



**April 2026**  
**ISSN:1538-1080**

**Volume 26 Number 1**  
**<https://doi.10.78717/ijhc.202614>**

## **RESEARCH THEORY**

### **The Healer's Cost: The Biophysical and Vital Equivalent of Healing Modalities**

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#### **Introduction: The Body as Resonant Instrument**

In the landscape of modern clinical practice, the prevailing ontological framework remains rooted in a Cartesian-Newtonian reductionism. This model conceptualizes the human body as a complex biological machine—a closed system of independent organs and tissues governed primarily by biochemical pathways and linear electrical signaling (Church, 2007). Within this paradigm, “caring” is defined as the external management of these chemical states, and the practitioner is viewed as an objective observer, largely insulated from the patient’s internal state.

However, as we move into the frontiers of high-level energy healing, intuitive diagnostics, and advanced kinesthetic arts, this mechanical model reveals its limitations. It fails to account for the well-documented phenomena of non-local resonance, empathetic entrainment, and the “sensing” of information that precedes physical contact. To address these anomalies, we must transition to a paradigm that views the human body not as a machine, but as a resonant transceiver (Gerber, 2001).

As a transceiver, the human organism functions as a sophisticated, bi-directional antenna. It is capable of “sensing” (receiving) subtle environmental and interpersonal signals and “projecting” (transmitting) coherent biological information through various fields—

electromagnetic, thermal, and biophotonic (Gariaev et al., 1991). In this context, the practitioner is not a detached technician but a resonant participant in a shared field.

This paper proposes a critical, often overlooked caveat to the transceiver model: the operation of this biological antenna is not energy neutral. We introduce the concept of the Transceiver's Cost: a measurable metabolic and vital cost associated with the detection, projection, and entrainment of subtle energy fields.

Contrary to the popular "New Age" notion that healing energy is a boundless, external resource that simply "flows through" the practitioner, the evidence suggests that the practitioner's own biophysical reservoir serves as the primary energy source for these interactions. When a healer "senses" a patient's ailment, they are not merely observing; they are matching a signaling pattern, an act that requires the expenditure of what historical traditions call "Life Force" and what modern science identifies as biophotonic coherence.

By synthesizing 20th-century Soviet laboratory data, spiritual observations of vital energy depletion by different types of mediums (Johannes Greber), and the kinesthetic dialogue used by Soviet scenic hypnotist Wolf Messing along with the techniques of Argentine Tango, we will develop a model of Transceiver Hygiene. This framework is essential for the longevity of caring professionals, acknowledging that to heal or to lead is to spend, and only by understanding the cost of the dialogue can we sustain the practitioner's wellbeing.

## **Part I. Soviet Evidence: the Projective Cost of Djuna Davitashvili**

The mid-20th century in the Soviet Union represented a unique period where parapsychology was not relegated to the fringes but was integrated into the "hard" sciences under the banner of Bioelectronics. Laboratories within the USSR Academy of Sciences, particularly the Institute of Radio Engineering and Electronics (IRE), were tasked by high-level state authorities to find the physical basis for "healing hands," blindfolded vision, and "muscle reading."

The most prominent figure in this research was Djuna Davitashvili. Her position was unique; her "healing" abilities were sought by the Soviet elite, including General Secretary Leonid Brezhnev. This political patronage allowed her access to state-of-the-art diagnostic equipment that was unavailable to her Western counterparts (Kuznik, 1995).

Researchers, led by the distinguished physicists Eduard Godik and Yuri Gulyaev, approached Davitashvili's work with the rigor of high-energy physics. They were not interested in "belief," but in "Field 1" (measurable physical fields). Their primary objective was to determine if the "sensing tool"—the human hand—emitted signals that could be detected by calibrated instruments (Godik, 2004).

