The growth and spread of Applied Kinesiology chiropractic technique around the world has been remarkable in both the professional and public arenas. The clinical methods of Applied Kinesiology are a metaphor that embraces most of the directions complementary and alternative medicine has taken in the last century. It has been calculated for instance that approximately 1 million people now use manual muscle testing (MMT) worldwide as part of their diagnostic methods, (1) and that half of the chiropractors in the United States and Australia use AK MMT methods. (2, 3, 4) Chiropractors, osteopaths, manipulative and functional medical doctors, nutritionists, acupuncturists, energy psychologists and massage therapists have also embraced Applied Kinesiology over the past half-century, making it one of the most prevalent and influential chiropractic techniques that has been taken up by allied healing professions.
Origins

If we look back into the writings of the founder of chiropractic, DD Palmer, we find evidence that he likely foresaw the manual muscle test as a means to diagnose the ‘tone’ of the central and peripheral nervous system. (5, 6)

Dr George Goodheart Jr, the founder of AK has said that he was indebted to the philosophy of chiropractic espoused by DD Palmer for the guiding thought which produced Applied Kinesiology methodologies.

The applied kinesiology combination of vitalist philosophy and triad of health explanations give the doctor and the patient a rich vocabulary for those illnesses which conventional allopathic medicine is poorly equipped to address. Research indicates that for the functional illnesses that the majority of clinicians around the world treat, precise diagnosis of causative factors, assurance of recovery by measurable improvements (revealed in the immediate improvements in the manual muscle test), and physician-patient agreement about the underlying nature of their problem hasten recovery. (7)

Perhaps one driver for this openness has been the growing awareness of the interconnectedness between the structural, biochemical, and psychological-spiritual aspects of physiopathology: what is called the Triad of Health. These are especially apparent in chronic conditions, which are now the dominant challenge within general practice as well as the most common patient complaint and cost to health care systems.

Since their inception in the foment of late nineteenth-century American frontier medicine, the manual medical schools (chiropractic and osteopathy) have depended on highly developed palpation skills to assess tissue changes on the surface through which they inferred important but subtle changes in the organism beneath the surface.

Into this environment stepped George J Goodheart Jr, DC, who in 1963-64 discovered the signifying power of the underlying motor system, through the tool of the manual muscle test (MMT), to potentially provide valuable information, making the MMT a form of functional neurology. (8)

After all the concept of neuromuscular ‘tone’ was the basis of early chiropractic science and practice, and a core principle of DD Palmer’s. Muscular ‘tone’ reflected the status of a tissue or organ’s innervation. (5, 6)

The manual muscle testing procedures developed in AK essentially sees muscle tone and function as a transcript of the central integrative state of the anterior horn motoneurons, summing all excitatory and inhibitory inputs flowing into the nervous system. (8) In AK, the locus of dysfunction detected by the manual muscle test ultimately rests within the nervous system.

Abnormal results of the manual muscle test, whether the muscle is weak or hypertonic, may indicate abnormal involvement of any of the factors...
surrounding it.

A change in muscle function when specific stimulation or therapy is applied to one of these elements also indicates dysfunction of the surrounding factors.

Goodheart was one of the most imaginative, open-minded and brilliant clinical researchers of his profession and age and had an enormous impact. (9, 10) As an integrative approach to health care is being developed throughout the healing professions (a movement led by the chiropractic and osteopathic professions), the most important cornerstones of this developing world-view are still slow to be integrated into the biomedical framework. But if our aim is to encourage better physiological and personal functioning, then a broader approach to the ‘diagnosis’ of what has disturbed our patients’ normal state of self-organisation will be necessary.

This began the long, lonely road all original thinkers travel. Goodheart first taught the new technique at a meeting of the American Chiropractic Association in 1964. As muscle testing became routine along with standard diagnostic methods, other forms of treatment were found to immediately return a weak muscle to normal function. Goodheart had found a new principle that the scientific literature had not previously dealt with: muscle function can be instantly improved by the correct form of manual treatment.

This integrative process was initiated by Goodheart when he embraced concepts that had been originally developed in the 1930s by Frank Chapman, DO, and Charles Owens, DO. (11) Goodheart found lymphatic reflexes to be associated with specific muscles and called them neurolymphatic reflexes. With continued investigation, specific muscles were found to be associated with other factors of health such as specific joint-muscle interactions, vascular reflexes, acupuncture meridians, organs, glands, vitamins, and minerals.

Gradually mavericks in other professions heard about Goodheart’s ideas, now given the name Applied Kinesiology, and saw its usefulness to their own clinical conundrums and began to adopt all or some of these discoveries into their clinical thinking so spreading Goodheart’s ideas beyond the well-trodden path of yet another purely chiropractic system. Applied Kinesiology started its long journey to its place as a multi-professional clinical tool, used by thousands of medical clinicians from around the world.

AK is mapping new territories around the world

The history of PAK in the individual countries around the world and the healing professions that have been individually affected by Goodheart’s research work will be discussed consecutively:

- AK enters Europe through France
- ICAK-France revives
- Applied Kinesiology in Italy
- Applied Kinesiology expands through Europe and Russia
- Applied Kinesiology in the United Kingdom
• Applied Kinesiology in Germany
• Applied Kinesiology in Benelux
• Applied Kinesiology in Russia
• Applied Kinesiology in the Baltic States (Balticum
• Applied Kinesiology in Australia
• Applied Kinesiology in Japan
• Applied Kinesiology in South Korea
• Applied Kinesiology in Canada
• Applied Kinesiology in Ukraine

Part II (to follow):
• AK in Chiropractic
• AK in Osteopathy
• AK in Functional Medicine
• AK in Olympic and Professional Sports
• AK in Dentistry and Nutrition
• AK in Traditional Chinese Medicine
• AK in Complementary and Alternative Medicine

The interest and curiosity which the Applied Kinesiology concept stirred up began to spread over the entire world. Goodheart’s work drew a large following of doctors. The International College of Applied Kinesiology (ICAK-USA) was founded in 1976 to promote the research and teaching of AK. Initially the organisation was in the United States with chiropractors as the majority of members. There are now chapters of the ICAK in Australia, Austria, Benelux, Brazil, the Baltic States, Canada, France, Germany, Italy, Korea, Japan, Russia, Sweden, Switzerland, United Kingdom, and the USA. The organisation is multi-disciplinary; membership includes medical doctors, osteopaths, dentists, psychologists, and other health care providers who are licensed to diagnose patients. Medical practitioners using AK vary by country. In the United States it is dominated by chiropractors and in Europe by medical doctors. There are more than 3,000 medical doctors in Germany, for instance, who use AK as part of their diagnostic system. (12) All of these historical milestones of chiropractic make PAK one of the most widely shared techniques in the chiropractic profession’s history.

**Applied Kinesiology enters Europe through France**

Frenchman Richard Meldener graduated from Palmer College of Chiropractic in Davenport Iowa in 1972. As soon as his practice was up and running, he decided to invest his energy in organising workshops in France with colleagues. Along with his colleague Alain Liny from Paris, they created *The Chiropractic Team* to structure continuing education. At that time Major Bertrand DeJarnette and Sacro-Occipital Technique (a teacher of chiropractic cranial and viscerosomatic technique in the US, and a mentor to both Goodheart and his father) was expanding. So they invited the American SOT staff to Paris.

During one of the workshops a colleague, Claude Portal, who had just graduated from Palmer told them about Goodheart who had been trained in SOT and started to develop AK.

In September 1976 they decided to invite Goodheart to France and organised a three-day lecture for him at Paris Orly airport. This was the first time Goodheart lectured in Europe. The quality of this seminar was such that *The Chiropractic Team* decided to invite Goodheart to lecture in Paris every three months.

There was a small band of European chiropractors behind this including Jean-Pierre Meersseman, Richard Meldener, and Xavier Gillet. The first 100-hour course was organized in 1982 in Interlaken, Switzerland and taught by Dr David S Walther. (13) The AIKA (Associazione
Italiana di Kinesiolgia Applicata) started around the same time as the ICAK-Europe chapter. They allowed only chiropractors, dentists and medical doctors as members. They are pictured here:

Top row, on right side of paperboard, N° 1 Jacques Hoffmann, with a moustache and without reading glasses. In 1977, he wrote a Doctor of Chiropractic thesis on muscle strength, organ irritation and spinal mobility relationship. This thesis was part requirement for graduation at the Anglo European College of Chiropractic; Bournemouth. UK. N° 2, Bertrand Faucret. He has been a teaching staff member on AK at Los Angeles College of Chiropractic N° 3 Jean Pierre Meersseman who, thorough his association with Silvio Berlusconi, did great work with AK for AC Milan football team in Italy. (See AK in Italy) 2nd row from right to left N° 3, Jean Belaval, N° 4 Claude Portal from Tour, in France. He introduced Goodheart and AK to the Chiropractic Team in 1975. N° 5 Alain Liny, who is holding a cranium in his left hand from Barcelona. He had been instrumental in the Chiropractic Team. N° 6 Jean Francois Garrigues with a moustache from Varese Italy. He created and spread a big colored poster with AK related muscles, meridians, nerve supply, reflexes and nutrition. 3rd row from right to left N° 1, Piet Martin from Belgium. He has been team teaching AK with Richard Meldener in the early days. N° 3 Daniel Nicolle from Paris. He shares his practice between Paris and the Middle East N°4 Mario Sabella, from Sydney Australia. He has been the first ICAK Diplomate in Australia N° 5 George Goodheart. The founder of Applied Kinesiology. 4th, row and sitting from right to left N° 2 Richard Meldener from Paris. The first Doctor in Europe to have obtained the ICAK Diplomate and a pioneer teacher of AK around Europe. He researched and published the first peer-reviewed article to objectify manual muscle testing and AK.

