

# Perception disorders and relationship to the invisible world

---

DR. JACQUES MABIT<sup>1</sup>,  
July 2024

## Introduction

The term "perception disorders" is commonly understood to mean any alteration of the natural senses of human beings that allow them to grasp reality. This disorder would generate a distortion of the perception of reality likely to lead to an erroneous interpretation of the environment. This diagnosis is made on the basis of manifestations considered pathological such as hallucinations, which consist of the perception of an object that would not exist, or unusual psychic phenomena such as telepathy, clairvoyance, guessing the thoughts of others or hearing voices. In the absence of a material basis for these perceptions, the resulting interpretation is considered imaginary, illusory or even delusional.

However, this general definition is based on presuppositions that would need to be revised. In this article, we propose to address this theme and review it on the basis of our clinical and therapeutic experience of more than three decades. On a complex and rich subject, in order not to weigh down and lengthen the text, we will go to the essentials of what may interest anyone wondering whether they themselves (or a loved one) are subject to unnatural perception disorders, coming from an invisible world. This introduces the question of the existence of invisible realities and possible evil presences inhabiting these spaces, and invites us to redefine or renew the old religious terminologies relegated to a supposedly bygone past (fallen angels, demons, impure spirits, possession, vexation, etc.).

In this spirit of synthesis and simplicity, we have avoided notes, quotes and bibliographical references, as well as medical, scientific and theological developments. We will cite in passing, but without detailing them, the origin of these manifestations<sup>2</sup>.

We intend to provide here some key, pragmatic elements to recognize the origin of these disorders, diagnose them, and choose the appropriate professionals and approach their treatment.

## The natural senses

First of all, it is necessary to consider that the natural senses are not limited to the five classic senses (sight, hearing, smell, taste, touch) but include associated proprioceptive functions that allow the inner feeling of the human being (balance, body position, body schema). Part of this proprioception is conscious, the other, passing through the cerebellum, is unconscious. It is therefore possible that proprioception disorders induce a person to perceive their modified body schema without their five external senses being affected.

Each perceptive function is part of a delimited spectrum that allows it to grasp only part of physical reality. In humans, the visual spectrum goes from red to violet and, without an instrument allowing it to broaden this spectrum, it does not perceive infrared or ultraviolet radiation. Similarly, at the

---

<sup>1</sup> Medical doctor, founder and executive president of the Takiwasi Center, Peru, [www.takiwasi.com](http://www.takiwasi.com)

<sup>2</sup> To explore the subject further, some references are provided at the end of the article.

auditory level, humans do not perceive infrasound and ultrasound. This spectrum is also specific to each individual, with some people having a more developed sense than others. The five senses therefore draw a map of environmental reality that captures only a portion of this reality, the rest remaining invisible and nevertheless existing. And no individual perceives reality in exactly the same way as another, which does not exclude the existence of a common objective reality.

The statistical processes dear to scientific studies establish a Gaussian curve that gathers the majority of individuals in an average space that determines the norm, therefore normality. Individuals located at the extreme margins are therefore statistically “abnormal”.

“Unusual” psychic functions are in reality potential in all individuals, even if the associated phenomena are qualified as paranormal. Telepathy, clairaudience, clairvoyance, etc., belong to the human species in its entirety, even if they are sometimes very atrophied in some individuals and very developed in others. They are part of the true gift in particularly gifted individuals as can be the case in a similar way for the “genius” of music, mathematics or languages. Mediumship can constitute in this context a natural function, but we will also see that it can be artificial and toxic and therefore require a differential diagnosis.

## **The real**

The classical definition of the real (or reality) refers to an observable if not measurable material reality. It is therefore part of the rationalist, positivist and Cartesian materialist thought. This tends a priori to exclude from the real any perception that would not be supported by a material object observable by a third party. This reductive way of thinking leads to attaching any manifestation to a material substrate and therefore assumes objectivity as the absolute reference of the real. In the absence of identification of a physical object serving as its support, perception is qualified as imaginary. As a result, thoughts, which are invisible, would result from pharmaco-chemical processes of the brain and would only be the subjective perceptible face of mechanisms internal to the neurological system. The same reasoning applies to feelings. Consequently, this primary way of thinking removes all subjectivity and cancels the existence of a free "I", contrary to common sense. Although each individual is convinced of the reality of his thoughts and feelings, and therefore of the existence of an autonomous self, the current positivist scientism dictates exactly the opposite. The subject disappears and the individual becomes just another object, even if it is an animated object to which a higher-than-average degree of sophistication is granted. Human being would be nothing more than a complex mechanism with no free will and totally conditioned and programmable.

These processes of tautological reduction form self-contradictory and closed systems. If everything is an illusion, this assertion is also an illusion and therefore nothing is an illusion. If everything is a lie, this assertion is also a lie and therefore everything is true, etc. Therefore, if the mechanistic explanation were absolutely true, materialistic thought would also be only the product of fine cerebral mechanisms of their authors and therefore in no way could claim to account for all of reality. It is therefore an article of faith, a scientific dogma, a para-religious posture.

A thought or an emotion are so real that they can generate observable physical alterations, as psychosomatics has demonstrated since the 1950s. Chronic anxiety can go so far as to cause a hole

in the stomach and a fear of death can cause, for example, an asthma attack. There are therefore invisible but nevertheless operative psychic or emotional “objects”.

These psychic or emotional objects can be the support of perceptions by the five natural senses which will translate them according to their mode of operation and from the personal and collective symbolic material stored in an individual. Thus, in a dream, a fear can take on the appearance of an aggressive animal or a monster. When the boundaries between waking consciousness and the state of daytime consciousness are erased, the monster in question can be visualized in the waking state. It obviously does not exist materially, but its psychic existence is real and therefore it does not belong to the register of hallucinations, it carries meaning and therefore a certain congruence with reality. This monster seized in the dream is just as real in the waking state when a person broadens their perceptual spectrum by means of psychotropic substances, is intoxicated by alcohol or is in a state of personal crisis which brings to the surface what was previously lodged in the subconscious.

