

INTRODUCTION

THE "NEW" BIOLOGY

This is a time of synthesis - not division, fragmentation, isolation, dissection. The recent history of medicine, i.e. the last seventy years, has been only the later. Things have become so dissected, taken apart, in short specialized that definitely the forest has become lost for the trees.

Science, for sure, and most forms of "knowledge", things we learned in school, have become so analytical, so divisive, that collectively they have become the prophesied One Eyed Doe of Hindu Scripture, knowledge, information, blind in the eye of Spirit. For sure, the Source was forgotten. Science has reached its agnostic limitation. We were taught all about death in medical school, not Life.

"Modern Medicine", i.e. the medicine in vogue for the last 70 years does not treat any chronic degenerative disease. It provides drugs, surgery etc. as forms of symptomatic relief. An aspirin doesn't treat anything, it just gives relief, temporarily. A ruptured appendix should be removed obviously but what happened that caused it to rupture in the first place?

What about the cause, the FOREST, not just a description of each and every individual tree? Why did you become ill, what caused you to become ill in the first place, with a disease of such and such a name?

Very good answers to questions such as these have been around for a long time. In a very real way, we are retracing our steps back through the history of medicine in the form of the resurgence of the so called Wholistic/Alternative/Holistic/Natural/Complimentary Medicine movement. There still isn't a good word for these "Alternative" therapies in this country or anywhere else really. There hasn't been, for a very long time.

These "branches" of medicine are not specialized areas; homeopathy, acupuncture, natural childbirth, manipulative medicine, nutritional therapy, hydrotherapy, psychosomatic medicine, herbalistic and allopathic or so called modern medicine, etc., rather they all belong together. That is what Wholistic means, not Holistic but Whole-istic. You put them all back together and then they work. Use them alone, as a claim to fame so to speak, and you get what we have today, isolated bits of knowledge flapping in the breeze.

In the past this amalgam of disciplines was called *Eclectic Medicine*. Eclecticism was an outgrowth of what was called 'botanical medicine' or 'native herbalism' in the nineteenth century. The Association of Eclectic Physicians, founded in 1823, enjoys a rich history in the American fabric. As medical practice developed in America, in the years following colonization, through the Civil War and into the first decades of this century, Homeopathy, native herbalism and Eclectic Medicine dominated the medical care industry. These physicians treated 65% of the population of that period.

George Cody, a historian of naturopathy, observed in 1985:

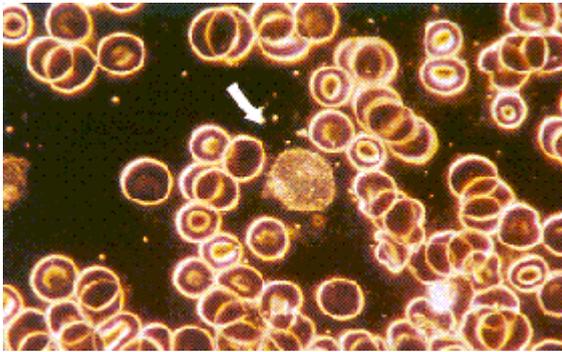
"Even in the halcyon days of the 1920s and 1930s the profession was never able to agree upon a concise philosophy. At the end of the twentieth century there was still no 'definitive definition' of the philosophical basis of natural medicine"

This is what this New Biology is about, putting all these so called different forms of medicine together. It is about finding common denominators, common causes of diseases, from among all these different forms of medicine, and making a science out of the resulting conglomeration.

This is the elusive philosophical and theoretical basis of natural medicine, of Eclecticism. These isolated bits of 'specialized' knowledge, just need put back together.

A ready point of synthesis in science is the fact that Biology, the science of Life, begins and ends with the same thing, The Protit .

The Protit



The small white dots the arrow is pointing to are the Protits. The large empty circles are red blood cells and the mottled cell in the middle is a white blood cell. The Protit is the smallest living thing, not the cell.

This is what this web page is about. The Protit is the alchemical Uroboros, the serpent forever eating its own tail. Life and death, being flip sides of the same coin, are not opposites really but compliments. You can't have one without the other or, one could say, there really is no death at all...Life goes on regardless.



