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ASSOCIATION BETWEEN THE PRACTICE OF EMOTIONAL SELF-HEALING AND CHANGES IN BODY MASS INDEX IN PARTICIPANTS OF A HEKALOGY EVENT IN MEXICO CITY

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ABSTRACT

The aim is to evaluate changes in body mass index (BMI) and emotional well-being in participants who attended the free emotional self-healing event in Mexico City on 22 June 2025. This was an explanatory research study with an experimental design and a longitudinal prospective approach. A census sample of 320 users who attended the Emotional Self-Healing event in Mexico City were weighed using a calibrated scale to the nearest 0.1 kg and measured for height to the nearest 0.1 cm using a tape measure. BMI was then calculated by dividing weight by height. BMI = weight (kg)/(height (m)*height (m)). The DASS-21 and Ryff emotional state survey were carried out 15 days before and after the event. A significant percentage of participants recorded a reduction in BMI and an improvement in emotional state. It can be concluded that Hekalogy positively impacts the reduction of BMI and improvement of emotional state. This can lead to potential benefits for cardiovascular health, regulation of body fluids, stress management, interpersonal relationships and general physical and mental health.

KEYWORDS: Emotions; Self-healing; Weight; Size; Welfare; Body Mass Index; Hekalogy.

1. INTRODUCTION

In recent decades, a comprehensive approach to human well-being has become increasingly relevant in the fields of physical and mental health. Metabolic diseases such as obesity have reached epidemic proportions worldwide and are influenced not only by genetic factors and eating habits, but also by emotional, psychological and spiritual factors. Against this backdrop, alternative and complementary therapeutic approaches have emerged that aim to positively impact both the body and the mind.

Being overweight (Spc) or obese (Ob) is defined as having an excessive accumulation of fat, which can be harmful to health. The World Health Organization (WHO) defines a person with overweight (Spc) as having a BMI of at least 25 kg/m² and a person with obesity (Ob) as having a BMI of at least 30 kg/m². Likewise, obesity is a chronic, multifactorial disease that is usually incurable, recurrent and progressive. It is associated with significant physical and psychological complications and presents considerable morbidity and mortality[1].

Obesity was long considered a problem in high-income countries, but this situation has changed in recent decades due to its increase in countries with lower incomes. Since 1975, this disease has tripled worldwide, with excess weight now exceeding 50% of the adult population in some countries, predominantly affecting women in both categories (1).

Emotional self-healing is one of the new approaches that proposes generating significant transformations in people's physical and emotional state by consciously working on repressed emotions, dysfunctional thought patterns, and the relationship with oneself. As a discipline that integrates emotional knowledge, hekalogy proposes methods of self-exploration that allow psycho-emotional burdens affecting general health to be unlocked.

In this context, emotional self-healing, as validated by hekalogy, proposes an innovative model in which many physical manifestations, including being overweight, are considered to be the consequence of unresolved emotional blockages. It suggests that releasing emotional burdens through guided introspection and inner transformation could lead to physiological changes in the body, potentially influencing body mass index without the need for external interventions such as diets, exercise, or relaxation techniques.

Despite the absence of a control group of people who did not attend the emotional self-healing event, making conclusive evidential comparisons impossible, this work seeks to provide preliminary empirical or proof-of-concept evidence. This evidence could pave the way for more rigorous future research designs, such as randomized controlled studies. This could lead to an increase in research into the impact of self-healing practices on physical health and emotional well-being, contributing to a more holistic vision of human care. The aim is of the study is to assess changes in body mass index (BMI) and emotional well-being in participants who attended the free emotional self-healing event in Mexico City on 22 June 2025.

2. METHODS

2.1. Experimental Design

To assess changes in body mass index (BMI) and emotional well-being status in participants who attended the free emotional self-healing event on June 22, 2025 in Mexico City.

