

ANESTHESIA IN BODIES

(parts 1 and 2)

A lecture given on 13 October 1953

1st ACC – 12

Transcript of lecture by L. Ron Hubbard AICL-11, renumbered 6A and again renumbered 12 for the "Exteriorization and the Phenomena of Space" cassette series. Tapes number 663 (part I) and 664 (Part II) in the Flag Master List.

[Clearsound.]

And this is October the 13th, the first morning lecture. And we have this morning a little further data on the difference between an objective and a subjective technique, and a little more data on Step II.

Now, in view of the fact that you're nice and sleepy, probably, or something of the sort, I want you to look down from wherever you may be, from wherever you may be, and see under the right foot of the body a number of planets. Look down and see a number of planets under the right foot of the body. See a number of planets there.

Now look up and find two corners of the room.

Okay. Let's look under that right foot again and find a number of planets.

Now let's look up again and find the two corners of the room. Feel them, if you can.

Now let's look down under that right foot again and find a number of planets.

Now let's look up and find the two corners of the room.

Now let's look down and find, under that foot there, let's find these planets.

Let's look up and find the two corners of the room.

Now let's look under the left foot and find a number of planets – the left foot and find a number of planets.

Now let's look up and outside the MEST universe.

Okay. Let's look under the left foot again and find some planets.

Now let's look up and outside the MEST universe once more.

And now let's look at the Capitol dome in Washington and the Washington Monument.

Let's look under the left foot and find some planets.

Now look outside the MEST universe.
Now let's look through Eisenhower's eyes.
Now let's look through Lana Turner's eyes.
And let's look under the left foot and find some planets.
And outside the MEST universe.
And the Washington Monument and the Capitol dome.
And your left shoulder.
And the Washington Monument and the Capitol dome.
And your left shoulder.
And the Washington Monument and the Capitol dome.
And your right knee.
And the Washington Monument and the Capitol dome.
And the bottom of your lungs.
And the Washington Monument and the Capitol dome.
And the front of your nose.
And the Washington Monument and the Capitol dome.
And your right eardrum.
And the Empire State Building and the Tower of London.
And your left eardrum.
And the center of your stomach.
And your right eardrum.
And the end of your nose.
And the two extremities of the Great Wall of China.
And the bottom of your lungs.
And the sun and the moon.
And under both feet and find the sun.
And under both feet and find the Empire State Building.
And under both feet and find Saint Paul's of London.
And under both feet and find the moon.
And under both feet and find your skull.
Now let's get Earth and the sun.

Wherever you happen to be at the moment, get a whole mob of people in front of you trying to understand.

Now, turn that around to make a whole mob of you trying to understand.

And throw that away and put a whole mob of you trying to understand.

Now face that about to a whole bunch of other people trying to understand.

And throw that away and get a whole mob of people being uncertain.

And turn that around on you as uncertain.

And a whole mob of Seeing Eye dogs trying to see.

And turn them around as the answer "Trying to see."

And turn them around again as the question "Trying to see?"

Now get them barking.

Now get them barking their ABC's.

Now blow them all up.

Now put out your father's head and blow it up.

Now put it out two miles and blow it up.

Put it out ten miles and blow it up.

Put it out forty miles and blow it up.

Now get a vast multitude under you admiring you for having done this to your father.

Now throw those away and put your mother's head out in front of you and blow it up.

Put it out there about two hundred yards and blow it up.

Put it out there again about two miles and blow it up.

Now put it out two light-years and blow it up.

Put her out there again and blow her up.

Now throw all that away.

And under your two feet find the sun.

And under your two feet find the floor.

Under your two feet find some planets.

Now find the corners of a room of an Inca temple.

Now locate the moon.

Now locate the two corners of the room.

Now put the feeling of sadness in the two corners of the room.

Put the feeling of grief in the two corners of the room.

Put the feeling of apathy in the two corners of the room.

And grief in the two corners of the room.

Find the moon under you and put grief in it.

Now put love in it.

Now put happiness in it.

And find the two corners of the room.

And put happiness in the two corners of the room.

Okay. Now put happiness into your bodies.

Happiness into the two corners of the room.

And happiness into your bodies.

Happiness into the two corners of the room.

And happiness into your bodies.

Happiness in the two corners of the room.

And happiness into your toes.

And happiness in the two corners of the room.

Happiness into your legs.

Happiness into the two corners of the room.

Happiness into your stomach.

Happiness into the two corners of the room.

Happiness into your lungs.

Happiness into the two corners of the room.

Happiness into your heads.

Happiness into the room.

And happiness into the Empire State Building.

Male voice: That's a new one, Ron.

And happiness into your body.

And happiness into the MEST universe.

And happiness into your body.

And happiness all around outside the MEST universe.

And happiness in the MEST universe.

Happiness outside the MEST universe.

And happiness into your bodies.

Contact the two corners of the room; put the emotion you think should be there.

Open your eyes.

How did it feel?

Male voice: The best yet.

You see how many ways extroversion and introversion...? Actually that's all we were doing – all we were doing. This could be run with the phrase "Put your attention on; take your attention off; put it elsewhere." It could be run on three universes.

