

## REGIONAL CONFERENCE

The contribution of “Psycho-Neuro-Endocrino-Immunology” (PNEI)  
to the promotion of health

Ancona, 27 November 2007 – Palazzo Regione Marche

### “DISAGIO DIFFUSO, ‘METODO ALLA SALUTE’ AND PNEI”

Speaker: Mariano Loiacono

#### **Introductory remarks**

MAURIZIO BONSIGNORI: Well, Loiacono, I knew you were the speaker, because you’re looking straight ahead.

It’s strange but true: I’m terrified of psychiatrists because they’d just have to take one look at me before throwing me out... although I quite like being out!

MARIANO LOIACONO: Judging by your talk this morning, I think they’d have a lot to lose by throwing you out. Psychiatry often throws people away, when it should be going in the opposite direction, helping people uncover their real resources and potential, often hidden behind the various masks of malaise. This is what I try to do every day at the Centre for Social Medicine of the "Ospedali Riuniti" University Hospital Trust in Foggia, by treating “*disagio diffuso*”<sup>1</sup> with the “*Metodo alla Salute*” or MaS Method.

As there is little time to talk to provide an in-depth picture of what the “MaS Method” has been in my thirty-year experience, in the final part of my speech I will show a video entitled "Life is", with images taken randomly during the dynamic interactions that take place during “*Gruppi alla Salute*” or GaS meetings, showing the harmonious and disharmonious vibrations between the “stars”: the group participants. As we are talking about widespread malaise, I am aware that I too am affected by so-called *disagio diffuso*. Hence, I am not, nor do I consider myself, a specialist of other people’s malaise: “*disagio diffuso*” is also part of my life, and this is borne out by the fact that I have suffered from autoimmune diseases.

MAURIZIO BONSIGNORI: I’m told you are an interesting and fascinating person.

MARIANO LOIACONO: I’d like to thank Stefano Berti for inviting me to this interesting Regional Conference as well as all those who are working to spread the word regarding the SIPNEI (Italian Society of Psycho-Neuro-Endocrino-Immunology), which I would also like to see take root in my own region.

I am grateful to Professor Bottaccioli for being the first to believe in the SIPNEI. I hope his initiative will gradually lead to the modification of the traditional approach to health that is normally adopted in the healthcare field and that this new approach continues to be taught to young students of medicine.

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<sup>1</sup> The Italian term “*disagio diffuso*”, roughly translates as "widespread malaise" or "pervasive discomfort" and refers to an ever-increasing phenomenon affecting all sectors of today's society and all aspects of life, and which is now reaching epidemic proportions.

In the short time I have available I will only be presenting the "Home page" of the theme of "*Disagio diffuse*, the MaS Method and the PNEI approach" with a number of possible links.

The value and, at the same time, the limitation of what I will talk about lie in the fact that it refers to a theory-practice that I have been experimenting since 1977 at the Centre for Social Medicine for alcohol and drug addiction and "*disagio diffuso*" at the "Ospedali Riuniti" University Hospital in Foggia. This is the first Centre in Italy to theorize and take specific notice of the phenomenon of "*disagio diffuse*".

This theory-practice is very close to and in harmony with the SIPNEI, because it stems from the paradigm of life itself, theorized in an integrated and global manner.

Etymologically the word "paradigm" from the Greek "para-deiknumi" means to "show beyond". This "showing beyond" makes for a fuller and more meaningful change to a situation where a given phenomenon - in this case, health – stagnates in a closed context with no prospects, despite there being strong evidence of suffering and chronic malaise. Every paradigm, thus, generally leads to a "method" which derives from the Greek "meta-hodos", meaning a road that leads beyond: that is, the value of a method is to generate change-transformation-growth-fuller health. The global paradigm (global epistemology) that I use has, during the course of my experimentation, led to the "Metodo alla Salute" or MaS Method, which I use to treat the various phenomena of "*disagio diffuso*".

### **"Disagio Diffuso" and the limitations of traditional services**

Like the word "disease" in English, the Italian term "*disagio*" derives from the Latin "dis-adiacens" meaning "no longer lying close to, to move away from") and is the condition that indicates when a person has moved far away from his/her specific nature, from what only he/she is, that is, when we live outside of ourselves, outside of the conditionings and indications that come from the outside, of the obligations-duties of the environment to which we belong.