### **The symbolic function**

The seizure of psychic and emotional material, due to its non-materiality, operates through the filter of the natural senses which imprints a certain deformation according to their structures, their limits and modes of operation, and according to the symbolic baggage of the person. In human beings, it is therefore necessary to consider this symbolic function which also constitutes a natural function. As for the senses, they must be educated in order to be fully exercised.

The symbolic function proceeds by analogy and allows to grasp through a material object the invisible reality that it designates by similarity. Thus the heart (material object) refers to love (invisible object), as claws refer to aggressiveness, the sun to the masculine and the moon to the feminine, etc. There are universal, cultural and individual symbols. Snow does not carry the same symbolism among the Eskimos as among the Tuaregs, nor the breast in the newborn as in the adolescent (in principle!).

However, beyond cultural and personal colorings, there are universal symbolic invariants. For example, the spiritual dimension "elevates", directs upwards, gives wings, inspires, just as light "illuminates" intelligence, makes the world more understandable, brings hidden things to light... No tradition or civilization associates spirituality with the underworld (or it is an inverted spirituality, precisely), nor knowledge or understanding with darkness. This constant in interpretation supposes a common inspiration-source which would necessarily come from beyond human beings, located in a transcendent and invisible universe. The various traditions recognize the manifestation of inspiring beings or mediators between the visible world and invisible spaces or the divinity(ies), united under the generic term of spirits. Their informative function will lead the Christian tradition to qualify these mediators as "messengers" or angels in Greek (*angelos*). In this sense the symbolic function would be endowed with a dimension that is both natural and supernatural.

This invariability of the essential symbolic forms that constitute the universe and constitute us in our bodies, therefore raises the question of the existence of a reality that usually escapes our natural senses, intangible and autonomous in relation to the human being. In other words, it points towards the possibility of the ontological existence (existence in itself) of non-human forces and beings.

## **The creation**

In other words, this question refers to the existence of a created world, independently of human will and of which we are then a creature. This is commonly posed in terms of Truth. Truth, the Real (with a capital letter), are then ontologically independent of human subjectivity. We can then seek this Truth and it becomes incongruous to speak of "one's" own truth. Of course, everyone leads their own path towards this Truth, but does not create it.

This approach sets aside both naturalism and relativism.

To the invisible inner world is then added an "invisible external world". The human being is no longer closed in on himself but finds himself connected to dimensions of reality located outside of him. Creation contains an immense invisible space where other incorporated creatures also exist, therefore invisible, but endowed with intelligence and free will.

The clinic of altered states of consciousness managed in a controlled manner in a ritual context, confirms what all traditions and civilizations have recognized from time immemorial. These created spiritual beings, with intelligence superior to that of human beings, possess immediate spiritual knowledge and, given their free will, recognize and serve the Creator or refuse to do so. Their choice is irrevocable, definitive, and places them in a metaphysical duality, either as evil spirits or as spirits of light. In other words, either angels or demons.

These spirits can influence human beings, often without their knowledge, for good or for bad. They can intervene on psychic functions and also on the physical body. The manifestations of these spirits are multiple and a work of discernment is necessary to distinguish them, the demons being liars par excellence and easily passing themselves off as beings of light, good angels, or adopting various deceptive disguises like that of aliens, always of a demonic nature.

In this invisible outer space, there are also beings of nature, created to manage the protection and maintenance of creation. These beings have also been identified in all traditions as associated with elements of nature (earth, water, air, fire). From fairies to gnomes, elves and even mermaids. These beings do not have a physical body but an etheric (electromagnetic) body and are therefore not really spirits with which they are often confused. They are born, they die, they reproduce, they have a sex, all traits that distinguish them from spirits. They do not have a moral conscience, so they are neither good nor bad but can negatively affect a human being who violates or invades their territory, like a dog defends its own. Because of their nature, they mainly affect the etheric body of human beings.

Finally, this invisible spiritual world also includes the spirits of the deceased. After death, the transition from earthly existence to the spiritual world is not immediate, sometimes incomplete. The permanence of the spirit of the deceased in the form of ghosts and wandering souls can affect the living. This permanence (of the deceased) is often associated with violent or sudden deaths.

## **Diagnosis and discernment**

A perception disorder requires a diagnosis in order to first establish whether it is linked to physical causes. Any lesion of the body, and in particular of the nervous system, is likely to produce disturbances of perceptions. A brain tumor, heavy metal poisoning, excessive exposure to electromagnetic waves or ionizing rays, side effects of medication (in particular in psychiatry), among others, must be ruled out. Certain symptoms such as tinnitus or epilepsy can result from both physical and spiritual causes.

On the psychological level, hysteria must be ruled out from the start. For a trained therapist, this is generally not very difficult. The hysteric can mimic disorders of spiritual origin with excellence, but it is a manifestation of psycho-affective problems.

When disorders persist and medical examinations are negative or conventional treatment ineffective, one is entitled to strongly suspect a psycho-affective or spiritual origin. Psychiatric nosography, based essentially on non-scientific consensus, has a whole range of labels that offer the means to characterize any perceptive disorder, it is therefore not conclusive in itself. It ignores spiritual and energetic questions and therefore does not seek them out or recognize them. Contamination by an evil spirit, which I call an infestation, is not part of conventional clinics. In addition, a psycho-affective disorder constitutes a prime breeding ground for an infestation, and vice versa, an infestation can result in psycho-affective alterations. The most common labels are bipolar disorder (formerly manic-depressive), post-traumatic stress disorder, borderline personality disorder, attention deficit hyperactivity disorder (ADHD), obsessive-compulsive disorder (OCD), Tourette's syndrome, delusions, endogenous depression, hypersensitivity, dissociative disorders, depersonalization-derealization disorders, psychosis, schizophrenia, chronic delirium, mood disorders, etc.