Godik and Gulyaev discovered that Davitashvili's hands were high-output infrared projectors. Using high-sensitivity thermal imagers (capable of detecting

micro-fluctuations in surface temperature of healer's hands), they recorded a phenomenon they termed "Thermal Pumping." During a healing session, the temperature of Davitashvili's palms would rise significantly, often by two to four degrees Celsius—within seconds.

Crucially, this was not a localized event. As her hands heated, the temperature of her feet and torso would concurrently drop. This indicated a massive Metabolic Shift: the body was actively shunting thermal energy and blood volume from its own core and periphery to the "transmitting" appendages. This is the first measurable evidence of the transceiver's cost. The "healing heat" was not being conjured from the ether; it was being metabolized from the practitioner's own internal biological stores. The practitioner's body was literally "cooling" its own core to "warm" the patient.

Beyond thermal energy, the Soviet labs utilized photomultipliers to detect ultra-weak photon emissions, now commonly referred to as biophotons. They found that during "working modes," Davitashvili's hands showed a significant spike in photon output. According to the research of V.P. Kaznacheev (1981), these photons carry biological information between cells.

By projecting these coherent photons, the healer attempts to "rewrite" the dissonant cellular code of the patient. However, the energy required to generate coherent light from a biological source is immense. The Soviet data showed that following these photon spikes, the healer's

own cellular luminescence would significantly dim—a state of Biophotonic Bankruptcy that required hours or days of rest to recover.

## **Part II. The Physiological Cost: Ninel Kulagina and Rosa Kuleshova**

While the thermal and biophotonic emissions of Djuna Davitashvili provided a baseline for the "projection" phase of the transceiver, other Soviet-era subjects offered critical data on the internal systemic cost of high-intensity bio-energetic work. Researchers like Genady Sergeyev (Sergeyev, 1975) and Veniamin Pushkin (Pushkin, 1973) shifted their focus from the signal itself to the biological state of the "antenna" during and after transmission.

Ninel Kulagina, perhaps the most famous "psychokinetic" subject in Soviet history, provided the most dramatic evidence of the physical body toll. Under the supervision of Dr. Sergeyev at the Navy Academy in Leningrad, Kulagina demonstrated the ability to move non-magnetic objects and stop the heart of a frog in a saline solution. However, the cost to her organism was catastrophic.

Sergeyev recorded that during a typical 30-minute session, Kulagina's heart rate would spike to over 180 beats per minute, while her blood pressure reached dangerous hypertensive levels (230/130 mmHg). Most remarkably, post-session evaluations consistently showed a loss of body mass ranging from 500 grams to 2 kilograms. This "weight loss" could not be accounted for by perspiration or caloric burn alone; it suggests a deep structural

“siphoning” of cellular matter or “Odic” substance (see Part IV for details) to facilitate the kinetic event. Sergeev concluded that the “healer” or “influencer” was not merely a conduit for energy but was metabolizing their own tissue to maintain for the high-rate cost the high-order coherence required for the feat.

Rosa Kuleshova, the pioneer of “dermo-optical” perception, provided insight into the sensing cost. In her sessions, she would “read” text or identify colors with her fingertips while blindfolded. Soviet researchers found that her fingertip sensitivity was tied to a specific “priming” of her nervous system. When her vital energy was high, her “sensing” was accurate. However, as the session progressed, the “metabolic noise” in her nervous system increased.

By the end of a two-hour trial, Kuleshova exhibited symptoms of **sensory overload**: severe tremors, nausea, and a complete loss of the “dermo-optical” faculty. The “sensing tool” (the skin and brain) had become “saturated” with the patient’s or the environment’s signals, leading to a state of Neural Bankruptcy. This suggests that for the diagnostician, the act of “sensing” is a process of filtration that requires constant vital maintenance. When the fuel (Life Force) is spent, the tool becomes deaf.