2.2. Pre-Established Hypothesis

The practice of emotional self-healing produces a beneficial change in the state of emotional well-being and body mass index, as evidenced by:

1. Reduction of body mass index in a significant percentage of participants.
2. Improvement in participants' emotional state (through the DASS-21 adapted emotional state survey).
3. Improvement in the emotional well-being of the participants (assessed with the Ryff adapted emotional well-being survey).

2.3. Sample Size

The census sample consisted of 320 participants, between 18 and 60 years old, men and women, who attended the emotional self-healing event called "Free Self-Healing in Mexico City" in a duration of 4 hours of emotional self-healing practice.

Changes in a reduction in BMI and improvement in emotional state were observed in a significant percentage of participants.

Each participant underwent an individual medical evaluation, explanation of the study, signing of informed consent, carrying out the DASS-21 and Ryff survey, then the body weight was taken through a scale previously calibrated in kilograms, the measurement of height through a height meter, then the body mass index was calculated by dividing the weight in kilograms by the height in meters squared, the formula is: BMI = weight (kg) / (height (m) * height (m)),

The measurements were carried out at two times:

1. Before Withdrawal (Baseline)

2. After the retreat (15 days after the event of the emotional self-healing practice).

The measurement was carried out under controlled conditions of environment, lighting and basic physical condition (without having eaten or consumed stimulants in the previous two hours).

2.4. Data Analysis

Descriptive statistics were used to assess changes in body mass index, considering the following criteria:

- Low BMI weight <18.5
- Normal BMI 18.5 – 24.9
- Overweight BMI 25 – 29.9

"Improvement in body mass index" was considered to be a decrease in the BMI value with respect to the measurement of dates 1 and 2.

The DASS-21 emotional state survey was also carried out, where a value was assigned to each response as follows:

- Never 0
- Sometimes 1
- Often 2
- Almost always 3

Subsequently, the sum of the items was carried out with an indicative interpretation of:

- Low level of emotional distress 0 – 3
- Moderate emotional level 4 – 8
- High emotional level 9 – 15

In the case of the Ryff emotional well-being survey, it was oriented as follows:

- Score from 1 to 5 each item
- 4 for 5 items: 20 points

Subsequently, the sum of the items was carried out with an indicative interpretation of:

- Low emotional well-being <10
- Moderate emotional well-being 10-15
- High emotional well-being 16 – 20

2.5. Inclusion criteria

- Signed informed consent.
- Willingness to attend the event "Free Emotional Self-Healing CDMX".
- Women and men between the ages of 18 and 60.

2.6. Exclusion Criteria

- Failure to comply with the sample collection protocol.
- Thin and pregnant.

2.7. Controlled Variables

- Measurement time: 10:30 a.m.
- Scale previously calibrated in kilograms and height meter.
- Same DASS-21 and Ryff emotional well-being status survey.

2.8. Experimental Design

The study was explanatory, experimental and longitudinal. Body mass index (BMI) was measured, as were the DASS-21 and Ryff emotional well-being status surveys, before and 15 days after the Hekalogy validated emotional self-healing event, to assess its effect on BMI and emotional well-being in participants who attended the free emotional self-healing event in Mexico City on 22 June 2025. BMI was measured in participants using a calibrated scale to measure body weight in kilograms and a height meter to measure height in metres. BMI was then calculated by dividing body weight in kilograms by height in metres squared. BMI = weight (kg)/(height (m)*height (m)). This allowed us to discover the importance of emotional self-healing, as validated by Hekalogy, in medical science today.

BMI is a measure that relates a person's weight to their height in order to estimate body fat. BMI is calculated by dividing a person's weight in kilograms by their height in metres squared (BMI = weight/height^2). A high BMI may indicate being overweight or obese, while a low BMI may indicate being underweight.

Improving BMI to a healthy range (usually 18.5–24.9) offers numerous health benefits. These include a reduced risk of chronic diseases such as type 2 diabetes and cardiovascular disease, increased energy and physical endurance, improved mood and self-esteem, and potentially better sleep (4).

