

LP: the light at the end of the tunnel or just another flash in the pan?

The Lightning Process (LP) has attracted national press coverage but alongside the hype and talk of miraculous recovery, InterAction received reports of relapse and failure, and decided to find out more.

After receiving a letter from a person with M.E. who had tried LP, felt better for several weeks then relapsed (see *InterAction* 57, p 43), we asked any other readers who had tried LP to share their experiences with us. Twenty-two people responded, several at length. Eight said predominantly positive things about the process (usually citing recovery), eight gave mostly negative reports (describing relapse or a bad experience), three were more mixed and four wanted to discuss similarities with, differences to, or their experiences of, other approaches.

Of those who had undertaken the program, most had done so in 2006, under the instruction of different practitioners across the country.

What is LP?

The website describes LP as a training program (not a therapy) that combines concepts from Neuro Linguistic Programming (NLP), hypnotherapy and life coaching.

It claims to help with a range of conditions from fear of failure to depression, addiction, procrastination and stage fright. According to the website "it's also effective for enhancing happiness, business success, peak performance issues, relationships" and more.

The main aim of the process is to "teach you how to regain the control in your life, and so give you the opportunity to break the spiral of illness, M.E., anxiety & stress, overwhelmedness, stuckness or low self esteem, or any other destructive patterns you have."

To achieve this "the key steps are: recognising the patterns which cause

the destructive feelings in your life; creating an effective way of stopping these patterns; creating more useful alternative patterns of thinking and action."

How exactly it works... "is one of the most commonly asked questions," says the website, "but it's the most difficult to answer, not because it's a secret, but because it takes two hours to explain how it works – that's what's covered in the first session." However people who have undergone the process told *InterAction* that the technique is very simple.

Melanie* told us: "It basically consists of telling yourself 'Stop!' every time you feel any symptoms and essentially telling yourself that you are okay or more than okay... Simply doing the things you want to do, or would do if you were healthy."

Jillian* said the LP coach "had several diagrams which showed how the constant negative thoughts were meant to be making me so anxious or "depressing" my immune system so that my body couldn't recover.

"She then asked me how much of the time I felt I was happy with my life. When I said about 60-70% she seemed taken aback. I'm a fairly grounded person and have learnt to enjoy the things I can do and not to focus on the negative! She then asked me to redo my score to reflect on how much I felt I could do compared with what I would like to be able to do if I was healthy. A bit like the M.E. ability scale. I found this difficult and upsetting.

"Once this was established she laid out three mats on the floor and got me to repeat certain phrases and step between them. I practiced doing this with her and we used examples of

negative thoughts which I should try and stop as soon as they started. It seemed very simple. She went over the phrases quite a few times and got me to gesture with my arms to show my body I was stopping my negative thoughts."

Carly*, who underwent LP in February 2006, told us: "The Lightning Process is all about changing your thought patterns in order to reduce the adrenaline in your body and thus improve your immune system. At first I found it very difficult to change my thought patterns... so I had to work very hard at the process. (The coach) doesn't cure you, s/he simply tells you what you need to do. It is you that has to do all the hard work."

Does it work?

Acceptance by most LP trainers depends upon you signing an application agreement which says that you understand that LP does not guarantee any results and that you accept full responsibility for the effects of applying or not applying the program.

Some people report significant improvements. Before LP, Terry* had had M.E. for 12 years and was functioning at less than 40% effectiveness and having frequent three-week periods of total bed rest. Then a chance remark alerted him to the Lightning Process. "I followed this up and I have now recovered. I am not only doing things I have not done at all, or so frequently for years, I am enjoying food as I want and in what combinations I want."

A former Management Trainer, Terry totally embraced one of the key propositions in the training, that it



wouldn't work unless he was fully committed to it and worked hard at it continually, to make it automatic and part of his reflex actions. As the seminar progressed he became more and more convinced of the effectiveness of the training process. Now he says: "I know my immune system has reverted to normal; it feels like new blood coursing through my veins."

Rachel* had a different experience: "I have had ME for over 30 years in a relapse/remission pattern." Before the course she was operating at her "usual 70%-ish." She says: "After (the course) I applied the process as needed. Got some strange looks when I did it in the middle of a supermarket or a street but I didn't mind that. After about six or seven weeks I was about the same. (The coach) tried a process over the phone designed to unplug the brakes but it didn't help. Since then I have been coming to terms with being as I was before."