You can be a bedpost or be that chair looking at the room. You can be an enormous number of things. But, it can also be arranged irregularly.

Now, just as though it had nothing whatsoever to do with that, I'm going to tell you how to make chiropractic work, just to see if you can relate these two – these two dissertations one to the other: "How do we make chiropractic work?"

Well, we stretch the patient out, preferably on the table, his back up. And we find out that the patient has been having pain in some part of his body or another, and we can nearly always find that some area of the spine is pushed aside or crinkled in or crimped up one way or the other. We can always find that's the case.

The extensional nerves which go down the interior of the spine, go through a great many disks and of course, can be cramped. And it's an odd thing, but the nervous system – there's a dissertation on this in Book One: How you would form a nervous system by impacts. It's in the beginning of one of the chapters of Book One. So, naturally, you'd find the skull hardest and the brain being a shock cushion underneath the skull. All right.

The excess shocks and impacts which have gone in and caused the neurones to form up the brain, of course, did not find enough tissue absorption in the brain – possibly, we can hazard – and so, not finding enough tissue absorption in the brain, were made to extend additional neurones for additional shock absorption, and this was of course extended on down the back.

If you hit somebody on the feet, it is an interesting thing that he gets the shock in his head. That's quite interesting. The shock in his head is worse than the shock in his feet very often.

All right. Let's go just a little bit further with this and we'll find out that somebody is hit in the feet, he is also hit at the base of the spine.

When we are running a severe shock or injury, we must not forget – if we are doing Effort Processing or any kind of a process which is trying to move somebody on a time track... And very often, you'll just look at this character sitting there, and you'll find out that he just can't move where he is. And there just is no motion. And he's in such an apathy about it and so on, that you're going to bail him out one way or the other, so you shift him, just perforce, with anything you use. You just shift him. He's running "Nothing can happen." He's got such a terrific brace on it.

Well, you may find he was a little child and he fell out of a window and he hit the step or something of the sort and – and how do we run – how do we run the pattern of the shock?

That's an interesting study. As soon as you start Effort Processing, and start working with Effort Processing, you start tracing the shock patterns of the body. And if you do not know the shock patterns of the body for blows on various parts of the body, your success with Effort Processing is minimal.

But if you've got some sense, and you've got a little brain and you're careful to figure out where the brain is and where the brain isn't and where the shock patterns go, Effort Processing today is a tremendously workable technique.

All right. How do you do this then? You find out that an impact on the feet will travel up to the brain and then go back down the spine. So we're traveling on the most extended and severe shocks which the body has ever received if we are tampering with the spine neurones.

If we wanted to treat the minor shocks we would treat the brain. If we wanted to treat the major trauma and effort – in terms of effort – we would treat the spine. Is that so? Follows, doesn't it? Because then the severe shocks to the body have reacted and reperculated into the spine, and you will sometimes find that – something wrong with the base of the spine on a person.

You will be asked about this. You will find something wrong – this person has something wrong with the base of his spine. You know immediately that you find this, that you are dealing with a severe shock which traveled up through the body, went through the brain, went down the spine, couldn't find any more neurone, tried to make some one way or the other, then turned around and re-echoed on itself and traveled up the spine again toward the brain, hit the brain, went down to the original point of injury, turned around at the original point of injury, went up, went into the brain and went down the spine again, hit the bottom of the spine, couldn't make any more neurone and then turned around and went back up to the brain again. And this is the shock wave that has followed through the body.

Well, what does this tell us and what use is it? Well, it developed a whole school of thought: chiropractic, with treatment of the spine. They didn't know why this worked, but it works. All right.

You'll quite often find people have some sort of a cyst at the tail of their spine – that they have something wrong with the sacroiliac. They have something wrong actually with the anal area. The anal area belongs to the genitourinary system and actually is a better cousin to a respiratory tract than it is the spine. Nevertheless, it can be affected by such shocks.

You'll find people confusing the anal area with the base of the spine in terms of injury. Well, somebody comes to you and they've got this trouble in the base of the spine; they have suffered such a severe shock that this sort of a concatenation of shock has taken place and this is the pattern of injury.

[Please note: at this point in the lecture, a gap exists in the original master recording. We now return to the class where the recording resumed.]

And continuing this dissertation on the subject of the spine – not really the dissertation on the subject of chiropracty, although I certainly have nothing against chiropractors. I dare say chiropractors have probably done more for man than doctors. I seldom find chiropractors opening their offices up to prefrontal lobotomies and amputations and histectomies [hysterectomies] and appendectomies just for the two-hundred bucks.

Anyway, they try to work out of the body, displacements of the vertebrae and the disks. Well, this is all very well. Of course, these things do get displaced on a severe shock. And a shock to the spine itself seems to tell the body that it has received a much greater shock in some other portion of the body. You understand? See, I mean, you get an injury to the spine and this immediately tells the body, "Boy, there was a terrible injury to the feet." You see how that would be? Because the spine is the extensional shock absorber. When it itself is injured, why, there's a total assumption and connection all the way through the whole system that some other portion has been interested [injured] and the spine was the secondary injury. Whereas you simply kick somebody in the spine...

All right. So a shock in the spine does not have to be as great as the shock in the knee in order to produce the equivalent trauma.