The multiplicity of psychiatric diagnoses varying according to doctors, the persistence of symptoms or their reappearance as soon as the restraining medications are lifted, the presence of repeated nightmares and sleep disorders, themes of a spiritual nature (blasphemies, inability to approach sacred places or things, to wear a holy medal, in particular that of St. Benedict or the Miraculous Virgin, etc.), impulses to commit acts contrary to the patient's morality, unusual and persistent bad luck, the sensation of nocturnal presences, paranormal manifestations, hearing voices (especially negative ones), are all symptoms in favor of a diagnosis of infestation. None is conclusive on its own, their addition increases the probability of interference of supernatural origin.

Very often, patients themselves have perceived the existence of an infestation but often reserve the right to speak about it for fear of being considered crazy. Their own perception, the idea they have of the origin of their disorders, without being decisive, is of great importance. Frequently, the patient perceives "something" negative that comes from the outside and disturbs him, but he does not know its origin. Based on the contemporary cultural context, which leads to seeking an invisible but operative cause for his disorders, he is spontaneously led to consider two possibilities, microbes or waves, of which he knows the certain existence, their invisibility to the human eye, and at the same time a toxic potential. The "obsessions" will therefore often crystallize around practices of protection against these possible pathogenic sources. Their ritual character signals the intuition of a supernatural dimension to their suffering, and the long-term ineffectiveness of the procedures demonstrates their veracity.

We will focus with particular interest on so-called dissociative disorders. The patient is supposed to be internally divided between two (or more) personalities, with therefore a "schism" (cut) of his self (schizophrenia). However, in the case of an infestation, there are indeed two beings present (or more), the subject's self and parasitic entities (evil spirits). In OCD (Obsessive-Compulsive Disorders), infestation is also very frequent, the parasitic entity harassing the subject by making him feel guilty. Tourette's syndrome is almost always the result of an infestation. During "auditory hallucinations", there may really be "someone" who speaks, in this case a parasitic spirit: this differential diagnosis is very important since this symptom alone is often enough to label a patient as psychotic, with the imposition of heavy and toxic chronic treatment, sometimes for life.

The infestation always has a bodily anchorage and, at the place of insertion, the patient may feel itching, persistent skin disorders, painful shootings, chronic pain without a convincing cause. The most frequent anchorages are the head and neck, the back from the nape of the neck to the coccyx, and the genital area. A shooting pain on the shoulder blade almost always indicates a parasitic spirit associated with a spell.

### **Diagnostic methods**

Traditional medicines have practical methods that allow the infestation to be objectified, similar to a medical imaging examination. It is essentially a question of imprinting the disturbances of the patient's body on a third organic body. The most used are the guinea pig, the hen, the hen's egg where the subject's energetic disturbances are imprinted, by means of repeated passes over the entire body. In the case of the guinea pig, a very common practice in the Peruvian Andes, the alterations of the animal's organs are similar to those, energetic, of the patient on the same organ, with radiographic precision. There are also inorganic substances capable of absorbing the etheric and energetic disturbances of the patient's body such as newspaper, alum stone or certain plant substances such as chonta (palm wood). However, these objectifications require a trained practitioner who is then able to read this evidence in the manner of a specialized radiologist. These practices are both diagnostic and therapeutic and therefore require a ritual framework.

The geographical distance, the cultural context, the necessary expertise of the practitioner therefore make these methods not very accessible to a Westerner.

In a Western context, the only possible objectification is through the practice of exorcism by a priest officially designated for this purpose. Reactions to exorcism prayers (having previously ruled out hysteria) represent an essential clue. There are no false positives in this case, but false negatives are possible, that is to say that the absence of an immediate reaction to exorcist practices does not rule out infestation while its appearance proves its existence. The limit to this practice is the difficulty in finding trained exorcist priests. Unfortunately, many priests, even exorcists, are not trained, do not dare to practice seriously, or, in contradiction with the Creed of the Church, do not believe in the existence of demonic entities. Many people first submit to the criterion of "science" or are satisfied with a few prayers of liberation or sprinkling a little holy water, without performing the ritual of exorcism, and, in the absence of significant reactions, conclude that there is no infestation.



The classic signs of infestation recognized by the exorcist practice of religious people must be spectacular:

- Speaking in unknown languages
- Demonstrating extraordinary strength
- Disgust and violent repulsion towards sacred places and objects
- Facial deformations accompanied by screams, blasphemies, obscenity, agitation, eye revulsion, etc.
- Extraordinary phenomena of levitation, bodily distortions, revelation of thoughts or past transgressions of others

These signs are indeed clear evidence of a major demonic infestation, that is to say possession. But the latter remains relatively rare and the vast majority of infestations are of a lesser degree and are not illustrated in such a patent manner. They are no less operative, although many priests stick to these extraordinary symptoms and, in their absence, fail to diagnose them. Infestations of a lower rank than possession are both much more frequent and much less easy to highlight.

The other diagnostic methods do not allow the infestation to be formally objectified but gather clues, a sufficient bundle of which points towards the infestation. The approach then resembles a kind of police investigation where the signs of infestation described above are sought.

In cases of recent infestation due to occult or magical practices performed by the person or resulting from attacks by a malicious third party, there is generally a sudden appearance of previously non-existent problems. This sudden and unexplained emergence constitutes a very convincing diagnostic element. In the course of an "ordinary" life, the sudden and concomitant appearance of sleep disorders, nightmares, unusual bad luck, feelings of physical and/or psychological discomfort, unusual negative ideas, practically indicates an infestation. The proximity in time of such manifestations with a form of "energetic" or "spiritual" practice, for example following care with a therapist, consultation with a clairvoyant or medium, playful participation in spiritualism or magic games, an unusual sexual relationship, should raise alarm bells. In this sense, it is recommended to carry out an anamnesis to try to date the beginning of the disorders and make the connection with concomitant events of a possibly suspicious nature.