Uroboros

DECELERATION OF INDEPENDENCE

When, in the course of human events, it becomes necessary for the physicians of one School to dissolve the fraternal and philosophic bonds which have connected them with another, and to assume, among the institutions of the earth, the position

to which Truth and Nature entitle them, as free thinkers and independent actors, a decent respect of the opinions of mankind, and a conscientious regard for the welfare of the human race, should prompt them to declare the causes which impel them to a separation.

I hold these truths to be self-evident, or, at least, susceptible of positive proof and absolute demonstration: That the doctrines and theories commonly entertained among men, and taught in medical schools and books, and practiced by the great body of the medical profession, and which constitute the so-called "Science of Medicine," and on which the popular practice of the so-called "Healing Art" is predicated, are untrue in philosophy, absurd in science, in opposition to Nature, and in direct conflict with every law of the vital organism; and that these are the reasons, and the only reasons, why medical science does not progress as do all other sciences; why success in the healing art bears no due relation to the advancement of all of the collateral sciences, and to the progress of intelligence among mankind; why medical theories are ever changing; why all of its assumed principles are in controversy; its hypotheses in dispute; why its fundamental rules and primary premises are wholly over looked or misunderstood; and why its application to the cure of disease and the preservation of health is so uncertain, so dangerous, often fatal, and, on the whole, so vastly more injurious than useful to the world.

The TRUE HEALING ART; on, Hygienic vs. Drug Medication. An address delivered in the Smithsonian Institute, Washington, D.C. by R. T. Trall, M.D., 1880, Present were **President Lincoln**, Rev. John Pierpont, Chairman of the Executive Committee; J. K. Herbert Esq., attorney-at-law; J. R. S. Van Vliet, Esq., of the 'National Republican'; N. B. Devereux, D. T. Smith, and W. A. Croffett, of then Treasury Department, and W. C. Dodge, Examiner in the Patent Office. This, during the Civil War when patients receiving no medicine did better than those that did, for such things as wound infections, typhoid, pneumonias, measles and dysenteries.

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THE CAUSE OF DEGENERATIVE DISEASE

Degenerative disease begins as a relatively acid condition in the tissues of the body. These tissues become oxidized, diseased and old.

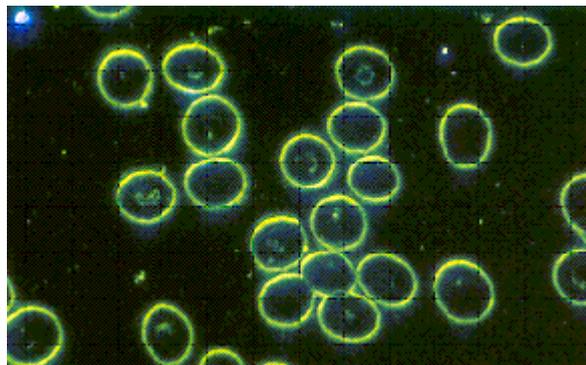
Pleomorphic organisms come out of this acid environment, from elements in the blood in order to clean up these old, diseased, tissues. Bacteria are being found in the diseased tissues of all chronic, degenerative diseases. [The Atlantic Monthly, A New Germ Theory by Judith Hooper, February 1999.](#) These bacteria are there as a result, not the cause. Louis Pasteur (1822-1895) was wrong, these organisms are not caught from the outside, they come from within.

Pleomorphism is a concept discovered in the early 1800s. Pleomorphic organisms are micro-organisms that change form (pleo-change, morph-form), viral into bacterial into fungal forms and back again. All micro-organisms change form. Grown in a hospital laboratory, under exactly the same growing conditions, a streptococcus is always a streptococcus but change something, the pH of the growth medium for example and that strep germ will change form into something else, some other micro-organism.

These germs come from inside the body, from "tiny dots" that you can see in the blood of any living thing, with any microscope. All micro-organisms, all living things come from these "tiny dots" and all living things turn back into these "tiny dots".

These "tiny dots" themselves, never die. The cell is not the smallest living thing, these "little dots" are. These "tiny dots" are called **Protits** in German and **Somatides** in French. There isn't even a name for them in the English language. Isn't that strange?

If the environment, the growth medium that surrounds the cells becomes acid, toxic, polluted, these "tiny dots" hook together into long threads and change into the viruses, bacteria and finally the fungi that clean up a corpse, if things get that bad. This is what the bacteria, germs are there for. They clean up old, diseased tissues. The germs are not the problem, the conditions, the environment they grew up in, is. Do you treat the problem or the result?



