situation as Gary, and I was exposed to a number of physical and emotional challenges, and as a result, that has contributed to my ability to have an optimized personal relationship. And I’ve been seeking private counseling. So I recommend and encourage that for others, and even though you may be skilled at EFT yourself, that frequently, a professional can help guide you through some of these more challenging processes.

Gary Craig: Sure.

Dr. Mercola: And I, as I explained in the copy for this teleclinic, I found it most useful, personally, for achievement of goals, and it’s just incredible what it can help you do once you’re able to get through those tail enders. And I really attribute a large measure of the success I’ve been able to have with the website to EFT. I’m actually understanding, realizing and appreciating that what we’ve done so far is only a fraction of where we’re going because the real goal, and the ultimate goal, is to change the whole medical paradigm in this country. That’s why I’m so excited that I have the
opportunity to work with Gary because I’m absolutely convinced that EFT is a central element of the tools that are required to make the conversion. Then of course, as I said, I use it for the complaining, which I’m also challenged with. [laughter] But it has made a difference, so.

**Gary Craig:** Let me ask you something, Dr. Mercola, if I may. We’ve been on this teleclinic for a while now, and I have more time myself. But do you have any sense of how many more questions we should take?

**Dr. Mercola:** Well, I think we could probably go for another half hour or so, somewhere in that range.

**Gary Craig:** Sure. Fine with me. More questions?

**QUESTION:**

**Gary Craig:** Mr. Lewis.

**Mr. Lewis:** Hi Gary. I spoke with you earlier, as the person with the driving issue.

**Gary Craig:** Oh, okay.

**Mr. Lewis:** The question I have is, after listening to all these other questions that have been asked and the things, and the way you’ve responded to them, is a technique question in regard to the affirmation. Should they be said out loud, or can you say them silently to yourself? Do you find that there’s a difference?

**Gary Craig:** I do find some differences, but let me explain some if I can. First of all, if it’s just socially awkward to start speaking, because you’re in a restaurant or you’re in a public place or something like that, to say these things out loud, just say it to yourself. Far better to do that than not to do it at all.
Mr. Lewis: Um-hmm.

Gary Craig: Generally speaking, if you say them, a little better. There are some occasions, I’ve found, where not only saying them helps, but yelling them will help. It’s something; there’s a certain something. I don’t know what that is, but I’ve found this on occasion, where we’ll be doing EFT for some issue that I think really should be falling by the wayside, should be improving, and it’s not, or it’s improving very slowly or something like that, I’ll have somebody yell it. They’ll be saying, [yelling] “Even though I have this” – whatever it is – “I deeply and completely”, and I want them to yell it so that they buckle the walls with their voice. Okay? And I have found, with great regularity, once I have them do that, and then we start tapping or assessing the improvement, a world of difference! Things fall dramatically after that. I’ve seen that with great regularity.

Now, am I able to tell you when you’re supposed to do it silently, when you’re supposed to just talk normally and when you’re supposed to yell? No. I don’t know. But I gave you that as an experimental thing to do. If you’re having a difficult time, for example, getting beyond, below this 1 or 2 with the driving thing, you may just want to pull the car aside or something, or just start yelling it and see what happens. You may be surprised.

Mr. Lewis: Okay. That’s what I was curious about. Now, in your relation to saying that, ….. there was a situation where somebody was at that point where they were really like, fighting to get past that point. So there was some ….. it means there’s some rage involved in it.

Gary Craig: Yes. We have a great example of that on our Ultimate Therapist DVD set. There was a fellow from England, he had had, it was a stomach issue as I
recall it, and it had just about always been like, a 4, 5, 6, in that area, but it rarely got below a 4, maybe a 3 once in a while, etc. And I was tapping with him. You can see it right there in the film. Tap, tap, tap, tap, tap. And we weren’t making any headway until I had him yell it. Then all of a sudden, bingo! It went way down, and it stayed down. He wrote me months later, and the only time it ever comes up is temporarily, when he gets emotionally stressed about something, but then it’s only temporary. So yeah, there’s a great example of it right there.

Mr. Lewis: Yeah. That is. Well, thank you very much for that, and I want to thank both you and Dr. Mercola for the time today and also for the things you’re giving to all of us.

Gary Craig: Sure. Happy to do it.

Mr. Lewis: Thank you.

QUESTION:

Gary Craig: Chris, hi.

Chris: Hi. Thank you so much for this. I have actually three questions that I hope I don’t take too much time with. One is that I’m an animal behavior counselor, and I deal with animals that have severe issues with aggression, fear and all of that. I’m concerned about whether you can make things worse when you’re working on surrogates like that.

Gary Craig: Well, can you make things worse? Let me say it this way. Things can appear to be worse. But I need to expand that some. I have, on occasion, worked with people – and this applies to animals as well, but I’ll use people for the moment because that’s where I have my best examples – and I’ll be tapping with them, and they...
will feel worse, I mean, either their physical symptom seems worse, or their emotional issue just gets more intense. And so the first conclusion to that would be, oh, gee, EFT is causing these things to get worse, and with all the experience I’ve had in there, that’s not the right conclusion. The better conclusion is: Ah! What we’re doing with this is we’re starting to peel this onion. We’re starting to take care of some of these issues that cover things up, and now, here comes the big one. It’s like the boil underneath, and now, it’s showing up, and it’s making the physical symptoms worse; the headache is getting worse, the backache is getting worse, the neck is stiffer, for example, or they’re just simply more intense about certain memories they would have and so on. So those are the cases which I alluded to earlier. This, by the way, comes because I have experience with this, and you newcomers here, you need to get this experience. But I basically say, “Hey, that’s good because now we’ve got the big one on the surface”. I like it when things get worse, even though it’s more uncomfortable for the person because that means we’re getting to something that really counts here. Does that help?

Chris: That makes sense. With an animal, do you suppose that you could peel away, in the situation with animals that bite and are dangerous, do you think that there’s a critical stage where you can keep at it and get them past the point? This is so theoretical, but I have some cases I’d love to use it on.