Very well. Where does this take us? This takes us into communication, internal and external, and into a type of therapy, which, if you ever practiced with very little children, dogs, cats or psychotics, you'll find yourself very happy to have this process – very happy to have it. It is, of course, tactile processing.

Tactile processing simply consists of bringing the being into communication with an area which he thinks he must avoid and showing them that it is safe to inhabit the area. Immediately I hope some minds jump to the immediate conclusion with regard to Theta Clearing, because its first cousin, right there.

All right. The amount of anesthesia which you find in the body is great. The sexual parts have anesthesia – a marked anesthesia compared to the amount of sensitivity which they could have. All you've got to get as far as sex is concerned is "Don't look." And, of course, it'll come right on down to "Don't feel." And this is the handy, jim-dandy, little, two-bit technique that they use to pin people down in bodies.

What's it got to do with pinning somebody down in a body? Well, if you can't look and you can't feel, that means, automatically the thetan thinks he's avoiding. Now, in most bodies you will find an enormous zone from the abdomen down to the knees and through the genitals, which is forbidden territory – mustn't touch – because, of course, if you can't look, you mustn't touch or if you can't feel, you mustn't look. It just adds both ways up. It's just a silly identification, Q and A, Q and A, Q and A.

And if you have this amount of area in the body which is anesthetized, even to a slight extent, you've got a part of the body which the thetan can't inhabit and it's a part of the MEST universe which is forbidden to him and it's right close to home. And if he can't inhabit something that close to home, he sure can't inhabit, he knows, Abyssinia or something. See, that's a long way away and that's not his country. He feels he might go there and do something about it.

But where a thetan has been and where he can no longer go is more important therapeutically than Abyssinia because he has learned a lesson. He's got some past track on it. He has facsimiles on it. There are deposits of energy which are stacked up.

So let's look at sex, and find out that in sex we have the area which you can inhabit which has been inhabited. So therefore, the thetan must stay braced against the area. And, of course, with reverse flows and so forth, as long as he's braced against an area, he doesn't exteriorize. All he's got to do is start bracing against something, you see, and he can't separate himself from it. The trick of the MEST universe is "Fight me."

If you're interested in buttons – I collect buttons: Rotary buttons and other kinds of buttons, but particularly nice push buttons on a subject the mind really reacts to.

And the nicest button you ever saw, because it combines with "have" (and "have" is tremendously important) – "You have to have a stomachache" is about the roughest sort of a button. If somebody has a bad, bad time with his abdomen and you want to bring immediate relief to it, you just get "have." Of course that runs right out "have to have a stomachache." You will end the process prematurely if you merely discharge "he has to have a stomachache." What you'll have to run is he has to have a stomach. Do you see? Because he can only have a stomachache if he couldn't inhabit his stomach. This is quite important.

The only therapeutic agent with which we are acquainted is the thetan. All other agents are part time, sporadic, erratic. And if an infection can set in, in the body, that's just one infection setting in. Another infection will set in there too. Why? The thetan can't inhabit the area. The initial trouble on the matter and the final cure on the matter is a thetan able to contact that area. If he can contact that area, he can cure that area and there won't be further infection in the area. This has been subjected to test, by the way.

All right. Now, although that data may seem random to you, but it's not random, not even vaguely random. If he can't inhabit this zone, which is the abdomen, genitals and the frontal part of the thighs, he's in a wonderful – wonderful condition, because that's an area he can't inhabit. Well, if he can't inhabit that area, then he figures he hasn't got any area to inhabit. And you get the identification. If he can't inhabit an area in his own body, then he can't inhabit the area back of his head. That's just part of it, you see?

Can't is too strong a word there because he can always partially inhabit an area. Therefore, he could partially inhabit an area back of his head. So, therefore, you get the uncertainty of exteriorization. He get real – he gets real uncertain about being out of his head, you see, because he knows he's a body and he can't be in his own stomach. He doesn't want to be in his own stomach. He's seen the terrible example, continuously, of what happens to beings which he eats and which go into his stomach. And he, of course, identified with the being, doesn't want to be in his own stomach. So that adds up and then the sex organs add up because nobody can look at them, so therefore he mustn't look at them. If you can't look at them, you can't be in them.

A thetan can be what he can see; he can see what he can be. That's like a nursery rhyme but it has fantastic effectiveness in processing. He can be what he can see; he can't be

what he can't see. Well, he doesn't like to be only what he can feel because that's too close up. So as soon as he gets into feel, he starts to get an effect from it. He isn't looking at it.

So we knock out, in the sexual organs, lookingness. And we knock out inhabitingness. And so inhabitingness means there's an area of his body he can't inhabit. Well, if he can't inhabit that area of his body, well, there must be other areas he can't inhabit too. And on Q and A, he would tell you that he doesn't want to be in front of his body. Sounds silly, but he doesn't want to be there. There are other reasons other people stand in front of his body and he doesn't want to inhabit them. There are too many times – "Ugh," he says to himself, "blah, horrible," and so on. So he – you never find a thetan willing, really, to walk out in front of his head. He is so unwilling that you find most real, roaring psychos are not in the body; they're out in front of their faces. Way out in front of their faces – yards out there. They've – they've blown through.