The small dots are the Protists which are constantly moving, for ever...

The large circles are red blood cells.

This is a picture taken through a Dark-field microscope so the background is black.

To treat the cause of the above is to treat this *internal milieu*, the internal environment in which these degenerative processes happen. This environment is the ocean that surrounds each and every cell. The main way this environment becomes acid is from the over consumption of protein. Protein is converted into strong acids by the body and these acids leach the minerals out of the body, out of the very bones of the body. Protein is good but all we need is 40 grams a day. The average American diet contains 200 grams! Protein is the problem, not fat and cholesterol!

In the long run, the only way to replace these lost minerals is to eat more fruits and vegetables and less acid producing food. How acid your urine and saliva are tell how far you have to go, how long it will take.

Everything that bothers you will get somewhat better with pH correction. All the myriad systems in the body are very dependent on the maintenance of stable pH. Whatever therapeutic modalities you use in addition to pH correction, will work better. All forms of medicine are helped; work better if pH balance is restored first.

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PLEOMORPHISM

Pleomorphism is a concept discovered in the early 1800's. It shows that 'germs' come from inside the body, from the "tiny dots" called of course the **Protits** or **coloids of life**. These can be seen in the blood of any living thing with any microscope.

Pleo-morphism means *many forms*, many or more (*pleo-*), forms or bodies (*morph-*). This is in contradistinction to **Monomorphism** which means one (*mono-*) body or form. Modern medicine, bacteriology, is founded on the idea of Monomorphism where once a germ is a particular germ it always stays that way. According to this way of thinking a streptococcal germ is always a streptococcus. It only has one (*mono-*) form, it doesn't change into anything else.

Pleomorphism on the other hand maintains that "germs" occur in *many* forms which begin with the Protit, which can change into a virus, which can change into a bacteria, which can change into a fungus. Any of these forms; bacterial, viral or fungal, can and do eventually, break all apart and turn back into the Protits from whence they came. It starts all over again, life, the snake forever eating its tail. The Protit never dies.

**This is a nature of life, it goes on no matter what.
A germ is 'a beginning', that's all.**



Uroboros

These Protits or colloids of life in our blood develop or change according to the condition (pH, etc.) of the blood. At some stages of their development they are outright pathogenic (make you sick) and parasitic. These are our *internal parasites*. These Protits can go in the other direction too and turn into cells that we need, see *Live Cell Therapy*. They can help regenerate organs.

The *internal parasite*, the Protit which exists in us always, is in contrast to *external parasites* with which we occasionally come in contact. This is where the germ theory actually holds relevance. This is the area of external microbes and parasites that when taken to extremes, intensifies into infectious diseases and epidemics which overwhelm the system.

Surprisingly, without having even the slightest idea of pleomorphic biology, medicine through hygiene, has accomplished much in this area. The fact is, opportunistic bugs, bacteria and viruses are all over the place, in our blood even which modern science says is not so even though they are easily seen. Some of us get sick and some of us don't. As far back as the plagues of the dark ages some lived and some died. One third of the people didn't get plague. Nobody knew why.

The reason why is that as the environment that surrounds the cells becomes *acid, toxic, polluted*, these "tiny dots", Protits, change form, into the microorganisms that clean up the garbage, dead cells, toxins and the like, that are the result of the toxic condition. This is why the bacteria, 'germs', are there.

Depending on how 'toxic' a person is determines if one can be overwhelmed by such things as plague, **anthrax**...relevent in todays world even.

When the host balance is destroyed, when the internal environment the Protits and cells live in, the *internal milieu*, becomes toxic and acid, the Protits lose their *symbiotic* (live harmoniously together) and life giving qualities and devolve downward, changing first into viruses, then into bacteria and finally into fungal forms, each stage of which is progressively more hostile to surrounding tissue cells.

Germ, all microorganisms, (viruses, bacteria, fungi and everything in-between) are the result, not the cause of disease!

**Louis Pasteur was wrong!
His idea of the bacterial cause of disease was wrong!**

**If "germs" are there as a result, not a cause,
then to treat the resultant germs with antibiotics is, in theory and in fact,
wrong!**

This basic misconception about disease effects all aspects of medicine.