### **Part III. Wolf Messing: The Kinesthetics’ Father of Intuition**

To understand the bridge between the laboratory and the scene, we must examine Wolf Messing (Lungin, 1989). While he was often billed as a telepath,

Messing himself was adamant that his abilities were rooted in “muscle reading” or what we now call the ideomotor response. Messing would hold the hand of a subject and “sense” their intent by detecting micro-muscular contractions that occurred before the subject was even aware of them.

Messing was the first to demonstrate that the human body is a high-bandwidth transceiver for intent. He proved that thought is not contained within the skull; it is “broadcast” through the muscular and nervous systems as a series of subtle kinetic frequencies. However, Messing’s “toll” was documented through his chronic neurological fatigue. He described the process of “sensing” as a form of “violent intrusion” into his own stability. To read another person’s intent, he had to suppress his own “biological signal” to near zero, making himself a “hollow reed.” This state of Extreme Receptivity left him vulnerable to the “dissonance” of the subject. He often suffered from “psychic exhaustion,” which we can now reframe as the Cost of Non-Local Entrainment.

### **Part IV. The Historical Perspective: Life Force as “Odic” Substance**

This clinical exhaustion finds its theoretical foundation in the work of Johannes Greber (Greber, 1932/2007). Greber, a Catholic priest who later engaged in deep research into mediumship and vital energy, provided a bridge between the spiritual and the physical. He introduced the term “Od” (a concept borrowed from Baron von Reichenbach) to describe the “life-glue”

that connects the spirit to the physical nervous system.

Greber proposed that for any mediumistic (“non-local”) event to occur—whether it be a healing, a prophecy, or a physical manifestation—a specific amount of “Od” must be “borrowed” from the practitioner. He described the “Od” as a biological semi-conductor; it is the substance that allows the “signal” of the soul to interact with the “hardware” of the brain.

Greber meticulously documented the symptoms of “Odic” Depletion in mediums:

1. **Vital Collapse:** A sudden drop in body temperature and muscle tone.
2. **Cognitive Fog:** The inability to process basic sensory information after a session.
3. **The “Thinning” Effect:** A state where the practitioner’s own “aura” or protective envelope becomes porous, allowing external “noise” to enter.

Greber’s observations serve as a warning for the “caring” professional. If the “Od”/Life Force is the primary currency of the transceiver, then every act of “sensing” or “projecting” is a financial transaction. If the healer does not know how to “recharge” or “shield” their “Odic” reservoir, they are essentially operating a business with high overhead and zero income—a path that leads inevitably to Vital Force Bankruptcy.

### **Part V. The Avatar’s Cost: Soul-Substance and the Physics of Materialization**

The transition from the laboratory to the spiritual domain brings us to the most

extreme expression of the transceiver model: Physical Materialization. While the Soviet data quantified heat and photons, the spiritual traditions of the East and the mediumistic records of the West describe a phenomenon where the “toll” is paid not just in calories, but in the very “soul-substance” of the practitioner.

The case of Sathya Sai Baba offers a unique case study in the “high-energy physics” of the transceiver. For decades, witnesses documented his ability to materialize *Vibhuti* (sacred ash), jewelry, and food. While skeptics looked for sleight of hand, advanced practitioners and healers who observed Sai Baba closely—including one prominent spiritual healer who provided testimony for this research—noted a profound energetic shift during these events (Kasturi, 1973).

In our transceiver model, we interpret the “soul” as the Primary Organizing Field of the human organism. This field is the high-frequency template that maintains the coherence of the physical body. To move energy from this non-local, subtle field into a dense, 3D physical manifestation (ash) requires a massive “step-down” in “frequency.” This process is governed by the relationship; even a few grams of ash represent an astronomical amount of raw energy roughly represented by the famous Einstein’s formula of the mass-energy equivalence:  $E = mc^2$  (Tiller, 1997).

The incognito spiritual healer reported that Sai Baba was not drawing this energy from a “void,” but was metabolizing

his own organizing field to facilitate the miracle. He was “using his soul” as the raw material for the devotees’ faith. This resulted in periods of profound physical fragility and eventual systemic decline. Sai Baba’s “cost” was an intentional sacrifice of his own vital coherence to “seed” the biofields of his followers with tangible vibrations of the Divine.