All right. Let's add this up a little bit further. What's this got to do with an anesthetized spine? What's this got to do with chiropractic? Well, he's gotten the idea that he doesn't want to be in places that blow up – one of the reasons why Explosion Processing is so effective. So he doesn't want to be in this neurone system. And he has an aesthetic.

Never overlook the aesthetic factor in processing – good old 8-80 – beauty and ugliness, beautiful sadness, all these things. The cells of the body are what are beautifully sad; MEST is beautifully sad. You'll find people running beautiful sadness. And, boy, they're so darned low on the Tone Scale that you'd have to use a parachute to get down to them after you've touched bottom.

So, when you start into areas which can't be inhabited, you get areas which one can't be. And you get the first reduction of beingness because it's closest to home on the part of the thetan.

All right. Another thing: The thetan is continually asking some exterior entity for permission to be. This immediately opens up a process whereby you do a mock-up of the body. And you get other people standing around telling the thetan to be in it, telling the thetan to be out of it, telling him to be above it, telling him to be below it. The next thing you know, bodies in pawn show up. And you're not surprised. You find out your preclear doesn't have mocked up, all of a sudden, his body. He's got a body in pawn mocked up, and then he'll mock up another body in pawn. And bodies in pawn start to go off. On doing what? Exteriorizing the thetan to the left, to the right, in mock-ups. Having other people stand around and tell the thetan to be above and below and around. And telling the thetan to go down and be George Bim and telling the thetan to go here and go there.

The cases which are really loused up and had this happen to them so often that they don't think they have their own power to get in and out of the body, they think somebody else has to come along and say, "Hey you, be in such and such a place, and be such and such a person until we say 'boo.' And when we say 'boo,' you will then return here, and then we'll tell you where else to go."

That is what's really nagging your case that you're having difficulty with. He's so used to being told where to go, what to be and what he can be; he's got a license to survive and he's getting permission to be. But, boy, you really have a time for yourself.

There are various traps in the universe whereby you walk into this place and there's a big, glowing stone or some other kind of a trap. And well, you just walk past the stone and he's out like a light – pambo. And somebody picks him up and says, "What a nice fellow you are. Now, why don't you go down to Earth and get a baby and grow up and be a nice man. And then when you die down there, you just come right back here immediately. And this is your reward." I mean, this is all – sounds silly to you, but it'll blow off and sometimes blow up a case with which you're having trouble. Blowing up a case with which you're having trouble is a very, very profitable venture, isn't it?

All right. So, you take this person who – in front of himself – who doesn't exteriorize on Step II and doesn't exteriorize then and there readily, you give him mock-up drills of all kinds and descriptions – introversion- extroversion drills, and so on. But you start giving him this drill of people standing around saying be to the right, be to the left, be above, be below; and get him standing around telling people to be to the right, be to the left.

Well, he basically despises the people who first started him down scale on the track. So every time he has theta cleared anybody, he's gotten a little key-in on this until he finally believes that he has to be told explicitly where and what to be, and in a certain state, and in a kind – a certain kind of a trance and so forth.

There isn't a person in this room that we could not hypnotize and send over and have with complete certainty, then take over the complete, entire running of practically any body on this planet. Now, that's a wide-open gate for some black lodge to start operating immediately upon Earth, because it's absolutely true.

You go down here and find along the curb some little kid. You take this little kid. You hypnotize him, dope him up, and so forth, shoot him over to Russia or England or some place and pick up some governmental person and start running them. You could do this.

This, by the way, many, many eons ago on the track was the favorite method of political control and remains so today. Now, whether we like this or not, it does indicate to us that there should be a process connected with doing a mock-up of the body and having the thetan be to the right and be to the left and be before and be behind and be above in the mock-up in brackets – other people tell him about it and so on. As soon as you get this drilled out a little while, then you just go back to Step II. And you simply mock the body up and mock the body up and mock the body up. Then you can have mock-ups which demonstrate permission to leave.

Military forces dramatize this. A naval officer is never able to leave the ship unless he's got the captain's permission, and so forth and so on. Everybody dramatizes this, but particularly the military. And here's an interesting situation with regard to right to leave. Well, all right, what about right to inhabit then?

Well, when the society sets down and says with malice aforethought that a person does not happen to have the right to inhabit certain portions of his own body, you're starting to get

into real trouble because there's the genus of disease, injury, accident-proneness and also a good, solid proposition about nailing people down in their bodies.

You see, it doesn't matter what people say to thetans or what people inform people of and all this sort of thing. That's beside the point. Language or idea interchange would not be even vaguely effective in this universe unless they were squarely formed upon the phenomena of the universe.

You process the phenomena, you don't process the statements. You get the reason why? All of this material that you speak and run and so forth, has a mechanical base of comparison with this universe. And you run the mechanical base and you get someplace. And you run the statements and the phrases and the ideas and you don't get anyplace. Because the idea is at the last moment of crush – the last moment of crush. We won't process the last moment of crush. Just to get the person out of the crush area is the emergency. Either reduce or get the person out of the crush area is the emergency. And the actual one is, bring him up Tone Scale to a point where he isn't even vaguely worried about crushes.