3. MATERIALS

1. Weight assessment:
• Scales calibrated in kilograms.
2. Size Assessment:
• Stadiometer.
3. Adapted emotional well-being state survey DASS-21 and Ryff.
4. Emotional Self-Healing Protocol:
• Structured retreat (4 hours of emotional self-healing practice).

3.1. Statistical Analysis

Data were collected on two measurements: weight in kilograms and height in centimetres on 22 June and 8 July 2025, and body mass index; as well as the results of the DASS-21 and Ryff emotional well-being status surveys. This data will be recorded in an Excel spreadsheet. The correlation between these results before and 15 days after the emotional self-healing retreat will be recorded among 320 randomly selected participants who attended the event for 4 hours of

emotional self-healing practice. Importantly, participants did not modify their eating or exercise habits, nor did they use relaxation techniques such as meditation, yoga, or breathing exercises. Instead, they were induced to experience stressors such as emotional distress, physical pain, crying, and vomiting, making our practice and research extremely interesting, unique, and innovative.

4. RESULTS

Figure 1 shows the measurement of body mass index weight in the participants before the emotional self-healing event (date 1):

- First measurement of body mass index dated June 22, 2025 at 10:30 am before the practice of emotional self-healing.

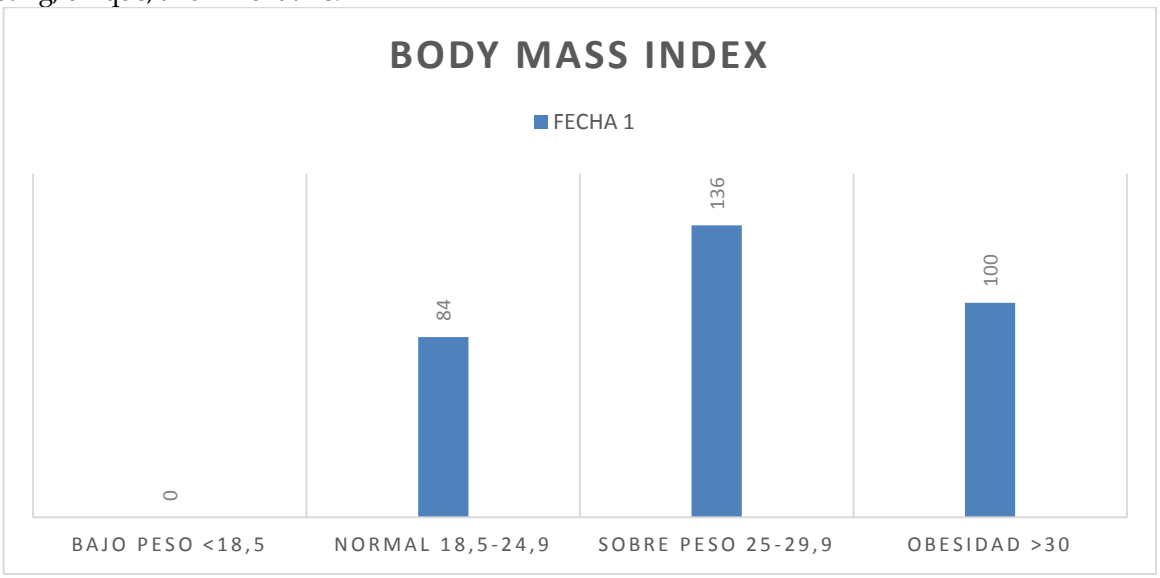

Figure 1: First Measurement of Body Mass Index.

Comment: It is observed that, out of 320 participants, a total of 84 participants with normal BMI, 136 overweight and 100 participants with obesity were registered according to the current scale of body mass index, this measurement was made before starting the event of the emotional self-healing practice.