Smell represents the natural sense closest to the spiritual world, the most immaterial. Its perceptual subtlety allows it to detect whether "it smells good" or not as popular language designates it (this person "I can't smell them", this situation, "I don't smell them"). The olfactory system, the flair, spontaneously connects to intuition. Infestations are often associated with the capture of repulsive, fetid, disgusting odors (excrement, rot, wet feline skin, macerated fish, etc.). If these do not have a natural cause (identifiable external source or diagnosed medical problem) and are not perceived by those around them but only by the subject, this element constitutes a probable sign of infestation.

Three other symptoms represent almost a convincing sign of infestation:

- The appearance of unusual skin signs, without identified cause, sometimes appearing and disappearing for no reason, especially if the spontaneous dermographism draws esoteric figures (cabalistic signs, inverted crosses, demonic figures) or signs of unexplained scratching or biting.

- The wearing of blessed medals of St Benedict or the Miraculous Virgin of Rue du Bac, when it is not supported (skin irritations, feeling of asphyxiation or discomfort), or when they break or oxidize quickly, or are lost. This joins the signs of rejection of the sacred.
- When the psychic defenses collapse with a significant ingestion of alcohol, cannabis (or both associated), or other psychoactive substances, loss of consciousness, while remaining active, and with amnesia. The intoxicated person loses control of himself and performs inappropriate behaviors (obscenity, violence, suicidal impulses, blasphemy, etc.) that he is unaware of in a normal state of consciousness. There is amnesia of these behaviors revealed a posteriori by those around him and of which the subject is greatly ashamed. If this amnesia is absent, it may be a simple disinhibition of buried psychic impulses.

On the same subject, it should be noted that the wild use of drugs in the broad sense opens the door to possible infestations. This concerns not only recreational drugs, but also psychoactive plant substances, visionary or not, such as ayahuasca, mescaline cactus or psilocybin mushroom, for example. Any opening to the invisible world absolutely requires a ritual device of protection and containment that requires expertise and cannot be improvised. In their absence or the establishment of an inadequate ritual framework, infestation is possible. Frequent and playful use of mushrooms can go without problems until the day an infestation occurs and can cause the person not only to experience a temporary "bad trip", but to suffer chronic malignant parasitism with its psychological and spiritual consequences, from simple insomnia to the most serious delirium. In view of these potential dangers, the greatest reserve and caution are required, both in participation in any "shamanic" ritual or in the offers of multiple "energy" treatments on the spiritual market, or the "medical" market as we observe with the explosion of psychedelic medicine practices, now officialized, that have become very fashionable (and economically profitable) where therapists are generally "accompanists" not trained in direct intervention in the spiritual world. These self-proclaimed "facilitators" tend to avoid the confrontation with themselves that self-experimentation supposes, because nothing is really "easy" in this area...

Delusions associated with cannabis use, especially if alcohol is also taken, can be considered almost automatically as infestations. Sudden cannabis psychosis, to be distinguished from a chronic delusional background, is a sure sign of an infestation. There is a need to detoxify from the cannabis impregnation (purgation) and then proceed to a spiritual liberation of the infestation. The psychiatric intervention of restraint at the time of the delusional episode, often necessary at the beginning, must give way to a process of physical and spiritual cleansing. Failing this, these patients, often young, begin a psychiatric "career", under permanent medication, internments and frequent repetition of delusional episodes as soon as they reduce their medication and possibly start using cannabis again. Cases of this type are growing exponentially due to the consumption of hybrid cannabis with a high THC content (from 2% to 30%) and the increase in occult, spiritualist or magical practices suggested by social networks and associated with the general desacralization of society.

If spells and enchantments have been considerably reduced in the Christian Western world, without however ever completely disappearing, the arrival of immigrants from ancestral cultures with frequent practices of witchcraft has caused an enormous increase in recent decades in the cases of



people bewitched or under influence. Westerners believe themselves to be protected from this because they do not believe in it, which in reality makes them more easily victims of a danger they are unaware of. Ignorance does not protect at all.

A common practice is that of enchantments (formerly love potions) which allow another person to be put under "amorous" influence. The latter feels irresistibly attracted to the sponsor of the "charm", against all reason. This practice can be reversed to, on the contrary, provoke the equally irrational and uncontrollable rejection of a person. These practices are carried out by the "collaboration" of the sorcerer with evil spirits. So it is a form of infestation.

Old infestations emerge more difficultly to consciousness because of the habituation to their presence. In the case of infestation by transgenerational inheritance, the person comes into the world with this parasitism and therefore generally assumes that the malignant manifestations that result from it are in reality part of his personality. They do not identify them as exogenous. The popular version of psychoanalytic discourse assumes that everyone would have their own "demons", or in a Jungian translation a psychic "shadow", individual and collective. These would therefore only be character defects or psychological deficiencies and not the presence of real spiritual entities. These learned or popular technicalities reinforce this error of judgment by offering a supposed explanation and a practical box in which to store and claim to neutralize these inconvenient inner impulses.

Parasitic entities feed energetically on the person they infest. They therefore tend to push them to consume psychoactive substances, from alcohol to tobacco, cannabis and all so-called hard drugs. Addictions therefore very often indicate a degree of infestation.

The notion of degree of infestation is important because the prevalence and harmfulness of parasitic entities can vary considerably. Many people are infested without knowing it (25% of people who come to see us). Reducing infestation to witchcraft and very rare spectacular cases of massive possession does not account for the phenomenon at all. Habituation in old, chronic, and moderate cases in their extrasensory or paranormal manifestations allows them to escape detection, particularly in a Western culture that has dismissed these realities or tends to move them to another register, that of mental pathology, existential difficulties or an "original" way of life. The trivialization of demonic and satanic questions exposed in broad daylight through fashionable ideologies or transgressive artistic expression paradoxically contributes to their invisibility. This daily prevalence induces a form of spiritual anesthesia and by reducing natural immunization to spiritual aggressions reduces their detection. However, they are no less effective, and even more so, because of the little opposition they encounter, and even the tacit assent and complicity they benefit from. It is therefore legitimate to ask the question of a possible infestation in all physical, psychological, emotional and behavioral disorders. And this is all the more true if they persist over time and are resistant to various forms of treatment.

