

**THE MERIDIANS AND THE EMOTIONS:  
WHY ENERGY PSYCHOLOGY CAN GO WHERE JOSEPH WOLPE NEVER DREAMED**  
(Draft of a paper being prepared for publication.)

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When Joseph Wolpe (1958) developed systematic desensitization, he provided the next four generations of clinicians their most potent single non-pharmacological tool for countering severe anxiety conditions. In his words:

*If a response inhibitory to anxiety can be made to occur in the presence of anxiety-evoking stimuli so that it is accompanied by a complete or partial suppression of the anxiety response, the bond between these stimuli and the anxiety response will be weakened* (cited in Gallo, 1999, p. 4).

The “response inhibitory to anxiety” that Wolpe cultivated is deep relaxation of the major muscle groups. Based on the principle that anxiety and full physical relaxation cannot simultaneously co-exist, the steps in systematic desensitization are to:

1. Teach the client how to relax each of the major muscle groups
2. Develop a hierarchy of anxiety-provoking situations, with the most severe at the top and the least evocative at the bottom.
3. Relax the major muscle groups.
4. With the muscles relaxed, bring to mind thoughts or images from the bottom of the hierarchy.
5. Shift the focus between holding the thought or image and relaxing the muscle groups until the thought or image is progressively associated with a relaxed response.
6. Systematically move up the hierarchy, reconditioning the response to each thought or image by replacing the anxious or fearful response with a relaxed response.

This article will demonstrate how the principles that underlie systematic desensitization are also central to energy psychology, and it will explain how energy psychology (used interchangeably here with “energy-based psychotherapy”) extends itself beyond those principles to create a far more comprehensive treatment modality

### **Energy Psychology**

Energy psychology, as such, is a relatively new discipline. The first national professional meeting in the United States was held in 1999. Although research is still relatively sparse, formal and informal case studies describing the successful application of energy psychology with depression, anxiety, phobias, PTSD, addictions, psychogenic illnesses, and other psychiatric disorders are being offered by clinicians from a wide range of backgrounds. Hundreds of case studies, in fact, exist indicating that both self-applied and therapist-assisted uses of energy psychology have led to rapid improvement, often in situations where traditional psychotherapy has had little effect. Some of these cases are on videotape and readily available.

Systematic research supporting the field's claims is only beginning to be conducted. [see website reporting on the status of current research programs in energy psychology [www.energypsychresearch.org/](http://www.energypsychresearch.org/)]. In one pilot study, for instance, 35 subjects who met DSM-IV criteria for specific phobia (in each case, it was small animals) were given 30-minute treatments that utilized either deep diaphragmatic breathing (n=17) or an energy psychology protocol (n=18) called EFT (Emotional Freedom Techniques). Both treatments produced statistically significant improvements in the phobic reactions, with the EFT group showing substantially greater improvements. The EFT group's improvement was at  $p=.001$  on a behavioral avoidance test (avoidance behavior is a key symptom in phobias);  $p=.001$  on a fear questionnaire,  $p=.001$  on subjective distress when imagining the fear-producing object,  $p=.001$  on subjective distress when approaching the fear-producing object, and  $p=.01$  on pulse rate. The diaphragmatic breathing group showed less dramatic improvements on four of these measures, but no significant change in subjective distress when imagining the fear-producing object. A summary of this study is available at [www.emofree.com/res-wellsphobias.htm](http://www.emofree.com/res-wellsphobias.htm).

The October 2001 issue of the Journal of Clinical Psychology, while taking a highly critical editorial position, was devoted to investigations of Thought Field Therapy (one of the original formulations of energy psychology). The full text of four articles from that issue as well as reports of related studies can be found at [www.tftrx.com/5ref.html](http://www.tftrx.com/5ref.html). The status of current research programs in energy psychology can be found at [www.EnergyPsychResearch.org](http://www.EnergyPsychResearch.org).

Energy psychology sits at the crossroad of psychotherapy and energy medicine. Energy medicine draws upon ancient healing and spiritual practices (e.g., acupuncture, yoga, qi gong, and shamanism), combines them with modern scientific procedures (e.g., empirical research methods, biofeedback, EEGs, and MRIs), and adopts them into modern contexts. Energy psychology utilizes these methods for making changes in psychological states, habits of thought, and patterns of behavior.