Figure 2 shows the relationship of the measurement of body mass index in participants 15 days after the event of the practice of emotional self-healing (date 2):

- Second measurement of body mass index dated July 8, 2025 at 10:30 am, 15 days after the end of the practice of emotional self-healing.

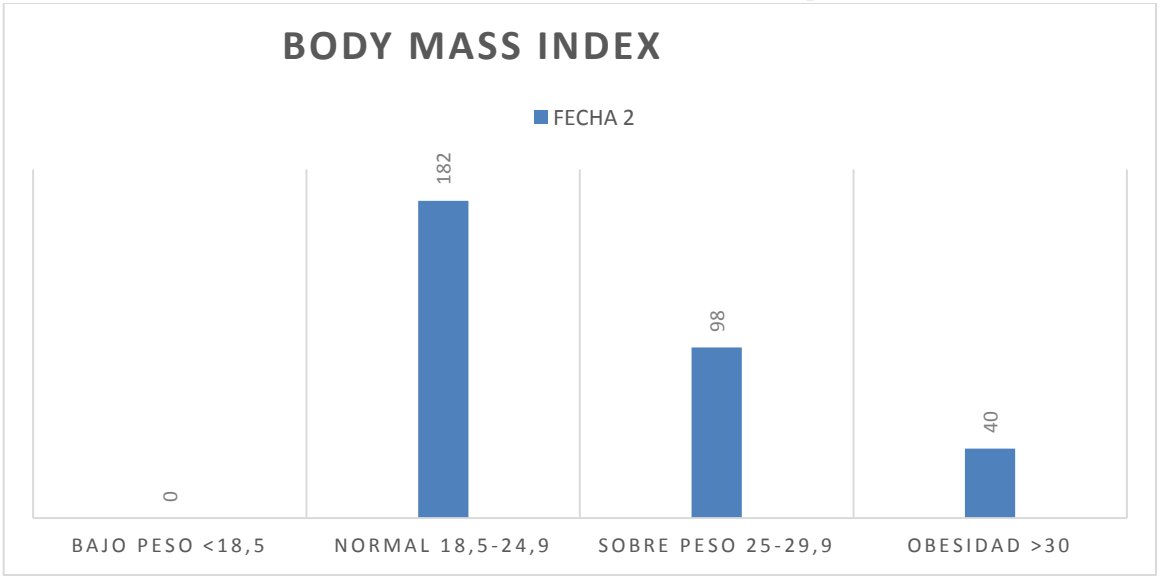

Figure 2: Second Measurement of The Body Mass Index.

Comment: It is observed that, out of 320 participants, 182 participants with normal BMI, 98

overweight and 40 obese participants were recorded in the second intake, which registered a reduction in BMI in a significant percentage of participants.

Figure 3 shows the relationship of the DASS-21 adapted emotional state survey on corresponding dates 1 and 2 as follows:

- Take #1 of the DASS-21 adapted emotional state survey dated July 22, 2025 at 10:30 am before the emotional self-healing practice.
- Take #2 of the DASS-21 adapted emotional state survey dated July 8 at 10:30 am 15 days after the practice of emotional self-healing.