In 1977 and 1978 David Walther and Paul White were invited to lecture in France. In 1978 Mario Sabella from Sydney Australia and Sheldon Sinett from New York City came to lecture in Paris.

Then Meldener asked Goodheart whom he would recommend as a lecturer. He suggested David Leaf who came to Paris in 1979 and ever since held January Ski seminars in the Alps on a regular basis.

Starting in 1978, Meldener attended the ICAK USA annual meetings: in Chicago, Montreal, Acapulco, Saint Martin (Caribbean), Hawaii and others. This inspired him to study for the AK Diplomate Exam, which he passed in May 1980.

Eventually ‘The Chiropractic Team’ was transformed into the European Chapter of the International College of Applied Kinesiology (ICAK).
However such was the rapid growth of AK throughout Europe at that time that in a few short years this Europe wide chapter was modified to national European chapters: France, UK, Germany and Italy, Switzerland and Benelux were the original chapters and more soon followed.

At that time Meldener was the only teaching diplomat in Europe and was in strong demand to teach the 100-Hours basic course. This he did in France, Denmark, Norway, UK, Switzerland, and Belgium. He presented the 100-Hours in Bournemouth at the Anglo-European School of Chiropractic and later in London at the British School of Osteopathy. The dissemination of chiropractic methods into European medical and osteopathic colleges had begun.

Meldener was also busy introducing AK to the dental profession in London in Harley Street, in Reims University with Pr Namani, in University of Lille with Pr Dupas, in University of Paris Garenciere with Pr Jeanmonod.

In 1991 at the University of Compiègne in France with Professors Goubel and Perot, Meldener published the first research article that showed, using the tibialis anterior muscle, under university laboratory conditions, the objective evidence for manual muscle testing and AK. During this project Goodheart visited the laboratory and approved the research. This was later published in French and English. (14, 15)

**ICAK-France revives**

In 2002 Laurent Picard DC was an associate with a colleague Philippe Albertini DC, in a company that organised various chiropractic seminars in France.

They wanted to organise the 100-Hours of AK because there was no kinesiology course in France at that point. So Laurent phoned Drs David and Monique Leaf to ask if they would be interested in teaching AK in Paris. Subsequently Leaf organised this course within the French chiropractic school, Institut Franco-Européen de Chiropractique (IFEC). Leaf certified a lot of participants.

In 2014 Dr Florent Fournier succeeded Picard to the presidency of ICAK-France and has organised many events including the most important chiropractic seminars in France.

The ICAK-France chapter was born in 2005, when Picard went to Toronto for the ICAK international meeting. A high point for Picard was taking a glass of champagne and spending some minutes alone with Goodheart. From all of this he realised, like so many before him, that ICAK was ‘his home’, the synthesis of all the education over many previous years. It was during this meeting that he decided to immerse himself in the study of AK and to pass the Diplomate examination of ICAK to teach in France and in French, the basis of AK.

Picard took the presidency of ICAK-France in 2007 and gained his DIBAK in October 2008 and since September 2009 he has taught the 100-Hours AK course in Paris and Toulouse every year. Over the next 10 years, about 500 DCs have completed half or all of the ICAK basic training. In parallel, Dr David Leaf gave his basic and advance training at the IFEC.

**The First AK seminars in Italy**

When it comes to recalling history, many dates and facts are often incomplete and the Italian AK story is no exception. Although there is some evidence that AK seminars in Europe were organised by the Association Culturelle Chiropractic Team in 1974 and that the first time George Goodheart lectured in Europe in September 1976 at the PLM Hotel Orly Paris Airport, there is very little photographic and written documentation regarding the first seminars in Italy. What is known is that Italian-based Jean-Pierre Meersseman was present at this first seminar by Goodheart.

It’s unfortunate that more information was not documented about this period but what is known is that applied kinesiology was spread by the initiatives of chiropractors. Although it has
been well documented that Marcello Trentin DC was the first full-time chiropractor in Italy starting in 1949 the chiropractic profession did not really ‘take off’ until the advent of the ‘Static Clinics’ in the 1970’s and 1980’s. Over these decades virtually hundreds of chiropractors, mostly from schools in the United States, were rotated through Italy.

This new concept was legally acceptable and opened the way to National Health Insurance contracts, rendering chiropractic free of charge to all Italians. Then combined with skilful and successful publicity, Static became a whirlwind of activity. In a short while, Static established 22 clinics in all the major cities of Italy. With a large capital expenditure, counting more than five hundred active support personnel, each individual chiropractor would deliver more than 500 to 1000 treatments per week and with the entire chain of clinics delivering over a million total treatments to 40,000 new patients per year, Static became one of the largest operations delivering services performed by chiropractors that the profession has ever known.

Quality of care became a problem due to the large numbers; at the same time other chiropractors were setting themselves up in independent ‘private’ offices with higher quality, superior techniques utilising applied kinesiology procedures and without reimbursement from the National Health System. Almost all ‘private’ patients paid in cash. These chiropractors represented a minority of the overall DC population but were able to create an image of being exclusive and word quickly spread among the population of the incredible results of these chiropractors and also this group started to see large numbers of patients privately.

Around this period, having heard of the great opportunities of chiropractic in Italy, DC’s from other countries comprised mainly of French, Americans, Belgians, Canadians, Swiss, English and others came to live the Italian dream.

**AK and Chiropractic in Italy**

What is clear is that with the growth of chiropractic in Italy there was also the Sanrocco Clinic, which was private and utilised applied kinesiology in its clinical procedures and stood above all other clinics. It was not associated with the National Health Care System.

Leading the Sanrocco Clinic was a charismatic Belgian DC by the name of Jean-Pierre Meersseman. His professional career and fame grew in the city of Como, Italy where his clinical proficiency and impeccable professional behavior gained the admiration of even would be critics. Part of the Sanrocco team in the 80’s and early 90’s were future ICAK-Europe President, Piet Seru, Brice David, Alfio Caronti, and later Antonio Gil, Mark Steele and Kristian Baekkel.

During the 1980’s chiropractic was receiving much attention in the press and VIP’s from all over Europe and the rest of the world would travel to be treated in the now famous Sanrocco Clinic in Italy. Among the names mentioned as patients during this period were billionaires King Hussein of Jordan, arms dealer Adnan Kashoggi, Fiat owner Gianni Agnelli, future premier Silvio Berlusconi, Prince Ranier of Monaco, King Motubu of Zaire. In the world of sports, over 100 World and Olympic champions have been to Sanrocco, the AC Milan Soccer team, and the United States Athletics Team trained in Como for the month before the 1991 IAAF World Athletics Championships in Tokyo, Japan and many others. Of the 41 athletes who trained in Como, 29 were finalists at these IAAF championships. One of the special cases of note was that of Florence Griffith-Joyner, (also known as FloJo) whom earlier had her malocclusion treated by the Sanrocco team and started to set records soon after that stood for many years.

As the fame of the Sanrocco Clinic grew, there were also many requests by other health professionals to learn what the doctors at Sanrocco were doing and this led to the establishment of an association that would organize courses and bring together members of various health professions to learn applied kinesiology and work together.
In 1988 AIKA-Accademia Italiana di Kinesiologia Applicata (the Italian Academy of Applied Kinesiology) was established by a team of chiropractors from the Sanrocco Clinic in Como, Italy, although for several years before this, the chiropractors from Sanrocco were already collaborating with dentists with applied kinesiology procedures. The first dentist to collaborate was Enrico Zucchi. In this period, the Meersseman Test for dental malocclusion was developed with its publication in many professional journals. Later, other health professionals with qualifications to diagnose such as medical doctors, psychologists and osteopaths were included. These meetings became weekly occurrences with meetings on Tuesdays and Thursdays that would last from 6 pm to midnight and thus it was decided to form a structure such as AIKA to accommodate the growing requests the health professionals wanting to better learn AK. Jean-Pierre Meersseman was elected the first President of AIKA.

The first AIKA courses were given on 3 occasions on June 17-18, September 9-10 and November 11-12, 1989. There were 127 attendees who participated in these courses and became members of AIKA, who later also became members of ICAK-Europe. The courses were offered every year for the next 5 years. In 1993 AIKA became an official chapter of the ICAK-USA and had more than 500 members who took the AIKA courses with Piet Seru serving as President from 1993 to 2000 then followed by Brice David. Unfortunately, in Italy as with government politics, AIKA was not immune to the political climate. During the period around 1996-1997, there was a court case in which a patient sued her dentist for malpractice due to damage after treatment of a malocclusion and it was decided that as a preventative measure it would be best to stop teaching courses to dentists and AIKA was disbanded several years after, around 2001.

ICAK-Italia

On February 13, 2006, the ICAK-Italia Chapter was officially founded with the following people and their positions:

President: Marcello Caso
Vice-President Jean-Pierre Meersseman
Secretary: Sergio Veneziani
Other changes in the leadership of ICAK-Italia:

2007-2010: Antonio Gil, President, Jean-Pierre Meeressman, Vice-President, Sergio Veneziani, Secretary; Robert Morrison, Treasurer. Advanced courses, in this period, were given by Chris Astill-Smith (2008) and John Diamond (2009).