### **The caregivers**

Detective investigation into possible signs of infestation can thus provide convergent clues and sometimes with a high diagnostic probability. However, it inevitably leads to the search for ad hoc care and therefore confirmation by experienced, safe and effective therapists.

Identifying competent practitioners represents a real challenge. Whether in the religious, medical or alternative practice fields, their official qualifications are not sufficient to validate them in this field. Exorcist priests may not believe in it, psychologists or psychiatrists may be in denial or delusional, alternative therapists may play the guru... Conversely, we can find competent people in all these categories, even without an "official" title, given a personal gift or because of extensive experience accumulated over the years. The patient's intuition and common sense play a valuable role in detection here, but they must necessarily be supplemented by a few basic observations:

- Does this practitioner show sincerity, compassion, self-control, humility?
- What is their relationship to the three "lusts" or passions: power, sexuality, money?
- Are there people previously treated by this practitioner who can testify to their healing without then establishing a dependency relationship?
- What seniority and recognition does this practitioner enjoy?
- Who did they train with? What is their background?

Here too, we find ourselves in the collection of concordant clues aimed at minimizing the possibility of going down the wrong path. Testimonials on social networks or websites do not represent any guarantee: every guru has his unconditional fans. If we cannot expect to meet the perfect practitioner, since every human being is fallible, a minimum of transparency on the processes implemented and the results obtained may be required. We will be wary of pseudonyms or anonymity, vague and general explanations using New Age vocabulary, unverifiable claims of extraordinary results, etc.

Alternative care practitioners, healers, magnetizers, may be competent people, endowed with a particular gift of clairvoyance, mediumship, magnetism, or a charisma of exorcism or discernment of evil spirits. We will therefore be careful not to generalize and quickly classify all these practitioners in the same category, a priori positive or a priori negative. The same goes for some therapists using potentially positive methods that are so well used, such as hypnosis, kinesiology, family constellations, etc. However, at the same time, these therapeutic tools and the possible gifts or charisma of these therapists are all reasons for evil spirits to infiltrate these people and their practices to divert them to their ends. Good practitioners, sensitive and open people, as well as religiously consecrated people, represent privileged prey for evil spirits. These are practitioners who must surround themselves with even more spiritual protection and rigor in their personal life and in their practice. It will be interesting to check whether this is the case or whether, in a suspicious way, these people show assurance and arrogance, while presenting a relaxed and inconsistent lifestyle.

Without the support of a strong, clear and defined spirituality, there is therefore a high risk of deviating from healthy practices to unhealthy ones, generally without the practitioner realizing it, that is to say without his voluntary consent. In our experience, this represents a large proportion of practitioners using ancient alternative techniques (healers, magnetizers, bonesetters, fire cutters, etc.) and the vast majority of those claiming to use innovative modern methods. The latter, often designated by grandiloquent and pseudo-scientific terms, are multiplying to such an extent that it is difficult to know them all (crystal baths, DNA activation codes, quantum healing, Akashic records, Metatron's cubes, energy harmonization, chakra alignment, transmutation of cellular memories, healing of karma, etc.).

Infestations can offer their victims special and sometimes quite spectacular powers. These people then feel invested with a special mission, an extraordinary gift, a vocation as a guide, savior,

therapist... Demons stroke narcissism in the right direction, flatter vanity, inflate the ego. They can also provide a feeling of invulnerability, power, access to hidden knowledge that would allow them to be “in the secret of the gods”. It can then be difficult for these people to give up this exhilarating identity, often hidden behind the mask of helping others. Some patients ultimately refuse a liberation that would return them to their simple humanity or sometimes put up tenacious resistance to those involved.

But this danger also and firstly concerns the interveners who can easily confuse the inflation of the ego with a supposed broadening of consciousness. It then sometimes becomes difficult for the intervener himself to recognize a possible infestation in them and to renounce the powers that it confers, altruism serving as an alibi. The evil spirits associated with the infestation allow them to obtain occult information by divination and thus impress the patient with sensational revelations (with a part of truth to ensure credibility) to better obtain his submission. Thus, many interveners possess artificial mediumship and claim to speak in the name of avatars, ascended masters, guides from an umpteenth dimension... We will systematically be wary of interveners claiming to have secret knowledge supposedly reserved for the initiated, all forms of channeling, spiritualism, automatic writing or Reiki, which are all certain sources of infestation. These workers are unknowingly used by the toxic entities that infest them and aim to contaminate their patients.

It should be remembered that the manifestations of power and the ability to communicate certain information do not in themselves validate the intervener in question. To verify the validity of these supernatural abilities, we will take up the list of concupiscences, we will observe the maintenance over time of the results obtained, if these suppose a dependence on the intervener or his group, we will appreciate his humility and his simplicity. The true therapist leaves the patient free of all constraint, respects his freedom and, after his intervention, does not establish any links of dependence.

Negative predictions about the future and threats of retaliation, automatically disqualify the one who advances them. He is a charlatan.

The alleged techniques of liberation through sexual practices are also proof of charlatanism. There is no exception.

More than diagnostic and therapeutic tools, it is the quality of the practitioner that counts. The liberation from infestations represents a demanding task and not without risks for the practitioner. This therefore requires a true vocation. The practitioner exposes his body and it is essentially through his body that he detects and metabolizes the toxic energies associated with malignant entities. The a posteriori proof of the accuracy of his diagnosis and its therapeutic efficiency is found in the results he obtains. The assertions of a practitioner who claims to make a diagnosis but does not offer the means to resolve the detected problem are doubtful a priori.

Given the specificity of this vocation, each practitioner also has his own techniques that allow him to observe the energetic body of his patient. As much as these may seem surprising or "folkloric", they can nevertheless be accurate and effective. The relationship of a practitioner to the invisible world sometimes determines unusual gifts, with sharp mediumship abilities, the capture of insights or sudden revelations through, for example, the perception of voices, key words, particular smells, body pains, images that impose themselves on him, etc. These methods intended to visualize the patient's

energetic body or to establish the relationship to the invisible world that informs him of his state, have been acquired by natural gift, by inheritance or during the initiatory process.