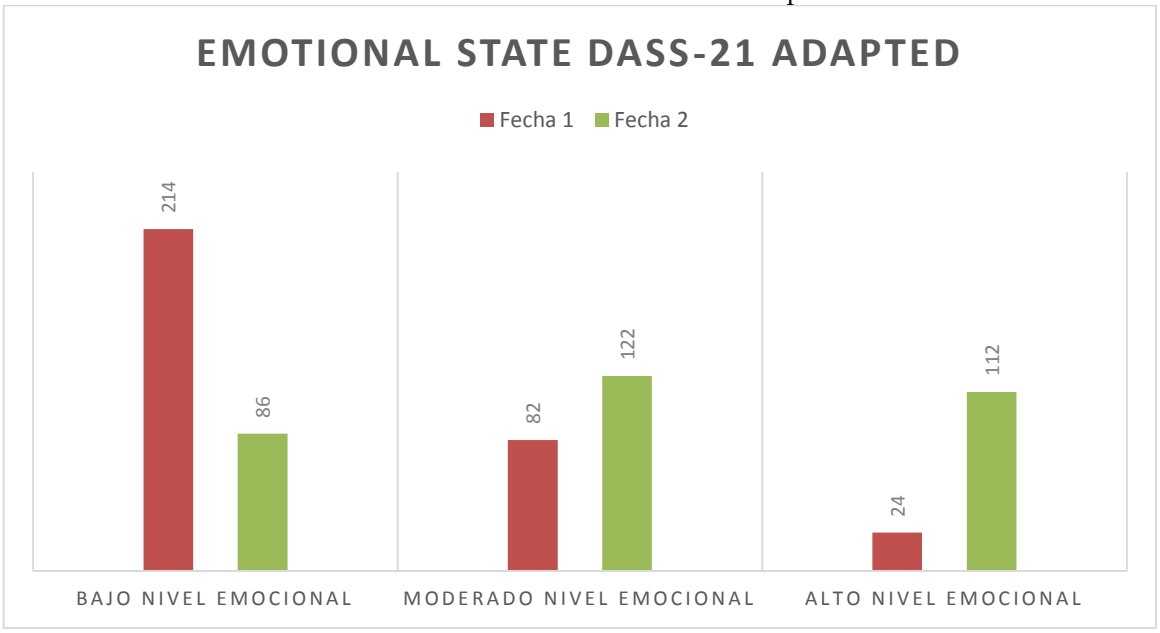

Figure 3: Emotional State Survey (Adapted Dass-21).

Comment: This figure shows an improvement in the emotional state in a significant percentage of the participants in relation to the survey carried out before and 15 days after the emotional self-healing event.

Figure 4 shows the relationship of the result of the RYFF adapted emotional well-being survey on corresponding dates 1 and 2 as follows:

- Take #1 of Ryff Adapted Emotional Well-Being Survey dated June 28, 2025 at 8:00 am prior to the Emotional Self-Healing Practice event.
- Take #2 of the Ryff Adapted Emotional Well-Being Survey at 8:00 a.m., 15 days after the event of the Emotional Self-Healing Practice.