I have always used the word "*disagio*" (malaise) because the word "*malattia*" (disease) seems slightly mediaeval, slightly dualistic or schizophrenic. "*Malattia*" comes from the Latin "male habitus" which means "I am badly or imperfectly dressed". Considering the fact that each of us is a whole (the word "health" derives from the Old English "hælp" which in turn has its root in the Sanskrit root "kailos", meaning not fragmented, whole, which, interestingly, has the same root!), I thought it was better to use the word "*disagio*". Indeed, if I move away from my specific wholeness or I no longer "lie near" my specific PNEI (Psycho-Neuro-Endocrino-Immunology), I am unwell; if, on the other hand, I get closet to wholeness, I am healthy and as a consequence, I live fairly well.

I introduced and theorized the term "*disagio diffuso*" years ago to indicate a characteristic phenomenon of today's world that is rising to reach emergency proportions. Indeed, like the English "*diffuse*", the word "*diffuso*" derives from the Latin "dis-fundere" which means "to pour, expand". It indicates the phenomenon that is now spreading, growing and inundating the entire planet, gradually expanding across different age groups, social conditions and institutions, although it was first expressed as "youth malaise" between the mid-1950s and the middle of the 1980s. Those who wish to further investigate the history of youth malaise and *disagio diffuso* can see the respective chapters of my book entitled "Verso una nuova specie" which can be downloaded free of charge from [www.nuovaspecie.com](http://www.nuovaspecie.com).

In practice, "*disagio diffuso*" is expressed in different ways and through different phenomena

First of all there is an asymptomatic phase or a phase of so-called "symptomatic malaise" which is generically observed as dissatisfaction with the life that one is leading, making do with the current conditions without actually feeling the pleasure-desire to live, experiencing existence as a burden and in fearing health problems, disguising suffering by hyperactively looking for more vital stimuli and more meaningful situations, avoiding moments of solitude and time for crisis-reflection, avoiding

situations in which these experiences might be amplified or might emerge or come to the knowledge of others, etc.

I would like to emphasise the importance of “asymptomatic malaise”, because generally it is not included in the medical-psychiatric diagnostic categories, in that it does not manifest with evident-blattant “symptoms”; and yet it is a very important incubation phase of the other phenomenologies-stages that characterize “*disagio diffuso*”. The asymptomatic phase leads, in healthcare, to the plethora of chemical tests and instrumental investigations, to the search for the “symptom-disease”, which remains the foundation of the entire medical and healthcare system.

After an asymptomatic phase or “asymptomatic malaise” – which almost never detected and goes unobserved – there follows a whole series of symptoms: interpersonal and institutional conflict, bullying, addictions to psychoactive substances (alcohol, illegal drugs and psychotropic drugs), other addictions, panic attacks, eating disorders, phobias, obsessions, depression, autoimmune diseases, border-line syndromes, mood disorders, personality disorders, psychotic disorders, etc.. This is the phase of “symptomatic malaise” which everyone can take place in one or more stages, even over a short period of time.

In fact, the new aspect is that the same person can present one or more of these symptoms in a given sequence, indicating their “personal” process of *disagio*, which is not fully recognised by the traditional services (drug rehabilitation centres, mental health and psychiatric institutions, health centres, social services etc), in that these services are organized to deal with single symptoms and are not qualified to treat “*disagio diffuso*”. The depth of this malaise means that the traditional treatments organized by individual specialist services (drug rehabilitation centres, mental health and psychiatric institutions, health centres, social services etc.) are no longer sufficient and efficient. There thus arise serious resistances to psychopharmacological and traditional psychotherapy. Indeed, the usual solution found by these services in response to their inadequacy for meeting the required demands, is to send-offload people from one specialist service to another.

Today, these services are losing round, despite being at the height of expansion and scientific-technological sophistication. They very much need to undergo the experience of crisis and to rethink their current state, the theories and partial methodologies on which they are based.

It is through this very process of producing different “symptoms” within the same person, that “*disagio diffuso*” has increasingly highlighted the limitations of medical-psychiatric epistemology, requiring a global approach and interpretation, and demanding profound innovation in the organization of services and in the relationship between these and all levels of ordinary life.