Gary Craig: Well, I can’t answer that question with a big “For sure!”, but let me just say, it’s likely, and that’s based on my perception of what your question is. But let me just presume an example here, and maybe this will be helpful. Let’s assume you have a dog that bites, and of course we need to get this dog so it doesn’t bite anymore, so it’s not dangerous to other people and won’t be put down, and so on. So the first
thing that comes to my mind is, the dog bites for a reason. It’s been traumatized. It has certain fears. It gets insecure. It needs to bite and be vicious and aggressive because that’s the way it needs to protect itself. I’m making this up, but dogs do this for a reason, just like people do.

Chris: Yeah, that’s generally accurate.

Gary Craig: Okay. And so if you know something about the dog’s history, you can start tapping for it. Just start saying words - even though they may or may not understand your English – words like, “Even though I was abused by my first owner all those times”, etc, and keep doing your tapping. That would be one way to do it.

Another way is just to simply assume what the problem may be if you don’t know the basics of it. You know, make the problem up. Dogs are very good. They will tune in to you; just make it up, and start tapping and be very soothing with it. Tap very gently and very nicely, and just keep doing it persistently. My guess is if you do it consistently over time, there will be less viciousness, less barking, less tendency to bite and so on. I think you’ll see evidence of that if you do it persistently.

Chris: Okay. Great. Thank you very much. My next question has to do with a very good friend of mine who is direly ill. She has hepatitis C, has had a liver transplant and the virus came back with vengeance shortly after the transplant. She is now on her third round of chemotherapy, although it’s the first round, post-transplant. And she has lost a great deal of hope, and now, of course, she’s got all the issues with the immunosuppressive drugs for anti-rejection, and the bad reaction to the interferon, and also a bad reaction to the other shots that they’re giving her to keep her bloodwork reasonably normal. I’ve seen her through several years of this already, but the
transplant was just in December. Now, she seems to have really given up and just, kind of like, she’s just run out of ability to fight this.

**Gary Craig:** Um-hmm.

**Chris:** With all the complications of the immune system, I’m not sure what angle could be taken to use the EFT to help her.

**Gary Craig:** Well, that’s a very, very, very, very sophisticated use of EFT. I’ve been doing a number of workshops that were filmed, and DVD sets and so on, on using EFT for serious diseases. We’re basically going at it from the angle that the cause of these diseases - whether we’re right or wrong, this is the angle we’re coming from, the approach we’re using – the cause of these diseases are unresolved emotional issues. Now, Dr. Mercola may have some comment on this, but let me, for the moment. I’ve had some conversations in the past with medical people on hepatitis C. The cause is presumably a virus. A virus gets in the system and does its damage over time. The other side of that equation is there’s an immune system, and a proper immune system can often handle viruses, put them in check, destroy them or whatever. So my approach would be, a compromised immune system may well come because there’s lots of unresolved emotional stuff, lots of abuses, lots of angers, etc, that are besetting the person. And while this is one of our more sophisticated uses of it, if she were sitting in front of me, I would be inclined to start going after all those emotional issues that may be, if we resolve them, would strengthen her immune system and give her a better shot at recovery. What would you say, Dr. Mercola?

**Dr. Mercola:** I couldn’t concur more emphatically with you, that these stresses are really a key here. I’ve taken care of a number of people with hepatitis C, with all
sorts of physical issues, and that needs to be looked at. I’ve found the most consistent problems to be related to elevated iron levels, and they tend to get stored in the liver. But that’s relatively easily assessed by measuring a protein in the blood called, ferritin, and that’s F-E-R-R-I-T-I-N, and that can easily be looked up on my website for more information. There are simple ways to actually reduce that, and that can help in the process. But if there are really high iron levels, it’s a very powerful oxidative stress, and it can cause quite a bit of damage in conjunction with the virus. But really, one of the key things is going to be addressing the emotional components with a tool like EFT.

**Chris:** Thank you very much.

**Gary Craig:** Okay, Chris.

**Chris:** Thank you so much, both of you.

**Gary Craig:** Yes.

**Dr. Mercola:** Yes, you’re welcome.

**QUESTION:**

**Gary Craig:** Janice, okay.

**Janice:** I have had about over 50 years of accumulated stuff, mostly emotional, and I can see myself spending the next 50 years, 24 hours a day, tapping. But I don’t want to do that.

**Gary Craig:** Um-hmm.

**Janice:** I want to be more organized, and I want you to help me become organized as to how much to do at any one particular time on any one particular day. Do we tackle one problem at a time until we feel it’s resolved, or do we tackle ten things
at a time and tap on all ten, if we find 15 minutes in the day that we want to tap? Do you know what I’m saying?

   **Gary Craig:** Yes. I do, but let me just get behind that a little bit for just a little more information.

   **Janice:** Okay.

   **Gary Craig:** ..... Do I presume correctly that in your past, like in your childhood, there were a lot of rejections, abuse issues and that kind of thing?

   **Janice:** Yes.

   **Gary Craig:** Okay. Let me answer your question this way. I’m going to answer it with what I’m going to call “categories”. Okay?

   **Janice:** Um-hmm.

   **Gary Craig:** First of all, to be more specific about a thing or two, I wouldn’t do like, ten things all at one time; I would do one issue at a time, even though you can do them in strings of things, one after the other. But let me give you a concept, if I may. Let’s assume that in your abusive past, an abuser was, let’s say, an uncle. I’m just going to make this up. Okay?

   **Janice:** Um-hmm.

   **Gary Craig:** So you have an uncle that was consistently abusive to you, and maybe those events, those specific abusive events, maybe there are more than a thousand. I’m just going to make that up for a moment. So it would seem daunting to go over all thousand or so specific events with EFT and have to go through all of those before you get relief. I mean, that would seem like almost too much. Would you agree?

   **Janice:** Yes.
Gary Craig: Okay. Now, what really happens here, I'm going to put the uncle here in a category, and I'm going to call it just, “uncle abuse”, for our example. What you do, is you would make a list of a number of the biggest ones, the most important ones, the ones that have the biggest impact on you that you can think of, and make a list of those. And one at a time, on those very specific events, start using EFT on them. In fact, Borrowing Benefits would be good for this, that video set that I mentioned earlier.