2010-2014: Robert Morrison, President. Dr Morrison obtained his DIBAK qualifications and organized some 100-hour courses plus advanced seminars by Dr Schmitt (April 2010 & October 2011), Dr Blaich (November 2010), Dr. Leaf (March 2012), Dr Belli (November & December 2012), Dr Maffetone (March 2013), Dr. Schusterman (March 2014).

2014-Present (2019): Laurent Nappee, President. Advanced courses have been taught by Dr Stephen Gangemi (March 2015), Dr Thomas Rogowskey (April 2016), Dr Alan Jenks (April 2017), Dr Michael Allen (March and May 2018). During this time Dr Jenks presented the AK basics with 50 and 100-hour courses.

AK Journal

The AK Journal was published by Castello Editore in Italy. It ran for 21 issues from 1998 to 2006 and had a large readership with almost every AK Chapter in the world subscribing all their members as a group. The AK Journal with Antonio Gil as editor, at one point was surviving financially due to the enthusiasm of the AK chapters and also paid advertisers such as Nutriwest, Biotics, and Standard Process.

Deciding what material to publish in the AK Journal was the responsibility of the Editorial Board included historic names such as George Goodheart, David Leaf, Sheldon Deal, Eric Pierotti, Hans Garten, Michael Allen, Chris Smith among others.

Applied Kinesiology expands through Europe and Russia

As we have seen above, International lectures by Goodheart as well as group meetings began in Europe in the 1970s. The first European meeting was held in France in 1976.

There was a small band of European physicians behind this including Jean-Pierre Meeressman, Richard Meldener, and Xavier Gillet. One of the first 100-hour courses was organised in 1982 in Interlaken, Switzerland and taught by Dr David S. Walther. The AIKA (Associazione Italiana di Italiana Kinesiolgia Applicata) started around the same time as the ICAK-Europe chapter. They allowed only chiropractors, dentists and medical doctors as members.

Dr David Leaf sponsored AK ski seminars in France and Switzerland that laid some of the groundwork for the organisational development of ICAK in Europe.

Dr Joe Shafer was chosen as the first president of the new organisation, and he was a Diplomate. Shafer realised that if AK was to grow in Europe, AK needed to include other professional groups, even physiotherapists. The task of getting them into the organisation proved to be a challenging one. Shafer made the plea that if the group failed to include other professions, then the more powerful professions would take AK and run away with it anyway, and then ICAK would have no control of the direction taken.

Shafer thought that if ICAK could get a ‘foot in the door’ in Europe and permit the other professions to enter into the organisation and learn AK methodologies, then it would just be a matter of time before acceptance of the other professions became a common thing, as it is today. Shafer had to get the bylaws passed through the chiropractic ‘senate’ that could have blocked the fledgling start of AK in Europe. Another goal was to get someone from one of the ‘non-accepted’ professions into the administration of the new ICAK Europe (ECAK) organisation. Shafer was able to convince the group to write the bylaws so that osteopaths and physiotherapists could become “non-voting” members. This permitted them to attend ICAK educational seminars, but not have too much influence in the organisation. Also, the bylaws required that elected officers of ECAK to
have at least one member of each profession represented.
This opened the door for getting the osteopathic profession more involved, with Dr Chris Astill-Smith playing an important role in this early integration. From the ‘foot-in-the-door’ to equal representation for all professions became just a matter of time. Astill-Smith went from the editor of the organisational education materials with no voting rights, to secretary, editor and finally to President of ICAK-Europe.

During the developmental years of ECAK, AK was to be under one European roof. This was difficult because of the language and medical-cultural differences, so it was decided to push the development of an ICAK in every country, and those practitioners without an ICAK in their country could choose the country in which they wished to be a member.

Today these ideas have created many more offshoots so that for many, unfamiliar with Goodheart’s chiropractic level of insight and intelligence, his ideas have become discredited in their minds, usually before any real examination, due to poor and sometimes injudicious misuse or expropriation by other leading health professionals. The purpose and the interpretation of the response to any manual muscle test rests with the practitioner, and so in many cases untenable questions may be ‘asked’ of the body using the manual muscle test. There have been many dubious conclusions drawn by various practitioners, both lay-public and licensed professionals, on the basis of seeming change in an ‘indicator muscle’. Worried patients have been told that their heart, liver, digestive tract, psyche and kidneys are weak, or that they are allergic to any number of foods, based on a poorly conducted manual muscle test.

Goodheart and the leadership of the ICAK have vehemently and publicly condemned such hasty applications of MMT insisting that the manual muscle test is but one indicator of a possible need for further investigation. Goodheart preferred to correlate his findings with objective tests and indicators of many kinds. Applied Kinesiology, while successfully adopted by a wide number of clinicians around the world, has not advanced into some professional circles as fast as it might otherwise.
Applied Kinesiology in the United Kingdom

A layman by the name of Brian H Butler was one of the first people (in 1976) to introduce some of Goodheart’s ideas into the UK. Initially trained as a Touch for Health instructor, he became the Touch for Health Foundation’s Faculty member for Britain, and trained many instructors in England and a large number in Europe. In 1988 he and Stephanie Mills created the charitable organisation called the Association for Systematic Kinesiology (ASK). They also set up The Academy of Systematic Kinesiology (TASK), which offered training to lay people. He later hosted the ICAK-USA's Dr. Sheldon Deal DC, DIBAK, to teach some of his shortcuts in Applied Kinesiology to this group.

However Butler failed to attract many healthcare professionals and it was not until the early 1980’s that an ICAK credited Professional Applied Kinesiology course was officially taught by an ICAK Teaching Diplomate in the UK to licensed healthcare professionals.

While both Goodheart and Walther had made brief appearances in the UK, it was not until 1984, under the auspices of the University College of Osteopathy, formally known as The British School of Osteopathy, (BSO), that its post-graduate department ran the first ICAK Diplomate-led course in PAK in the UK.

Dr Antony Newbury, president of the International Academy of Oral Medicine and Toxicology, had previously been involved in helping put on a course on the treatment of the Temporomandibular Joint the year before at the BSO. He had attended a dental seminar on the effect of the TMJ on health given by Dr George Eversaul in Las Vegas where he had come across PAK.

Newbury was demonstrating AK and some of those who saw this were ‘hooked’. Dr Newbury found Richard Meldener DC, DIBAK in Paris as the only AK Diplomate in Europe at this time and it was decided to ask him to teach at the BSO. He first agreed to come and teach some of the post-graduate board the basics, to see if they wanted to set up a complete official post-graduate course. Richard Holding DO, then a member of the BSO’s post-graduate board, thought they could use the weekend, held at Tony Newbury’s Harley Street office, to see if others were interested. They invited a small group of senior members of the BSO faculty, such as former Dean Colin Dove DO, and member of the post-graduate board, Stuart Korth DO, founder of the Osteopathic Centre for Children and Chris Astill-Smith DO, among others. Richard Holding DO was also heavily involved in teaching the Sutherland Cranial Teaching Foundation (SCTF) cranial osteopathic post-graduate courses run each year at the BSO.

Holding first heard of Goodheart through Robert Fulford DO, who along with several other of Sutherland’s respected students, came to London from America to the BSO each summer to teach Sutherland’s cranial osteopathic ideas through the auspices of the SCTF. Fulford obviously knew Goodheart but Holding did not know enough to ask him about the connection. Fulford thought Goodheart and Sutherland were great pioneers!

Professor Andreessen, an orthopedic surgeon who taught undergraduate myology at BSO with Chris Astill-Smith, was also interested in PAK, and introduced it there, not telling them what it was. Like Newbury and now Holding, he had come across PAK and was also enthusiastic to get a course running at the post-graduate department, but some of the faculty at the BSO did not greet this with enthusiasm.

As Colin Dove said,

‘I remember the event with Meldener at Tony Newbury’s and the battle to get AK launched at the BSO. So many of our colleagues failed to realise that we were running a business. You get bums on seats by providing what people want not by providing what you think they should study’. (Personal Communication with CLJ, 23rd July 2013)
Richard Holding remembers:

‘At the next meeting, we argued for several hours that a chiropractor could teach at the BSO and that he would be paid substantially more per hour than anyone else at that point. I would then be course director for the 100-hour course.

‘I invited The Anglo European College of Chiropractic in Bournemouth, (now AEEC University College) to share alternate weekends but was told it was not ethical to share! I remember we then ran several 50-hour courses, over several summers in the mid-1980’s with Richard Meldener at the BSO when it was at its rather grand Trafalgar Square location, until Chris Astill-Smith was the first British ICAK-Diplomate in 1988 and he took over.

‘Ken Eddie, from the nutrition company Nutri Advanced, found Alan Beardall DC at a Nutri West (nutrition company) Extravaganza in the US. I circulated widely for Alan though at first he sent John Bandy to do a basic course for him. We did several courses with Alan at the BSO until one Post Grad Board meeting they dropped me from the board and stopped all the courses. Ken took over propagating the Beardall courses up until Beardall’s sad, untimely, death’.

Dr Beardall’s highly detailed research into Goodheart’s work became known as ‘Clinical Kinesiology’, perhaps starting the growth of ‘Alphabet Kinesiologies’ as more and more researchers, of various talents and persuasions added to and changed Goodheart’s insights.