All right. What's this, again, got to do with the spine? You can go up and down the spine and find various spots on the spine which are uninhabitable. They're anesthetized. People seldom realize this because who looks at a back? Sex be damned; sex is visible. But backs – a fellow just plain never looks at his back.

Most people, when they're having difficulty being exteriorized, when they get out they take a look at the body, the body is just a black blob. The main part of this is they're looking at the back of the body. And they never look at their own backs. Backs are seldom displayed, and so on.

You'll find people here and there through the society who have fetishes about backs. And they will adore beautiful backs, and so forth. But backs are just – they're so bad off that they're completely forgotten about.

One of the reasons for this is because they're the residual shock of the biggest injuries which the body has received. The body has received these enormous shocks and injuries and they've been mirrored in the back. But when there's been a direct spine injury, the body knows it's dead. When the body knows it's dead, it must turn around then – it knows it can't survive as itself. As soon as the body knows it can't survive as itself, it has to turn around and survive as sex. That is to say, it's got to go on down the time track.

So, what do we get then as the steps of the body which become uninhabitable, and which is the most uninhabitable area of the body? Sex? No. When the body finds out it can't survive, it has been subjected to a sufficient amount of injury that it has registered a severe trauma in the spine. Regardless of where the body was hurt – regardless of where the body was hurt. And you'll find anybody who is difficult to exteriorize is having a spinal anesthesia.

You go up and down his spine with a pin, with a hammer, and you would immediately discover (and he would be much amazed to find) that there were large skin areas on the spine – just the skin areas – where he can't feel anything. His next area is of course sex: genitals, the area of the abdomen, the front of the thighs, and genitalia. But that's second.

Well, what do you know. I mean, life isn't all based on sex after all. Freud wasn't as deep as you could get. Deep as you could get was really the spine, by this logic and by test.

You'll find anybody who has a spinal anesthesia has entered the thirds – the second stage of dependency upon sex. They received an injury to the body. This convinced them that the body was not going to survive forever. Immediately they abandoned the idea of surviving forever as the body and they switch off to surviving by making other bodies. This is a GE specialty. Here's the way the GE operates and the thetan's patterning the GE.

All right. Its second choice, then, is the sexual area. And what's its third choice? What happens when sex gets knocked out? You really get the secondary loop of all secondary loops. You get a thetan, you see, who is trying to inhabit the body. And then you get a thetan being a body that's now trying to be a spirit. So, immediately that you get into the third echelon, he's got to survive as a spirit – religion – that is to say, become immortal by some necromancy and go to heaven by some prestidigitation, and so be able to survive forever or even go to hell – that's at least surviving forever. So you've got a case that has gone through to the third echelon trying to be a spirit on the third strata. He is a thetan inhabiting a body that is trying to be a spirit. You follow that?

So you're trying to exteriorize somebody who is concerned with taking care of his spirit, which is something on the order of his watch, see? And you'll find these people being terrifically removed with regard to their processing. Why are they being so removed with regard to processing? They're processing something else.

You've got a preclear in front of you; and there sits the preclear; and you're running – running the preclear all right, you say. But, doggone it, the preclear is already concerned about the body because it can't live forever. And then the body's concerned about sex because sex has failed – can't have all the babies he wants, and so forth, or she wants. And so we find that the spirit has entered in here. And we're processing – we're processing a thetan who is processing a body which is trying to process a spirit. You're never going to exteriorize this boy as long as he's in that kind of a state of mind because he's processing something else.

Get your order of deterioration and inhabitability. The body can't inhabit itself anymore; it's got to inhabit a spirit. You'll find when he gets way on down the line, that he's lost the eighth dynamic and – pardon me – seventh dynamic; he's gone into the eighth dynamic. He's got to be God, going all over space, and so forth. This is the last stages of paranoia. They've got to be God; that's a manifestation of it. And you'll find some of them retreated from the seventh back to the sixth dynamic and they're trying to be a piece of MEST. So there's a fourth and a fifth stage of deterioration.

Now, you're going to process a psychotic on the subject of Theta Clearing and get anyplace? No. No, you're not. You're going to have to get him into a body and comfortably inhabiting the body, actually, before you could exteriorize him. Now let me – let me just summarize that very, very bluntly. When you're trying to exteriorize a thetan, you're exteriorizing a thetan who is so extremely worried, thrice removed or twice removed in many cases, that he doesn't remove as the thetan. You see, nothing can happen to a thetan. That is the pity of it. That's the horror of it all. That's the horror of a track.

Here's the body. The body loves the idea of survival and no pain. It hates the idea of pain – oh no! And the thetan, he's very fond of pain. It's sort of interesting.

I ran a preclear one time who just fought me – just fought me, you know, with practically fingernails – trying to keep me from convincing her of this. I wasn't trying to convince her of this. I'd just made the statement, "Well, I don't know, as a spirit you may enjoy pain, who knows." And she just got madder than hops. So I had to stop telling them that after that, even vaguely hinting, that this might be true. And I just had them waste pain until they suddenly found it out.

Well, I wasted pain on this preclear in a bracket. Getting this preclear to waste pain. They found out that pain was very difficult to waste. Always watch these things that are very difficult to waste. As boy, are they valuable. And it's value that makes scarcity which makes singleness of possession which is havingness which is what pins the person down into MEST.