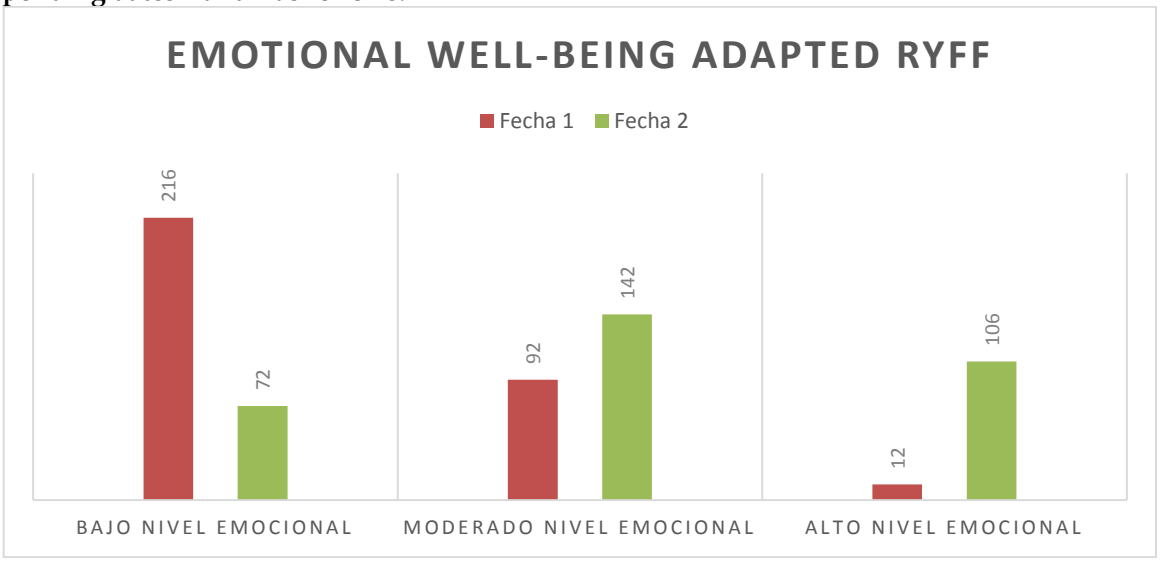

Figure 4: Emotional Well-Being Survey (Adapted Ryff).

Comment: Figure 4 presents an improvement in the emotional state in a significant percentage of the participants in relation to the survey carried out before and 15 days after the emotional self-healing event.

5. DISCUSSION

The objective of the study was to evaluate changes in body mass index (BMI) and emotional well-being in participants who attended the free emotional self-healing event in Mexico City on 22 June 2025. A significant percentage of participants were found to have experienced a reduction in BMI and an improvement in emotional state. Despite the absence of a preparatory control group, a review was carried out of other existing studies, such as one conducted in May 2024 entitled 'Body Mass Index'. Accuracy for the Diagnosis and Management of Obesity', which concluded that obesity is a predictor of multiple non-communicable pathologies affecting the quality of life of individuals and their families and social environments. The primary focus is on prevention and early, accurate diagnosis using useful, accurate, and easily replicable tools that take into account individual conditioning factors such as race, ethnicity, sex, and age. This is why specific studies of each population group are needed to establish adequate BMI cut-off points, since the WHO's general data could exclude obese patients from decision-making by cataloguing them as normal weight, which would directly impact individual and collective health. The diagnosis and management of obesity have both revealed the need for a more holistic and personalized approach. Practical applications of these findings could include developing diagnostic tools that integrate anthropometric and biochemical measurements to provide a more accurate assessment of individual cardiometabolic risk. Future lines of research could focus on establishing BMI cut-off points that reflect ethnic, racial and geographic differences. This would allow for more effective and personalized interventions (2).

Another study, published in December 2020, examined the relationship between elevated body mass index and the prediction of dysglycaemia. The study concluded that elevated body mass index increases resistance to the action of pre-existing insulin through different mechanisms. This facilitates the deterioration of carbohydrate metabolism and the possible onset of dysglycaemia. Using this relationship and validated cut-off points for our population would enable the rapid diagnosis of excess weight and prediction of one of its significant consequences: dysglycaemia (3).

In August 2022, the study Body Mass Index References was published. Diagnostic Accuracy with Brachial Fat Area in Argentine Schoolchildren, concluded that the references showed similar diagnostic accuracy in detecting high caloric reserves, with optimal cut-off points for Z-BMI scores of less than two Z-scores. This is relevant for identifying excess adiposity in populations in relation to implementing public policies for preventing chronic non-communicable diseases (4).

In Chile in 2022, a cross-sectional study was carried out on the relationship between high body mass index and socioeconomic variables in the Chilean population, in which education was found to be relevant to the implementation of BMI prevention and control strategies. An inverse relationship was shown between smoking and high BMI, which could be associated with a body weight control mechanism. It is necessary to refocus from the educational field. Regarding economic income, the findings are contradictory: it was found that the probability of an individual being overweight increased with income, while the probability of being obese decreased with income (5).

In March 2023, a study called 'Body Mass Index Associated with Body Image and Self-Esteem in Young Adults, UMF 62' was conducted in Mexico City, where the association between BMI and body image and self-esteem in young adults from a family medicine unit was estimated. It was found that there is a significant relationship between BMI and body image perception because the people in the study perceive themselves as they see themselves. However, no association was found between BMI and self-esteem, which could explain why they accept themselves as they are. BMI and body image are important factors to consider as they can affect an individual's emotional state. However, further research is needed to investigate whether people can feel satisfied with themselves and happy despite the prevalence of overweight and obesity. BMI and body image can influence an individual's emotional state, so it is necessary to implement health programmes that improve physical appearance and strengthen self-esteem (6).