Dr Beardall and his wife tragically died while in the UK at a course that was being taught with Dr. Richard Meldener. They were likely victims of driving on different sides of the road in the UK and they must have forgotten where they were after teaching in Leominster, and when they came onto the main road they stayed on the right and drove head on into a lorry. They were killed instantly.

Despite the initial lack of enthusiasm from the Anglo-European College of Chiropractic, several chiropractors joined the osteopaths, dentists and renegade medical doctors in the early courses in Britain. Meldener had a special interest in the TMJ and one year attracted a particularly large body of dentists to learn AK.

Meeting Goodheart on one of his early visits to the UK was a great excitement. (Goodheart had been stationed in the UK as a young officer in the USAF during World War II where he showed his genius for lateral thinking in tweaking designs for aircraft weaponry).

The 50-hour courses each summer were stronger on some sections than others and it was still difficult to gather the whole scope of Goodheart’s findings. The Atlantic was much ‘bigger’ than it is today, so it was a great moment for many UK doctors, who knew they had discovered their life’s work in his.

Around this time the Australian psychiatrist and AK enthusiast John Diamond MD appeared in London and taught his own Goodheart-inspired ideas to an enthusiastic audience, but by the later
80’s the more impenetrable, muscle-meridian-psychological side of AK was driving a few away from gaining a full mastery of the exciting but elusive treasure trove.

With first John Bandy DC and later, Alan Beardall DC, arriving to teach further complexities of manual muscle testing, a split started to appear in the small band of osteopathic AK enthusiasts. Some, like Richard Holding, became firm enthusiasts of Beardall’s *Clinical Kinesiology* model, while others either drifted away or were a bit bereft as to how to take their PAK studies to fruition.

Already there were increasing inter-changes between the growing body of AK students across Europe, first as some pioneers came to London to hear Meldener, secondly with the newly founded ICAK-Europe chapter. But quite soon after this pioneering new Pan-European chapter was founded it was soon clear that separate national chapters would be needed to meet the differing needs of different professions attracted to Goodheart’s findings across Europe. David Leaf was teaching his annual ski seminar in Switzerland, but these were often too costly for some of the younger clinicians in their early years of practice, with small children and big debts, but apart from Meldener there were no other resident European Diplomates.

By 1987 the ICAK-Europe Chapter was formed and started to hold annual conferences. After one in Switzerland in 1987 and Milan in 1988, the UK enthusiasts were strong enough to take on organising the International conference in London in 1989 under osteopath Mark Mathew’s organisational drive and were very happy, and not a little star-struck at that time, to have both Goodheart and Walther as keynote speakers.

Dr Chris Astill-Smith took time off from lecturing and seeing patients to hit the books and came back from America in 1988 as the first non-DC to be accepted as a Teaching Diplomate of the International Board of Applied Kinesiology. To the rest of his AK peers who had studied alongside him on those wonderful, if at times confusing, summer AK courses through the preceding four years with Richard Meldener, this seemed a quite remarkable achievement. AK teaching being less codified and standardised at that time.

Chris Astill-Smith’s new Diplomate status, allied to his extensive experience of osteopathic education at the BSO, combined with his natural gift for making complex material understandable launched a remarkable flowering of PAK across Europe. He began teaching AK all over the continent along with ICAK-E’s indefatigable expat President, Diplomate Joe Shafer DC, then based in Denmark. Drs Astill Smith and Shafer were then running courses in the UK, Denmark, Germany, and Italy and by the early 1990’s spreading the word to an enthusiastic core of Russian doctors not long out of the iron grip of the Soviet Union.

Astill-Smith, the first in the UK out of the block with teaching Diplomate status, almost single handedly set up and ran ICAK-UK in its early days, enthusiastically teaching the basic course in the UK, regularly travelling to what was regarded as ‘the source’ to learn new angles from Goodheart and others in the ICAK-USA, and sharing them with a growing body of AK aficionados.
at 'Up-date' weekends in Bath or Oxford back in the UK.

At the international ICAK Conference in Paris, 1990 the idea of a sub-Diplomate status was introduced by Astill-Smith, at the request of the Osteopaths in the UK: The Certificate Clinical Competence.

The following year at the International Conference in Copenhagen (organised by Shafer and a small but enthusiastic group of Danish AK students), the first two MD Diplomates, Wolfgang Gerz and Hans Garten from Germany passed the Diplomate exam and they started to take over from Astill-Smith much of the teaching in Germany and Austria.

The following year in 1992 two more UK osteopaths, Alison Astill-Smith (then married to Chris Astill-Smith) and Clive Lindley-Jones, took the Diplomate exams in Brussels, perhaps the only IBE exams to allow extra time for breastfeeding, as Alison with still nursing their first son.

Throughout the early 1990’s others in the UK, like the indefatigable Tracy Gates DO, Pauline Mathers DO, and the innovative Simon King DC followed, gaining Diplomate status and joining the other new Diplomates around Europe starting to teach the now more organised teaching schedule of the original 100-hour AK course.

AK in the UK has attracted a steady flow of students, each year, from those early days in the 1980’s to the present, mainly osteopaths and chiropractors with a smattering of medical doctors looking beyond the prevailing medical model. The classes of first Chris Astill-Smith then Clive Lindley-Jones and later Tracy Gates, Pauline Mather and Simon King, kept a small but enthusiastic group going. Tracy Gates took over as President, a role she held very capably for many years alongside her work as secretary to the International Board of the ICAK. Eventually as the others dropped out from teaching the basic course, Tracy Gates was for many years left teaching the entire basic AK course in the UK.

Thanks to Dr Joe Shafer’s wisdom and tact (following Goodheart’s aphorism that ‘you only keep what you give away’), who encouraged and manoeuvred ICAK to open its doors in Europe beyond the chiropractic profession, Astill-Smith’s excellent teaching talents and unstoppable enthusiasm (if not for air travel, at least for teaching most weekends around Europe), soon saw PAK spreading rapidly across the continent from the Atlantic to the Urals.
But at this time a bigger shift was also underway. One hot summer in the early 1990’s a weekend meeting was convened at Clive Lindley-Jones’ house in Oxford UK, to thrash out ideas for a combined European AK syllabus, to see if the largely UK needs, taken more or less wholesale by osteopath Astill-Smith from the American chiropractic model, could be merged with the German syllabus that was being developed by Drs. Gerz and Garten for the German speaking students, mainly coming from a medical-physiotherapy background, some with additional training in osteopathic or chiropractic skills and philosophies.

Despite much hard work and great argument this was not to be. Each country’s chapter, coming as it does with its own historical and cultural differences, attracts a different body of clinicians with differing needs and professional focus. As mentioned above, most feel more comfortable being taught by colleagues of their own professional stripe. The freer, early pioneering days of AK in Europe in the 1980’s, when a few enthusiasts were happy to cross professional boundaries, learn and share from each other, all united by their enthusiasm for AK hopefully could be sustained permanently in that form, at least in Europe despite a slight diverging of basic syllabi.

However new pressures and a harsher, more government-controlled professional climate has not been kind to PAK except perhaps in Austria where it has been accepted as an accredited medical post-graduate course, but then that has led to the Austrians leaving the international community of ICAK.

With most of the founding members gone, new and younger enthusiasts are in most of the ICAK chapters around the world, running with Goodheart’s innovative genius. Outside the United States, the chapters with the most vibrant groups are the United States, Canadian, German, Russian, Australian and Korean Chapters. And yet across Europe from France and the UK in the west to Latvia and Russia in the east, passionate enthusiasts teach and share the knowledge with undimmed enthusiasm.

This is not to say that all has been plain sailing in PAK’s first few decades, as it has spread across the world beyond the shores of its native USA. Like all passionate exchanges of scientific and medical insights, it has brought both heated debate and, at times, quite bitter conflict, argument and organisational difficulties. However it would not be stretching things too much to say that this joy in the exchanging of insights old and new based in the power of Goodheart’s discovery has brought greater inter-professional and international friendship fostering mutual respect, where only a generation ago it was all out war. Goodheart was naturally most munificent, and grew more so as his influence increased in the world, accompanying what he gave with that courtesy and freedom which, to speak the truth, is necessary to make the benefit really compelling for his AK students around the world.

Where the professions and countries within which it has settled are a bit more open to ideas beyond drugs and surgery, PAK has thrived. Good examples are in Europe as with the extraordinary growth in Germany. Equally in South Korea exciting things are being done with PAK that are never considered elsewhere, in a culture that gives parallel high status and demanding education to both western allopathic medicine as well as Traditional Korean Medicine.
Beginning in 1984 Wolfgang Gerz MD, who had been a World Champion in the Finn Dinghy Sailing class, had participated in the Olympic competitions as a competitor. He had problems with his low back during this event and was treated by a chiropractor who used Applied Kinesiology. He immediately became interested in what she was doing and bought one of the seminar handouts by David Leaf.

In 1985 he started his 'Chirotherapy' training in Germany, a post-graduate training in manual medicine for medical doctors.

At the training table he met Hans Garten MD, who was doing his specialisation in anaesthesiology and, unhappy with the diagnostic tools this discipline offered for pain control, decided to undertake the same training. He had been a trained acupuncturist since 1981 and immediately became inspired by the opportunities Applied Kinesiology offered.