The “energies” that both disciplines work with include the familiar electromagnetic spectrum as well as more “subtle” energies, such as the chi that is the focus of acupuncture and qi gong. The term subtle energy has been used in the West to refer to energies that have no amplitude or frequency but are known for their effects. Various ingenious methods have been created for mechanically quantifying such effects. The School of Engineering at Princeton University, for instance, has found that random events generators display different patterns when in the presence of a group of people whose intention is focused than with a group whose attention is scattered (Radin, 1997). Prayer, which has been shown to influence healing on people from a distance, might also involve such subtle energies. Subtle energies are, in fact, believed to travel throughout the body and to prefigure neurological and other physiological changes. Energy healing works in tandem with both electromagnetic and more subtle energies.

The notion that the physical body is paired with an “energy field” or a “subtle body” or an “energy body” is central in both energy medicine and energy psychology. The anatomy of this energy body includes 1) centers where energies concentrate, 2) pathways along which energy travels, 3) energies that surround and protect the body, 4) energies that connect and harmonize the various energies systems, and 5) energies that control the cycles of life. Numerous cultures and healing systems emphasize one or more of these energy systems. For instance, in yogic tradition the energy centers are known as “chakras,” acupuncturists speak of the “meridians” when describing the pathways along which energy travels, and the energies surrounding the body have been called the halo or

aura. In energy psychology, dysfunctional patterns of thought and behavior are understood as being coded or carried in the energy field. They are treated by shifting the energies that are maintaining them. As with Chinese medicine, to which some of its roots trace, the theoretical core of energy psychology is simple: Whatever the presenting problem, it has a counterpart in the client's energy system and can be treated at that level.

Practitioners of energy psychology may concentrate on the meridians, the chakras, the aura, or another aspect of the energy field. Because the meridians have been the most widely used energy system, meridian-based psychotherapy is the focus of this paper.

### **Comparisons of Systematic Desensitization and Meridian-Based Treatments**

The meridian-based psychotherapies depend upon a related principle. In both methods, an involuntary, *problematic* response to a memory, thought, image, or recurring circumstance (an internal or external stimulus) is associated with a new involuntary response that is *not* problematic. In the meridian-based psychotherapies, however:

the problematic response may be any emotion that impairs thought or behavior, not just fear or anxiety (the primary focus of systematic desensitization)

the stimulus is reconditioned to a new response in the meridian system (the body's 14 major energy pathways) rather than to a new response in the muscular system.

The meridians form the energetic infrastructure of physiological events. The underlying premise is that not only does energy flow according to the physical structures of the body; matter also follows energy. The neurochemical processes that determine emotions, thought patterns, and habits of behavior are, in this formulation, influenced by subtle energies. Psychological conditions co-exist in the energy system and the neurochemistry. Interventions into the energy system impact the brain's chemistry as surely as does medication, but they can be targeted with far greater precision and safety than pharmacological interventions. By changing the energy patterns that underlie a psychological problem, changes in the associated neurochemistry follow.

The procedures used within meridian-based approaches to energy psychology have been well-mapped for both popular (e.g., Gallo and Vincenzi, 2000; Lambrou and Pratt, 2000) and professional (e.g., Feinstein, 2002; Gallo, 2000) audiences and will not be detailed here. In brief, they are based upon interventions that correct a disturbed energy response within a meridian. The acupuncture points, identified by traditional Chinese medicine and verified now by a variety of measures (Collinge, 1998; Gerber, 2001), may be stimulated through tapping, holding, or massaging (as well as by more invasive procedures such as needles or electrical stimulation), to affect the flow of energy in the meridians. More than 360 such points are situated on the meridian pathways and are the key to altering the problematic psychological response to an internal or external stimulus. The essence of this treatment is to:

1. Identify a thought, image, memory, or circumstance that triggers energy responses which impair thought or behavior, and
2. Pair this stimulus with a new response in the energy system by activating appropriate acupuncture points while the problematic situation is psychologically engaged.