In Murcia, Spain, a study was conducted in 2022 to investigate the influence of healthy habits on body mass index in 12–14-year-olds in the Murcia region. The study revealed that obese adolescents exhibited poorer eating and exercise habits, greater screen time, and poorer social and school relationships. The only modifiable behaviour studied that showed an association with excess weight was the score in the physical activity dimension of the ENHASA. New strategies are encouraged, mainly focusing on promoting regular exercise, such as extracurricular sports activities in schools, active life campaigns, and parental involvement in sports activities. Applying questionnaires to detect deficit dimensions that favour excess weight in patients opens the door to designing

individualised intervention plans that take into account the most influential dimensions for each patient, optimising available resources (7).

In 2022, they examined weight loss and the oxidation of adipose tissue (fat), where the analysed indicators showed different levels of importance given by each national specialist consulted. These levels should be taken into account for weight loss through the oxidation of adipose tissue in a fitness training model. This research provides theoretical and methodological validation for the prospective development of a sustainable specialised training model. As a preliminary step, training is recommended for national fitness professionals on the actual importance of each indicator, emphasising the integration of each training component, including the studied principles, anaerobic training as a complement to the aerobic intervention process, and the indicated complementary alternatives (weight loss and fat oxidation in fitness (8)).

Similarly, the article 'Changes in body weight, physical activity and lifestyle during mandatory confinement due to the new Coronavirus (Covid-19) in Colombia in 2021' states that, due to the rarity of events leading to global population confinement, such as the outbreak of the new Coronavirus, the effects of a period of home isolation have not been well studied. Since lifestyles were completely altered, the opportunity was recognised to conduct a survey to determine the effects of quarantine on weight and lifestyle changes. The survey found that 29% of respondents (1,434 people) lost weight, while the rest either maintained their weight or gained it. One possible explanation for weight loss or maintenance during confinement is the decrease in food consumption outside the home, which is usually high in fats and sugars. For many, cooking and dining at home presented an opportunity to improve eating habits. This finding is consistent with reports that energy restriction may help reduce body weight. Other hypotheses include a decrease in muscle mass due to cessation of exercise among regular exercisers, and depression or anxiety arising from confinement, which altered eating patterns. Therefore, they conclude that measures to contain the pandemic, such as home confinement, can cause changes in lifestyle habits and body weight. While the overall picture painted by this survey is not particularly discouraging, it does present challenges to the nutritional and physical activity recommendations of healthcare professionals in the event of a pandemic and confinement. Further research is needed to determine whether the lockdown related to the SARS-CoV-2 pandemic has resulted in the long-term reinforcement of adverse dietary habits and associated health problems (9).

On the other hand, the study 'Intervention programme: Comprehensive Diet and Physical Exercise for Reducing Anthropometric Parameters in Salvador de Bahia, Brazil, which was carried out in December 2021. The study was conducted in a health crisis scenario due to the SARS-CoV-2 virus pandemic and in an epidemiological context characterised by high rates of obesity and chronic non-communicable diseases (NCDs). When this programme was implemented and the results observed, significant values were found in almost all the study variables: the participants experienced a significant decrease in their anthropometric measurements after the programme. The same findings were found in a 12-week study after the intervention: the participants experienced weight loss and a reduction in excess body fat. The study concluded that dietary habits and physical exercise positively impact the normalisation of anthropometric measurements. It was found that the Lifestyle Medicine intervention programme, which included a comprehensive diet based on whole grains, plant-based proteins, fruits and vegetables, as well as scheduled physical exercise, produced significant reductions in anthropometric measurements and blood pressure. Evidence shows that the intervention model can prevent high rates of obesity and abdominal fat, as well as reducing the risk of chronic non-communicable diseases (10).