All right. This person, finally, at last found herself in facsimiles here and there early on the track where she was hanging over this body and watching it writhe and saying, "Well, I'll have to help the poor thing out." And then just moving into the body very quietly, you see, enjoying all that beautiful pain.

The thetan actually can't get any sensation unless he gets some compression. And his anxiety is "How do I get compressed?" I was telling somebody a short time ago – at first it didn't seem – it didn't seem terribly unpopular to him. I said, "Now, the way to keep – the way to keep a wife is to beat her regularly. Don't go in for this idea that you should never – that you should never lay hands on a girl." Of course I got an immediate howl. But I just said it for a gag.

And all of a sudden the people present began to think of the – when things were going well and there was no quarreling, there was no need for anything; and the wife was getting ignored and wasn't getting anything – very little attention, and so on – she left the guy. But at times of terrible stress and poverty, when she was getting thrown downstairs, and hit with a clothes bucket every now and then, and so forth, and you'd have thought just beautifully messed up – no thought of breaking that family up. No sir!

It's fantastic. You'll find out that families blow to pieces in the moments of calm, not in the moments of stress. Well, that's the same way with a husband. You'll see some husbands going around and they're married to some gal. My God! She throws books at him, stamps and beats her feet and once in a while will hit him with a poker and screams and roars and so forth; and the family doesn't break up. You might find him doing other things than being completely maritally loyal, but he doesn't leave the girl. Oh, he says he will. But everything is going along beautifully, and so forth, and she's working hard to send him through medical school or something of the sort. And everything is going along, and she's being the best girl you ever heard of. And the next thing you know, well, what do you know, why, pam! He's off with some other dame – overtly and gone.

Now, life makes sense on SOP 8-L, when you run it – something you should learn for yourself. But it's violence, pain, distress, problems, that sort of thing, is the breath of life to the thetan. Boy, he's really got himself in wonderful situations where there's lots of agony and

emotion and beautiful sadness and dramatization galore. He's just happy as can be. He just gorges. The guy's wonderful; he can just gorge on that stuff

Okay. Now, that's great. But when everything is calm and peaceful and so forth and he has the orange grove which he's retired to, and the kids are all doing well and everybody's doing well, he's liable to go out and blow his brains out.

Life makes sense when you realize that work and pain are intensely desirable, intensely desirable to this strata of existence. And calmness, peace and long-term survival, they're not desirable. We'll go over that an awful lot when we get into SOP 8-L. We're not in there now.

But keep it in mind that life does make sense. It does make sense. It's just trying madly not to. Because if it permits itself to make sense, there's no randomness. Life's effort is not to make sense. Life makes beautiful sense, if you look it over squarely, and so forth, and are willing to be sufficiently detached from it.

All right. Let's look, then, at this business of the geographical. You know, the sun and the moon have geographical areas in navigation. Yeah, they do. They have geographical areas and they're known as the GP – the geographical position on Earth of the sun at a certain hour and the geographical position of the moon. It means if Earth is blown up to a sphere as big as the heavens, at that particular orbit that the latitude and the longitude of the body on that theoretical sphere would be such-and-so and so-and-so. So we could safely say anything has a geographical position – the only point I'm trying to make here.

The body, although it can move around, is still a position in MEST. Don't forget that one, by the way. That is liable to trip you someday. You're liable to start running out all the geographical positions to which this boy is allergic and then suddenly find out the geographical position to which he's allergic is him. He's mobile, and he's been carrying this geographical position all over the place. It's this horrible thing called mobile geographical position and that's what louses life up. If we only had GPs as precise as the sun and moon – but the sun and moon move, and they're still geographical positions.

All right. Where – where do you start in then? If you were going to assess somebody, brutally and cruelly and wickedly – just pull their problems to pieces at a heck of a rate – how could you positively and completely assess a being by never asking him a question? Never putting him on an E-Meter; E-Meter's secondary. Boy, that's easy as can be.

You would look for these first two signs: Anesthesia of the back spine area – how great and how marked. Anesthesia of the genitalia – how great and how marked. And if you had both of these – if you had both of these – you would look for the deterioration of the endocrine system and signs in the person that the thetan was trying to kill the body – physical signs. And these show up in very marked and precise ways. We needn't go into that particularly. The thetan is trying to eat the body up or kill it so that it can survive as a spirit. Isn't that cute.

And you'll find many a preclear who will just sit and chew and chew and chew and chew. And he says he's chewing on engrams; he's not. He's actually trying to knock the body

off. Eat it up, chew it up, one way or the other. Because he's doing – he's doing the very best thing he can. It is anesthetized. It can't feel anymore.

So what are the first three positions – the first three big, marked, radical positions? The encroachment of succumbing and the difficulty of the case is marked in these stages: One, anesthesia of the spine. Two, anesthesia of the genitalia. Right in with that comes, by the way, stomach difficulty, digestion difficulty, and so forth. But it's anesthesia we want. And the next is anesthesia of the body itself as a whole, including its sense organs such as particularly taste and smell. Those are the first two sense perceptions to go. Okay?