As with systematic desensitization, the problematic response is extinguished by bonding the stimulus to a neutral or undisturbed physiological response. Another strength that both systematic desensitization and meridian-based psychotherapies share is that both apparently impact not only the frontal lobe, the domain of most traditional areas of psychotherapy, but also the limbic system. Like eye movement desensitization and reprocessing (EMDR) methods, they apparently affect the data-processing functions within the limbic system that are disturbed by traumatization and other forms of severe psychological stress but not easily accessed by “talk therapy” (van der Kolk, 1994; Weil, 2001).

### **The Meridians and the Emotions**

Each meridian is associated with a characteristic set of emotional and behavioral themes. Where systematic desensitization is most effective for treating anxiety and fear, the precision afforded by being able to target the specific emotional response in any of the 14 meridians allows the techniques of energy psychology to be applied to a range of psychological problems that Wolpe could not have anticipated. While the specific meridian-emotion links vary somewhat from person to person, many generalizations seem to hold. For instance:

The functions of the heart meridian tend to correspond with poetic associations to the heart: loving feelings flourish when it is in a healthy balance; heartache and heartbreak correspond with a disturbance in the energies of the heart meridian.

The governing meridian (which runs along the backbone) seems related to confidence (“standing tall”) when its energy flow is unimpeded and a lack of courage (“no backbone”) when it is out of balance.

The stomach meridian, when in balance, supports a sense of basic trust; but when its flow is impeded, the reactive emotion is obsessive worry. This is the energetic link to stomach ulcers and some forms of indigestion.

In addition to stimulating specific acupuncture points, practitioners of energy psychology have introduced a system of “verbal treatments,” essentially affirmations that are formulated around the emotional issues associated with the meridians involved in the psychological problem. These affirmations are often stated while the meridian treatment points are being stimulated. In addition to any subliminal, auto-suggestive, or reconditioning effects they induce, these verbal statements provide a bridge between the energy treatment and the client’s conscious involvement with the issue and its specific impact on the meridian energies. For some clients, the affirmations are the most memorable part of the treatment.

Associations between each meridian and specific emotions date back some 5,000 years to “5-element theory” (summarized in Eden, 1999, Chapter 7) in Chinese medicine (still the most widely practiced form of medicine in the world). Other formulations have also been introduced within energy psychology (e.g., Diamond, 1997). Because emotions are multi-determined and each person is psychologically and energetically unique, it is not surprising that there has been controversy regarding which emotions and themes are associated with which meridians. Since assumptions about the meridians and the emotions they govern are implicit within some of the treatment

protocols used within the meridian-based psychotherapies, accurate generalizations could be of enormous value, and it is an area that begs for research.

Meanwhile, a testable set of associations between the meridians and the emotions, based upon Chinese 5-element theory, early formulations within energy psychology, and clairvoyant reports on the emotional consequences of meridian imbalances have been proposed {see below "List of Proposed Meridian Emotions and Affirmations" and Feinstein, 2002).

One clinical application of the presumed relationship between the meridians and specific emotions is that pre-determined sequences for stimulating the acupuncture points on specific meridians are used to treat specific emotions. One protocol is used for jealousy, another for grief. While such simplistic formulas often require sophisticated adaptations to account for the many variables in any given situation, clinical reports from over 30 practitioners interviewed by the authors suggest these simple protocols are effective in a wider range of cases than any paradigm which does not account for subtle energies would predict. Research into claims of rapid cures using simple protocols is only beginning to be conducted.

In addition to stimulating specific acupuncture points, practitioners of energy psychology have introduced a system of “verbal treatments,” essentially affirmations that are formulated around the emotional issues associated with the meridians involved in the psychological problem. These affirmations are often stated while the meridian treatment points are being stimulated. For example:

If the heart meridian is involved in the problem, affirmations that may be used while stimulating heart acupuncture points are “I breathe love into myself!” (internal focus) or “I can [do what is required] with love!” (external focus).

For the governing meridian, an affirmation that augments courage might be “Yes, I CAN [overcome this problem]!” For the stomach meridian, an affirmation that counters obsessive worry might be “I trust the larger picture!”

In addition to any subliminal, auto-suggestive, or reconditioning effects they induce, these verbal statements provide a bridge between the energy treatment and the client’s conscious involvement with the issue and its specific impact on the meridian energies. For that reason, some clients find the affirmations to be the most memorable part of the treatment.