Janice: Um-hmm.

Gary Craig: And once you've collapsed one or two or three or four, so those specific ones no longer bother you, then you're going to start to find what’s going to happen is a generalization effect, and that is, all these issues, these specific events in the “uncle” category, have some commonalities, some things in common. So once you take care of some of the bigger trees in that forest, if you will, after a while, they generalize, and the whole forest falls. And you may have to do 10, 15 or 20 all together to make the whole thing fall, but you don't have to go through all thousand of them. I hope that makes sense to you.

Janice: It does. ..... [cross-talk]

Gary Craig: Let me give you, if I may – I’m interrupting a second, I’m sorry, but I want to get this one metaphor out -

Janice: Okay.

Gary Craig: Let’s assume that the “uncle” category is a tabletop. And that tabletop is supported by table legs, and each table leg is one of these specific abusive events in the past with your uncle, in my example. So that table was going to stay up so
long as those legs held it up. But if you collapse 10 or 15 legs under that table – I mean there’s still another thousand legs or so that are holding it up – but if you collapse big table legs, the rest of the table legs will start to wobble because they have all this in common with the ones you’ve collapsed, and for all those table legs, they’ll just give way, and the whole table falls, and “uncle abuse”, in my example, instead of being “My uncle is a bad person. My uncle is a beast. My uncle, and so on”, you genuinely have, if you’ve done this well and this worked properly, you genuinely have a belief shift, and it’s no longer that he’s this bad person to be feared and so on. It’s more like, here’s somebody who really needs help, and I [just happened to be] in the way [of this troubled person]. And it’s not just a logical statement; it’s something that you really feel. That doesn’t mean that you’re going to necessarily be around your uncle the rest of your life, because you have some cautions, etc. But you’ll have a much different view of it, the sting is all gone, and you’ll have the ability to go through life without dragging along the weight of the [traumatic memory of] the uncle, and that will give you a much improved life. Now, I spent a lot of time on that. I’m sorry. How did I do?

Janice: Well, that explains what to do with one category. But let’s say, let’s just pull #10 out of the air; there are ten categories that you decide you want to work on.

Gary Craig: Uh-huh.

Janice: Do you work on all ten in one day? Do you reserve five for today, five for tomorrow?

Gary Craig: The answer to that is, do what is comfortable for you. There are some people that can just simply go right through all those and do them in one day.

Janice: Um-hmm.
**Gary Craig:** Other people will do one, and it'll just exhaust them, and they'll come back two, three days later. So it will depend on you. There is no cookie cutter answer to that.

**Janice:** Um-hmm.

**Gary Craig:** It’s really going to have to depend on your own system will tell you, “Oh, well, we’re probably done for now”.

**Janice:** Okay. Because I can see myself getting sore doing it. I can see my eyebrow area getting sore, you know.

**Gary Craig:** Yeah.

**Janice:** Because I’m not a patient person. I want to do this, and I want to do it now, and I want to get all my problems solved today, not tomorrow.

**Gary Craig:** Well, yeah. Sure. Sure. Don't we all? Don't we all? You may want to do some tapping on that: “Even though I’m really impatient”. [laughter]

**Janice:** Yeah. Yeah. [laughter] That is a thought.

**Gary Craig:** [laughter] Well, I’m serious about that too. I mean, if it really is an issue, “You’ve got to do it all and you’ve got to do it all right now”.

**Janice:** Um-hmm.

**Gary Craig:** But I think it’s taken a lifetime to develop these, or a whole childhood to develop these, and as good as EFT is, I don't think you’re going to take care of them all in one session. It’s going to take some unraveling over time, and depending on the severity of it, and the complications, you may need somebody to help you, that can see these things easier than you can.
Janice: Okay. Alright. So if you don’t get success in a certain amount of time, you feel like maybe you should consult a more experienced person?

Gary Craig: Yeah. I would. But if you’re getting success, and it’s satisfactory success, I would keep going. If you hit a wall. See, somebody else with you can oftentimes see things you can’t see because you’re too close to it.

Janice: Right.

Gary Craig: You know?


Gary Craig: Okay, Janice.

Janice: Thank you much.

Gary Craig: Right.

Janice: Bye.

QUESTION:

Gary Craig: Francina?

Francina: Yes.

Gary Craig: Hi.

Francina: Good morning, Gary. Thank you so much for your time, and thank you also, Dr. Mercola. I had an interruption, and I apologize. I would love for you to share what you talked about with your L5-S1. I have already had a spinal cord decompression and fusion in my neck, and the doctors want to do it in my low back. I have suffered for about 13 years since a car accident, with some pretty severe back pain and nerve pain in my spine.

Gary Craig: Um-hmm.
Francina: So I would love you just to address that for me. And I am working with many doctors. Most of the doctors I work with tell me that my physical manifestation is 90% emotional, and it’s a tough thing for me to accept.

Gary Craig: Okay. Well, let me ask you something. When they say that, did they base it on the fact that, when they look at x-rays of your back and so on, they’re not seeing anything that functionally should cause you your problems?

Francina: No. That’s actually an NST chiropractor that I’ve been working with for about two years. The physical evidence is degeneration and herniation and some bone spurs and things like that.

Gary Craig: Okay. Well, I think you said you had a technical interruption when I was doing the L5-S1.

Francina: Yes, I did.

Gary Craig: But basically, what I said was I just kept tapping over years and years and years and years, and from all I can tell, though there’s no proof of this, other than before and after x-rays - I only saw the before; I don’t have the before to show you - but the after one shows that I actually regenerated my disc.

Francina: What do you mean by “tapping over years and years”?

Gary Craig: By using EFT over many years.

Francina: So this was process that happened over a period of time?