So, you look at this person and they are terribly thin, very thin. Or they're this way or they're that way. If you were to give them an examination, if you were to stretch them out on a table and look over their spine – if they were very thin and looked in bad shape, you would be wasting your time to do that; you would just know – but you ought to do this just for your own satisfaction. You look over their spine – anesthetized.

If you were to take the abdomen (you needn't go into the genitalia), or the front plate of the thigh, you would find a marked anesthesia. Oho! Then you – they will worry about pain. And they will accident-prone and try to get pain. But you'll find out the remainder of the body is anesthetized. And then from the anesthesia you go into the perception deterioration and the perception deterioration starts with taste and smell.

Anesthesia actually starts out, then, with feelingness which is immediately allied to lookingness. And you can measure directly the body's ability to look by measuring the deterioration of its ability to feel.

Now, he has been able to feel and now he can't feel. Which tells you what? It tells you he has digressed from looking to feeling, and that was all right. Then he regressed from feeling to not feeling. Well, that was all right. About the time he gets into not feeling, he's into thinking. And when he's into thinking real deep, and so forth, why, that's pretty bad, but he goes down from there to being nuts. It doesn't mean he necessarily deteriorates this whole cycle in one lifetime, by the way. He's busy agreeing with what MEST ought to do.

Somebody tells him to get out of the body or tells him he's got to "come back here" – what do you think? All these boys are worried about trying to get their anchor points back, and somebody's trying to get them back, and so on. And you can get your anchor points just back so far, and you just can't feel a thing, believe me. You start pulling in hard enough, you feel nothing.

Theoretically, now, you could merely put your hand out, and by tightening up its muscles and withdraw action, you could bring about a state of anesthesia by pulling in the anchor points which make up the muscles. Just try to get a withdrawing action very, very solid, and test the amount of pain – the relative pain in the hand.

Now, what you would get in a case like this is the person does this instinctively when he hits his finger, for instance. He immediately pulls the finger into him and tenses and tries to compress and tighten – bring into him again – all of the muscle anchor points. This is to shut off feeling. And recoiling from things shuts off looking and then shuts off feeling. The real deepest horror there is, is to get him back so far that one cannot look and he dare not feel. And

the summation of horror is simply "must not withdraw, must not reach"; "must not grasp or let go." You can just run that as a concept on a person and horror turns on. All right. The anatomy, then, has a great deal to do – physical anatomy – has a great deal to do with a person's ability to exteriorize.

What is a very reliable technique? Oh, this is a very reliable technique: exteriorization-interiorization. That kind of shifts a person's viewpoint around, coupled with, on a very difficult case, the patch-up and repair of each one of these steps in terms of geographical location of the body.

You see, there'd be nothing to this. You want to get this person to put out anchor points. This'll rehabilitate his feeling. But any technique, if it's extroversion-introversion, recovers communication. Recovers communication in the interior. Recovers communication in the exterior. And so we go right along with it. There's nothing to it.

Now, is there an artificial method by which we can do this? Well, not very well. But if there is one, it would go in this fashion – a very simple one, a very quiet one, a very careful one. It would give an irregular, alternately peaceful, pleasant, and again irregular, sensation in any part of the body which you desire the thetan to reach. Don't give a monotonous – don't do it on the body – tap, tap, tap, tap, tap, tap, tap. No, no, no. If you're tapping any part of the body, to get the thetan to reach it, you'd go [sound of taps of varying speed]. Keep surprising him. Because after you've gone this way [taps] a short time, it's a steady attention, repetitive cycle of action, which is no motion or no randomness and so he doesn't give it any attention. No randomness is the background. This repetitive action is the beginning of automaticity. He simply sets up a circuit to look at it. It's going that way, hell! He doesn't look at it again until it goes suddenly [taps]. Now, you haven't paid any attention to your heart for a long time, but if your heart all of a sudden went [claps] you'd pay attention to it for a moment.

Or you could take a person exteriorly on the subject of skin, and by using – using a small, light, very gentle brush, a bristle brush, pins, a wood file, an emery wheel and such bric-a-brac, produce different types of sensation with which the thetan can communicate. Right?

All right. The next thing you would do would be to produce sensation in the area irregularly. You know, you could put the file across it, z-z-z-z-zip, then you get the z-i-p, then zip-zip-zip-zip-zip, and then z-z-zip; you'd have his attention.

You want to heal up somebody's broken leg in a fair hurry, all you'd have to do is take an extremity beyond the point of the break and start to operate all around it – changing your location and changing the intensity and vibration and characteristic of touch on that area. This tells you how to do chiropractic.

It's only when the vertebrae would go completely out, that an injury to that level that chiropractic is interested in. But let's not be quite as fascinated with that.

The only reason the vertebrae is out is it's being held out by tension. You'd really be working it slightly wrong way to, to give it just an adjustment. That is just a shove-off or something of the sort. Actually, if you could take the tension of it off one way or the other, why, you'd have a better situation. But where it's out severely and so forth, had been pushed

out by an injury, yeah, sure, you could change its sensation. And when you change its sensation you attract the person's attention to it and you get the only therapeutic address it can have applied to it by the change of attention.