Gina* had a more positive experience. "After the first session of LP, my mindset was transformed. Having arrived in a wheelchair, I was able to walk back to the car park. After seven weeks, I am able to drive, see friends, walk normally and no longer feel fatigue, only normal tiredness. I still use the process when necessary and apart from being unfit due to being virtually housebound for three years, I feel fine."

Penny's* experience was different: "I have had M.E. since 1991 and multiple chemical sensitivities quite severely since 1998." She took part in a three day group course. "The course was

extremely enjoyable and I was carried along on a wave of positivity, fully believing that this was going to work for me. I came home convinced that I was getting better and applied the process rigorously. However, light housework, short walks and sedentary hobbies were still the only things I could manage.

"Reporting back on my second follow-up phone call I was told that I was stuck in neutral and that I must list things that I was passionate about and do these things in order to stimulate the endorphins. I began challenging my chemical sensitivities, applying the positive approach and arranged a five day caravan holiday in Essex. I was confident.

"On the way back we had a puncture on the M1 and I stood on the hard shoulder for over an hour breathing in motorway fumes on a hot day. There was no escape. My respiratory problems have been horrendous ever since due entirely to the pollution exposure. I would never have put myself in such a challenging position prior to the process."

Penny concluded: "I think that one should approach this treatment with caution and not be carried away by those for whom it has been beneficial. It would be interesting to find out how many people were truly 100% fit 12 months after LP. I know of no support groups for those who fall by the wayside."

Linda* thinks differently: "The Lightning Process changed my life within days and every day I am still improving as I get fitter. I am now

swimming, riding again, walking, dancing, entertaining and I have had the time of my life. I feel better for the first time since I was 18. If it folded round me now (and I don't believe for a minute it will) I have had five months completely clear and I truly believe I have the rest of my life ahead of me."

Euphoria and disappointment

Melanie* told us: "I went through the Lightning Process in the summer of 2004 and had a couple of follow-up sessions a couple of months later. I was convinced it would be the answer to my prayers.

"I was euphoric after the process. I managed a couple of weeks, during which I practised the 'positive' process all the time and tried out walking a lot more than usual. At the end of that time, I hit a wall and felt totally depleted."

After a couple of months she went back. Her coach said she wasn't practising the process rigidly enough, and that it would not work if she doubted it. She felt euphoria again after the sessions.

"On the positive side, I believe it helped me to feel more optimistic and to focus on the positive. Conversely, there was a period of disappointment when it didn't turn out as promised and I was, in the nicest possible way, led to believe that my dedication was the problem," she explained.

Belle* suffered a relapse after participating in the program. "First I was on a real high, but over the weeks I increasingly struggled to achieve consistent results with the technique... I was saying stop to the signals of my intuition and getting sicker and sicker. Realising this, I then had to start a long and painful process of forgiving myself for 'failing'."

Judith*, who has benefited from LP, says: "The few people for whom it hasn't made such a notable difference need to persevere and get people to help them pinpoint the barrier that is preventing it from working. From experience of helping a friend, once the preventing factor is recognised the Lightning Process has dramatic results."

Unfortunately, neither Rachel nor her fellow 'classmate' Stella* were able to overcome their relapse, despite the best attempts of their trained LP practitioner.

“Doing M.E.”

Stan* found LP “helpful in terms of learning not to dwell on negative thoughts, but (it) hasn’t alleviated the main symptoms of my M.E.” He says that, “Essentially LP assumes that people with the condition are ‘doing ME’.”

Phil Parker, the founder of LP, has said that he sees M.E. as a physical illness, regarding M.E., CFS, PVS and fibromyalgia as the same type of condition. Jillian* saw a different LP coach. She has chemical sensitivity and had been confined to her house for most of the last two years prior to undertaking LP, as her room is up two flights of stairs and she could only manage to go down one flight.

“I arranged with (the coach) an environment in which I believed I would be able to cope with the course,” she told *InterAction*. “When we arrived I found four steps to the front door plus a large flight of stairs and the ground floor had just been sprayed with air freshener.”

Jillian was tired with a headache, severe muscle pain and brain fog after the session and lay awake most of the night trying to use the process to not notice the pain. Next day, in less pain but still unable to focus, she set off for the second session. “I told Mum I felt I couldn’t have grasped what I was meant to do properly, that I had either misunderstood what I had to do or failed to pick something up. I couldn’t understand quite why I was so much worse as well when I should have been feeling much better if other people who had done it were anything to go by.”