By developing a “global epistemology”, I have tried to go beyond medical-psychiatric nosography, which stops at identifying the main symptom or symptoms of a “disease”. I believe that the scientific epistemology is partial be it during diagnosis, therapy, rehabilitation, prevention or training. In my opinion, it is an “I.De.A.”: I use the word “I.De.A.” as the acrostic of “Interpretazione Delirante Allucinatoria” (Hallucinatory Delirious Interpretation), meaning that it is a partial theory, far from being absolute, which can be falsified-improved-overturned by clinical experimentation that is more global.

Indeed, this “I.De.A.” is gradually producing chronic treatments for situations that remain increasingly chronic, despite the fact that psychopharmacological and psychotherapy treatment begins increasingly earlier (adolescents, children). Unfortunately, even for hyperactive and distracted children, diagnosed with ADHD (presumed genetic alteration based on positive answers to six out of ten questions), Ritalin is now available, an amphetamine presented as a new potent superdrug. The lack of psychoactive substances to give to children, given the ineffectiveness of those in use, has induced science to turn to the ruse of sleight of hand: it has removed an amphetamine from the category of illegal drugs and has declared it a psychotropic drug that is good for health. Thus, science is entitled to

decide, according to its own needs, when the same substance can be called an illegal drug and when it can be considered a good medicinal drug!

Not to mention the exorbitant cost of this traditional treatment, no longer compatible with the public resources available to this “I.De.A.” of health.

Unfortunately, this “I.De.A.” of medicine-psychiatry does not go into crisis because it lays the cause of its failure and chronicity on altered genetics, as though genetics were not an integral part of life. In this respect, I think the “SIPNEI” approach is very important, in that it gives equal pathogenic-therapeutic value to each level of PNEI (Psycho-Neuro-Endocrino-Immunology): “P” (Psycho) first of all with all of its deep characterizations, historical memories and connotations that it represents and contains.

Starting from this deep and global vision of life, I decided to investigate “*disagio diffuso*”, since, as I published in 1988 in the journal “Sociologia urbana e rurale” of the University of Bologna, I felt it was the expression of the anthropological mutation that has been taking place for more than fifty years now, and that it would become more frequent at all ages and would manifest via a psychotic trend.

This phenomenon, although not yet recognised through the global interpretation that I have given it, can be verified universally in its current manifestation and in the epidemiological forecasts that have been made for years in the field of psychiatry.

### **The Centre for Social Medicine and the “Metodo alla Salute”**

In keeping with these reflections-considerations, since 1977 I have been experimenting a new approach to various forms of “*disagio diffuso*” using the “*metodo alla salute*” or MaS Method, at the Centre for Social Medicine in Foggia, a public service, access to which is through national insurance number .

The MaS Method is “theory-practice” which begins from a “global” approach to life (and, as a consequence, to health problems) inspired by the “global epistemology” that I have theorized and developed. As a result, the MaS Method is not limited to dealing with the symptoms that individuals present, but rather aims to help people get closer to their true and specific nature, by gradually releasing them from the bonds that have hindered their life journey, and helping them to accept and even exploit the more negative aspects of life, and achieve greater fulfilment.

As a consequence, the MaS Method is open to everyone: to people of both sexes, any age group, social class, level of schooling, profession (including antisocial professions), ethnicity, ideology, historical phase, etc. It is not merely a medical/therapeutic approach for those with manifest symptoms, but rather is a means to help people get back on the journey of life (the word method derives from the Greek “meta-hodos” which means beyond the road) and is a way to regenerate one's life, starting from what I alone really am”. This return to the simpler and profounder aspects of life inevitably induces in us a state of awe, wonder and contemplation, when we realise that we are playing an active part in our own existence, and fully experiencing the journey towards our own discovery.

With its emphasis on the growth of the individual rather than the symptom, the MaS Method is a concrete alternative to psychotropic drugs and psychotherapy, going beyond the chemical anthropological vision, so dear to most of today's “scientific” responses to malaise. Indeed, it is possible – even for a schizophrenic – to gradually reduce and eliminate the use of psychotropic drugs and other legal (e.g. alcohol) and illegal psychoactive substances. External drugs are not used, not to go “against” these solutions, but rather because they are mere substitutes for the substances that our bodies already produce and can learn to produce again, once we regain a normal quality of life, and bring our lives closer to the dynamics and possibilities that life has to offer, by reformulating a harmonious and whole “PNEI”.