This is why this is a "new" ... biology.

Louis Pasteur is said to have said on his death bed that really he had been wrong about his "Germ Theory" of disease. He said then, in so many words, that; it is not the germ that is the problem, it is the internal environment, the *internal milieu* that allowed the germ to develop in the first place that is the problem.

I'm not saying that antibiotics don't have their place in today's medicine. They do do course but, I would say, only when all else has failed, CODE BLUE, CARDIAC ARREST, like that.

Add to this the error of **William Harvey**, who stated in **1651** that the cell is the smallest unit of life and the magnitude of this issue becomes even more apparent. That was more than 300 years ago!! and still, to this day, this fallacy has not been corrected even though **Béchamp (1816-1908)** demonstrated that the smallest unit of life was what he called the *microzyma* and **Enderlein** again published in **1921** and **1925** that the smallest unit of life is not the cell but the *Protit*.

One should treat the cause, not the result. The idea of *anti-biosis*, anti-biotic (anti-life) is one way. The opposite of anti-biosis is **PRO-BIOSIS** (for-life), which is what **Eclectic Medicine** is about. It's not "alternative", it's Eclectic. "Alternative medicine" is just a popular anachronism for Eclectic. None of this is new and it isn't alternative.

As these "little dots", Protists, change form, they become independent and no longer live in harmony and in support of their host body. As they develop their individual form, they create their own metabolism and waste products of that metabolism, acids, which are harmful to the local body fluids. These toxic, acid, waste products cause pain and inflammation and support the further growth of the offending microorganism. Finally, this 'local' process, which develops in the body's 'weakest organ', effects the *Whole* body.

It is *not* the organisms that make you sick,

**it is the *waste products of the metabolism* of those organisms
that make you sick.**

THE ORGANISMS ARE THERE AS THE *RESULT*, NOT THE CAUSE.

"In reality, it is not the bacteria themselves that produce the disease, but we believe it is the chemical constituents of these microorganisms enacting upon the unbalanced cell metabolism of the human body that in actuality produce the disease. We also believe if the metabolism of the human body is perfectly balanced or poised, it is susceptible to no disease." (from the Annual Report of the Board of Regents of The Smithsonian Institution, 1944, The Rife's Microscope, The Smithsonian Report, 1944).

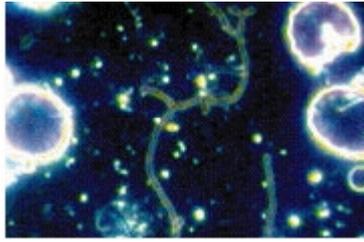
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These disease processes, these changes in the blood, are difficult to fathom at first as they make themselves known in the beginning as **functional disturbances** (effecting the functions but not yet the structures of the body) in the most diversified organs such as by;

headaches, high or low blood pressure, inability to maintain chiropractic adjustment, feeling poorly, unmotivated attitude, lack of appetite, drab complexion, coated tongue, wounds in the mouth, pimples, sores, hoarseness, runny noses and the like, ear noises, diarrhea, lowered capacity for seeing and hearing, depressions, weak, concentration or poor memory.

Later, these disturbances manifest as the chronic diseases we know so well today.

Medicines based on these ideas have been available and well researched in Europe for the last 150 years. Most of these medicines are available in this country now. There is more known about these older medicines than about modern drugs, simply because these ideas have been around for so long. Just because these scientists lived in the 1800s or before doesn't mean they were stupid



The small dots again are the Protits, the large white rings, red blood cells.
The long organisms in the middle of the slides are bacterial forms that the Protits have turned into.

Modern Biology claims this is not so, even though it is there for anyone to see.

Why things are like this is explained in the topic *HISTORY - THE HISTORY OF THE PLEOMORPHISM/MONOMORPHISM DEBATE* (after the topic Monomorphism below).