In 1985 Dr Wolfgang Gerz organised the first 50 hours training in Applied Kinesiology in Munich Germany, which were taught by the first European Diplomate at that time, Dr. Richard Meldener. The second 50 hours were taught by the second Diplomate in Europe, Christopher Astill-Smith, in 1988, who taught another two series of 100 hours organised by Hans Garten in Hamburg.

In 1991 at the ICAK European Meeting in Copenhagen, Hans Garten and Wolfgang Gerz passed the Diplomate exam, being the first medical doctors outside the United States to take this exam. From then on they started to teach medical doctors, dentists, Heilpraktikers and physiotherapists in Germany, which seemed to be logical, as there were only a handful of chiropractors in Germany.

In 1992 they founded the ‘Deutsche Gesellschaft für Applied Kinesiology’ (DGAK), whose first Chairman was Gerz and had medical doctors, dentists, physiotherapists and Heilpraktikers, a professional group in Germany which has no defined education but who, after an exam before a medical board, is furnished a license to diagnose and is similar to the naturopathic profession in Germany. Unknowingly it had the same abbreviation as the association that had been founded by Heilpraktikers and laypeople in Freiburg, Germany, who had actually taken a ‘Touch for Health’ training and called themselves the ‘Deutsche Gesellschaft für Angewandte Kinesiologie’ (DGAK). The Freiburg group forced the medical group to change its name threatening it with a law suit, which was the origin of the German Chapter of ICAK: ICAK-D.

The ‘Internationale Ärztegesellschaft für Applied Kinesiologie’ (IÄAK) was founded in 1993 in Klagenfurt, Austria. It later changed its name to International Medical Society of Applied Kinesiology (IMAK). In 1993 the Austrian Chapter was founded (ICAK-A), with members who are medical doctors, dentists and physiotherapists.
In 1996 Garten founded the ‘Deutsche Ärztegesellschaft für Applied Kinesiology’ (German Medical Association of Applied Kinesiology, DÄGAK) together with Jeff Farkas, an American chiropractor, working in Germany. This became the second German Chapter, which had medical doctors and dentists as members as well as physiotherapists as associate members. The structure copied the one of the medical Manuel Medicine associations in Germany with the intent to bridge the gap between Applied Kinesiology and established manual medicine. DÄGAK ever since its foundation has sought to promote Applied Kinesiology as a scientifically based technique of Manual Medicine. The pre-requisite for acceptance of a technique should thereby be at least a credible model within the parameters of established science. The majority of this growth and activity was done with Dr. Goodheart’s blessing.

The three German-speaking chapters grew relatively fast as the acceptance of Complementary and Alternative Healthcare traditionally is quite important among both patients and health professionals in Germany, which after all is the country of origin of such methods as Homeopathy (Hahnemann), neural therapy (Hunecke) and electro acupuncture (Voll).

Helpful in this process has been the publication of the first textbook on Applied Kinesiology in German by Gerz in 1996, with a second edition in 2000, (16) a series of educational videos by Hans Garten in 1996, (17) another two textbooks in 2004 (now in its second edition 2012) and 2007. (18, 19) There are textbooks on AK and acupuncture (20) and AK and cranial osteopathy as well as three handbooks on manual muscle testing by Garten, Gerz, and Ramsak. (21, 22, 23, 24, 25)

In November 2004 the IMAK (Chairman Harald Stossier) obtained accreditation of the Diploma of Applied Kinesiology from the Austrian Medical Chamber for the Austrian Chapter, which has an important status in the European Union according to its legislation. It is the first and only certificate in Applied Kinesiology awarded by a Medical Board in the world.

After Drs Smith and Meldener, many diplomats have taught AK in Belgium and Holland: Wolfgang Gerz, Hans Garten, Jeff Farkas, Joseph Shafer, Clive Lindley-Jones, Tracy Gates, Dieter Becker, Ulrich Angermeier, Wally Schmitt, Phil Maffetone, Laurent Picard, Richard Belli and Steve Gangemi...applied kinesiology chiropractic technique in Europe is now being used and taught by chiropractors, osteopaths, medical doctors, physiotherapists, dentists and other allied professionals.

Since 2008 DÄGAK and ICAK-A (under the roof of IMAK) developed their uniform teaching curricula with standardised handouts, which are compulsory for every teaching Diplomate. Diplomates who are IMAK lecturers exclusively teach the material which they have a specialised proficiency in (chiropractic, osteopathy, orthomolecular medicine, acupuncture, etc).

These Chapters published the MJAK (Medical Journal of Applied Kinesiology), the abstracts of which can be read in English language. The full text articles in German are at www.DAEGAK.de.

**Applied Kinesiology in Benelux**

The first AK seminar in Benelux occurred in Antwerp in 1989, with seminars by Richard Meldener and Christopher Astill-Smith. In 1987 Dr Geert Drenth had followed an AK seminar with Richard Meldener in London, and worked for a year at the osteopathic practice of Christopher Astill-Smith. He was so excited with the AK results that once he moved back to Belgium, he started a yearly returning 100-hour event. This seminar series has remained successful and has stimulated around a thousand AK practitioners in Belgium and Holland.

Senior members of the ICAK Benelux Board celebrated on the Royal Yacht Britannia at the 2018 ICAK Conference in Scotland. Because the ICAK-Benelux now has their own diplomats, Alain-Bruno Judicq teaches AK in French, Geert Drent in Dutch, and Alan Jenks and Jim Townhill are teaching 100-hour AK modules in English. ICAK-Benelux was founded from the existing ICAK-
Europe in 2006 by Geert Drenth, Ivan Devos and Hans van Beers and has been continued by Bodil Petersen, Marielle Allwaters and their teams.

Ivan Devos started his AK education 40 years ago with James Durlacher during his chiropractic education in the USA, and was one of the first to go to the AK meetings in Paris. Dr Devos also videotaped all the seminars with Chris Smith.

In 1987 Geert Drenth was stimulated by Christopher Astill-Smith to start the AK seminar with Richard Meldener in London. It was here that he met Harry Stassen, a Dutch dentist who would became a board member of the ICAK-Europe and stimulated Drenth to start organizing seminars in Belgium.

After the first 100-hour modules in 1989, Chris Smith continued teaching for years. In the beginning only chiropractors and osteopaths would attend the seminars. Then one year a physiotherapist named Christianne Crijns attended, which was not to the likings of the Dutch chiropractors who were following the 100-hour seminar. Because of her, Harry Stassen stimulated the ICAK-board to accept the Dutch physiotherapists to be part of the ICAK-Benelux. Since this time hundreds of physiotherapists and manual therapists have successfully been educated in the basics of Applied Kinesiology.

In Belgium physiotherapy is a five-year Master degree at all universities, but the chiropractic and osteopathic professions are still not recognized by the Belgium government, despite their large numbers in the country. This is due to an old Napoleonic law, which states that only medical
doctors are allowed to diagnose. In Holland both professions are regulated, although the DC and DO professions still impugn the value and evidence-base for AK.

The first sponsor that helped organise the seminars in Belgium was Biodynamics, a company selling Nutri West nutrition products. The owner, Francis Maes, would personally come to every seminar and help in every way he could. In 1992, Francis was the one to organise the International Annual Meeting in Brussels. With Goodheart present, this became a successful International Meeting, and nothing was considered too much for the entertainment of ICAK delegates. It took some time before the ICAK finances were back to normal.

In 2008 Geert Drenth organised the International Meeting in Antwerp, ‘Back to Basics’ which had a good turnout, especially the gala-party on Saturday evening. This adventure will hopefully be repeated in Bruges, June 2020.

**Applied Kinesiology in Russia**

Dr Lyudmila Vasilova was the chair of post-graduate Manual Medicine in Novokuznetsk, Siberia (Russia), and asked Joe Shafer (a chiropractor) and Chris Astill-Smith (an osteopath) to bring the first AK courses to Novokuznetsk Russia in the fall of 1991. Dr. Lyudmila Vasilova was the driving force for the organized part of ICAK-Russia.

Dr. Shafer went to a Russian International Sports Medicine Conference in Moscow. While there he gave a modicum ‘5 minute’ presentation as they asked the group of chiropractors there if anyone could present something. No one was willing so Shafer thought that he might just demonstrate ‘Gait’ reflexes and facilitation and inhibition.

Lyudmila Vasilova was present as the chair of Post-graduate Manual Medicine in Novokuznetsk, Siberia (Russia).

Vasilova was impressed and had heard of AK and craniosacral therapy. She asked Shafer if he could come to Russia and present craniosacral techniques. He told her that he was not a cranial osteopath, but an applied kinesiologist and that AK had techniques in the craniosacral discipline. So she asked him to come and present a 5-day course.

Having never done a 5-day course and only just putting together a 100-hour basic course, Shafer was terrified of going to Russia alone and attempting to give a 5-day workshop. So, he thought of Chris Astill-Smith, as he was an AK colleague and had classic cranial osteopathic training. Shafer contacted Lyudmila and she invited them to come in the autumn of 1991.

Sergey O Pilyavskiy, MD, DIBAK is a Director of the Institute for Clinical Applied Kinesiology in St. Petersburg, Russia. In addition to teaching and clinical practice, he has successfully begun translating into Russian the textbooks written by the leading Western applied kinesiologists and publishing them throughout Russia. Sergey is also a Vice President of the ICAK-Russia.