Gary Craig: Yes, and I wasn’t really tapping for the back, per se, using EFT for the back, per se. I was just giving workshops and teaching other people how to do it, and as a result, I was tapping, tapping, tapping, tapping, tapping, tapping. Okay? And earlier today, when I was going through the Basic Recipe, I was sitting here, tapping on
myself, as well as over the telephone so you could hear the tapping and so on. So I’ve
done a lot of tapping, and that’s the only thing that I can point to that would have caused
that disc, instead of degenerating to a bad state, to have actually regenerated to a
healthier state than it was when I was 36, and I’m a lot older than that now. [laughter]

Francina: Well, but on some level, you must have been giving instruction to the
DNA to regenerate.

Gary Craig: I don’t know what I did. See, we don’t have the answer here.

Francina: No. I …..

[cross-talk]

Gary Craig: All I know is I just did a lot of tapping, and maybe there was some
other reason for it, but I have no idea what it was. I’ll also say that my eyesight improved
from the time I started tapping until now. When I started tapping in the early ‘90’s, I had
just barely passed my driver’s vision test, and I thought, the next time, I’m done for.
[laughter] But I passed that driver’s test fine. I read fine. I don’t wear glasses or
anything!

Francina: There wasn’t any specific thing that you addressed in your tapping?
That’s my real big dilemma, is: What is it I should be addressing when I do my EFT?

Gary Craig: Well, so let me be more specific. You asked me about that one
experience, and that one experience had to do with, I wasn’t even tapping specifically
for it. I was, in a way, what we call, borrowing benefits, which I’ve alluded to earlier in
this teleclinic.

Francina: Right.
**Gary Craig:** But let me give you a different concept, if I may. You may well start tapping and use tapping, like, “Even though my such-and-such disc is degenerated”, or “Even though there’s degeneration here”, or “a problem there”, and do that consistently, and you may – I can’t guarantee you this, but we’ve seen results like this before – you may start having actual physical healings that “aren’t supposed to happen”. That may well happen.

Let me give you another angle on it. I’ve had many people with back issues, that the doctors will look at the x-rays and say, “Ah! Okay. You see here, the so-and-so disc and the vertebrae here”, and they point to these things, “And this is pinching on that, and that’s why you’re having your pain”. We will go ahead and go tap, tap, tap, and that pain will either subside noticeably or completely go away. And that’s a real puzzle, and my only explanation for that – and maybe Dr. Mercola has his own explanation; I’ll just give you my non-medical one – is that in the system, when you have stresses in the body, it pushes and pulls on the various muscles in the body, which then push and pull on the joints, which aggravate pain. But then when you start using EFT, and you give relaxation to those stresses and those emotions and so on, which are pushing and pulling on the muscles, and in turn, aggravating pains in the back and so on, when you do that, you have relieved one of the contributors to that pain, and maybe the major contributor. I’ve seen that a lot.

**Francina:** What I hear you saying, then, is that a lot of times, interference in the spine, or pain in the spine or whatever, is created from stress, and when you relieve the stress. The question I’d like to ask is: When you tap, tap, tap, and when you’re actually relieving the stress in the body, what is it that you’re saying? I like the example when
you said, “Even though my disc is degenerated”, and I can follow that one. But what would you say? “Even though I have stress in the body”? “Even though I was told 90% of my physical problem is emotional”? I mean would I just add all that stuff in there and just say it?

**Gary Craig:** Sure. See, there’s an art to doing this. We give you, in the Basic Recipe, this cookie cutter way of doing it. “Even though I have this ______”, and you fill in the blank. And so that often works, but you’re going to have to fill in your own blank. So you can, with experience, you will find that’s really easy to do. Some people think that’s really challenging, that’s really hard, because they haven’t really given it that kind of a try. But just use your imagination.

**Francina:** Okay.

**Gary Craig:** You know, “Even though I was told this, I’m really angry about that”.

**Francina:** I am! [laughter] I was. I was really angry.

**Gary Craig:** Okay. Well, chances are, if you really pay attention and you really get angry there. Well, let me ask you right now. As you’re talking about that, are the pains in your body any different than they were when you weren’t talking about it?

**Francina:** Oh, yes. I notice that there’s a heightened sense of …..

[cross-talk]

**Gary Craig:** Well, there’s your clue right there. I see that all the time. People will start talking about their issue, and they’ll “feel worse”, and we talked about that earlier. And that’s because their emotional issues show up physically. And that’s one of the real stunning paradigm shifts that’s going to come about as a result of the EFT-type
procedures because we’re talking about healing on a level that doesn’t require drugs, medicines and surgeries and that kind of thing.

    Francina: I agree. I totally agree, and I thank you so much.

    Gary Craig: Okay.

**QUESTION:**

    Gary Craig: Jodie!

    Jodie: Hi. Thank you for your time today.

    Gary Craig: Hi, Jodie.

    Jodie: I have a question in regard to, have you, or do you know of anyone, that has done this type of work on genetic issues?

    Gary Craig: Well, give me an example. Could you?

    Jodie: Yes, I could. My seven-year-old son is going through puberty at age seven. The possible causes of that, from our understanding, are a tumor that’s secreting hormones, a genetic issue, a congenital adrenal hyperplasia, or a head trauma. So we’re in the process of ruling all that out. With his history, things that have been endocrine issues for myself, and mother, grandmother, etc, they’re leaning towards genetic, with the adrenal hyperplasia.

    Gary Craig: Okay. Well, you’re into areas here that I have no training in whatsoever.

    Jodie: Um-hmm.

    Gary Craig: However, that doesn’t stop me. [laughter] And the only reason it doesn’t stop me. By the way, I don't ever tell people that they shouldn’t take their drugs or their surgeries or any of that kind of stuff because I’m not qualified to say any of that.
Jodie: Um-hmm.

Gary Craig: And so I’m not telling you to do it. I’m not telling you which of your doctors are right, wrong or otherwise. Okay?

Jodie: Um-hmm.

Gary Craig: All I know is, if we apply EFT, there’s a good likelihood that something positive is going to happen, and it may be dramatic. So you can start using EFT on, “Even though I’ve had this head trauma, and it’s showing up in this abnormal way”; that would be a way to start. “Even though I’ve bought into the fact that I’ve got some genetic makeup here”.