MONOMORPHISM

Monomorphism is the cornerstone of **Robert Koch's** (1843-1910) and **Louis Pasteur's** (1822-1895) Germ Theory of disease. This theory professes that disease has a microbial cause that is "caught" from the outside;

"that there are differences among pathogenic bacteria (ones that can make you ill), and each has a constant nature...each distinct bacterial form corresponds to a specific disease and that the *form of this microbe always stays the same*, **monomorphism**, and causes the same disease however often the disease is transferred from one animal to another, the kind always remains the same and never changes into other kinds". (*Robert Koch*, 1987, pg. 48)

In 1878 Robert Koch wrote *Etiology of Wound Infections* which was the beginning of the Germ Theory of Disease. Where Pasteur's views were shaped by the study of fermentation, Koch was affected by his contact with wounded soldiers. He noted that the bodies of animals that die of artificially infected wound diseases (pus from an infected animal injected into a healthy one) invariably contained many bacteria...In each case a definite organism corresponded to a distinct disease...and that for every individual, traumatic, infective disease, a morphologically distinguishable microorganism could be identified.

In 1880 Koch built on an essay of the relations between microbial diseases and their causes from the work of Jacob Henle, his professor of anatomy. These became known as the **Koch-Henle Postulates**.

The following are these postulates which revolutionized medical epidemiology at the turn of the century, by laying out the standard proof of infectivity to the present day. The postulates dictate that a microbe must be:

1. found in an animal (or person) with the disease,
2. isolated and grown in culture and
3. injected into a healthy experimental animal, producing the disease in question; and then recovered from the experimentally diseased animal and shown to be the same pathogen as the original.

* * *

By the early twentieth century the whole landscape of medicine had changed. Most of the common killer diseases, including smallpox, diphtheria, bubonic plague, flu, whooping cough, yellow fever, and TB, were understood to be caused by pathogens. Vaccines were devised against some, and by the 1950s antibiotics could easily cure many others.

By the 1960s and 1970s the prevailing mood was one of optimism. At least in the developed world, infectious diseases no longer seemed very threatening. Far more scary were the diseases that the medical world said were not infectious: heart disease, cancer, diabetes, and so on. That these diseases are now considered to be "infectious", is what this web page is about.

Also, no one foresaw the devastation of AIDS, or the serial outbreaks of deadly new infections such as Legionnaire's disease, Ebola and Marburg hemorrhagic fevers, antibiotic-resistant tuberculosis, "flesh-eating" staph infections, and Rift Valley fever.

"The infectious age is, we now know, far from over. Furthermore, it appears that many diseases we didn't think were infectious may be caused by infectious agents after all. These include stomach ulcers, heart disease. The first cancer virus discovered in 1910 called the Rous sarcoma virus, certain leukemias, lymphomas, nasopharyngeal cancer common in south China, cervical cancer, stomach cancer, liver cancer, Kaposi's sarcoma with Herpes virus 8, mammary-gland tumors in mice, childhood obsessive compulsive disorder, Sydenham's chorea which is a rare complication of streptococcal infection. Streptococcal antibodies find their way into the brain and attack a region called the basal ganglia, causing characteristic clumsiness along with obsessions. Schizophrenia has long been considered to be possibly "infectious" in nature."

The Atlantic Monthly, A New Germ Theory by Judith Hooper, February 1999, pg. 44.)

The catalogue of suspected chronic diseases caused by "infection"/bacteria to David A Relman, an assistant professor of medicine, microbiology, and immunology at Stanford University, now includes;

"sarcoidosis, various forms of inflammatory bowel disease, rheumatoid arthritis, lupus, Wegener's granulomatosis, diabetes mellitus, primary biliary cirrhosis, tropical sprue, and Kawasaki disease. Likely suspects include many forms of heart disease, arteriosclerosis, Alzheimer's disease, most major psychiatric diseases, Hashimoto's thyroiditis, cerebral palsy, polycystic ovarian disease, and perhaps obesity and certain eating disorders. Multiple sclerosis has been linked to the human herpes virus 6, the agent of Roseola infantum, a very mild disease of childhood" (ibid.)

* * *

Where do these bacteria come from...?

To modern science, this is still an *unanswered* question.

* * *

Regarding **stomach ulcers**;

In 1981 Barry J. Marshall became interested in incidences of spiral bacteria in the stomach lining. The bacteria were assumed to be irrelevant to ulcer pathology, but Marshall and J. R. Warren noticed, serendipitously, that when one patient was treated with tetracycline for unrelated reason, his pain vanished, and in endoscopy, revealed the ulcer was gone.

An article by Marshall and Warren on their culturing of "unidentified curved bacilli" appeared in the British medical journal, *The Lancet* in 1984. No one listened until finally Marshall personally ingested a batch of the spiral bacteria and came down with painful gastritis, thereby fulfilling all of Koch's postulates.

