



A GERMAN NEW MEDICINE REFERENCE

The Male Territory Conflicts

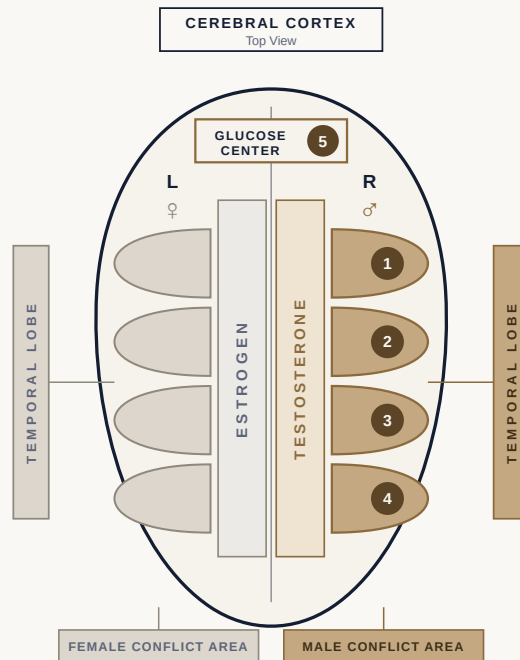
The five conflicts that register in the male conflict area, what they do to your testosterone, and the organ each one runs its program in.

BRANDON BOZARTH · THE BIOLOGICAL MAN

HOW IT WORKS

One shock. One relay. One organ.

A territory conflict is not a mood and it is not a mindset. It is a specific biological program that starts in a specific moment and runs in a specific place.



- 1 Territory loss ● 2 Territory fear ● 3 Territory anger ● 4 Territory marking ● 5 Resistance

Schematic. Markers indicate the relay group, not precise coordinates.

The moment is a shock: you were caught off guard, overwhelmed, and isolated. Dr. Hamer called this a DHS. In that instant the conflict registers in the brain, in the relay that matches the theme of the shock. From there three things run at once and they always run together: the psyche goes into conflict activity, the brain relay shows the impact, and the organ controlled by that relay starts to adapt.

For a man with normal hormone status, every territory theme lands on the **right** side. Conflicts 1 through 4 land in the right temporal lobe. Conflict 5 lands in the glucose center, in the diencephalon rather than the cortex, but it follows the same rule: right side is male, left side is female.

Because the right side is the male area, one more thing happens: **testosterone drops**. That is not a side effect. It is the adaption. Less testosterone makes you less of a threat, more agreeable, more likely to be kept in the tribe after losing ground. It is also the exact state that gets diagnosed as depression.

Losing the domain that was yours

The loss of your private or professional domain. The ground itself is gone, and you did not choose it.

ORGAN	GERM LAYER	RELAY
Coronary arteries (intima)	Ectoderm	Right insula, temporal lobe

What sets it off.

- Loss of the home: an unexpected move, a divorce, a fire, a flood
- Loss of property, or assets taken
- Loss of the professional domain: a business failing, bankruptcy, being laid off
- Loss of a hobby or an intellectual domain
- Loss of the sexual mate

CONFLICT-ACTIVE PHASE

The inner lining of the artery ulcerates. The biological purpose is to widen the vessel so more blood can move, giving you what you need to reclaim the territory. This is what produces angina pectoris, chest pain from mild to severe. It is not the heart failing.

HEALING PHASE

The lining rebuilds. Cells proliferate, edema swells the vessel wall, and cholesterol rises to carry out the repair. When the conflict relapses again and again, the cholesterol deposits accumulate. That accumulation is what gets named atherosclerosis.

EPILEPTOID CRISIS

The heart attack. It arrives three to six weeks after the conflict resolves, at the point the brain expels its edema. It is initiated in the brain, not by a blocked artery. Where the conflict ran intensely for longer than nine months, the crisis is most likely fatal, which is why conflict duration matters more than any number on a lipid panel.

A threat coming at the territory

Not the loss of ground, but danger approaching it. Something is coming and you saw it coming.

ORGAN	GERM LAYER	RELAY
Bronchial mucosa & bronchial musculature	Ectoderm (mucosa) · new mesoderm (muscle)	Right temporal lobe, sensory cortex

What sets it off.

- A threat at work: the warning, the restructure, the man circling your position
- Violence or the threat of it inside the family
- A medical diagnosis delivered as a verdict
- Childhood fear from punishment, or from something frightening on a screen

CONFLICT-ACTIVE PHASE

Ulceration in the bronchial lining, in proportion to how hard and how long the conflict has run. The purpose is to widen the airway so you can take in more air and escape. There are no symptoms in this phase, which is why men live inside it for years without knowing. Where the muscle is also involved, the fear carries a second theme, not being able to escape or act, and the muscle weakens instead.

HEALING PHASE

The tissue rebuilds. Swelling brings pain, a tickle in the chest, and coughing. This is the phase conventional medicine reads as bronchial or lung cancer. It is repair, not invasion.

EPILEPTOID CRISIS

Coughing fits with bronchial spasm. Wheezing and a long, drawn-out exhale. This is the asthma attack itself, and it happens in the crisis, not in the conflict. When the bronchial and laryngeal muscles hit the crisis together, that is status asthmaticus, and it is genuinely dangerous.

The fight inside the territory

Nobody took the ground and nothing is coming for it. You are in it, and you are fighting.

ORGAN	GERM LAYER	RELAY
Stomach small curvature, pylorus, duodenal bulb, bile ducts, gallbladder, pancreatic ducts	Ectoderm	Right temporal lobe, post-sensory cortex

What sets it off.