The remainder of this paper offers a set of meridian-emotion relationships that are proposed as generally reliable within the practice of energy psychology. They are based upon Chinese 5-element theory (see Eden, 1999, Chapter 7), earlier formulations that have been used within energy psychology, and the first author’s ability to clairvoyantly “see” meridian imbalances and the resulting emotional consequences. For each meridian, the list presents:

The meridian’s “reactive” emotions (the disturbed response) [see note 1]

The meridian’s “balancing” emotions (the emotions characterized by that meridian being in balance). This is also the emotion that, when evoked (by an affirmation, for instance), helps bring the associated meridian *into* balance.

Sample affirmations for working with the meridian and its emotions (Where the sample affirmation has brackets, such as “ *I am decisive in [overcoming this problem]*,” the brackets should be replaced with as specific a statement as possible), [see note 2] and

A brief [**why**] explanation of the relationship between the meridian and the associated emotions. While based more on analogy than biology, more in the body's poetry than in empirical findings about a meridian's functions and its associated emotions, these rationale statements attempt to provide a beginning understanding of the relationships involved. [see note 3]

### **List of Proposed Meridian Emotions and Affirmations**

"Meridian Emotions and Affirmations" See CD Rom Energy Psychology Interactive: Available at [www.innersource.net](http://www.innersource.net) "

The “sample affirmations” presented in the list are only starting points. For instance, a proposed affirmation for heart meridian is “I breathe love into myself.” For some people this may be so difficult to conceive that pacing the intervention to the person is simply an acknowledgement of the “reactive emotion,” such as “I feel heartbreak.” For others, the positive affirmation may fit but need to be reduced in its intensity (such as “I am *learning* to breathe love into myself”). This can be a highly creative aspect of the treatment. The statements the client uses should be tailored so they are meaningfully connected with this emotion and with the problem state. Being able to target the meridians involved in a problem state and their associated emotions, rather than being limited to the still substantial benefits of progressive relaxation, allows for a treatment specificity that could only have thrilled Dr. Wolpe.

**MERIDIAN EMOTIONS** [see note 1] **AND AFFIRMATIONS** [see note 2] in alphabetical order....

#### **BLADDER MERIDIAN**

Reactive Emotions/Themes: Fear, Anxiety, Futility

Balancing Emotion/Theme: Hope

Sample Affirmations: *I am hopeful. I am hopeful about [solving this problem].*

**Why**: Bladder meridian governs the nervous system. The nervous system and the bladder meridian begin at the same spot, the third eye. The nervous system transports millions of pieces of information every second. When the energies that support it are in their flow, the capacity to fulfill every potential is activated, the future is bright, hope abounds. When its energies are disturbed, problems cannot be solved, the world becomes fearful, aspirations futile.

## CENTRAL MERIDIAN

Reactive Emotion/Theme: Feeling Vulnerable

Balancing Emotion/Theme: Feeling Centered and Secure

Sample Affirmations: *I am clear, centered, and secure. I am confident about how I will [meet this challenge].*

**Why** Central meridian runs up through all the chakras, the body's energy centers. When central is in its flow, the major energy bases are nourished and the sense of being "centered and secure" is prominent. When central is disturbed, you cannot access the strength that comes from your major energy centers, leaving you feeling vulnerable and actually being vulnerable.

## GALL BLADDER MERIDIAN

Reactive Emotions/Themes: Rage, Judgmentalness

Balancing Emotions/Themes: Tolerance, Kindness

Sample Affirmations: I reach out with kindness and forgiveness.

**Why:** The bile produced by the liver to break down fats, toxins, and stomach acid is stored in the gall bladder, ready at a moment's notice to do its nasty work on complex foods. The gall bladder meridian goes through the gall bladder, surfaces at the outer eye, and is associated with looking outward. The combination of this surveillance and propensity to rip things apart, when the gall bladder's energies are disturbed, can escalate from a tendency to pass judgment to a monolithic rage toward whoever or whatever crosses its path. When gall bladder meridian is in its flow and its power to destroy toxins secure, it can look toward the world with kindness and mercy.

