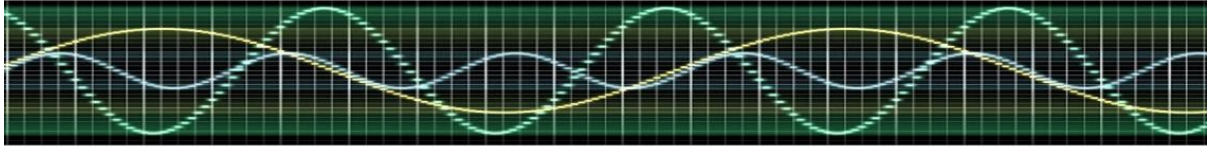




Redland Reflexology

BODY OPTIMISER - SOUND WAVE TECHNOLOGY



Diminishing Function Risk			Optimal and Balanced			Increasing Inflammation Risk		
1	2	3	4	5	6	7	8	9
Critical	Severe	Moderate	Mild	Normal	Mild	Moderate	Severe	Critical

MENSTRUATION

Some Associated References re GROK response (to check for imbalances)

To check for imbalances you can use the search function on each of the two spreadsheets of results to search for items mentioned within the GROK response.

Note: GROK warns that it's responses to queries may not be correct.

GROK Query: JAN 2026

If a woman is having painful menstruation problems then which items in the following RR Body Chemistry Results list would be associated as an imbalance?

GROK Response: JAN 2026

Hormones: Mood/Sex/Sleep/Stress

The following hormone-related items are commonly associated with imbalances contributing to painful menstruation (dysmenorrhea), particularly through estrogen-progesterone imbalance (e.g., relative estrogen dominance or low progesterone), which can exacerbate prostaglandin production and uterine contractions:

- Estrogen
- Estradiol
- Progesterone
- Cortisol
- Follicle Stimulating Hormone (FSH)
- Luteinizing Hormone (LH)

These relate to hormonal fluctuations that influence endometrial shedding, inflammation, and cramping severity.

Inflammation/Oxidation

Elevated inflammatory markers are linked to increased prostaglandin levels and pain intensity in dysmenorrhea:

- Hs-CRP
- Fibrinogen
- Cytokine Activity

LIMITATIONS: Redland Reflexology, the RR Physio Analyser and the RR Body Analyser Optimiser are not able to detect cancer or diagnose diseases or medical conditions. Like other similar systems, we cannot guarantee that the system is 100% accurate; however, scan sessions may highlight frequency imbalances in the body that could be related to certain disorders. If you have symptoms that concern you, it is important to consult your doctor or healthcare provider.

These indicate systemic inflammation that correlates with menstrual pain severity. Fatty Acids, Omega-3

Low levels of anti-inflammatory omega-3 fatty acids are associated with higher dysmenorrhea pain, as they help reduce pro-inflammatory prostaglandins:

- Eicosapentaenoic (EPA)
- Docosahexaenoic (DHA)
- HS-Omega-3 Index (RBC EPA+DHA)
- Omega-3 Total

Supplementation with EPA and DHA often reduces pain intensity.

Macrominerals / Microminerals

Deficiency in these minerals is linked to increased muscle cramping and dysmenorrhea severity:

- Magnesium
- Calcium

Magnesium relaxes uterine muscles, while adequate calcium supports muscle function; deficiencies exacerbate cramps.

Vitamins/CoEnzymes

Low levels are associated with worse pain and symptoms:

- Vitamin D, 25-Hydroxy

Vitamin D deficiency correlates with increased dysmenorrhea severity and pain.

Other Sections

No strong, direct associations with painful menstruation were identified for the remaining sections (e.g., Blood-Lipids, CBC, Insulin Resistance, Amino Acids, Digestive Acids/Enzymes, Genetic, Toxicities, Liver/Kidney Function, etc.). These relate more to general health, cardiovascular risk, or unrelated systems without primary evidence linking them to dysmenorrhea imbalances.

Primary dysmenorrhea is driven mainly by prostaglandins, inflammation, and hormonal factors rather than lipids, CBC abnormalities, or toxicities in most cases.

GROK Query: JAN 2026

If a woman is having painful menstruation problems then which items in the following RR Body Organs Results list would be associated as an imbalance?

GROK Response: JAN 2026

Arteries Lower Body Female

The following arteries are associated with imbalances in painful menstruation (dysmenorrhea), often linked to poor blood flow, stasis, or spasms in the pelvic region (e.g., uterine artery blood flow impedance, ovarian supply issues, or pelvic congestion in TCM and clinical contexts):

- R Uterine Artery
- L Uterine Artery
- R Ovarian Artery
- L Ovarian Artery
- Uterine Artery Plexus

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These relate to uterine contractions, pelvic circulation, and hormonal/endometrial support, where restricted flow or spasms contribute to cramping pain. Connective Tissue Hip

The following connective tissues/ligaments are associated, particularly in cases of uterine retroversion, tension, or pelvic structural issues that can exacerbate menstrual pain:

- R Round Ligament
- L Round Ligament

The round ligament supports the uterus and can cause or contribute to pain when tense or in retroverted positions.

Other Sections

No direct associations found for the remaining sections (e.g., Connective Tissue Spine, Ear Left/Right, Eye Left/Right, Heart sections, Lymphatic groups, Muscles various, Nerves various, Organs various) in relation to painful menstruation imbalances based on anatomical, TCM, or clinical evidence of structural/vascular involvement. These are more related to other systems (e.g., digestion, upper body, sensory organs) without primary links to dysmenorrhea.

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