That started AK in Russia. Lyudmila Vasilova has been the main driving force for the organised part of ICAK-Russia.

**Applied Kinesiology in the Baltic States (Balticum)**

The history of origins of ICAK Balticum dates back to the end of the 1990’s, when Professor Lyudmila Vasilieva first visited Riga.
Lyudmila Vasilieva was one of the first graduates of the course, taught by ICAK diplomats Joseph Shafer and Christopher Astill-Smith in Russia in the early nineties.

Professor Vasilieva enthusiastically embedded the acquired knowledge into her medical practice, as well as widely advocated it.

A professor of rehabilitation, Zinaida Kasvande, organised her first introductory course in AK together with Professor Vasilieva in Riga. The course immediately became popular among doctors specialising in manual therapy. Olga Ivanovskaya, Mikhail Petrov, Vladimir Sklyarevich, Anita Dyachenko, Valeri, Kudoyar, Oleg Sukhorukov, Visvaldis Bebrīšs, Ugis Beķeris and many others were amongst the first researchers of a new scientific discipline, Applied Kinesiology. In order to continue their studies, Sklyarevich, Ivanovskaya, Kudoyar and Sukhorukov headed to Novokuznetsk and Moscow, and completed a course in manual therapy, specialising in basics of AK and muscle testing. The doctors kept on visiting courses in Russia, taught by Joseph Shafer, Chris Astill-Smith, John Diamond, Hans Garten

A new impulse in the exploration and development of AK in the Baltics was the organization of a basic course in AK in the years 2004-2005 with the participation of German colleagues Wolfgang Gerz and Karmen Kannengeizer. An off-site training course, which took place on the island of Rugen, Germany, rallied the Baltic colleagues based on a common interest in studying AK. In 2005, the foundation of the Baltic society of AK-ICAK Balticum, appeared to be a logical continuation.

With the participation of Estonian doctor Vasilij Zagura, Lithuanian doctors Alfredas Marushko, Almantas Pocius, Dalus Barakauskas and others, it was possible to expand the geography of AK and create a department of ICAK of the whole Baltic region – ICAK Balticum. Wolfgang Gerz and Michel Allen were significantly involved, and so were John Diamond, Joseph Shafer and Tracy Gates, whose motivation helped found ICAK-Balticum.

The foundation of a regional organisation in AK allowed a more active participation in ICAK conferences all around the world. One of the highlights is when Valeriy Kudoyar and Oleg Sukhorukov visited Detroit in 2007. The colleagues had an unforgettable time acquiring new experiences and studying emotional sides of the health triad, in a course taught by a prominent
psychiatrist, one of Goodheart’s first followers and closest allies, John Diamond, in his New York home.

The doctors were initially impacted by the founding father of AK, George Goodheart, in his home in Detroit, with the active participation of John Diamond. The communication and help of colleagues has supported ICAK-Balticum on its thorny path in mastering AK. On a conference in Amsterdam, Hans Garten, in a private conversation, offered Oleg Sukhorukov to take the ICAK diplomat exam. His offer was motivated by the fact, that, if Oleg, a Russian speaker, were to pass, it would be possible, with translations, for Russian-speaking specialists to pass the exam in their mother language.

A hard time started for Oleg Sukhorukov, a period of passing the diplomat exam. Eventually Boston, Toronto, Berlin, Bordeaux, and Vienna were the geographical stages of passing the exam. Having passed it in 2010, Oleg Sukhorukov was accepted into IBE - the examination committee. The exam questions have since then been translated into Russian. Soon, there were new ICAK diplomats: Tatyana Chernishova, Sergey Pilavsky, they passed the exam in the Russian language. Once there are candidates in Latvia, who would want to pass the exam in their mother language, it would facilitate the translation of the exam questions into Latvian.

The organisation of regular seminars with the participation of famous specialists, such as John Diamond, Tracy Gates, Joseph Shafer, Chris Smith, Harald Stossier, Jose Palomar and others contributes to the support of interest in AK among specialists in the Baltics on a high level. The success in medical work among the specialists, who have acquired AK, graphically demonstrates the advantages of this comprehensive chiropractic and useful medical discipline.

AK is growing in the Baltic states, perhaps helping the chiropractic profession to gain more footing there as well. With the holding of the 52nd annual ICAK conference 'Balance and Harmony' in Riga, Latvia in August 2016, ICAK-Balticum became truly on the international AK map.

Applied Kinesiology in Australia

The first Australian exposure to AK was to four undergraduate students at Palmer College in the early 1970’s. They were Ian Hope, Mario and Henry Sabella and Donald McDowall. Dr. Goodheart instructed them during his presentations at local chiropractic association meetings in the United States. In their graduation year Mario, Henry and Donald felt confident enough in AK techniques to begin teaching small AK classes at the Palmer College in 1973 and 1974. Dr. Mario Sabella was involved in forming the very first AK Club at Palmer.

Before graduating, Mario Sabella went on to work in Dr Goodheart’s Detroit practice in the Michigan Building, famous for where Henry Ford made his first car. Dr Goodheart felt the environment of Henry Ford’s creativity in this building inspired him to innovate.

While Ian Hope was waiting to graduate in 1974, Mario Sabella returned to Australia in 1973 and worked in Ian Hope’s first practice, the Macquarie Chiropractic Clinic in Belconnen, ACT. There, Dr Mario prepared an AK chiropractic practice for his friend Ian.

Donald McDowall returned home to Canberra in 1974. After working in his father, Keith McDowall’s practice for 2 years, Donald purchased the Macquarie Clinic from Ian Hope in 1976. Henry and Mario moved to Newcastle, NSW to establish another AK practice.

Goodheart gave Donald, Mario and Henry a letter of authority in 1976 to teach his work via the authority of the Australian Chiropractors Association (ACA) and under academic approval of the Phillip Institute of Technology (PIT), prior to the Chartered Diplomat’s meeting of the inauguration of the ICAK. All profits were given to the Institute to help establish the new chiropractic program. Mario Sabella was the only Australian able to travel to attend the 1976 ICAK foundational meeting in Dearborn, Michigan where he was awarded the Chartered Diplomat status.
Donald McDowall was able to travel to Dearborn, Michigan in 1977 and sat the first trial of the written section of the Diplomate exam. He sat and passed the practical section in 1978 for his Diplomate award. Donald McDowall became the first Australian to complete the Diplomate of the International Board of Examiners of the ICAK. Donald began teaching AK in Canberra in 1978 using the first official ICAK approved ‘Walther Seminars’ materials upon their release in 1978. (13) Mario Sabella used these same resources to teach AK in Sydney. Henry Sabella practiced AK but didn’t take on the teaching duties.

Both Donald McDowall and Mario Sabella were responsible for lighting the flame of interest in AK, which grew rapidly in Australia over the following years.

Not unlike themselves, Donald and Mario’s early teaching at Phillip Institute sparked the interest of many students to investigate AK further. One student at the time, Victor Portelli, began taking the 100-hour courses offered by Drs McDowall and Sabella concurrently. Victor completed 4, 100-hour sessions with Dr Sabella and 3 with Dr McDowall from 1978.

The first AK seminars were sponsored by and coordinated through the Post Graduate division of the International College of Chiropractic in Australia (ICC) beginning in 1976-79. [ICC > Preston Institute > Phillip Institute PIT > RMIT; Ed]

Dr Portelli taught an unofficial AK introductory class to around 40 students of PIT in 1984-85 for no fee and among those first exposed were the people that would eventually form the local applied kinesiology chiropractic association.

During a week-long skiing trip to Falls Creek in the Victorian Highlands in the early to mid-1980s, a dedicated group of young enthusiastic doctors keen on AK thought it a great idea to form an exclusively chiropractic AK Association. These hearty souls included Robert Peacock, Victor and Peter Portelli, Keith Maitland, Joe Krawec, Barry Decker, Andrea Bisaz and a few chiropractic students from PIT. During the morning they thrashed their bodies on the slopes and in the afternoon and evening they thrashed their brains trying to work out how to start up an organisation from scratch.

With little experience of how associations or committees worked, they forged ahead seeking legal advice largely paid for by Victor Portelli and they decided to form an exclusively chiropractic association to be named The Chiropractic Applied Kinesiology Association. (CAKA)

Dr Portelli was elected the inaugural president with Robert Peacock as his vice president and a few enthusiastic people who formed the bulk of the committee including Joe Krawec, Andrea Bisaz, Barry Decker, and Keith Maitland but without any formal structure. The group grew exponentially over the first couple of years in the mid 1980’s to around 200 members, who had a strong interest in this new and exciting technique, wanting to know more.

In 1987 Keith Maitland became the first Australian trained chiropractor (from PIT and a student of Dr Portelli’s) to successfully pass the diplomate exams in Washington DC and soon after his return to Queensland he began teaching the AK certification series using Walther’s materials which included manuals and slides.

The first official seminar of the fledging association was held in Melbourne on December 5th, 1987 and featured both Donald McDowall and Keith Maitland as the speakers and was very well attended with many travelling from all over the country to attend.

Victor Portelli served 2 terms as president and was succeeded by Robert Peacock.