## GOVERNING MERIDIAN

Reactive Emotion/Theme: Lacking Courage to Move Forward, "No Backbone"

Balancing Emotion/Theme: Sense of Strength, "Standing Tall"

Sample Affirmations: *YES, I can. YES, I can [overcome this problem].*

**Why:** Governing meridian runs up the spine. It is the energy BEHIND you. When this energy is in its flow, it makes your posture straight. You stand tall. You have power. When it is disturbed, what appears as a lack of courage is actually a lack of access to the energy that would give you reason to be brave.

## HEART MERIDIAN

Reactive Emotion/Theme: Heartache or Heartbreak

Balancing Emotion/Theme: Love for Self or Others

Sample Affirmations: I breathe love into myself. I can [do what is required] with love.

**Why:** Intense feelings go straight to the heart. It sets the mood for all the organs. When the heart's energies are in their flow, love and joy flourish. When overwhelmed with pain or grief, the heart aches and can literally break.

## KIDNEY MERIDIAN

Reactive Emotions/Themes: Fearful Isolation, Shame

Balancing Emotions/Theme: Gentleness with Self

Sample Affirmations: *I am gentle with myself. I step out gently.*

**Why:** The kidneys are a phenomenal disposal system, filtering toxins from the blood and ridding them from the body. If the energies of kidney meridian are disturbed, this critical, life-sustaining task is disrupted. No other organ can accomplish what needs to be done, and a disturbed kidney meridian labors in fearful isolation. The shame of failing to keep you alive hangs in the outcome. When kidney meridian is in its flow, this isolation and shame, looming as potentials, are countered by gentleness and understanding, as if speaking to a frightened child.

## LARGE INTESTINE MERIDIAN

Reactive Emotions/Themes: Controlling, Holding on

Balancing Emotion/Theme: Releasing,

Sample Affirmations: *I surrender (or let go). I let go of the hooks keeping me attached to [this problem].*

**Why:** Some of what was taken in for the purposes of nutrition cannot be used and must be expelled. After the body's multi-system process of sorting through what to keep, the critical job of the large intestine is to make a final determination about what is not needed and to let it go. When the energies of the large intestine meridian are in their flow, the waste is easily and naturally sorted from what needs to be reabsorbed. It is released back into the world. When the energies are disturbed, waste and sustenance are not clearly distinguished and the urge is to hold on, to retain what is toxic because it has not been differentiated from what is needed.

## LIVER MERIDIAN

Reactive Emotions/Themes: Rage Against Self, Guilt

Balancing Emotion/Theme: Kindness Toward Self

Sample Affirmations: *I like myself. I am no longer angry at myself.*

**Why:** Liver is the largest organ in the body, with hundreds of functions. Removing toxins is among the most important. Liver meridian also governs the eyes and is associated with an inner seeing, as if the eyes are turning back to look at oneself. When the propensity to break down poisons combines with sight turning inward, rage directed toward the self is the disease of a disturbed liver meridian. When liver meridian is in its flow, poisons of body and mind are comfortably removed and a kind eye turns within.



## LUNG MERIDIAN

Reactive Emotions/Themes: Grief, Detachment

Balancing Emotions/Themes: Inspiration (in-breath), Letting Go (out-breath), Faith

Sample Affirmations: *I have faith [this problem will be resolved]. I am letting go of [this problem].*

**Why**: Lung meridian breathes in the energy of life, bathes every cell in that energy, and releases the residue back to the world. Each outbreath is based on faith that an in-breath will follow. When lung meridian is in its flow, faith is easy as each release is followed by new inspiration. When this energy is disturbed, the release seems a threat, the desire is to hold on, letting go means loss, grief follows, detachment is the reflexive defense.

## PERICARDIUM MERIDIAN

Reactive Emotions/Themes: Bewildered by Choices and Demands, Neglecting Heart's Needs

Balancing Emotion/Theme: Discernment, Prioritizing Heart's Needs

Sample Affirmations: *I am discerning. I support my heart's needs.*

**Why**: The pericardium is the buffer between the beating heart and the other organs. Like a good secretary, it must make clear choices about how the boss' energy and resources are managed. When the pericardium meridian is in its flow, discernment thrives and decisions support the heart's needs, which reflect the soul's longing. When the pericardium meridian is disturbed, the demands from without and within become overwhelming, and the heart and soul's needs become lost in the confusion.