### **Part VI. The “Thinning” of the Vital Force Vessel**

For the modern healer or diagnostician, the lesson of Sathya Sai Baba is one of Resonant Vulnerability. To “sense” a patient’s ailment, the healer must engage in a process of “phase-matching.” They must tune their antenna to the frequency of the patient’s dissonance to understand its nature.

When the healer matches a lower, dissonant frequency (disease), a “thinning” of the vital force vessel occurs. The “Odic” substance (as described by Greber) is diverted from maintaining the healer’s own structural integrity to building a “Bridge of Perception” to the patient.

- **The Siphoning Effect:** If the patient is in a state of “vital force deficit,” the law of equilibrium dictates that energy will flow from the higher-potential source (the healer) to the lower-potential source (the patient).
- **The Diagnostic Cost:** The act of “accurate sensing” is itself a form of siphoning. To truly *know* the patient's pain, the healer must allow a portion of that pain to resonate within their own transceiver.

Expanding on the observations in Part IV, Johannes Greber identified specific “Laws of Borrowing” that govern the interaction between a sensitive/medium (transceiver) and an external influence. He noted that the “Third Party” (the spirit or healing force) cannot interact with the physical world directly; it requires a biophysical catalyst.

Greber recorded that during sessions of high intensity “sensing” or manifestation, the medium’s physical weight would fluctuate, and their pulse would become thready. He termed the borrowed energy “life-force matter.” He warned that if a medium attempted to work while ill or emotionally depleted, the “fee” would be drawn from the vital organs themselves, rather than the “overflow” of the nervous system.

This provides a vital clinical warning for the “caring” professions. Many healers operate under the delusion that they are “protected” by their intent. Greber’s data suggests that intent does not override biophysics. If the “sensing tool” is depleted, the “fee” will be collected from the practitioner’s biological foundation, leading to the “healer’s burnout” that is so prevalent in the therapeutic community today.

### **Part VII. From the Sacred to the Kinesthetic**

We have now established the “cost equivalent” in the laboratory (Djuna) and the temple (Sai Baba). We see a consistent pattern: Sensing and Projecting require the expenditure of a vital currency. The question

then becomes: How can we train the transceiver to be more efficient?

How can we “sense” without “spending” our entire soul-substance?

The answer lies in the study of Entrainment and Dialogue, and for that, we turn to the most sophisticated laboratory of human resonance developed: 1) by Rudolf Steiner’s Eurythmy and 2) its contemporary manifestation: the Argentine Tango. In the next section, we will explore how the “body mechanic bridge” provides a model for high-efficiency sensing that minimizes the transceiver’s cost through rhythmic phase-locking.

### ***Eurythmy: A Laboratory of “Visual Speech”***

This evolution of the transceiver reaches its most articulated form in the work of Rudolf Steiner. He in his lectures ordered the arts based on the degree to which the medium is bound to the physical realm (Matter) versus the extent to which the medium is the fluid expression of the human spirit (Movement / Consciousness). Rudolf Steiner established a radical hierarchy of the arts. He placed Eurythmy, the art of harmonized movement, at the very pinnacle. Why? Because the body itself, the ‘ancient instrument given to us at the Saturn stage,’ is the medium (Rudolf Steiner Archive: <https://rsarchive.org/>).

The hierarchy moves from the most matter-bound art, Architecture (dealing with static space), through Sculpture and Painting, up to Music and, finally, Eurythmy. Eurythmy transcends other arts

because it makes the invisible structure of human consciousness—the form of speech, the flow of music—visibly manifest through the living, self-modulating body. Eurythmy is literally a ‘visible speech.’ Steiner recognized that the act of speech is, in fact, a ‘reduced movement’ of the body’s extremities, concentrated in the throat. Eurythmy reverses this: it expands the concentrated sound back into the limbs, allowing the dancer to articulate the soul’s inner feeling and thought.