There is now little doubt that *Helicobacter pylori*, found in the stomachs of a third of adults in the United States, cause inflammation of the stomach lining. In 20 percent of infected people it produces and ulcer. Nearly everyone with a duodenal ulcer is infected. *H. pylori* infections can be readily diagnosed with endoscopic biopsy tests, a blood test for antibodies, or a breath test. In 90 percent of cases the infections can be cured in less than a month with antibiotics.

* * *

Where do these bacteria come from?

You don't "catch" them, so *infectious* is not the correct word.

* * *

Regarding **arteriosclerosis**;

It has recently been discovered that arteriosclerosis is also a bacterial process. Notice I did not say, 'caused by bacteria'. **The plaques of 99% of patients with hardening of the arteries have the bacteria *Chlamydia pneumoniae* in them.**

According to *The Atlantic Monthly*, Feb. 1999, *Chlamydia pneumoniae* is a newly discovered bacterium that causes pneumonia and bronchitis. The germ is a relative of *Chlamydia trachomatis*, which cause trachoma, a leading cause of blindness in parts of the Third World. *C. trachomatis* perhaps more familiar to us as a sexually transmitted disease that, left untreated in women, can lead to scarring of the fallopian tubes.

Pekka Saikku and Maija Leinonen of Finland discovered the new type of chlamydial infection in 1985 though its existence was not officially recognized until 1989. Saikku and Leinonen found that 68 percent of Finnish patients who had suffered heart attacks had high levels of antibodies to *C. pneumoniae*, as did 50 percent of patients with coronary heart disease, in contrast to 17 percent of the healthy controls.

While examining coronary-artery tissues at autopsy in 1991, Allan Shor, a pathologist in Johannesburg, saw "pear-shaped bodies" that looked like nothing he had seen before. Cho-Chou Kuo, of the University of Washington School of Public Health, found that the clogged arteries were full of *C. pneumoniae*. Everywhere the bacterium lodges, it appears to precipitate the same grim sequence of events: a chronic inflammation, followed by a buildup of plaque that occludes the opening of the artery (or, in the case of venereal Chlamydia, a buildup of scar tissue in the fallopian tube).

Recently a team of pathologists at MCP-Hahnemann School of Medicine, found the same bacterium in the diseased section of the autopsied brains of seventeen out of nineteen Alzheimer's patients and in only one of nineteen controls.

Whether antibiotics help any of these diseases or not remains to be seen. The first major clinical trial is under way in the United States, sponsored by the National Institutes of Health and the Pfizer Corporation: 4000 heart patients at twenty-seven clinical centers will be given either the antibiotic azithromycin or a placebo and followed for four years to gauge whether the antibiotic affects the incidence of further coronary events.

Whether the antibiotic helps coronary heart disease or not does not explain where these bacteria come from and thereby how to effect a *causal* or real cure. That this issue of *Chlamydia* in the tissues, is still being pursued by the modern pharmaceutical firms as "infectious" in nature, amenable to the treatment with antibiotics and/or vaccines, is another example of how entrenched Pasteur's and Koch's ideas are in the whole of medicine from the profit orientation of the petro-chemical pharmaceutical companies on down.

The above reference to the article from *The Atlantic Monthly*, does add to its credit,

"Even if heart patients can be shown to have antibodies to *C. pneumoniae*, and even if colonies of the bacteria are found living and breeding in diseased coronary arteries, is it certain that the germ caused the damage? Perhaps it is there as an innocent bystander, as some critics have proposed."

As will be shown, the above bacteria, *Chlamydia pneumoniae* and *Helicobacter pylori* come out the red blood cells themselves. The blood is teeming with microorganisms, especially if it sits on the microscope slide for a few hours. You can watch this process under any microscope, anywhere, anytime.

* * *

This is a funny situation really. Modern, allopathically trained physicians *can't* see these things, literally. You can see all these organisms in the blood with any microscope, so its not a matter of "seeing is believing". More, it's a matter of "**believing is seeing**", so you can even *dare* to take a look in the first place.