Previous research studies have focused on changing eating habits and exercising to achieve a change in body mass index over time through perseverance and discipline. It should be noted that these practices also indicate the need to avoid stressors through relaxation techniques, visualisations and projections to achieve a sense of well-being in the future.

People who attend a self-healing event discover all that they have always carried inside. When they delve into the depths of their mind, they realise emotions that they had not released since childhood. There, they have the opportunity to free themselves from all those burdens that affect their physical and mental health. By the end of the event, participants have a deep sense of peace, and above all, they are aware that they create their own reality and can transform it. This generates great empowerment and peace.

Therefore, giving attention to emotion generates its liberation; this is Hekalogy. For this to happen, the human being must be in a state of mental surrender.

This enables dense energy (emotion) to move through the body, resulting in the body expressing what it feels through crying, vomiting or diarrhoea,

thus physically releasing the density of that energy.

In other words, this research work shows that there are two paths: the known path of controlling and managing what we feel, which generates more tension (stress) due to an increase in body mass in humans caused by physiological inflammation of the cellular genome, and the path of totally surrendering to what we feel.

While the study's relevance lies in recording a reduction in BMI and an improvement in emotional state in a significant percentage of participants, it also seeks to provide empirical evidence. Recognising the limitations of the lack of a control group, which undermines the ability to provide conclusive evidence, these results contribute to a path for future research with more rigorous designs. This will help to develop the emerging field of complementary medicine and neuroscience, which seeks to understand the interactions between emotional processes, unconventional practices, and objective physiological markers. However, it is important to acknowledge the limitations of this study, including the small sample size, the absence of a control group, and the short-term follow-up. These factors restrict the generalisation and statistical robustness of the research conclusions.

6. CONCLUSION

The results of this study show that emotional self-healing practices based on Hekalogy principles positively impact body mass index reduction and emotional state improvement. These effects were observed in a significant percentage of the census sample, suggesting a relationship between conscious emotional management and body regulation processes.

These findings support the hypothesis that structured, guided emotional work can generate concrete physiological effects, offering a valuable complement to traditional health approaches. Although this study was conducted during an intensive, one-day group retreat, its results pave the way for new longitudinal research to evaluate the sustainability of changes over time and explore their replicability in different populations.

Integrating tools such as emotional self-healing into preventive health programs and integrative therapies could be a significant step toward more comprehensive care focused on root causes of physical and emotional imbalance, not just symptoms.

Beyond their potential clinical relevance, these results contribute to the emerging fields of complementary medicine and neuroscience, which seek to understand the interactions between emotional processes, unconventional practices, and objective physiological markers. However, it is important to acknowledge the limitations of this study, such as the small sample size, the absence of a control group, and the short-term follow-up. These factors restrict the generalizability and statistical robustness of the conclusions.

Consequently, while the obtained data strengthen the biological and clinical plausibility of emotional self-healing's impact on beneficial changes in reducing body mass index and improving emotional state, additional research with more rigorous experimental designs, larger samples, and adequate controls is required to confirm these findings and delineate the neurophysiological mechanisms involved. If these results are confirmed, this approach could open new avenues for integrating Hekalogy and other related practices as complements to conventional health approaches, thus favoring a more comprehensive model of human well-being. Thus, this line of research can become a benchmark for future integrative health interventions, were science and awareness benefit human well-being.

Author Contributions Statement

J.C. and R.P. designed the study. J.C. and R.P. collected data. J.C. and R.P. curated and analyzed the dataset. J.C. and R.P. wrote the first version of the manuscript. J.C. and R.P. supervised the project. J.C. and R.P. arranged funding. All authors read, reviewed and approved the final version of the manuscript.

Conflicts Of Interest: All authors – none to declare. The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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Data Availability: The data supporting the findings of this study are available from the corresponding author, upon reasonable request.

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