Music and Poetry are high arts, but Eurythmy is placed higher because it translates the auditory experience of rhythm, melody, and harmony into the visual realm using a precise, universal grammar of movement. It seeks to capture a spiritual content—an ‘etheric’ reality—that is too fluid for stone or canvas.

Steiner’s cosmology explains that human evolution is a journey toward ultimate unity. In the distant Lemurian epoch, human beings were androgynous. However, our current Earth stage—continuing post-Atlantean stage—is characterized by the separation of genders. This separation is necessary for us to achieve individual self-consciousness, but it creates the fundamental spiritual challenge of our time. The future Jupiter stage will see the reunification of these principles within the individual. Therefore, any art that attempts to bridge this separation—to achieve dynamic coherence between the

archetypal masculine and feminine—is profoundly evolutionary.

We propose that the Argentine Tango is a powerful, organic realization of this Eurythmic imperative in the social realm. Born in the 1880s from an urgent need for connection in the immigrant port areas of Uruguay and Argentina, Tango was initially driven by the demographic reality of a men-to-women ratio. This challenge was crucial: competition forced the leader to not simply dominate, but to truly understand the follower's experience.

### ***The Argentine Tango: A Laboratory for Kinesthetic Entrainment***

To transition from the theoretical “cost” to a practical “sensing” model, we must look to a discipline that has perfected the art of non-verbal dialogue: the Argentine Tango. Unlike scenic or ballroom variations, social Tango (*Tango de Pista*) is a purely improvised, 100% reactive kinesthetic dialogue. It represents a real-world, repeatable laboratory for studying the ideomotor transceiver in a state of high-intensity resonance. In the Tango embrace, the two dancers do not communicate through visual cues or memorized patterns. Instead, they utilize the ideomotor channel—the body's capacity to detect micro-muscular contractions and shifts in the center of gravity that occur milliseconds (up to a second) before a physical step is executed. This is “sensing” in its most primal, biological form.

In our research, we have identified a specific mechanism of transceiver efficiency we call the “Canaro Bridge.” When dancing

to the music of the prominent Argentine composer Francisco Canaro, the relentless, staccato *compás* (the 1-2-1-2 rhythm) acts as an External Rhythmic Anchor. From a biophysical perspective, this rhythm serves as a “carrier wave.” It entrains the motor cortex and the autonomic nervous systems of both dancers simultaneously (Porges, 2011). By providing a perfect, predictable temporal grid, the music reduces the “internal noise” of each individual transceiver and works as the third party. This allows the two “antennas” to lock onto the same frequency, creating a state of Phase-Locking. When the rhythmic bridge is established, the “cost” of sensing is drastically reduced. The follower does not have to “search” for the leader’s intent; the intent is carried on the rhythm itself. This is High-Efficiency Sensing: achieving maximum communication with minimum vital expenditure.

### **Part VIII. Kinesthetic Siphoning: The Cost of the “Collapsed” Partner**

However, even in the perfect laboratory of the Eurythmy and Argentine Tango, the “cost” remains a physical reality. In a standard *Tanda* (a set of three–four songs lasting approximately 9–12 minutes), the energy is ideally circulated in a Self-Sustaining Loop. The leader projects intent, the follower resonates and reflects that intent, and the shared field (the “Third Mind”) recharges both participants.

But a “dissonant event” can occur. If one partner is “collapsed”—emotionally drained, distracted, physically ill, or mentally “noisy”—the loop is broken.

- The Siphoning Effect: The healthy partner must now output a disproportionate amount of “life force” to maintain the structural container of the dance.
- The “Weight” of Presence: This is not a physical weight, but an energetic one. The “sensing tool” (the leader) must work twice as hard to “read” a signal through the noise of the partner’s depletion.