During Robert Peacock’s presidency and the fast expansion of the group it had become clear that a formal structure was becoming a requirement, especially as they were seeking recognition as a subchapter of the ICAK. A name change of the organisation to better reflect the true direction of AK which was being embraced by other non-chiropractic professionals internationally, getting away from an exclusively chiropractic organisation, also became a priority.
Dr Eric Pierotti, the education officer for the Australian Chiropractors Association (ACA) in South Australia and with many years of committee and seminar experience, was himself an avid fan of AK, had staged several 100-hour basic courses for Mario Sabella. He had also successfully brought David Walther to Australia for seminars in both Adelaide and Sydney, and was recruited to the board as secretary in early 1988 and mandated with getting the house in order.

Robert Peacock and Eric Pierotti spent 2 days in Melbourne rewriting the association bylaws and formulating a formal board structure using the ICAK-USA board as a template and the recruitment of likeminded people to fill the board roles.

One of the earliest boards consisted of:

- President: Robert Peacock
- Vice President: Keith Maitland
- Secretary: Eric Pierotti
- Treasurer: Ian Niven
- Collected Papers: Braden Keil
- Newsletter editor: Frank Marcellino
- Sub Editor Newsletter: Victor Portelli
- Seminars: Joe Krawec
- Committee Members: Keith Keen, Andrea Bisaz

The decision was taken in 1988 to make the name change to the ICAK-A and forward the bylaws to the US to become an official chapter of ICAK, which was accepted making Australia the second official chapter after Europe. In 1987 Eric Pierotti was the first elected international representative to ICAK and travelled to Chicago in 1989 to represent the Australian interests at his own expense, at the now famous Super 25 meeting. He is still the Australasian representative and has not missed an international meeting since.

By 1990, the association had grown on the strength of providing AK seminars as well as AK certification series taught by the new Diplomates on the block, Victor Portelli and Robert Peacock. During this time Victor Portelli in collaboration with Frank Marcellino were researching and developing their new Visceral Biomechanics techniques which have gone on to be lauded internationally. Robert Peacock’s interest and expertise in clinical biochemistry saw him develop and teach his very successful Chiropractic Ecology seminars. Keith Maitland was no longer teaching a basic course. This left a rather large hiatus in terms of teaching of the basic course. There was of course a veritable smorgasbord of weekend seminars on all manner of topics from this very active group of Diplomates and other non-Diplomates busily developing techniques and protocols using AK methods.

This void was filled by Keith Keen who was awarded his diplomate in 2001 and took up the teaching mantle and worked tirelessly on providing the basics to hundreds of willing students single handedly for the next 6 years.
Eric Pierotti in 2007 passed the exams and together with Susan Walker a couple of years later began to teach the basic course and together formed the so-called ‘Three Musketeers’ teaching team. This was the first time in Australia that the basic course was taught using the very same manuals, PowerPoints and teaching aids and providing the exact same information so that if a student missed a session they could do a catch up at another time in another city. This has set a precedent for the rest of the world to follow.

Ten years later the trio is still working together sharing the load of basic courses all over Australia. Trevor Chetcuti, Stephen Sassinis Shashan, and Tracey Ladermann who look after Melbourne, and Michael Hooker who now teaches in his homeland New Zealand, have now more recently joined them.

Robert Peacock served 3 terms as President and was succeeded by Keith Maitland in 1991 and served to 1992.

Eric Pierotti was elected president in 1993 and held that position up to and including 2000 when Australasia became only the second chapter to host an International meeting outside of the US, after Munich in 1997.

He was succeeded by Richard Cheyne from New Zealand, Keith Keen and then Donald McDowall, who all served multiple terms with distinction and brought their own unique expertise and style to steer the board.

The president at the time of writing (2018) is Mary Papatheocharous who had held the position for 2 terms by then and has brought a new freshness and direction to the board after serving as a committee member for some time.

The 2018 board included:

- Vice-President / International Representative: Eric Pierotti
- Registrar: Ara Amai
- Treasurer: Leesa Payne
- Secretary: CatherineLangford
- Newsletter Editor: Andrew Powell
- Committee: Trevor Chetcuti, Graham Taylor
The association now boasts 10 Diplomates (after the tragic passing of Robert Peacock, after a long illness), 8 of whom are certified teachers, and are held in very high regard by the AK community.

Australian AK Diplomates have always been actively involved in international affairs with Keith Keen and Donald McDowall working with the IBE for many years, Eric Pierotti has served on the IC since 1989 and was chairman for 9 years from 1999-2000, and 19 years and counting as Australasian international representative, IBE procedures chair, vice chair of the IEC, and chair of the Dispute Resolutions Committee. Trevor Chetcuti took over as chair of the IBORs in 2016 and is highly regarded for his work with research. Australia has had the privilege of hosting two international meetings, the first in Sydney 2000, which is still considered a benchmark and a model for how an international meeting should be staged. The second in Cairns in 2013 was also a great success and ICAK-A proudly hosted their third in Brisbane March 20-24, 2019.

Under the guidance of some new and enthusiastic young bulls and a few of the experienced old stagers that refuse to ride off into the sunset, the association has over 214 active members in a variety of categories, and include members from Japan, New Zealand and Hong Kong. They boast a healthy bank account and are providing the highest quality seminars with home-grown talent as well as hosting renowned international speakers biannually.

Academic interest in AK became ‘official’ for the first time internationally in 1977 when the International College of Chiropractic (ICC), Melbourne, the forerunner of RMIT University’s program, included AK in its Research and post-graduate programs. This interest may have resulted in a publication by Lines et al on neurolymphatic reflex treatment. (26) In 2006 the post-graduate section of the Chiropractic Division of the Health Sciences section of RMIT University in Melbourne Australia accepted the ICAK’s International Board of Examiner’s Diplomate as a suitable entry requirement for its Musculo Skeletal Management (Applied Kinesiology) degree. This program was launched at the Annual Conference of the ICAK in Vienna Austria on May 28, 2006. RMIT University saw a strong future in supporting the direction that Applied Kinesiology was moving while recognising the work of the ICAK as it taught and examined new Diplomates. The positive outcomes for this program include the first support of a chiropractic specialty system in the chiropractic division of a government-sponsored University in the world. (27)

At one time AK methods had been taken up by approximately half of chiropractors in Australia. (27)

**Applied Kinesiology in Japan**

The Chukyo College of Chiropractic in Nagoya, Japan held the first International Post-Graduate Seminar in Japanese history, with Drs Goodheart and Walther as lecturers. In 1982 the Chukyo College began technique courses between the college and Drs Goodheart and Walther, and both were installed as a Professor Emeritus. (2)

Numerous teaching trips to Japan, Europe, Australia, Canada, and all over the United States were a part of Goodheart’s and Walther’s Applied Kinesiology peripatetic life for decades.

Victor Portelli and other AK Diplomates have travelled from Australia and Europe to teach the Japanese AK community over several years establishing the AK community in Japan.
In early 1990, some chiropractors were invited to teach seminars for the medical physicians in Korea.

Two of them were Rene Espy and Nancy McBride, who were Applied Kinesiologists who demonstrated manual muscle testing diagnosis and treatment, including joint manipulation. Mr Hongmo Yang, who was a promoter of chiropractic and tried to legislate it in Korea, invited them to Korea a second time, but was not successful. Two attendees of those seminars decided to enter Parker College of Chiropractic in the United States in 1994.

One of them was Dr Seung-Won Lee, an orthopedic surgeon, and the other was Dr Seung-II Youn, an Oriental Medical Doctor. While at the Parker College they attended a 100-hour Applied Kinesiology course in Dallas TX in 1995, taught by Dr Tom Rogowskey, a Diplomate of AK. They also attended the seminars of chiropractic neurology by Dr. Ted Carrick.

After graduation from the Parker College of Chiropractic, Dr Seung-II Youn practiced chiropractic, Applied Kinesiology and Oriental medicine in Dallas, TX while attending AK, chiropractic neurology, and nutrition seminars. The concept of the muscle system and muscle test particularly as the most exposed part of the nervous system is demonstrated by these multidimensional physicians, whose expansion of the AK method of health into several other healing disciplines in South Korea is laudable.

Dr. Seung-Won Lee had returned to Seoul Korea to open his clinic to practice a combination of chiropractic and medical approaches. They attended the AK seminars of Drs Goodheart, Blaich, Schmitt, Leaf, Sprieser, and Lebowitz. In 1997, they became Diplomates of the American Chiropractic Neurology Board. Dr Lee taught chiropractic neurology to Japanese chiropractors and Korean medical physicians for 4 years from 1998.

Dr Lee is also on the faculty of American College of Functional Neurology, a trainer in Neuro Linguistic Programming and Hypnosis since 2010. He is also an associate professor of the Carrick Institute (lecturer of functional neurology in Seoul and Tokyo), and an instructor at the Medical College of Busan National University. Since 1997 he’s been in private practice of a multidisciplinary clinic (AK, functional neurology, orthopedics, functional medicine, NLP, and hypnosis) in Seoul, Korea.

In 2002, both of these doctors achieved Diplomate status with the ICAK (DIBAK) and had started to hold 100-hour essential courses in Applied Kinesiology for the first time in October 2002. At the first seminar of AK, about 150 medical and Oriental medical physicians attended, again showing how AK methods have spread into a much wider world. This is because many Korean physicians are interested in the field of complementary and alternative medicine. The attendees of these seminars were from various medical fields such as orthopaedic surgeons, neurologists, neurosurgeons, rehabilitation physicians, anaesthesiologists, family medicine practitioners, oriental medical doctors, and chiropractors. ICAK-Korea has provided 100-hours courses of AK every year since 2003.