Her mum was not allowed into the session with her. This surprised Jillian as she’d made it clear on the phone that this was what she needed and wanted. The coach wanted to go over the homework.

“I hadn’t written it down because by the time I’d got home I’d been too ill,” explained Jillian. “I tried to explain but she didn’t want me to be negative so wouldn’t let me. I had to say how it had had a positive effect. I had used it all the way home the previous day and that evening and through the night and that morning.

“She said pain is a good thing – she enjoyed going to the gym and needed to hurt afterwards. I felt this was all valid but irrelevant. I tried to explain it was completely different and explain

the previous evening. I tried to describe it and didn’t get very far. I burst into tears because she wasn’t paying any attention.” Jillian said she was very distressed by the coach’s approach throughout the session.

“Every time I started to cry I had to do the mat thing over again. She told me it wasn’t any good her being sympathetic. It wasn’t going to help me. She said it was good that it was happening and would reinforce something – good pathways – and stop negative thoughts. By that point I considered walking out but decided to stick it out to the end and not later blame myself for having given up on it.”

Leap of faith

Ann* was put off LP by the attitude of a practitioner: “I spoke to a local woman who teaches it in order to find out more. She was rather cagey when I started asking her questions, and said, ‘It isn’t for me to justify the Lightning Process. You need to read the website, see if you think you’re ready, and then it’s your job to convince me that this is for you. It’s about you taking that leap of faith.’”

Michelle* didn’t like what she called the ‘cloak & dagger’ approach. “Not being able to find out beforehand what the process entails, or to be able to read about the science and theories behind it,” she explained. “They will not tell you what actually happens in the sessions and the cynical side of me wonders if that’s because it’s just such a simple technique that anyone could start using it for themselves.

“The thing about ‘don’t talk about the LP to anyone else – it will sabotage it for you and for them’ – some of this makes sense to me,” she added. “As it’s a behavioural technique that you need to practise very intensively initially, then you could be sidelined by trying to explain and intellectualise about it and pick it apart – it would lose its immediacy. But I don’t really see why, once you’ve got the hang of it you can’t say something about it to others who are interested.”

Ann was critical of the application process. “Even if a person does decide to go for LP, you have to fill in a detailed questionnaire first, and they then select you based on whether they think you are suitable. This goes some way to explaining their apparent high

success rate, because they are hand-picking those they ‘cure.’”

Penny had heard of a number of people being turned down for the program at first, who were later accepted. Michelle was one of those who was initially refused a place: “In terms of being ready, I was initially turned down, despite having done a lot of reading about it on the websites and deciding that it made a lot of sense – in fact I read about Reverse Therapy and Mickel Therapy, and chose LP over both of these as it seemed more appropriate for me. Yet, perhaps because I asked some questions about research, and why it doesn’t work for some people, I was told I was not ‘chomping at the bit’ enough. I was then given the phone number of someone who had recovered to have a chat, and then accepted on my second attempt.”

And afterwards? “Basically no instant miracles, but some significant improvements,” she reports.

Who might benefit from LP?

InterAction put the question to LP’s founder Phil Parker. “I believe LP has the potential to help everyone with M.E. but I’d like to qualify that statement as it seems at first reading an unlikely claim,” he told us. “Firstly it’s important that LP is recognised for what it is, as training rather than a therapy. This means that your question needs to be divided up into its component parts. The first question is: ‘Do you believe everyone has the potential to learn the Lightning Process?’ and in the same way you could ask ‘Do you believe everyone has the potential to learn French?’ then my answer would be ‘yes.’

“The second set of questions would be: ‘But would everyone choose to learn French, would everyone think they could learn French, would everyone love to learn French, would everyone do their homework and practice hard, would everyone who’s learnt French keep it up?’ These are very different questions and the answer to these are of course, no, not everyone. LP is a training program that teaches people how to create success in their health, their lives and their work and – for those who are prepared to work hard and apply it as it is designed to be applied – the results are consistently good. But like any training program, it

will only produce reliable results if those guidelines are adhered to.

"If people choose to apply it intermittently, in a different way to the way they've been taught or not apply it all, then the results will naturally be unpredictable. Independent of how many times this is reiterated in our web site, pre-training assessment phone calls, seminars and follow up sessions, there will always be a handful of people who choose not to follow the suggested approach, and will therefore get unpredictable results.