This Kinesthetic Siphoning is a direct analogue to the healer-patient relationship. In a clinical setting, if the healer (the leader) is not anchored by a “Rhythmic Carrier Wave” (like for example the Canaro rhythm), they must provide the entire “power supply” for the diagnostic session. This leads to the rapid onset of “transceiver fatigue”—a state where the body’s vital reserves are drained not by the work itself, but by the effort required to maintain a connection with a non-resonant partner.

### **Part IX. Tango as a Healing Modality for the Elderly**

The power of this entrainment is not merely for the artistic or higher consciousness training modality; it is a profound Clinical Tool. Emerging research has identified Tango as one of the most effective non-pharmacological interventions for the elderly, particularly those facing neurodegenerative challenges like Parkinson’s Disease and cognitive decline.

For the elderly, the transceiver's cost is already high due to the natural thinning of the vital energy vessel that comes with

aging. The internal “noise” of tremors or balance instability makes “sensing” their own body difficult.

- The “Third Party” Assist: When an elderly practitioner engages in Tango, the partner (often a trained lead) provides a “coherent proxy” for their nervous system.
- Neuroplastic Entrainment: The tango-style rhythmic anchor forces the elderly brain to bypass damaged motor pathways, utilizing the extrapersonal “Third Mind” of the couple to maintain balance (Hackney & Earhart, 2009).

Studies have shown that Tango improves “functional reach” and “one-legged stance” far more effectively than traditional exercise (Keogh et al., 2009). This is because Tango is not just exercise; it is Resonant Training. It teaches the “sensing tool” to look outside its own dissonant signals and “hook” into the coherent frequency of a partner.

### **Part X. Transition to the Digital Frontier: The Predictive Brain**

The lesson of the Argentine Tango is clear: Coherence reduces the Cost. If we can find external anchors—whether they be the rhythm of Francisco Canaro or a clinical protocol—we can protect the practitioner’s “soul-substance.” This leads us to the next phase of our research: The Predictive Brain. If we can train the brain to “foresee” the frequency or the pattern before they arrive, we can operate our transceivers at a fraction of the cost. Further, we will explore the “Project Ether” protocol and show how

“Ratchet Logic” provides a modern solution to the age-old problem of the healer’s cost.

To understand how the transceiver’s cost can be mitigated, we must examine the brain not as a reactive organ, but as a precognition engine. Modern neuroscience, specifically the framework of Predictive Processing (PP), suggests that the brain does not “wait” for sensory input to arrive. Instead, it constantly generates internal models of the world and “projects” them outward to meet the incoming data (Clark, 2015; Friston, 2010).

In the context of the healer or the Tango dancer, the “cost” is highest when the prediction fails. When a “sensing tool” encounters a noisy, unpredictable signal (such as a chaotic disease state or a “stumbling” dance partner), the brain must work in “overdrive” to resolve the discrepancy between its internal model and the external reality. This resolution process—correcting for “prediction error”—is metabolically expensive. It drains the biophotonic and glucose reserves we identified in the Soviet laboratory studies of Djuna Davitashvili.

To train the transceiver to operate with higher efficiency, at MIG-Tech Lab, we have developed a mobile training protocol known as Project Ether. This tool is designed to bridge the gap between “hard science” and “intuition” by utilizing what we term “Ratchet Logic” (MIG-Tech Lab, 2026).

In most intuitive tasks, the practitioner waits for a “feeling” or a “signal” before acting. However, as we saw

with Wolf Messing, waiting for the signal often means absorbing the subject's dissonance. Project Ether reverses this. It forces the user to commit to a kinesthetic choice *before* the sensory evidence is manifest.

This creates a “Ratchet” effect in the neural circuitry:

1. **The Commitment:** The user “projects” a prediction into the future state.
2. **The Feedback:** The “Ratchet” clicks into place when the result is revealed.
3. **The Refinement:** Over time, the brain learns to minimize “prediction error” by tuning the antenna to the correct frequency more rapidly.