Drs Lee, Youn, Chang-Sik In, and Jae-Woon Lee had translated Walther’s synopsis into Korean, which was the first book of Applied Kinesiology published in Korea. The official members of ICAK-Korea translated Goodheart’s book ‘You’ll Be Better: The Story of Applied Kinesiology’ into Korean in 2009.

ICAK-Korea was founded in March of 2003. Dr Lee was elected president and Dr Youn as vice president. In 2004, at the ICAK-International Annual Meeting in Boston, ICAK-Korea was approved as an official member of ICAK. In 2013, 6 doctors have achieved the DIBAK. Those are Jae-Won Jung MD, Won-Bae Moon MD, Se-Hyung Park MD, Eun-Sang Ko OMD, Soo-Young Choi OMD, and Dong-Ha Baek OMD. The seminars of AK have been enriched by the participation of
these Diplomates. In January 2013, the osteopath Lindley-Jones held the lecture regarding ‘How to Unscramble Hidden mechanical problems with Applied Kinesiology’ for the Korean physicians.

In 2014, ICAK-Korea had translated Dr David Leaf’s textbook ‘Applied Kinesiology Flow Chart’ into Korean.

In 2016, Dr Scott Cuthbert presented AK at the Jangheung International Integrative Medicine Expo, the largest integrative medicine conference in the country, as well as at Kyung Hee University in Seoul.

Applied Kinesiology in Canada

In Quebec, the history of Applied Kinesiology began in 1978, when Goodheart charmed the Canadians at its first conference in Montreal at the invitation of Dr Réal Choinière DC and Hervé Lafleur DC.

AK’s first 100-hour basic course was taught in Montreal in 1980. Invited by doctors Judith Houk DC and Gabriel Tassé DC, brothers Rod and Dan Gleason DC from Thunder Bay, officially Canada’s first DIBAK, offered their knowledge for 2 years. They are the founders of the Canadian chapter of ICAK.

Richard Roy DC, was the first DIBAK in Quebec in 1980. He also participated in teaching a basic 100-hour course. It was in the Spring of 1982 that David Leaf DC presented himself at Spa Eastman, at the invitation of Réal Choinière DC. Already armed with his algorithmic diagrams, he charmed the audience, but especially Raymond Cyr DC, who became a faithful disciple then a friend, and went on for 28 years to organize the seminars of Dr Leaf in Montreal. For her part, Sharon Reid organized Dr Leaf’s presence in Toronto for more than 10 years.

A special word of thanks should be given to Monique Chardonnault-Leaf DC, who supported those seminars for so many years. In Ontario, Dr Emile Zmneck DC and Dr George Milne DC, ND were among the first to get their DIBAK. Dr Hans Boehnke DC, obtained his DIBAK in 1989, and taught the introductory course to AK at the Canadian Memorial Chiropractic College for several years.

In those same years, a group of hard-working Ontarians met every month to share the knowledge they learned and applied in the past few weeks. These were:

Hans Boenke DC, DIBAK
John Thyret DC
Bill Dronyk DC, ND
Bob Dronyk DC, ND
In 1993 Gilles G Brisson from Quebec and Cameron Colquhoun DC from Ontario had the same idea at the same time to revitalize ICAK-Canada, which no longer existed, without even knowing each other. This group of motivated doctors succeeded in pooling their efforts to formally re-establish the Canadian Chapter of Applied Kinesiology.

In 1994 a meeting at Château Frontenac welcomed George Goodheart and was a great success. At this point, the Canadian chapter of ICAK had a new start with more than 70 members and the regular publication of an information letter and research papers. The chapter now has members from across Canada: Quebec, Ontario, Alberta, British Columbia, and New Brunswick.

The first board of directors of 1994 who worked hard to structure the AK:

President: Gilles G. Brisson
Vice-President: Pierre Deraîche
Secretary-Treasurer: Cameron Colquhoun
Free Members: Hans BoehnkeDIBAK, Brian Blower, Jean-François Lafleur,; Michel Lefebvre
Regional Representatives: Michel Lefebvre (Quebec), Jacques Bédard (Ontario), Nikhil Bair-Patel (Ontario), Brian Blower DC.

In 1996 a meeting of ICAK-Canada took place in Saint-Sauveur, then in 1998 in Laval and in 1999 in Toronto. During the 2000s, David Leaf continued to teach several generations of doctors. In 2004 Chris Astill-Smith presented a series of functional biochemistry courses in Toronto.

Divisions within the organisation led to the withdrawal of Quebec from the Canadian chapter for five years between 2000 and 2005. 2005 is a pivotal year when Canada, supported by Quebec having reinstated the training, held an international meeting in Toronto. John Millet DC, hosted the event and was involved since 2000 in both the Canadian and international organisation.

The same meeting of 2005 was a milestone in the teaching of AK in Quebec: Dr Charles Héroux DC, the youngest chiropractor to obtain his DIBAK, began the following year teaching his first
100-hour basic course. Thirteen years later, he now teaches AK in several countries. A few years later, the rest of the ‘French connection’, a group of motivated young chiropractors who would travel across America to gather relevant information and learn from American chiropractors, also got their DIBAK. Of those, Anne-Eugénie Simard and Jean-Sébastien Bernier became teachers. New teachers have been constantly added: François Fortin DC, Sébastien Houle MSc, DC, Geneviève Gagné DC, and Frédéric Rancourt DC.

In 2011, Jayson Grossman DC, ND went to swell the ranks of the Ontario DIBAKs. With his great expertise in teaching, he managed to join both the ND and the DC, bridging between British Columbia and Ontario.

In 2012 the ICAK-International Meeting was held in Montreal. Thanks to our close ties with many of the AK’s greats, an impressive selection of guests were received on stage.

ICAK-Canada today has 98 members including 20 DIBAK and the first honorary DIBAK received in 2018 by Raymond Cyr DC.

Applied Kinesiology in Ukraine

Applied Kinesiology was first presented in the Ukraine in 2010, when Ukrainian doctors began an active dialogue with their Russian colleagues. The first seminar from Lyudmila Vasilyeva took place in Yalta (Crimea, Ukraine). Doctors became interested in training in the largest Ukrainian Center for Medical Rehabilitation and Kinesiotherapy called the ‘Higher League’. In 2012 the head of the Center, orthopedic and traumatologist, Gleb Kirdoglo MD, PhD, for the first time organised training in AK in mainland Ukraine (in Odesa), where a series of seminars were conducted by teachers from the Moscow Academy with professor Vasilyeva. The seminars enjoyed a full house and students came from all over Ukraine, and very soon from many other countries. At the same time, Gleb Kirdoglo studied at seminars in Moscow and began to assist Professor Vasilyeva during the training cycles.

In addition to active academic work, the doctors of the Higher League Medical Center began scientific research work. Using the latest diagnostic equipment, studies were conducted; kinesiology algorithms of assessment and care were tested and assessed. Physiotherapists at the
Center were developing new kinesiotherapy and rehabilitation approaches for patients with musculoskeletal disorders. Research results have been presented at major scientific conferences in Kyiv and Moscow. Gleb Kirdoglo received a patent for a method of treating patients with dorsalgia.

In 2012, the Ukrainian Association of Applied Kinesiology and Medical Rehabilitation, UAAK, was created and registered. The organisation continues to be actively involved in educational and scientific work, publishing books and teaching aids, and developing training programs. UAAK specialists have begun to conduct international seminars in Europe, Asia, and the Middle East. At the invitation of medical centers and specialised associations, UAAK organises training cycles in Germany, Estonia, Latvia, Kazakhstan, Moldova, and Israel. The number of students who have attended the training now exceeds 5,000.

The President of the Ukrainian Association, Dr. Gleb Kirdoglo, initiated the creation of professional AK communities in Kazakhstan and Moldova. In 2019, over 700 specialists from 9 countries are members of the UAAK.

In 2019, the European Academy of Natural Sciences presented Dr. Gleb Kirdoglo the Albert Schweitzer Medal for ‘the development of medical rehabilitation and applied kinesiology in Ukraine and Europe’. This annual award is presented to medical representatives from different countries for their international contributions to the development of various fields of medicine.

Despite the incessant expansion, evolution and redevelopment, much of the original AK approach has stood the test of time and persists in its essentials among the hundreds of thousands of MMT practitioners around the world. The voluntary skeletal muscular system is the source and the recipient of the greatest neural activity in the body, and therefore the AK clinician is one of the most comprehensive ‘diagnosticians’ of human function and malfunction at work in the world today.

**Conclusion**

Goodheart and the ICAK have dedicated their lives to the future of integrative healthcare and its realisation with Applied Kinesiology. This passion for functional diagnosis, ‘diagnose the need, supply the need, observe the result’, for the most unusual and the most common patient problems has been shared at chiropractic, osteopathic, medical, and dental colleges, seminars, and lecture-tours all over North America, Europe, Australia and Asia.

Hailed as a friend and inspiration to many, Goodheart is a man to be remembered, honoured, and modelled. The numbers of clinicians and healing professions that are using and developing AK demonstrate that many of the most famous doctors in the orthodox and complementary and alternative medicine world felt that ‘the Goodheart approach’ was invaluable because it focused on measurable physical factors which make up the constellation of dysfunctions affecting the person’s total health picture and happiness.

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