Jodie: Um-hmm.

Gary Craig: And by the way, while the doctors are tending to give you these medical reasons for these things because that’s where they come from – and I’m not saying they’re not right; I don’t know – but in my experience in these kind of conversations, I don’t hear from the doctors - except for somebody like Dr. Mercola – I don’t hear things like, “Oh, there’s an emotional cause here. There could be an emotional reason why we’re having this problem”.

Jodie: Um-hmm.

Gary Craig: It needs to be explained in terms of medical, scientific stuff. Okay?

Jodie: Um-hmm.

Gary Craig: Maybe it’s right. Maybe it’s wrong. But it ignores the emotional, and we’re putting the emotional in, and the energetic in, and we’re finding by putting that in, where medicine is throwing up its hands and saying, “I don’t know”, we’re getting
results. So that’s for everybody to kind of weigh. But I would certainly go for the emotional stuff. Sure. Absolutely.

Jodie: Okay. So would you phrase it by, “Even though”. See, I don’t like to make claims that anything’s wrong with him. We’re doing this process as a “field trip”. He has not idea, because I don’t want fear or anything in him.

Gary Craig: Um-hmm.

Jodie: We’re doing this as “field trips”. So he’s getting to see x-rays of his hands, etc.

Gary Craig: Yes. Okay.

Jodie: “Even though I have a genetic issue”, or I mean, how would you phrase that?

Gary Craig: Well, he doesn’t even know what “genetic issue” means. Does he?

Jodie: No. He doesn’t.

Gary Craig: Okay.

Jodie: …. Um-hmm.

Gary Craig: Okay. Well, does he recognize he has a problem?

Jodie: No. I don’t want him to.

Gary Craig: Oh, okay. Well, you may want to do this surrogately then.

Jodie: Um-hmm.

Gary Craig: Or do it surrogately, like, you tapping for him.

Jodie: Um-hmm.

Gary Craig: Or you could just, without even addressing the physical issue, you could just say, “Well, what scares you?”, and listen to what he says. And maybe he saw
something on television that has really bothered him and caused him nightmares, and he’s never told you.

**Jodie:** Um-hmm.

**Gary Craig:** And he saw that at age three. I don't know. I'm making this up. But kids are very impressionable. So, “What scares you, and what makes you angry?”, and ask him about stuff like that, and start dealing with those issues.

**Jodie:** Okay.

**Gary Craig:** You need to deal with those anyway, by the way, whether or not they show up with physical results.

**Jodie:** Sure.

**Gary Craig:** They’re worth addressing anyhow. And see if you’re going to get some physical results as well.

**Jodie:** Okay. And could an emotional issue like that travel through generations? I mean have you had any work or anybody diving into that area?

**Gary Craig:** Well, I had an interesting conversation about that. I don't know the answer, but I'll give you this conversation so you can weigh it as you wish.

**Jodie:** Okay.

**Gary Craig:** It has to do with whether or not things are hereditary, and so the medical take on that usually is, something is hereditary, in the genes. That's my non-medical way of saying it. So if your grandmother or grandfather, or whatever it is, had some of these things, then you’re likely to have it, and so on.
Well, okay. That’s fine. What’s interesting though is that some members of a given family seem to have these hereditary things, and siblings don’t. Yet, they’re supposedly having similar makeup, a similar hereditary background, and so on.

What is not addressed ….. and I think is very possible, is that another thing that gets handed down is not only genes, but beliefs, religious beliefs in particular, things about sinners and being bad and what’s good, what’s right, wrong or otherwise in this world, and to the extent those are passed down, I would be very curious if somebody could do proper research on that and find out if people that have these supposedly hand-me-down, hereditary things do not also have hand-me-down beliefs. Okay?

Jodie: Um-hmm.

Gary Craig: I don’t know the answer to that. But I would be very interested. I see enough impact of the belief and emotional system on the human body to think that there’s some merit to that investigation.

Dr. Mercola: Well, Gary, there is a researcher who is doing some work in that area, and you know who he is too. It’s Dr. Bruce Lipton, L-I-P-T-O-N, and he’s a cellular biologist, and has taught at ….. medical schools in California and the University of Wisconsin. And this whole concept of genetic-based disease is fascinating, and clearly, there are some diseases that have strong genetic components. But if you listen, or review Bruce’s work and his phenomenal videos – and you could type his name into Google on my website, and you can find access to his great videos – but he describes the process, where these diseases, that the genes are actually relatively dumb file structures, and it’s the emotions themselves that actually regulate the expression of the genes. So even though you have a potential to develop or have a particular problem,
you can rapidly turn off and on the expression of that genetic potential. He goes into a much more sophisticated explanation of that. But it really is worth the review for those with the interest.

**Gary Craig:** It’s fascinating stuff. I’ve seen one of his videos, and I’m very impressed with what’s going on there, and I think they’re breaking important ground here; not that it’s necessarily new that emotions affect our physiology, but we’re finally finding a way to do something about that, in which EFT can help.

**Jodie:** Okay. And then my next question. The only thing they have to offer him, obviously, if they find it’s cancer, you know, treat it that way, that route, since we don’t exactly know the source of this. So they’re offering an injection that is to stop him from going through puberty, give it to him for three years, take it away when he gets to age 11 or 12, which would be a normal time to start puberty, and then go on; the reason being is because his epiphyseal plates will close, and he will be short stunted as an adult because in puberty, that will stop. The epiphyseal plates close, and that will stop growing.

**Gary Craig:** Okay. Go ahead.

**Jodie:** I guess what I was wondering is, since there’s that theoretical time span there, how quickly, you know, since this is untapped ground for me, how quickly would the EFT techniques work? Would it, could it possibly work soon enough to not give him that medication. This child’s had nothing, no vaccines, he’s had hormone-free beef, he’s had everything. So you can see my frustration with this.

**Gary Craig:** Well, Okay. Let me answer it this way. Could it possibly work? Yeah. The answer to that is, yes. Will it work? I don’t know. You’d have to try it.
Jodie: Right.