In summary:

1. The blood is not sterile, as we were led to believe after the Second World War with Hitler's ideology of the creation of a 'pure' blooded race.
2. The cell is not the smallest living thing.
3. Organisms come of the blood and tissues to decompose those tissues when they can no longer live and support their own metabolism within the environment they find themselves in, in their *internal milieu*.
4. These same organisms can also come out of the blood and regenerate new tissues and organs; depends on which way we want

to go. One needs a source of Protits in the diet, organ meats provide these, organ specific Protits/Somatides. (See *Live Cell Therapy*)

THE HISTORY OF THE PLEOMORPHISM/ MONOMORPHISM DEBATE

WHY PLEOMORPHISM IS UNKNOWN TO MODERN MEDICINE

A dichotomy in medical speculation, an unresolved philosophical conflict, has existed from ancient times to the present. This conflict is between two theories known traditionally as **Empiricism** and **Rationalism**.

"While this conflict can be discerned in the earliest writings of the Hippocratic Corpus, from the fifth century BC, the names Empirical and Rationalist became current in Rome at the beginning of the Christian era - designating groups of physicians competing with one another ideologically and economically." (*Divided Legacy*, Harris Counter, pg. xv.)

The main form of medicine practiced today is of the **Rationalist** or **Rationalist/Methodist** point of view. Rationalism involves a mechanistic or chemical understanding of the human organism. It maintains that *life* itself can be explained by physics and chemistry, or, more generally speaking, by mechanics. Rationalism maintains that there is no essential difference between the structural chemistry of life and that of inanimate nature.

This idea of the body viewed as a machine composed of many little machines is contrary to the *Empirical* view that the laws governing the living organism differ from those of lifeless matter. This concept is called **Vitalism**.

The person as a whole is something different from a collection of viscera; the wholeness gives some extra, if undeniable, quality to the individual organs. Today we pay for our knowledge of the parts in ignorance of the whole.

Vitalism maintains that;

"the organism is reactive, at all times coping with, and attempting to overcome, the stresses which impinge upon it from outside. It behaves purposively, the nature and form of its reaction being determined by the specific environmental stress encountered. It responds to challenge, which no aggregate or assembly of non-living substances can ever do". (*Divided Legacy*, Harris Counter, pg. xvii.)

In 1946, the quantum physicist Erwin Schroedinger pointed out...

"that biological material has a totally different character from all other states of matter density of life - that is, the information stored per unit volume - and that of any inorganic system that has not been produced by living forms...The silicon chip must use many orders of magnitude more atoms to store the same amount of information as a gene."

This is vitalism, *Quantum Vitalism*.

According to Harris Coulter, no perfect Rationalist therapeutic doctrine has ever been devised. Even Galen, who of all physicians in history worked hardest at theoretical consistency, left a few loose ends. But the formulation which emerged in the late nineteenth century - the **specific bacterial disease** treated by the '**contrary**' medicine - seemed to its devotees an almost unblemished depiction of the Rationalistic reality. The above is what is what 'modern', allopathic medicine has become.

The microbe and the Germ Theory of Disease became a new organizing principle in medicine, bringing much scattered clinical data together into a series of new *specific* entities with some cures, **specific cures**. The 'germ theory' was bolstered by the doctrine of 'monomorphism' - meaning again that microbial genera and species are fixed and eternal, that the form of each microorganism associated with a specific disease always stays the same and always causes that same disease.

"Monomorphism was above all, a practical response to an emergency situation in bacteriology. This concept of disease, emerged in a context of intense anxiety over the social depredations inflicted in every country in Europe and the United States by a series of diseases whose very names - *tuberculosis, diphtheria, typhus, cholera*--were chilling reminders of human mortality," (*Divided Legacy*, Harris Coulter, pg. 37)

More to the point;

"involved in the concept of Pleomorphism was the role and importance of the **host organism - THE PATIENT!** Microbes altered their forms *in response to the patient*, in response to the diet, environmental stresses the patient encountered, what poisons the patient consumed etc.." (ibid.), Harris Coulter)

Such ideas have little to do with the doctor.