These “readings” or diagnostic procedures are often part of great therapeutic and cultural traditions, such as taking the energy pulse or using tobacco. Many methods involve highlighting disorders using a material medium (pendulum, cards, shells, etc.). What is called mancy can only claim to highlight what is already there, like instruments for amplifying invisible reality. Just as a microscope reveals the presence of microorganisms that are present but invisible to the naked eye, mancy reveals latent information to follow up on a question whose answer is there but inaccessible to the usual senses. For example, it is justified to ask whether a particular therapeutic procedure is recommended for a particular person (reading) but not to know how many children they will have (divination). The use of divination to draw so-called information about the future, what will happen, constitutes a practice of spiritualism and therefore a serious spiritual transgression. It presupposes a determinism that annuls human freedom. Any speaker who dares to affirm truths to come from these means is a charlatan.

Interrogating the souls of the deceased is to be placed in the same category of spiritualism, extremely toxic on the spiritual level.

The transition from the neutral and respectful reading of spiritual laws to divinatory and spiritualist practices represents an easy and dangerous slippage. It is one thing to ask if a person "can heal" (potentiality) than to ask if "they will heal" (determination), but confusion is easy. We are therefore invited to exercise the greatest caution, without this ruling out the possibility of being faced with an authentic and healthy intervener.

It is necessary to take into account that a practitioner can be potentially dangerous without knowing it, either through ignorance of spiritual laws, or because he is himself under malignant influence, or because he is the bearer of a psychological disorder of which he is not aware. At first glance, nothing looks more like a good healer than a sorcerer, a crook, a neurotic or a psychotic suffering from mystical delirium. We cannot therefore remain at the "first impression" but look "twice". It is necessary to use criteria of judgment and discernment by distancing ourselves from deceptive emotional or affective seductions. It is not enough to be sympathetic and animated by the best intentions to become competent. Within the alternative care movement or New Age practices, many practitioners act with the desire to help others, with healthy underlying intentions, without wanting to abuse either financially or sexually, but toxic due to ignorance of the areas in which they claim to be involved. However, ignorance of one's own ignorance can be the worst trap. Goodwill is desirable, but never sufficient; it must be accompanied by knowledge, experience and above all by genuine empowerment and recognition by peers. The latter, which is essential, makes it possible to avoid the double ignorance that generates a self-referentiality of sufficiency. The systematic labelling of suspected practitioners as charlatanism or fraud without proof of economic or sexual abuse allows all these unconsciously toxic but well-intentioned people, who are prevalent in the New Age movement, to go undetected in their incompetence, or even their dangerousness, neither by others nor by themselves.

If choosing a safe and effective practitioner is difficult, the elements described above can significantly reduce the risk of making the wrong choice. In this case, it is necessary to move away from a quick

black and white binary categorization. In a complex universe, the answers are never simple, and hasty judgments are harmful. Haste causes a loss of reasonable caution, excessive caution paralyzes and closes the door to possible solutions. It is better to waste a little time at the beginning in order to identify an adequate practitioner than to rely on incompetent or even toxic people, who will only make the situation worse.

It is also always possible to interrupt the relationship with a practitioner if, during the diagnostic or therapeutic process, the practitioner reveals inappropriate practices or behaviors. In this case, it is recommended to do so without aggression or confrontation, so as to avoid possible reprisals from practitioners who actively use magic or witchcraft. Just don't go see them anymore.

### **The care**

In the case of suspicion of an infestation by a person, even before consulting a practitioner, it is always possible to carry out certain first aid measures by oneself and which do not represent any danger. The effectiveness of these practices can completely resolve the problem, alleviate it without resolving it or not present any results. In these last two cases, one will then be called upon to consult a practitioner.

Disturbances of the etheric body (electromagnetic envelope) must be eliminated immediately because they present manifestations that can be easily confused with an infestation. To do this, it is advisable to immerse oneself in a bathtub of hot water in which a handful of coarse organic sea salt has been previously dissolved. The person must immerse themselves completely, except for the head, for a period of 20 minutes. After getting out of the bath, the person must lie down for two hours to rest, without eating, due to possible dizziness and possible fatigue. Usually only one bath is necessary, but it can be repeated three times with at least two days of rest between each bath. For a child or young person, the amount of water and salt should be reduced accordingly. Baths in sea water are sometimes sufficient, but not always.

Flowering water showers, commonly called "plant baths", are an easy, inexpensive and very effective process. We will gather aromatic plants available, crush them by hand in a bucket of warm water and let sit for an hour. The person can take a normal shower and then pour this flowered water over his entire body, including the head. Do not dry off completely so as to keep the smell of the plants. This process is recommended preferably in the evening just before bedtime. Aromatic plants can be picked in the surrounding environment but also obtained in markets or stores (lavender, sage, etc.), including edible plants (thyme, rosemary, bay leaf, basil, etc.). We can also add petals of aromatic flowers such as rose. This preparation cannot be substituted by essential oils or perfumes. Herbal baths can be used, even for babies, for their sedative and soothing properties in cases of nervousness, anguish, anxiety and other nervous system disorders. They do not present any danger.

Other treatments will depend on the practitioner consulted and his working methods. Some medicinal plants from ancestral traditions, consecrated, and within a correctly conducted ritual, have specific exorcist virtues. This is the case of lilies, tobacco and ginger, to name just a few examples. Infestations can be eliminated physically like a poison (vomiting, diarrhea, sweating, burping, etc.). Some practitioners can literally "take on" the malignant energy charge of their patient and then expel it from their own organism.