Gary Craig: We try it on everything. I'm not about to comment on whether some medical procedure that the doctors want to go for is valid or not. If it was me, given the understanding I have at the moment from what you've said, I would try EFT before I would try medical interventions, unless I had evidence that waiting was really going to be disastrous or something like that. But that's my own view. That's not advice; that's just my view.

Jodie: Right.

Gary Craig: Okay?

Jodie: Okay. Thank you so much.

Gary Craig: Alright, Jodie.

QUESTION:

Gary Craig: Barbara, hello, Barbara.

Barbara: Hi. My question is about using EFT for fears when you don't know what's the underlying problem with the fear. I have a fear of flying, which I've used EFT successfully enough that I'm able to get on a plane, and although I don't like it much, I can get through the flight without a problem. But I have a fear when my family members are flying, and I'm not actually on the plane, that I can't seem to control. I haven't had any bad flying experiences. So I'm not sure where the fear comes from. So I'm not sure how to use EFT.

Gary Craig: Well, it doesn't necessarily have to come from flying experiences. Flying brings up a number of possible fears. I mean the fear of dying, for example, the fear of injury, for example, the fear of losing loved ones, for example. So all those, they
would be the real fear; the fear of flying just may be the cover for it, if you will. It may be the cover of the book, and the book inside has got different fears instead. When you think about the fear of flying, what does it remind you of?

**Barbara:** You mean when I’m flying or when someone else is flying?

**Gary Craig:** Either way.

**Barbara:** I guess fear of losing loved ones is when they’re flying.

**Gary Craig:** Okay. Have you lost loved ones before?

**Barbara:** Yes, but not with flying. [laughter]

**Gary Craig:** It doesn’t have to be with flying. But the mere fact is that it happened with you in the past, and so it becomes a very. Are you emotional about it right now about it?

**Barbara:** A little bit. My son is flying to Vietnam in a month, and he’s going to be actually flying around ..... shorter flights within that country, and I’m really fearful about him, not so much, not really on the ground, when it’s on the ground, but it’s this thing about the flying.

**Gary Craig:** Well, the environment in which we’re talking here is not a therapeutic environment. So it’s not best to go into lots of details here.

**Barbara:** Um-hmm.

**Gary Craig:** But the fact that you had the loss of a family member before - maybe even more than one; I don't know – can really give rise to this. So in this example that we’re talking of, that could well be fundamental to the reasons why the fear of flying that you’ve addressed so far isn’t all the way down. Because you said you could do it now, but it’s still uncomfortable.
Barbara: Um-hmm.

Gary Craig: And the fact that you would have this extra fear regarding family members. You need to go back – at least that’s where I would go, just based on the information I have, as if you and I were one on one, working together – I would go back to that other event, and I would start collapsing that one with EFT. I’d take the sting off of that one. I would take whatever emotional issues are still around, that, chances are, are showing up and causing undue discomfort in current circumstances regarding flying. It really isn’t flying so much as it’s the fact of losing a loved one.

Barbara: Um-hmm. But I guess the question would be general also: If I’m working - I’m a holistic health counselor, and when I work with clients and I want to use this technique – how do you figure out if you can’t seem to relate the fear to where it’s really coming from, how do you do that?

Gary Craig: That’s experience with this. See, you said you were a counselor?

Barbara: Yes.

Gary Craig: Okay. One of the things that, in my experience anyway, about conventional counseling, is the tools involved may be helpful, but they’re not anywhere near as dramatic and effective as EFT, and that’s just my experience. And as a result of that, it’s difficult to use EFT in the same way as you would with a lot of experience because it does things you’re not used to things being able to do. I mean you can do things in minutes with it that sometimes take weeks, months and years. Are you hearing me?

Barbara: Um-hmm.

Gary Craig: Okay.
Barbara: I have a couple clients that are interested in learning about EFT.

Gary Craig: Um-hmm.

Barbara: And if it’s something I can do, like, migraines, or something like that, or losing weight. But if it’s something like this, where you have a fear. I guess the question is: How do you get to the source? Because I understand, you’re saying about breaking it down to a ..... low level, so you can tap away that, collapse all those other issues. But how do you get to those?

Gary Craig: Well, the real question, if I may, is more like: How do you get the kind of experience that would give you the ability to do that?

Barbara: Okay.

Gary Craig: Because remember, this is, in fact, our introductory course, and we’re into sophisticated areas here.

Barbara: Um-hmm.

Gary Craig: But we have, as I mentioned earlier, loads of videos on www.emofree.com that show all these approaches, with real people, over and over and over again, from all kinds of different approaches, and that’s a great way to start getting experience. You’ll have clients you may be stubbing your toe with, and you start watching these videos, you go, “Oh! I could use something like that with Suzie, or John”, or something, and that’s what the real value is in those. It gives you all these approaches. The Basic Recipe itself is really mechanically quite simple. You memorize it, and it takes less than a minute to do it. But it’s the human system that becomes complicated, and that’s why we have so many videos showing all these different ways of going about it. I hope that helps.
Barbara: Yes. That’s very helpful. Thank you.

Gary Craig: Okay, Barbara.

QUESTION:

Carlene: Mr. Craig and Dr. Mercola, Thank you so much for sharing your art with us today. This is really wonderful, helping us to understand this process a little bit better.

Gary Craig: Well, thanks for calling.

Carlene: My question, first of all, involves, I’ve got a foster child who’s been through severe trauma, and of course, I would not try these techniques on him myself. But I need to know if he’s going to be a candidate for it. The reason I’m questioning his candidacy is because he’s got pretty severe scarring on several of the tapping points, and I wonder if that scarring on the surface of the skin is going to interfere with the effectiveness of the process.

Gary Craig: I don’t think so. But there are a variety of ways to get around it even if they do.

Carlene: Okay.

Gary Craig: First of all, are you concerned that it’s the scarring itself that may inhibit the actual tapping affecting the meridians?

Carlene: Exactly.

Gary Craig: It’s not because there would be pain there or something?