"One of the key purposes of our application procedure is to help people to decide if and to assess whether they are ready or not to undergo training at this point in time. We are as keen as anyone to make sure trainees only come to training when we feel they are ready and prepared to do the work needed to get results."

How much does it cost?

The London program costs £560. This buys three sessions, totalling 5-7 hours, over three consecutive days (£90 per hour if you are bedbound needing one-to-one sessions). Accommodation is not included. The first two sessions last 2-3 hours and take place in a small group setting, "usually 3-5 people." On the third day you get 1 hour one-to-one with your trainer. The fee is payable by cash or cheque on application. Your cheque will not be cashed unless you are accepted but payment is non-refundable in the event of cancellation on your part. The website suggests applicants should budget another £50-£100 for follow-up coaching support.

What do medics think?

Dr Neil Abbot, ME Research UK, said: "Many putative therapies for M.E./CFS have come and gone over the years – each with its advocates and successes in the short term – so the real test of (LP) will come with time, and from its published objective success rates. M.E./CFS is a diagnosis of exclusion with probably many different kinds of patients, so one therapy will not suit all. And are adrenaline (nor/epinephrine) levels raised in patients generally? Of three research studies which have measured plasma levels directly, one (Timmers 2002) found epinephrine levels significantly increased (to a modest level), while two (Ottenweller

2001; Peterson 1998) found no difference in nor/epinephrine, so whether adrenaline levels are raised to the point where lowering them induces a lightening cure is a moot point."

Dr Hazel O'Dowd, Consultant Clinical Psychologist and Clinical Champion for CFS/M.E. services in Avon, Gloucestershire, Somerset and Wiltshire, said: "My personal view is that CFS/M.E. is multi-factorial and that for a small minority, anxiety or 'over-production' of adrenalin will be a significant problem and therefore helped by this process – or in fact any therapy that helps with anxiety based problems (and some are much cheaper! and available through the NHS).

"What concerns me is that they do not select on the basis of how problematic adrenalin-driven symptomatology is (ie. how much of a problem anxiety and its correlates are) but on how 'committed and motivated' people are, which I do think is insulting. No-one wants to be ill."

Professor L J Findley, Essex Neurosciences Unit, is undertaking a clinical study into the process. He says:

"The theory of the Lightning Process would, at first sight, seem reasonable but as yet we do not know. What we know thus far is that some people benefit and improve but it is also known, by anecdotal report, that some people do not improve and some have claimed relapse following the process.

"A great deal of basic work is required in order to ascertain which patients are likely to respond to LP, those who could be harmed or made worse by the treatment, at what point in the illness it might be appropriate to use the process and the duration of effects as they have never been measured.

"Until there is more knowledge and proper guidelines can be developed, individuals practicing in this form of training/therapy should keep carefully logged follow-ups of all patients treated. I also think it would be wise if all patients were referred through a medical specialist in M.E./CFS.

"Over recent months, Gerri de Vries, an LP practitioner and occupational therapist with huge experience in fatigue syndromes, and I have been assessing individuals and offering treatment to those we consider likely to benefit from the process. Each patient has been properly assessed in advance and is being followed up by a therapist

and physician. This is an open clinical study to try and provide data to argue the case for a proper clinical trial in the conventional sense. We hope to have some data to publish in the next few months."

Action for M.E. policy

Action for M.E.'s policy remains unchanged when it comes to therapies which:

- claim to offer a cure
- have not been subject to research published in respected peer-reviewed journals
- require the payment of large sums of money

Action for M.E.'s policy is that M.E. is a real, physical illness and that any treatment, management technique or therapy has to recognise this to be effective. Interim CEO, Trish Taylor says: "Whilst we understand people's desire to try therapies in their desperation to get well again, we strongly advise people to examine any claim with scepticism. More research is needed into the effectiveness of all treatments, management techniques and other approaches. There is no one treatment that is beneficial to everyone.

"Over the years there have been a number of approaches that purport to offer a cure for M.E. or lead to recovery. Whilst there are some individuals who seem to make remarkable improvements, sadly we have always found that such cases are few in number.

"Our surveys have shown that many people can hope to make a substantial improvement to their health over time through a combination of pacing, symptom control and good diet. Many also report benefits from various complementary and nutritional approaches – but we would always advise you to ask questions about the evidence for benefit before paying out large amounts of money."

* Names have been changed to protect identities.