The MaS Method aims to go beyond the current organization of health and social services, characterized by specialist divisions and categorizations. For this reason, we consider the Centre for

Social Medicine to be an “anthropological laboratory” which for years has experimented a model that integrates healthcare, rehabilitation, prevention, social networking, training and research.

The method springs from the profound side of life and proposes dynamic interactions for healing and growth, hence it is open to all forms of asymptotic and symptomatic malaise (interpersonal and institutional conflict, bullying, addictions to psychoactive substances - alcohol, illegal drugs and psychotropic drugs - other addictions, panic attacks, eating disorders, phobias, obsessions, depression, autoimmune diseases, border-line syndromes, mood disorders, personality disorders, psychotic disorders, etc.).

Its function is preventive and rehabilitative; hence it actively encourages the participation of healthcare workers organized into "working groups", family members of all ages, children and teenagers, social volunteers and anyone wishing to grow towards wholeness, without waiting for the appearance of symptoms or urgent personal suffering.

For several years now, numerous students and undergraduates from several Italian universities have chosen to do theory-practice internships and research their degree dissertations at the Centre for Social Medicine, gaining direct experience of the various aspects of the method.

### **“Gruppi alla Salute”: “metahistorical dynamics”, the setting**

“Gruppi alla Salute” GaS Meetings are based on the MaS Method , which some have described as a non-discovery, in that, right from the start, almost everyone feels that the dynamic interactions are normal and wonder why no one had thought of them before.

GaS Meetings are a place-opportunity to regain a fragmented and split individuality. They are based on the conviction that everyone - including those with obvious psychiatric symptoms – is called on to deal with their own problems, heal and grow in their own specific natures. For this reason, anyone who genuinely wants to take care of themselves and grow can take part in a GaS meeting. This applies to operators-therapists and patients, because here, it is not the social role that counts, but rather the individual on the other side of the mask. One feature of GaS Meetings is that anyone taking part, including the group leader, is considered a “person undergoing treatment”. This enables strong mutual recognition between individuals that are on the same journey towards “sarva” or wholeness. This Sanskrit word is the root of the Latin “salus” (producing, salutary and salvation in English) which means “whole, undivided, not fragmented”.

Hence, GaS Meetings act as a kind of “devoted womb” in which, by undergoing a period of intensive treatment for a few months, everyone has the chance to face their own negative parts, and the parts that are lacking, their fragmented parts and those of others, to heal their knots, to grow towards “wholeness-salus-sarva” and find the deeper sense of their life and adulthood. For this reason, GaS meetings becomes a practice grounds in which fragmentation and malaise can be confronted by individuals with different specific natures, in order to become whole again. In this practice ground the idea is to try and give value to all individuals and stimulate them to develop suitable skills for living in a complex and globalized society, defining and experimenting a theory and practice-based approach to different forms of malaise. GaS meetings are the place where we learn and to modify our behaviour and attitudes, acquiring new instruments for relating to others and a more global point of view on life.

In practice, the GaS meeting is the place-occasion-practice ground where it is possible to experience “metahistorical dynamics” between all “persons undergoing treatment”, including the group leader, overcoming the sectorization and division between types of malaise and social roles.

“Metahistorical dynamics” are life dynamics that help the individual: to “go beyond” (“meta”) their “history”; to understand and heal the vital knots at the root of their malaise-estrangement; to recover lost or severed parts of themselves and experience aspects of their lives that they have so far been unable to experience sufficiently; to get back on the road towards vital growth. This is why the GaS meeting an opportunity represents for participants to develop the skills of listening, exchange,

immersion in their own background and narrating themselves, “common ground” theory, understanding experiences and communicating them in writing.