By strengthening the brain’s ability to “foresee” the frequency, we reduce the “cost.” An efficient antenna catches the signal at the earliest possible millisecond, requiring far less “soul-substance” to bridge the gap between the healer and the healed.

To prevent the “sensing tool” from stagnating in a reactive habit, Project Ether utilizes an 11x11 matrix of signal-to-noise variables with only 11 of the total 121 combinations having a signal embedded. This structure creates a calibration ratchet which functions as follows:

1. **Sensory Lock-In:** As a user gains accuracy on a specific level, their transceiver (brain/body) entrains to a specific “frequency” of signal hidden within a specific “texture” of noise.

2. The Ratchet Event (The Level Shift): Upon advancing to a new level, the software introduces a fundamental change in the signal/noise architecture. Because the random number generator embedded in the application cycles the matrix immediately, the brain is forced to a “point of no return.”
3. The Reset Cost: The user’s reported failure upon reaching a new level is the subjective experience of the healer’s cost. The brain’s previous predictive model is suddenly obsolete. To find the signal again, the practitioner must pay a “vital force equivalent” in focus and biophysical energy to recalibrate their sensing apparatus to the new reality.

This mirrors the clinical reality of a healer moving from one patient to another. No two “dissonances” are identical. A healer who tries to use the “technique” that worked on the previous patient will often fail—and suffer a higher metabolic cost—if they do not allow their internal ratchet to reset for the new “level” presented by the next individual.

### **Part XI. Intuition as Kinesthetic Efficiency**

Intuition is often viewed as a mystical “gift,” but through the lens of the transceiver’s cost, we can reframe it as Biophysical Efficiency. A highly intuitive healer is simply one whose predictive models are so accurate that they require minimal “Odic” expenditure to achieve resonance.

This explains why spiritual masters like Sathya Sai Baba, or high-level Tango

maestros appear to work with “effortless grace.” Their “cost” per transaction is lower because their “sensing tool” is perfectly tuned to the underlying frequency of the field. They are not fighting the noise; they have become the signal.

This predictive training is not new. Various “Schools of Presence,” including internal martial arts like Tai Chi or Aikido, utilize similar principles of “precognition.” By training the body to sense the opponent’s *intent* (the ideomotor signal) before the physical strike, the martial artist achieves a state of “Aiki” or harmony (Ueshiba, 1992).

In our model, this is the ultimate form of Transceiver Protection. If you can sense the “strike” (or the disease) at its inception, you do not need to “absorb” its full kinetic or energetic weight. You simply “step aside” or “phase-shift,” preserving your own life force while remaining fully engaged in the dialogue.

### **Part XII. Transition to Professional Care: The Ethics of Energy**

We have now moved from the laboratory to the spiritual heights, through the dance floors into the digital training of the modern brain. We have established that Sensing is Spending.

This leads us to the final and most critical section of our article: Transceiver Hygiene. If the healer’s cost is a biological reality, how must we change our clinical practices to protect the caring professional? In the following section, we will lay out the practical pillars for the modern healer to

survive and thrive in a high-Cost energetic economy.

If the evidence from the Soviet laboratories, historical mediumship, and the Argentine Tango leads to a singular conclusion, it is this: Healing is a high-cost energetic transaction. The “third party” involved in the dialogue—whether defined as the “Od” of Greber, the “biophotons” of Gulyaev, or the “soul-substance” of the spiritual Avatars—is the primary currency of the human sensing tool.

For the caring professional, the implications are ethical as much as they are biological. To ignore the transceiver’s cost is to invite systemic depletion, chronic fatigue, and the eventual “shattering” of the practitioner’s own organizing field. We propose three pillars of Transceiver Hygiene to ensure the sustainability of those who work at the frontiers of human resonance.