- Disputes at home, the argument that keeps returning to the same ground
- Feuds at the workplace
- Anger at school, in the kindergarten, on the playground, in a nursing home, in the hospital
- The extended territory: the village, the town, the country

CONFLICT-ACTIVE PHASE

Ulceration in the duct lining, proportional to the intensity and the duration. The purpose is to widen the ducts so bile moves more freely, improving digestion and giving you the energy to win the fight. Pain runs mild to severe. These organs all share one relay, which is why the anger can show up in the stomach for one man and the gallbladder for another.

HEALING PHASE

The lining rebuilds. Edema swells the tissue and the pain stays for the whole of the healing, not just the start of it. In the stomach that inflammation is named gastritis. In the bile ducts the swelling brings pressure pain in the abdomen, and if it is large enough to block the bile, that is jaundice: yellow in the skin and the whites of the eyes, dark urine, pale stool. Where the healing runs with inflammation there it is named hepatitis. Chronic hepatitis means the conflict keeps relapsing and the healing never completes.

EPILEPTOID CRISIS

Acute sharp pain, with cramps and spasms when the surrounding striated muscle goes through its crisis at the same time. This is stomach colic, or liver colic. Vomiting and bleeding come with it.

The boundary was crossed

The ground is still yours. Someone came across the line, and the line has to be marked again.

ORGAN	GERM LAYER	RELAY
Renal pelvis, calyces, ureter, bladder, urethra	Ectoderm	Right temporal lobe, post-sensory cortex

What sets it off.

- Someone intruding on the home, the property, the wider territory
- A fight at work over position or professional ground
- A partner crossing the line, or meddling where they were not invited
- Sexual abuse, or unwanted sexual contact
- Personal belongings handled without respect
- Beliefs attacked, or ongoing harassment
- For a boy: made to share his room, disputes on the playground, a sibling in his space

CONFLICT-ACTIVE PHASE

Ulceration in the renal pelvis, the calyces, and the ureter. The purpose is to enlarge the volume and widen the passage so more urine can move, because urine is how the territory gets marked. Sensitivity drops in this phase.

HEALING PHASE

The lining regenerates and the ulcers close, and sensitivity now runs high, which is the signature of ectodermal tissue in repair. Pain and a burning sensation when urinating. What gets named a urinary tract infection, or cystitis. Frequent urination, blood in the urine, and spasms of the ureter or the bladder. In a man with normal hormone status, the left half of the bladder, ureter and renal pelvis is the side controlled from the right temporal lobe.

EPILEPTOID CRISIS

A brief return to hyposensitivity while the crisis passes through. Note that renal colic is not part of this program. That belongs to the separate one that forms stones in the kidney collecting tubules, and the two get confused constantly.

Set against it, and made to comply

Strong opposition against a person, a situation, or an institution. Or being forced to do something against your will.

ORGAN	GERM LAYER	RELAY
Beta islet cells of the pancreas	Ectoderm	Right diencephalon (insulin center)

Where this one sits. Resistance is the male conflict of the glucose center, and it runs on the same rule as the four territorial conflicts: right side is male, and the female counterpart is the fear-disgust conflict. It is not itself a territorial conflict, and the relay is the diencephalon rather than the temporal cortex.

What sets it off.

- Hard opposition against a person: a parent, a sibling, a colleague, a supervisor, a doctor
- Opposition against a situation at work, at home, at school, or in the relationship
- Opposition against what an institution demands: the school, the church, the hospital, the government
- Being forced to do something against your will
- For a boy: resisting daycare or school, or standing hard against what a parent tells him

CONFLICT-ACTIVE PHASE

The beta islet cells reduce their function and blood sugar climbs. This is hyperglycemia, and it is what gets named diabetes. The purpose is to hold glucose in reserve so the muscles have the energy to carry the resistance through. Extreme thirst comes with it, the body trying to dilute the sugar. Run long enough and this is where ketoacidosis appears.

HEALING PHASE

Glucose comes back down toward normal, and then keeps going. In the later part of healing the blood sugar drops below the normal range and shows as hypoglycemia. Where the conflict keeps relapsing while healing, that low blood sugar becomes chronic.

EPILEPTOID CRISIS

Blood sugar spikes again for a short period. Acute hyperglycemia at this point can bring on a diabetic coma.

A note on the age labels. Whether diabetes shows up in the alpha-cell healing phase or the beta-cell active phase is set by gender, laterality and hormone status, not by age. From this view the split between "juvenile" and "adult-onset" diabetes carries no meaning.

Find the one that resonates

Read the five again, slowly, and watch which one your body answers to. You are not looking for the one that sounds worst. You are looking for the one you recognize.

Then go looking for the moment. Not the season, not the year, the moment. Where were you standing. Who was there. What was said. A territory conflict starts in a single instant where you were caught off guard, overwhelmed, and isolated, and that instant is findable.

When you find it, do not try to think your way out of it. The conflict is not held in your thoughts. It is held one layer underneath, in the identity you took on in that moment, the "I am" or the "I am not" that got written while you were not looking. That is the level it resolves at, and that is the whole of the work.

One caution worth stating plainly. Nothing here is a diagnosis and nothing here is a treatment. This is the biological map, and it is educational. What you do with your body and your medical care stays yours to decide.

You don't have to find it alone

I built an AI-powered GNM app to help you find which conflicts you are running and how to solve them. It lives inside Bio-Skool, alongside the full Biological Relating workshops and the people doing this work on real symptoms and real marriages. I'm in there with you.

[Find your conflict inside Bio-Skool →](#)

All biological mechanisms in this guide are sourced from learninggnm.com, Dr. Ryke Geerd Hamer's Five Biological Laws as documented by Caroline Markolin, Ph.D. Brain schematic is an original illustration.