Carlene: Mainly just the transference of energy. Some of the things I’ve read on Dr. Mercola’s site indicate that if energy isn’t free to flow along the meridians in the body, that we’re not going to achieve the healing.
Gary Craig: Okay.

Carlene: So that’s my big concern.

Gary Craig: Possibly, there’s something about that. But I haven’t really seen that to be a problem. I wouldn’t buy into that belief yet.

Carlene: Okay.

Gary Craig: What I would do is, you can address other points on the body where the scarring isn’t if you want to.

Carlene: Okay.

Gary Craig: First of all, I’d just go ahead and address it like it wasn’t any problem.

Carlene: Okay.

Gary Craig: And see what happens. I would certainly do that. If you don’t seem to be making headway there and you want to experiment with whether or not that’s a problem or that’s in the way, then just start tapping the finger points, if you want. Also, if you go down the spine, if you take two fingers and separate them apart, maybe like an inch or inch and a half and tap right down the spine, several times, down the spine, you will find that access to all the meridians are on either side of the spine. So you can just tap down the spine.

Carlene: Okay.

Gary Craig: Well, that’s another way to go do it. The end points of a lot of the meridians that are on the facial points come out on the toes. That’s the other end of them, so you can tap the toe points if you will. That’s another way to go about it. But I
would address this as though that’s not a problem. I would address this more like what we’ve got to do is get to the real traumas here.

**Carlene:** Okay. Alright.

**Gary Craig:** That’s where the real skill comes in.

**Carlene:** Wonderful. The second part of my question is, this child also has, subsequent to a vaccine injury, he’s got some pretty severe food and environmental allergies as well. Should those be addressed as coming from a physical cause or coming from emotional as well? In other words, when we do a setup statement and that?

**Gary Craig:** Well, I would start with. I mean, name something he’s sensitive to.

**Carlene:** Okay. Wheat.

**Gary Craig:** Wheat. Okay. Alright. Well, a lot of people, I mean, it’s questionable whether people should eat wheat anyway.

**Carlene:** Right.

**Gary Craig:** But anyway, let’s just take that for example. “Even though I have this sensitivity to wheat”, “Even though my skin breaks out” - I’m making this up, you know - “when I eat wheat”, or “Even though I get anxious when I eat wheat”, or whatever the case may be. That is one way to do it, and keep at that, and see what happens around wheat. You may be able to get results just that way. Okay?

**Carlene:** Okay.

**Gary Craig:** You may also need to go back to find out, if you’re not getting any result at all, maybe there are some emotional issues – I’m going to make one up to give...
you an example – that’s kicked off the wheat thing. Let us say, a youngster playing Little League baseball. I’m really making this up. Okay? I’m stretching.

**Carlene:** Okay. [laughter]

**Gary Craig:** And his coach is mad at him for something, ridicules him and picks up a loaf of wheat bread and hits him in the face with it.

**Carlene:** I understand. Okay.

**Gary Craig:** Now, I really reached and stretched for that one. Okay?

**Carlene:** That’s okay. I got the point.

**Gary Craig:** But now, he has an emotional issue having to do with it, or maybe he was eating a sandwich with wheat in it at the time that happened. That would probably be a better example. That can trigger this, and so every time wheat gets in his system, the system remembers that and has that emotional response, which shows up physically in an allergy, in an anxiety response or something like that.

But I’ve had many cases, even with multiple chemical sensitivities, where we start addressing like this, and one by one, those sensitivities start to fall away. Go to our website, [www.emofree.com](http://www.emofree.com), and in our search engine, put in the term, “allergy”, or “allergies”. Gosh, there’s one case there. What did he say? I think he collapsed something like 50 allergies for his wife in a short period of time. But there’s many articles like that. So just go look for those things, and you’ll find them.

**Carlene:** Wonderful.

**Gary Craig:** Okay.

**Carlene:** Thank you. Are the mother or father the appropriate surrogates if they happen to be the unintentional cause of the emotional damage that occurred?
Gary Craig: The very first part of your question got cut off. I didn’t hear it.

Carlene: Okay. I was just asking: If the parent is an appropriate surrogate, if we need to tap on a younger child, if the parent happened to inadvertently be the cause of the emotional trauma?

Gary Craig: That’s a good question. I’ve never had that one. I could think of reasons in both directions. One is if they were the cause, then. Are you thinking of surrogately while the mother, for example, is holding the child?

Carlene: Or tapping for the child and that. But if we’re trying to get to the base of the emotional issues at all, and the mother happens to be involved, is that going to create a resistance to the child’s healing?

Gary Craig: Well, I don’t know. But let me tell you why I have two answers for you.

Carlene: Okay.

Gary Craig: One answer is, don’t do it. That is, leave mother out of the equation because maybe her presence is causing more problems than it’s solving.

Carlene: Okay.

Gary Craig: That’s one way to go about it. And see what happens. The other way is, for sure, put her in there because her emotional issues need to be collapsed as well as the child’s, and nice to do it simultaneously, and maybe there’s some extra levels of love in there that are going to bring more healing about, and that’s just going to have to be a trial and error. That’s an interesting question. I’ve never had that one posed to me before.
Carlene: Well, you gave an awesome, insightful response to that, to be able to reveal things between the mom and the child. Thank you again very, very much for your help.

Gary Craig: Okay. One more question.

**QUESTION:**

**Gary Craig:** Libby, hi.

Libby: Thank you for taking the call. I've never done EFT; so I'm very new to this, and I just wanted some specifics answered. Like, when you're asking a question, whether it's from yourself or someone else, do you want the person to focus more on themselves, like what's bothering them or what's triggering them? Or like you could say, “Well, my mother was mean to me”, or whatever. But would you say, “I feel bad that my mother was mean to me”, or do you know what I'm saying?

Gary Craig: Well, what you want to get – I think I heard your question correctly – what you want to get to is your *response* to something.

Libby: Okay.

Gary Craig: It isn’t so much what happened out there as your response to it. An example would be, somebody can see a car accident. Two people could see a car accident, and one person would, after seeing the accident, would go, “Gee. That was bad news”, and the other person goes into a big panic. Are you with me?