## SMALL INTESTINE MERIDIAN

Reactive Emotion/Theme: Feeling divided, pulled in more than one direction

Balancing Emotion/Theme: Decisiveness

Sample Affirmations: *I know what I want (or will do). I feel decisive about [overcoming this problem].*

**Why**: The job of the small intestine is to decide what to do with the food. Sorting through a chemical complexity that is sobering to imagine, the small intestine must make instant decisions about what will become you and what will be eliminated. When the energy of small intestine meridian is in its flow, decisiveness prevails, choices are easy. When this energy is disturbed, even the simplest decision will divide you.

## SPLEEN-PANCREAS MERIDIAN

Reactive Emotions/Themes: Over-Compassionate, Inability to Assimilate Input

Balancing Emotions/Themes: Fairness Toward Self, Metabolizes Input into Self

Sample Affirmations: *I feel compassion for myself.*

**Why**: The spleen and the pancreas are the body's great metabolizers. The useful life of a red blood cell is but a month, and the spleen (along with the liver) is involved in the breakdown of 10 million

worn-out blood cells a second so their materials can be used in the creation of 10 million new blood cells the next second. The pancreas secretes insulin that converts sugar to energy, and it secretes other hormones and enzymes that metabolize other foods, converting it from what was outside of you into what is you. The spleen-pancreas meridian is involved in metabolism of all forms, from food to emotions to experience. It is oriented to recognizing possibility in the other, the other's value (whether a sugar molecule or a rival colleague) as a potential resource toward the greater good. When this meridian is disturbed, it works even harder to find what is right in the other, compassionate perception overwhelming even its own needs and interests. Fairness toward self as well as to others is the mark of a spleen-pancreas meridian in a balanced flow.

## STOMACH MERIDIAN

Reactive Emotions/Themes: Obsessive worry

Balancing Emotion/Theme: Trust in the larger picture.

Sample Affirmations: *I let go of worry. I trust the process (or the Universe).*

**Why**: The stomach stores the source of the body's energies. When all is well and its energies are in their flow, there is trust that the next meal will come. When stomach meridian is disturbed, the body's source of energy is threatened, and the worry, gloom, and fear may become obsessive.

## TRIPLE WARMER [STIMULATOR] MERIDIAN

Reactive Emotions/Themes: Fight, Flight, or Freeze

Balancing Emotion/Theme: Feeling Safe

Sample Affirmations: *I am safe. I am [we are both] safe as I [overcome this problem].*

**Why**: Triple warmer governs the fight or flight response out in the world, the immune response to internal invaders, and the survival habits that are induced by threat. When this meridian is in its flow, we are cradled in a sense of safety within its protective hands. When it is disturbed, all systems go on alert and defense is elevated above any other purpose.

## Conclusions

Energy psychology provides a set of methods for shifting responses within the body's energy system that underlie emotional and behavioral problems. It differs from most other forms of psychotherapy by being able to target a wide range of psychological difficulties with great precision and relatively little verbal processing. While some of the mechanisms involved in its techniques are still being investigated, such as electromagnetic resonance and recalibration, other mechanisms, such as conditioning a new response to a problematic stimulus, as discussed above, have long been familiar to psychotherapists. Being able to directly target the meridians involved in a problem state and their associated emotions, rather than being limited to the still substantial benefits of systematic desensitization, allows for a treatment specificity that could have only thrilled Dr. Wolpe.

## Notes

Note 1: Because emotions are determined by many factors, and because each person is psychologically and energetically unique, the meridians and corresponding emotions, as listed, must be understood as generalizations rather than unvarying cause-effect relationships. However, you

may be surprised by how well these generalizations hold in your clinical practice. While earlier formulations have been used within energy psychology, this list represents a conciliation of previous lists, “five element theory” from Chinese medicine (a penetrating 5,000-year-old system for understanding human energies and emotions), and consultations with Donna Eden about how she clairvoyantly "sees" the body's energies, and the accuracy of her sight has repeatedly been verified in clinical settings." meridian imbalances and the resulting emotional energies.

Note 2: The affirmations must also be understood as generalizations, starting points in crafting a statement that is attuned to the presenting problem and the energies and emotions that underlie it.

Note 3: While based more on analogy than biology, more in the body's poetry than in empirical findings about a meridian's functions and its associated emotions, these “whys” attempt to provide a beginning rationale for understanding these relationships.

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