When there's something very mechanically wrong with the vertebrae, it's practically an operation to get it really back into shape again. But chiropracty accomplishes this, and very often snaps the spine that's slightly out of line or dislocated back into line and you get an improvement in the condition.

Well, you've given a little counter-shock to the area; you've done various things on the area. But, let's not just hit or miss on this area. How many of various things can you do? If the vertebrae is really out of line because of an injury, you get it to be put back into line by a chiropractor, by a medical doctor, by something or other; you'd adjust it mechanically – I'm not advocating adjusting it mechanically, by the way – or if you simply better plow into it on a business of restoration of feeling and looking in the area – how simple.

So, you just take this spine and you – with taps and clips and hits and little zips and things like that and various attractional sensation to the area – the person, theoretically, could just be made to bring his attention down into the area – just blow out whatever's wrong with it. Do you see that?

You take an injured part – sprained wrist, sprained ankle on a little baby, or a hurt horse, or a hurt dog – the only therapy you really got that's really good therapy is just that one: mechanical, erratic sensation in the area so as to bring about a communication on the part of the being running this mock-up to that area and so a reduction of the tension and shock in the area, which actually is a blowup of the trauma in the area. The only process you've got with small children, and so on, that is immediately workable.

And it's workable on people out of communication, as in the state of a catatonic. A catatonic, of course is so low on communication that they are in terrible condition. Now, if you were to put a catatonic in a vibrating drum of some sort or another which would attract attention alternately and irregularly to their body, they very possibly would come out of it. See, there's no permanent injury to the thetan ever. He can always be persuaded to do something.

Very well, how do we – how do we tie up, then, all these things I've been talking about? Exteriorization- interiorization. Well, if a person doesn't communicate well interiorly, don't expect him to communicate well exteriorly. If he can't handle the first object of the first dynamic, he won't be able to handle the sixth object of the sixth dynamic, which is the MEST universe. If he can't handle that body which is right in front of him and he's badly stuck in it, his problems will be so great in terms of trying to control the body, that you aren't going to get him to relax his attention for a moment and try to control the MEST universe.

People who can't move things, for instance, are still too wrapped up in trying to control minor things such as the body, see? Their attention is so fixed upon the body that they cannot unfix their attention to anything else. They're fixated in then – on this operation of control. The more fixated they are, the harder they are trying to control. Control is – the effort to

control and the feeling that one must control has its inception with this grade: Cannot inhabit. "If I can't pervade, I have to control."

So, if a fellow can't pervade, one, the spine – and he's doing all right everywhere else – you can kind of follow shape right there and you'll have a little trouble exteriorizing him. If he can't pervade his spine or the area of sexual anesthesia I've mentioned, you're going to have a little more trouble with him. And boy, if there's no feeling in that body at all, he can't pervade any part of that body – actually, it's practically dead – boy, you're going to have a hell of a time dragging him out of his head.

Of course, there's the last one of no actual life or feeling in the body. And when it gets down to that level – boy, oh boy, oh boy – all he does is feel very sad about the whole thing, believe me. He's not stuck to the body. He just won't give up until he's finished the cycle of action of pervasion. What is the thetan trying to do? He's trying to pervade. And that is beingness and that is havingness. The ultimate in havingness is being able to pervade something. So, if he really wants a body, just have him pervade it. So you've got to give him the body and let him pervade it.

When you're having trouble with a case, whatever system we're using, please understand what's the matter with the case. He can't pervade it. So you can teach him to approximate it. And then, after you've taught him to approximate it, which is build the mock-ups of it, and so on, your next stage is a very simple one: is teach him to communicate with it. And you do that by teaching him to communicate with it and then with his exterior environment and then with it and his exterior environment. You can do so selectively, somewhat on the order of the process I was giving you at the beginning of the session. There are many such processes.

There is even the process where you go over a person very carefully, like this: You say, "All right. Now, let's feel this foot and let's feel that foot. And let's feel this shin and that shin and the stomach," and so forth. And you're not trying to force him to feel any of these parts, all you want to know is, is what part he's having difficulty feeling. You can do this sometimes in mockups. You throw a mock-up up there and large sections of it are gone. Those are the areas he can't inhabit. See? And sometimes you'll throw up a mock-up and the area of the sexual sensation and so forth is missing or black. Areas which can't be inhabited are normally areas which are black.

All right. So you go over a body and you do a careful assessment of the body on the terms of "Where can't this fellow be in his body?" And you don't try to exteriorize the thetan. This is something like backing the cart up very prematurely. No, let's, for God's sakes, before we back the cart up, find out if we've got a horse. And in this particular case, let's see if we can inhabit the body before we try to get the thetan to inhabit the space surrounding the body. If he can't inhabit the space surrounding the body, you know that he's having difficulty in inhabiting the body.

It's up to you then, to find how far this difficulty goes. He may be having trouble inhabiting the body and inhabiting the body's past in terms of the geographical location where the body's been. There are other ramifications on this. But actually, your first task in a difficult case or in a case which isn't doing as well as it should or in any case, actually, is to

try to get him to inhabit and pervade what he is trying to pervade. Anytime you can assist a thetan to do what he is trying to do, you get well people, always.

That's the end of that lecture.

[End of tape.]