Libby: Yes.

Gary Craig: It’s the same incident, the same car accident, but two different responses. So it’s always the response. It’s the personal response that you want to get rid of, or make more normal, if you will.
Libby: Right. And then, the rating system that you use. You’ve mentioned it a couple of times. Can you give us an example of how it works. I guess 0 would be the typical goal? But what is 10? I mean is 10 like, can’t leave the house kind of thing or?

Gary Craig: Well, 10, typically — and I did not cover that as well as I might when I was talking about the Basic Recipe but it is covered in the *EFT Manual* – 10 would basically be the worst it’s ever been, whether it’s a physical thing or an emotional thing, it’s the worst it’s ever been, and 0 is complete freedom from the whole problem.

I will point out though, when you make this estimate, you’re really estimating. So some people think, “Well, I have to get it down to, it’s got to be 8.36”. You know?

Libby: Um-hmm.

Gary Craig: Well, no. [laughter] What you’re looking for when you start is a benchmark. Well, yeah, maybe it’s not a 10 at the moment, but boy, it’s an 8 or thereabouts. So you’d put down 8, but see, the important thing is after you tap, then when you start assessing your numbers, you’re assessing it compared to a number you’ve written down, which is 8, in this example. Then, by comparison, if it seems half as intense, well, now you’re down to a 4. Aren’t you?

Libby: Okay. Yeah.

Gary Craig: So that’s how you use it. These are estimates more than just cast in concrete type numbers.

Libby: Okay. And my last question is about the cadence of the tapping. I don’t know if we have time. But I would love it if we could just go through the whole sequence, like three times, so that we could get the cadence, if cadence is an issue.
Gary Craig: Well, I don't know about three times. I'll go through it once. How's that? We'll close with that.

Libby: Perfect.

Gary Craig: Okay. So let's just say we have an issue, and we're just going to generically call it, “the problem”. Okay?

Libby: Okay.

Gary Craig: Alright. You start chopping the Karate Chop spot like this, and you do it continuously. [tapping] Or first of all, before that:

- You start, on a scale of 0-10, what is the intensity of my problem? And so let's assume it's an 8.
- Then you start tapping on the Karate Chop spot [tapping] like this, continuously, and you say, “Even though I have this problem, I deeply and completely accept myself”. “Even though I have this problem, I deeply and completely accept myself”. “Even though I have this problem, I deeply and completely accept myself”.
- Then you would tap the Eyebrow point, and you'd say, “This problem”.
- Side of the eye, “This problem”.
- Under the eye, “This problem”.
- Under the nose, “This problem”.
- Chin point, “This problem”.
- Collarbone point, “This problem”.
- Below the nipple, “This problem”.
- Under the arm, “This problem”.

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Thumb point, "This problem".
Index finger point, "This problem".
Middle finger point, "This problem".
Baby finger point, "This problem".
Then you do a 9 Gamut, or for the time being, just slap the back of your hand, continuously like this [slapping back of hand], and continue while doing the following:
Open your eyes.
Close your eyes.
Open your eyes.
Hold your head steady and look hard down to the right.
Hold your head steady and look hard down to the left.
Roll them around in a circle like you’re looking at the numbers on a clock.
Roll them around in the other direction.
Hum *Happy Birthday*.
Count from 1-5.
Hum *Happy Birthday* again.

Then do the sequence again, which means:
You tap the Eyebrow point, and say, "This problem".
Side of the eye, "This problem".
Under the eye, "This problem".
Under the nose, "This problem".
- Chin point, "This problem".
- Collarbone point, "This problem".
- Below the nipple, "This problem".
- Under the arm, "This problem".
- Thumb point, "This problem".
- Index finger point, "This problem".
- Middle finger point, "This problem".
- Baby finger point, "This problem".

**Libby:** And then finish with the Karate Chop point? Yes or no?

**Gary Craig:** You can if you want to.

**Libby:** Okay.

**Gary Craig:** Now, I separated all that down, but it’s something that takes about 15 seconds. I simply do the – this is with my experience now - I’m not advising you to do this yet. Do it the long version first and get that down. But after a while, if you look at our videos, you’ll see I’m getting great results just simply going once through the Setup phrase, that, "Even though I have this problem, I deeply and completely accept myself". You’ll also find the more advanced things; I do a lot of other words within that, but that is more advanced. That’s in our videos. And then I simply do the:

- Eyebrow point.
- Side of the eye.
- Under the eye.
- Under the nose.
- Chin point.
- Collarbone point.
- Under the arm.

Those points only, and I stop right there and I assess how people are doing. Typically, that's all we need for one round. I can do that whole thing in 15, 18 seconds, something like that.

**Libby:** Okay. Alright. Great. Thank you very much.

**Gary Craig:** Alright. You bet you.

**Dr. Mercola:** Well, Gary, that was just wonderful, and I just am very grateful to have the opportunity to put this together with you, and I'm very excited about the future events that we're going to be holding because, as you mentioned, this is just the foundation …… basics. And even though you started to go into some specifics, we're going to have whole, individual, future teleclinics that will go into each of these areas and hopefully, we'll have you back in the future for some of those.

**Gary Craig:** Sure. That would be delightful. I've enjoyed all the people that called in. I enjoyed the interchange here. This is a good experience. I liked it. So, we'll do it again.

**Dr. Mercola:** And just to remind those listening that the DVDs are clearly available now, and you don't have to wait for future teleclinics. There's an enormous wealth of information. That is how I learned EFT, through watching Gary’s videos, and we'll send you the links, the special links - so we don't have to say it here - that you can actually go to the site and order the videos for further information.
So it’s an enormous benefit. It’ll change your life, and the lives of people you love, and it’s really an important part of the tools we’re going to need to change the whole healthcare system in this country. So thank you so much, Gary.

**Gary Craig:** Okay, and thank you.

**Dr. Mercola:** Alright for now, and we’ll have future ones, and they’ll be announced in the upcoming mails.

END OF TELECLINIC