However, we can take as general rules during the entire liberation process:

- Do not consult or follow the care of several different therapists without their mutual approval.
- Strictly adhere to the instructions given by the therapist, without adding or removing anything, and in case of doubt, consult them before acting.
- Avoid any intervention on the body that is not approved by the therapist, in particular practices including an energetic dimension (acupuncture, massages, etc.).
- Maintain sexual abstinence throughout the process as well as abstention from any psychoactive substance, including alcohol and tobacco.
- Avoid the use of perfumes and aromas, especially synthetic ones, including perfumed toiletries (unless specifically indicated by the therapist). It is preferable to use natural products without odor (baking soda as toothpaste, Marseille soap, etc.).
- Eliminate the ingestion of pork and cold cuts as well as strong condiments (chili, black pepper, etc.).
- Maintain the healthiest diet possible.
- Avoid frequenting potentially charged places (ruins, vacant lots, abandoned houses, etc.) and concentrations of people, especially in so-called "festive" contexts (nightclubs, rave parties, concerts, etc.).
- Avoid listening to potentially toxic music (metal, punk, rap, electronic music, etc.) and noisy contexts.
- Clean your living environment of potentially negatively charged objects (African masks, ritual objects, pornographic materials, magic books, esotericism, occultism, etc.).
- Avoid confrontations with loved ones and postpone "dispute resolution" until later.
- Avoid making important decisions, family, professional or otherwise, until the end of the process.

In summary, it is about preventing any potential source of energy disturbance by maintaining physical, psycho-affective and energetic hygiene.

During a liberation process, malignant entities can resist their expulsion and suggest false leads to deceive the person. We will be particularly wary of "revelations" concerning attacks of magic or other by such person, or of sexual abuse or incest by such other person... Infestations can indeed come from this kind of origin, but it is prudent to verify the reality, to have the confirmation of one's therapist, and to wait until the end of the process before assuming it as certain. Once the process is finished, it is strongly advised to leave a break time that can go from two weeks to nine months, depending on the intensity of the infestation, to give oneself the time for the necessary integration of the consequences of these internal upheavals. Then, it becomes possible, in serenity, to contact, if necessary, the people with whom disputes are to be settled. We will leave this same period of metabolism before resuming any possible inner work, especially if it includes an energetic or ritual dimension.



## **Spiritual orientation**

The generic term of interveners includes religious people. Exorcist or liberation practices exist in all spiritual traditions and dominant religions (Buddhism, Hinduism, Islam, Judaism, etc.). Their approach goes beyond the scope of this article, where we will stick to the Catholic practices that are more common and known in the Western context, and which we ourselves use.

Catholic priests have the power of spiritual liberation in the same way as any baptized Catholic. Their priesthood, however, gives them additional protection and power. Some believers, nuns and priests also have the charism of discernment and liberation.

Bishops have, by virtue of their episcopal ordination, the power of exorcism, which applies to the most serious cases, major infestation or possession. This is included in a ritual precisely defined on the liturgical level and which only they can use or the exorcist priest to whom they delegate this power and this function. Each diocese is in principle provided with an exorcist priest appointed by the bishop. In case of need, any person, even non-believers or of another confession, can request from the bishopric contact with the priest assigned to this mission.

Very often, religious people are unaware of the spiritual liberation practices that are possible among authentic therapists or healers, or even among simple baptized believers, whom they tend to dismiss and automatically label as charlatans or crooks. Most have received no training in spiritual combat and the discernment of spirits, and prefer to keep their distance from an area that inconveniences them. And, unfortunately, this state of affairs also concerns bishops and exorcist priests.

In this matter, it is therefore recommended not to stick to labels or official functions, but to inquire about the capacity and commitment of such a believer, religious, priest or bishop, in the field of liberation. The vast majority of infestations do not require an exorcism ritual, and the prayers of liberation of a committed and trained lay or religious person are sufficient. Spiritual liberation groups or activities exist in certain associations, parishes or monasteries.

Contrary to what many believers think, their faith does not automatically protect them from possible infestations, although their baptism gives them a higher degree of protection than a non-baptized person. The use of prayer and the sacraments also provides them with extremely effective spiritual weapons that complement the interventions of third parties. The sacrament of reconciliation (confession) in particular represents an exorcist practice in itself.

If spontaneous prayer of the heart is justified, the prayers instituted by Tradition and validated by the Magisterium of the Church are the most effective. We should be wary of prayers, even with a holy appearance, that circulate on the web or in non-validated prayer collections: they can have an effect contrary to that sought. It is in our best interest to stick humbly and pragmatically to the tools forged long ago and tested by mystics and centuries of tradition.

It is also easier for a believer to wear consecrated objects of spiritual protection (scapular, medals, rosary, etc.) and to detect spiritual interferences of possible infestations with their prayer life or sacramental practice. Their baptism gives them a power of liberation, for which they can invoke it by relying on it to pronounce prayers or words of liberation for themselves or for third parties. These same locutions can also be made in the name of Jesus, the Christ liberator from all evil, and with the

help of the other spiritual powers of the Christian pantheon and the "heavenly armies": The Virgin Mary, the holy angels and archangels, the saints of all times.

The use of Christian resources does not exclude the association with interventions of traditional or alternative medicines and in particular plants. The Christian faith also recognizes the presence of the Spirit, as seeds of Truth (*semina verbi*), in all spiritual traditions and civilizations. Purified and well-articulated, these various modalities of dealing with human suffering do not contradict each other but on the contrary usefully complement each other. Discernment, diagnosis, therapy and liberation processes can benefit from these associated approaches by making them more refined and therefore faster and more effective.

The practitioner or the patient themselves, if baptized and depending on the context, can consecrate the material supports by prayers of blessing but also of exorcism. There are special ritual prayers established by doctrine and liturgy for this purpose. Water, salt, incense, oil and plants can not only be blessed but also exorcised. Their therapeutic power is then considerably potentiated. These elementals can purify objects and places of possible infestations, but also, depending on their nature, be ingested. The exorcism of elementals must preferably be carried out by a priest or a consecrated person but, failing that, it can be carried out by any person formally baptized within the Catholic or Orthodox Church.