“Metahistorical dynamics” are not automatic and can even occur outside of a GaS meeting. As with any incubation or process of growth, the following conditions are required for them to occur:

- Going “beyond” the “history” (time-space) that we usually live and entering-immersing ourselves in metahistorical dynamics during GaS meetings;
- Encouraging gradual participation and entering the deeper layers, preventing interruptions and drop-outs.
- Achieving-creating-setting off a series of dynamics regarding all aspects of life involving everyone and the three codes of life: the rational-symbolic-verbal code, the analogical code and the bioorganic code. In this respect, GaS meetings are different from group psychotherapy in that narration and interpretation are not the be all and end all of the dynamic but rather are factors to be integrated with the physical and emotional spheres, which, during a session, are dominant, vortical and chaotic, especially as we go deeper into the knots-blocks that stem from our history.
- Dynamics must, if possible, be creative and not foreseeable-plannable, interconnected, circular, and exchange unexpected parts.
- The dynamic interactions must encourage participants to go deep within themselves, to relive the historical knots-blocks that have caused them to sever parts of themselves and that have halted their growth, so that they can evolve-heal-regenerate.
- The strong experiences that unleash from these dynamics must be integrated with softer dynamics and, above all, theory. “Global theory” facilitates re-emergence from the metahistorical dynamic to return to the surface and introduce to one’s life new entities-parts-points of view-experiences-skills that will then be part of the new condition of “wholeness-salus-sarva”.

The need for deep healing, and recovery of a multiplicity of entities-parts-points of view-experiences-skills, the “metahistorical dynamics” should be experienced-attended for a suitable period of time in continuous and intensive treatment. Indeed the “metodo alla salute” or MaS Method encourages the growth of individuals, rather than merely dealing with symptoms; indeed, it is a journey “towards” health. “Metodo alla salute” literally means “Method towards health”, with “alla”, meaning “to” or “towards”. So it is a journey that may continue forever, since health, the recomposition of fragmented parts, and growth towards wholeness, are all aspects of an infinite process that coincides with life itself.

There is no real setting for “gruppo alla salute” meetings. GaS meetings are very simple and involve a sequence of four phases and forms of interaction between all participants in a circle. Each participant, including the group leader, is a person undergoing treatment, and, at the same time, the therapist and travel companion along the journey to growth of other participants. This double role is given, right from the start, even to so-called schizophrenics or people with other types of chronic malaise.

The group leader is the group participant, who, regardless of their level or type of education, has already undergone a process of metahistorical dynamics and training, and, whose presence is geared to facilitating-maintaining the right conditions for creating “metahistorical dynamics” among all participants, if possible. There is no precise technique to refer to for group leaders, other than being present and creating the most appropriate metahistorical dynamics by observing the situation and participants present at that particular meeting. The greater the group leaders’ ability to focus on the globality of the dynamic interaction that is underway (“glob-ception”), the more useful their leadership is for participants – and themselves – to experience interactions that are creative, interconnected, circular, and which exchange unknown parts that are not foreseeable-plannable. As a consequence,

participants and group leaders alike can bring to their own lives new entities-parts-points of view-experiences-skills, which then become part of the new condition of “wholeness-salus-sarva”. Naturally, the journey of each participant is very personal and different; during the GaS meetings everyone understands-modifies different parts-aspects of themselves, depending on their own history, their level of participation and the quality and quantity of metahistorical dynamics that have taken place in that meeting.

Each meeting lasts approximately four and a half hours and is structured as a “journey”. There are four phases. The first phase entitled “ancestor thoughts” brings us into contact with all our ancestors along the journey of life, over four and a half billion years. The phase of “communications”, in which participants present themselves to the group and assess the commitments they have made to change various aspects of their lifestyle. The “immersion” phase is where people can narrate profound aspects of their life, good or bad, past or present. Next comes the “common ground theory” phase in which everyone can give their own theory (and not only group leaders or those with specific training) to provide a common link between the various stories; the group leader provides a “global theory” of how life works, from a profound, integrated and dynamic perspective. The presence of psychotic people or other chaotic situations clearly has a deep influence on the dynamics and the planned phases. The “gruppo alla salute” adapts to the people present and the dynamics that emerge there and then.

Part of the “treatment” involved in the MaS Method is also meetings for the supervision of personal situations, couples and families showing greater resistance and difficulty to change. All “persons undergoing treatment” can take part in these meetings, as each can contribute his or her own level of theory.

### **Training**

The MaS Method also involves training activities and “global” research, within the new “global” epistemological vision on which it is based.