**1. Phase-Shielding and Functional Detachment.** The hallmark of the “empathetic” healer is often seen as “feeling what the patient feels.” However, our research suggests this is the most expensive way to sense. To “merge” with a dissonant frequency is to allow that dissonance to “drain” your own coherence.

- The Model: Healers must learn to sense without merging. This is Phase-Shielding.
- The Technique: By maintaining a “High-Frequency Anchor” (a state of internal coherence or a “Soul-shield”), the healer can detect the patient’s signal without allowing it to “thin” their own vital energy envelope.

**2. Rhythmic Recharging and the “Tango Reset.”** Just as the rhythm of Tango provides a carrier wave for the partners synchrony, the practitioner must utilize external rhythmic and acoustic drivers to “reset” their biophysical oscillators during and after a session.

- The Recovery: High-intensity sensing leaves the nervous system in a state of “static.”
- The Protocol: Utilizing specific frequencies (such as the 3/4 “waltz” staccato or harmonic resonance tools) to shift the transceiver from a linear projective mode to a circular, restorative mode. This helps the “antenna” shake off the patient’s residual dissonance.

**3. Transition to a Circulatory Model.** The most dangerous error in healing is the “projective” model: “*I am giving you my energy.*” This is a guaranteed path to bankruptcy.

- The Shift: We must move toward a Circulatory Model. In this state, the healer and patient create a shared, temporary “Third Mind” or “Third Field.”
- The Benefit: In a circulatory state, the energy is not lost but “recycled” through the loop. The “cost” is paid by the *system* rather than the *individual*, significantly reducing the burden on the practitioner’s personal soul-substance.

**Conclusion: The Bioethics of Presence**

The journey from the clandestine labs of the USSR to the spiritual heights of the Avatar, and finally to the kinesthetic embrace, reveals a universal law: *To sense is to spend*. By acknowledging the Transceiver's Cost, we move away from the "supernatural" and into a rigorous, biophysical framework for the 21st century. The evidence suggests that the human body is the most sophisticated diagnostic tool in existence, but it is a tool that requires "fuel" of a very specific, high-order nature.

Whether we are training the predictive brain through smartphone app, assisting the elderly through the resonant stability of the Tango, or materializing hope in a clinical setting, we must protect the transceiver. We must respect the metabolic and vital cost of the dialogue. Only by honoring the "cost" can we ensure that the light of the healer does not go out while trying to illuminate the "darkness" of the patient.

### **Appendix: The "Safe Mode" and the Fatigue of Concentration**

Within the architecture of Project Ether introduced above, we observed a specific psychological and biophysical defense mechanism: the Pattern-Stickiness Safe Mode. To avoid the heavy "vital force cost" of constant recalibration, the user's psyche often prefers to cling to a previously mastered signal-to-noise pattern, even when the random number generator has shifted the underlying reality.

### **References**

The "Safe Mode" as a Biological Governor is an evolutionary adaptation. The brain, seeking to conserve metabolic fuel, resists the high-intensity expenditure required to build a new predictive model for each level. The practitioner who attempts to "force" a perfect result through sheer concentration is, in effect, attempting to "buy" accuracy with a higher "vital force equivalent" than their current biophysical account allows.

Our Intuition Training Game testers report that the more they "concentrate" to achieve 100% accuracy, the more rapidly they reach a state of Transceiver Exhaustion. This supports our thesis that "sensing" is not a passive mental act but an active, energy-intensive metabolic process.

- **Forced Resonance:** High concentration acts as a "turbo-boost" for the antenna, drawing heavily from the biophotonic and glucose reserves.
- **The Fatigue Signal:** The resulting fatigue is the body's "emergency shut off" signal, warning the healer that the "cost" of this specific sensing modality is approaching a point of structural damage.

In the clinical setting, this explains why "trying too hard" to diagnose often leads to a "thinner" and more brittle vital force vessel. The most efficient transceiver—the one with the lowest Healer's Cost—is the one that can "shift gears" between levels without the friction of forced concentration.

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