More details on how intuition can help solve daily problems are presented here from Dr. Green’s “biosketch addendum,” in which he comments on the work of Eugene Peniston, Ph.D. We include this selection here as a clear example of how intuition can play a role in solving scientific, clinical and research problems.

At Menninger, the Center for Applied Psychophysiology conducted a series of biofeedback workshops that were advertised in the American Psychological Association Monitor and other publications. Gene Peniston, active in treatment of alcoholics and other addicts, came from the Veterans Administration Hospital in Fort Lyons, Colorado to attend the Clinical Biofeedback Workshop, where the relationships between brain rhythms and substance abuse were discussed, and he later returned to the three-day Brainwave Training Workshop, in which workshop participants could learn rudiments of theta brainwave biofeedback for “interrogation and programming of the unconscious.” [Eds.]

. . . His [Peniston’s] experience, during the workshop, of interrogating the unconscious while in the theta state, yielded a hypnagogic vision with a full-blown protocol for training alcoholics to reprogram satiety centers in the hypothalamus. He was highly excited by what he had “seen,” and on returning to Colorado he randomly assigned 20 hard-core alcoholics either to brainwave training or to conventional treatment. While all ten of the conventionally treated alcoholics relapsed by 15 months post-treatment, not a single one of the brainwave-trained alcoholics ever returned to their previous drinking patterns during the 36 months of follow-up now available.

1990. Since this level of recovery was unheard of, Dale Walters went to Colorado and interviewed all of Peniston’s recovered subjects. Eight were dry and happy. They had no craving. Two were angry. They hadn’t really wanted to stop drinking, but no longer could do so without becoming nauseated. One discovered that he could tolerate one drink per day.

What these two patients didn’t realize was that through their visualizations while in the theta state (which is our programming-of-the-unconscious technique, corresponding with the most powerful of the yoga techniques for psychophysiological self control), they had gained access to basic hypothalamic programs and rewritten them. The neurochemistry and neurotransmitter theory for this wasn’t known as short a time ago as 10 years, but now we have learned, from
ingenious neurophysiologic research reported in recent literature, the *neuroanatomy of addiction*. Also, blood chemical studies indicate that self-regulation training changes the basic control mechanisms of the hypothalamus.

1991. Also, concerning this use of theta-state reprogramming, Dale Walters and Steve Fahrion have begun studying whole-head Lexicor brainwave arrays (from 20 electrodes) in alcoholic trainees, and have discovered remarkable brainwave shifts over the course of training. A case study of this effect was written up and has been published (1992) in Alcoholism: Clinical and Experimental Research.

Until now, the yogic method of physiologic programming has been ignored in the West, but with this brainwave-and-visualization breakthrough in alcoholism (and in drug addiction!) the value of states-of-consciousness training in medicine is certain to get serious scrutiny. At present, physicians who understand the intricate neurochemistry of the brain, can see clearly what is happening, but to many others it is suspect.

1992. Oddly enough (or perhaps understandably enough), the main opposition Dale Walters has received during Peniston-type workshops around the country has been from Alcoholics Anonymous. Instead of seeing this breakthrough, which is now established in a number of hospitals throughout the country, as an ally, they see it as a threat and a danger, for it implies that the old saw “once an alcoholic, always an alcoholic” is not true. AA has depended on limbic (emotional) suppression of hypothalamic drives through religious zeal and will power, and can not imagine a genuine reprogramming of hypothalamic neural circuits through theta-empowered visualization. They fear, understandably, that many of their members may begin experimenting again with alcohol, with their usual sorry results. So, there is a genuine problem. But the answer lies in reprogramming, not in suppression.

In concluding this Biosketch Addendum, I am beginning to believe that what I learned in 1940 about the invocation and use of intuition, with its offshoots of interrogation and programming of the unconscious, will eventually become general medical and psychological knowledge. Fortunately, alcoholism has
attention-getting power, just as in 1967 migraine had attention-getting power, leading to an explosion of interest in thermal self-regulation training.

There is a long way to go before the medical method of choice for Raynaud's disease, migraine, and hypertension is thermal training for rebalance of distorted homeostasis in the autonomic nervous system, but that is the direction in which we are moving. The pharmaceutical industry is concerned about this trend, we have learned. But even as world ecology has become important, so will our personal internal ecology become important, and militate against the use of chemicals to accomplish what is better done by psychophysiological self-regulation.

As one of our medical friends put it, "All these chemicals are poisons, that have some beneficial side effects. . . ." And he could have added the hope that before long, intuition, creativity training, and self-regulation training will take a place, along with intellect, in both general education and in medical education. This has already started in India. Hopefully it will spread around the world.

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