Thus, in the immersion bath in salt water, one can choose to exorcise the salt used in solution. In the same way, flower water showers can be blessed or exorcised beforehand. In addition to these two non-dangerous practices that can be used systematically, it is always permissible for a supposedly infested person to ingest three times a day a pinch of exorcised salt followed by a sip of exorcised water. This practice, at worst will be useless, and at best will allow a liberation or contribute to it, without presenting any type of inconvenience or spiritual transgression.

## **Conclusion**

Diagnosis and treatment of cases of infestation are a real clinic, with its indications and contraindications. Since the support of this reality is invisible in an ordinary state of consciousness, its approach requires specific techniques in order to establish safe and efficient relationships with the invisible world and to know its laws and limits. The release of spiritual influences can only be done with tools of the same nature, that is to say spiritual.

The establishment of this cartography of the invisible world and the means of investigation and care can benefit from the knowledge of ancestral knowledge and traditions, as well as the enormous baggage and two-thousand-year-old experience of Christianity. An intelligent and respectful articulation of these ways of knowing the invisible reality represents a stimulating perspective to respond to the contemporary suffering of individuals and societies and to face the terrible assaults of the Evil One in our troubled and desecralized times.

Ancestral medico-religious traditions need to be purified of their shadow of witchcraft and idolatry practices, while the Christian Tradition must rediscover the ways of the body and the Incarnation in a process of salvation that begins with healing. Both are mutually necessary.

Between the two, Western medicine with its hegemonic tendency must shed its arrogance in the face of cases of infestation that it ignores and does not treat, and as a result induces the stigmatization of many sufferers with humiliating psychiatric labels, while leaving them prey to malignant entities, leading to chronic, ineffective and disabling treatments, sometimes for life.

The combination of ancestral knowledge, the knowledge of various medicines and the power of faith and Christian tradition can enable a qualitative leap in the treatment of perception disorders and outline the contours of a new post-materialist paradigm.

## LEARN MORE

1. Conference in French: « **Challenges of discernment between the psychic shadow and the spiritual shadow** », Dr. Jacques Mabit, IdéePsy, Paris, 2018.

Psychotherapy, especially from the influence of C.G. Jung, introduced the notion of psychic shadow and invites its transformation and integration into consciousness. Shamanism reveals to us the autonomous and exogenous spiritual shadow of non-humans that cannot be transformed and integrated into our consciousness. How can we discern between these different shadows that condition our mental and spiritual health?

Link: [https://www.youtube.com/watch?v=BM3Ncq\\_FCuw](https://www.youtube.com/watch?v=BM3Ncq_FCuw)

2. Article: “**Jung, his inspirers and the New Age**”, Dr. Jacques Mabit (Oct. 2021), 41p.

The figure of Carl Gustav Jung (1875-1961), Swiss psychiatrist and founder of Analytical Psychology and Depth Psychology, cannot be left out of the list of “inspirers of the New Age”. Indeed, beyond his status as a psychoanalyst, he is an almost constant reference for personal development seminars and training in transpersonal psychotherapy, but also, in his approach and his explorations, a person “inspired” by of spiritual entities, as he himself recognized. That is to say, much of his knowledge and his writings do not proceed from his own background but from “revelations” transmitted by “inspirers” belonging to the spirit world. The power and richness of his thought fascinate and arouse admiration, and just as much justifies examining his sources of inspiration.

Link: [https://www.takiwasi.com/docs/arti\\_ing/jung-inspirers-new-age.pdf](https://www.takiwasi.com/docs/arti_ing/jung-inspirers-new-age.pdf)

3. Article: “**Synergism between Catholicism and Indigenous Spirituality within the Drug Addiction Rehabilitation Program of Takiwasi, a Therapeutic Community in the Peruvian High-Amazon**”, Alberto Dubbini, Marco Gallizioli, Fabio Friso, Jaime Torres, Jacques Mabit, Matteo Politi, Published in Studies in Religion/Sciences Religieuses, 2019.

The association between spirituality and medicine is unfolding as a research theme that may have increasing practical implications in healthcare systems. Both spiritual and scientific dimensions are

present within the treatment protocol for addiction applied at the Takiwasi Center, a pioneer therapeutic community that combines western approaches, including psychotherapy, biomedicine, and Catholic practices, with traditional Amazonian medicine. Through a series of open-ended and semi-structured interviews conducted on nine workers of the center during fieldwork research and comparison with the information obtained from literature review, the present article aims at testing the existence of an effective synergy between Catholic religiosity and indigenous-mestizo spirituality within the therapeutic process performed at the Takiwasi Center and puts in evidence some stimulating and problematic issues that arise from this synergy.

Link : [https://www.takiwasi.com/docs/arti\\_ing/synergism-catholicism-indigenous-spirituality.pdf](https://www.takiwasi.com/docs/arti_ing/synergism-catholicism-indigenous-spirituality.pdf)

4. Article: **“Therapeutic potential of spirituality and mystical experiences in the treatment of substance use disorders”**, Alberto Dubbini, Jacques Mabit, Matteo Politi, Published in *Revista Cultura y Droga*, 25 (29), pp. 41-62, 2020.

Link: <https://www.takiwasi.com/fr/rencontre-monde-esprits.php>

This article aims to give an overview on the role of spirituality, faith and mystical experiences in the treatment of Substance Use Disorders (SUDs) by presenting the case of the therapeutic community Takiwasi, where psychoactive plants are used, and by considering other Complementary and Alternative Medicine (CAM) therapies that are derived from or have connection with religious or spiritual practices. The research has been based on the review of scientific and grey literature and on an interview performed with the president and founder of Takiwasi. Synergism between Christian and Amazonian spirituality appears relevant within the Takiwasi protocol. The use of CAM including Mindfulness, Holotropic Breathwork and Yoga emerge from the literature. Clinical experience show that spirituality is a key factor to be taken into account when considering addiction treatment and several CAM practices with spiritual connotations show promising potential for the treatment of SUDs.