Courses in “global epistemology and group dynamics” (two separate intensive weeks with a two-week gap) are held regularly, open to everyone – including people undergoing treatment – because health belongs to everyone, not only those who are well or those who have an official role to promote health. The courses are thus open to those who have taken part in the GaS meetings (family members, operators, students, etc.), who intend to develop the ability to “globally” interpret and manage individual dynamics, strong relationships, relationships with groups, within the vision-interpretation of life. Participation in these courses provides participants with the opportunity to acquire the skills to become first-grade “travel companions” of GaS meetings.

The training of group leaders, which begins with personal participation in GaS meetings and initiation on the journey towards regeneration of their specific natures, and continues with weekly supervision meetings held at the Centre for Social Medicine, where the group leadership experience of each “travel companion” is discussed.

Monthly “global training” sessions are held on important topics of common interest (sexuality, psychoses, relationships, etc.), where, using the “dareforma” method (literally “giving shape”), each participant acquires the theoretical and practical skills to pass on their personal experience and ideas.

In order to train persons interested in the MaS Method and “global epistemology”, short training courses are held on a regularly basis. These are entitled: the “Cummunitometer”, the “Iceberg”, the “Partiality Trunk”, the “Sarvas Pyramid”, the Quadrangle, the “Graallasalute” (literally Grail to health), Crossingover, “Home Life”, Crisis Unit, the Walnut, etc... There are also didactic-training meetings entitled “*Avanti tutta*” (“full steam ahead”) and “*Indietro Tutta*” (full steam backwards): two interesting “journeys” through the stages of addiction and the return to global health.

### **Spread of the method**

In almost all regions of Italy there are people who have experienced the GaS meetings and who volunteer as group leaders.

Since February 2006, a GaS Group has been operating at the Day Centre in Ancona, thanks to the generous commitment of Dr Roberto Boldrini, the centre's director. The reason for integrating the method into a rehabilitation centre was mainly to provide a serious response to a problem that has never been solved in the field of rehabilitation: the question of allowing guests to undergo a journey of deep personal growth in close contact with people with strictly psychiatric problems. Rehabilitation within a rehabilitation centre is thought to be a closed phenomenon, in that it does not immediately activate the process of integration with other people that have been "psychiatrized".

Drug Rehabilitation Services and Mental Health Centres have also shown an interest in introducing the method as a further response to the therapeutic process.

In addition to the method's effectiveness, what is particularly interesting are the low cost management and the possibility of intervening synergically on various forms of malaise within a single family unit taking part in the same treatment.

In the future, it would be good to establish forms of collaboration-exchange with the SIPNEI. We are able to provide an experimental laboratory in which to verify - by developing the "P" (Psycho) component of the person undergoing treatment (relationship with oneself, strong relationships, relationship with groups, relationship with a Global Maximum) – how the indexes of other life codes improve, including the "bioorganic code". As a result, the various phenomenology of malaise already mentioned above also improve, including autoimmune phenomena.

### **The Global Community**

The success of the MaS Method has led to a spontaneous drive to create a network of relations and global exchanges ("global community"), regardless of background and social group (sex, age, social class, schooling, profession, ethnic group, ideology, historical phase, etc). The MaS Method aims to build and spread a "global community" network across the territory, beginning with those who have undergone a process of regeneration thanks to the MaS Method. The purpose of this global community is to publicize the method within the local contexts of group participants by creating "dedicated" contexts within a "working group" that is synergetic with other parts of the network. A GaS meeting can be held in any ordinary context: an office, a church, at school, at an association, at home, in the street, etc.

Related to the MaS Method are the "itinerant meetings, with regular trips to various parts of Italy involving people undergoing treatment, family members and anyone familiar with the MaS Method. During "itinerant meetings", conventions and training sessions are held, as well as "MaS Birthday" celebrations for people whose lifestyle has changed considerably over the previous. As well as being an opportunity for growth and exchange, the "itinerant meetings" represent an important experience for persons undergoing treatment, and enables us to spread the work about the MaS Method and the Global Community in various areas of Italy.

We also hold what are called "Travelling Sundays", which are day excursions held to celebrate and give value to all aspects of life, including, the historical, cultural, philosophical and religious.

For years there have been active collaborations with several regions in Italy, with universities, public bodies, religious groups and individuals and groups from all over the country. Over the last few years the Global Community has opened a number of "domus", or homes located within cities, where MaS Method practices are adopted, in order to develop and safeguard lives and spread the MaS Method across the territory.

**"Collana dell'Arca", Limax, the documentation centre, blog, website**

We also have a rich collection of editorial works ("Collana dell'Arca") including interesting and varied research contributions regarding the "*nuova specie*" (new species), and "historical memory" (particularly rural), Bantu culture, the issues of stress, globalization, and research into a new "global code".

The quarterly magazine "Limax" has been published for thirteen years by the Nuova Specie Association and LAM Studium. Limax gets its name from the "*limax agrestis*", or the common snail, which the "Metodo Alla Salute" uses as its symbol. This is a very special magazine: it deals with "*disagio diffuso*" and the new methods for regeneration of "health-wholeness". Anyone on the "journey towards health and wholeness" can contribute to it, with no exceptions, special privileges, censure, differences in role and power (including schizophrenics). Many people have written about their own personal and emotional experiences ("e-motional" from "ex moveo" means an experience that "moves from or begins with the self, from my life, it moves from only what I am") and have had the satisfaction of seeing their contributions in print and appreciated by the other readers. It is timeless, because the contributions and articles are based on genuine emotional experiences; over time it becomes a living memory, offering new stimuli and taking you to new depths of inner knowledge.

It refuses financial sponsorship from the pharmaceutical industry or any other company and receives no funding from public or private organisations. Limax will be published for as long as there are people willing to subscribe to it and sponsor it through support activities.

The Documentation Centre has been running for several years. The centre currently deals with transcribing audiovisual material from: GaS meetings, intensive weeks, epistemology courses, training courses for travel companions, theme days, interpretation of fairy tales and passages from the bible, in the light of the global epistemology, supervisions and evaluations of people in treatment and of the method itself.

It also sorts and distributes transcribed material, stores the Association's quarterly journal, Limax, and other works published by "Nuova Specie". The Documentation Centre also proposes meetings for theorization on particular themes.

Further information and news regarding the MaS Method and the planned activities can be found on the blog <http://www.metodoallasalute.blogspot.com/> and website <http://www.nuovaspecie.com/>.

The download section of the site contains a video interview by Gigi Marzullo aired on "Sottovoce" RAIUNO, an interview by Professor Delle Noci on Telefoggia and an interview aired on Teledauna. It is also possible to listen to recent radio interviews.

The website now provides free download and consultation of the book "Verso una nuova specie" (*Towards a New Species*), adopted for six years by the faculty of sociology of the University of Urbino. A key work providing better understanding of the *nuova specie* project on which the MaS Method is based.

### **The "Nuova Specie" Project**

As mentioned in the book "Verso una Nuova Specie", *disagio diffuso* is the result of a profound "anthropological mutation" which is currently underway in today's world.

This "anthropological mutation" has become more evident with the spread of science, technology and the processes of "economic globalization", which, especially after the second world war, have "disrupted" the previous world order consisting of small separate "villages", each with its own set of stable and internal rules. This is the transition from the "World Village" to the "Village World", whose borders are unclear and whose streets are constantly invaded by many different and opposing phenomena.

The "anthropological transformation" that is currently in progress has cancelled the cultural, institutional and social references to which man has become used, making us weak and fragmented. As a consequence, today, individuals have been deprived of a vision and organization of life that can

provide us health, wholeness and harmony. The traditional cultural models that we have been used to are no longer sufficient to deal with today's social and personal malaise. *Disagio diffuso* is a structural malaise that deeply affects the very way that man has so far interpreted, organized and lived all aspects of life. A new point of view is required (a new "code"), to lead the individual back to a state of health and wholeness and return to his or her own specific nature and develop unknown evolutionary skills.

I have theorized this new point of view in the book "L'uomo a quattro dimensioni" (*Four-dimensional Man*, Nuova Specie, 1988) which is used as a reference manual in the courses on "Quadrimensionalism" which I hold on a regular basis, open to all ages, level of schooling, social class and symptomatology.

Quadrimensionalism is a new code that can enable us to evolve towards a more whole and more global new species, driven by the forceful thrust of "*disagio diffuso*".