Pleomorphism meant that the **host organism or patient was an active participant in infection and disease** - in contrast to Koch and Pasteur and the monomorphists who held the microbe to be all-powerful, the host organism a passive victim. Pleomorphism meant downgrading the microbe, since the host, by resisting the latter's onslaught, could alter its characteristics and make it return to a normal form as again. **The patient had control over the bacteria, not the other way around.** *The microbes are the result, not the cause of disease.*

Even the common "communicable" diseases, e.g. strep throat or chickenpox, can not take hold, grow, if the *internal milieu* is not conducive to their reproduction. As stated before, one third of people in Europe did not get bubonic plague. In treating cancer with isopathic medicine, for example, one does not attack the tumor at all, instead one changes the environment, the *internal milieu* that caused the cancer in the first place.

What this all means then, this pleomorphism/monomorphism controversy, is that at its most fundamental level it has socioeconomic dimensions that still effect us profoundly today.

"Accepting Pleomorphism meant acknowledging the *host organism's, the patient's capacity to defend itself (him or her) against, and dominate, the microbe.*

Monomorphism, on the contrary, enhanced the role of the microbe in disease, and consequently *that of the physician who combats the microbe.* **This is the principal reason for the instinctive hostility of the majority of physicians to Pleomorphism and Whoistic/Alternative Medicine in general."** (*Ibid.* pg. 39)

This gives the responsibility for health back to the patient...

if they want it!

Pleomorphism has been a great threat to this "*control*" factor. This *control factor* means;

"control of the disease with poisons that need monitored and controlled, controlling therefore, the patient and their pocket book." (*Ibid*, pg.39)

The phenomena are forced into categories which can be manipulated to make a living from the practice of medicine. The monomorphists have identified their doctrine with science itself, as science itself, that Monomorphism is a law of nature, which it is not. This viewpoint has, through the years, taken on such an aspect of truth that to question it now seems a scientific sacrilege.

The followers of Koch proclaimed Monomorphism with 'religious fanaticism', stated Max Gruber in 1885. F. Loehnis stated in 1922 that the intransigence and verbal violence displayed by the various factions in this conflict resembled certain historic theological quarrels.

This battle has been going on for a long time!

For all these reasons, Monomorphism was at first excessively rigid, even dogmatic. Rene Dubious states that Koch and Pasteur; "overestablished" the doctrine of the specificity of disease causes and that blind acceptance by several generations of bacteriologist of the dogma of constancy of cell forms and immutability of cultural characteristics discouraged for many years the study of the problems of morphology, inheritance, and variation in bacteria.

"Upon clear contemplation, not only the cancer problem but the entire pathology, as taught by school medicine, have become unsustainable. In any case, it is extremely revealing of the insight

that Prof. Sauerbruch, in following a series of cancer patients he treated isopathically (with pleomorphic medicines) in his hospital at the Charite and who, subsequently, in the closing years of his life again and again had pointed out that:

"IF ENDERELEIN, AND NASSONS ET AL, ARE CORRECT, THEN WE CAN THROW OUT OUR ENTIRE LITERATURE".

(*Blutuntersuchung im Dunkelfeld, nach Prof. Dr. Günther Enderlein, pg. 77, 1993, Compiled by Dr. med. Maria M-Bleker*)

The consequences of this are profound.

* * *

Also, there are many problems that monomorphism has not been able to explain. **Bacterial resistance** to antibiotics is one that is becoming quite critical in today's world. The bacteria don't 'mutate' into a drug resistant form, they just change, evolve, de-evolve. There is a big difference between the two forms of change. Mutation occurs rarely, Pleomorphism occurs all the time.

Another problem has been microbiology's inability to classify microorganisms in proper families and the like, genera and species because the organisms do change form. Despite the inability of a century of bacteriological research to define the boundaries of these supposed genera and species, the suggestion is never heard that the search for them should be abandoned. The monomorphist conviction that genera and species do exist somewhere still retains a peculiarly tenacious hold.

In school we only cultured bacteria on *very particular* growth media. For example, all the strep "germs" in hospital microbiology labs anywhere are grown on blood agar (sterile human or rabbit blood mixed with agar). Therefore all the germs grow the same way, all streptococcal bacteria look like little round balls in strings, *if* they are grown on blood agar, at a very specific pH's, pH 7.6 - 7.8, and temperatures. Change any of these conditions, the pH etc. and the germs change form.

According to Enderlein's formulations, the protits which are used as medicine actually are grown on a culture medium composed of a broth made of *asparagus and agar*.

**In medical school
we never grew anything on an asparagus/agar broth so,
we never saw protits!!!**

**What you see
is determined by *how* you look at something.**

Is this *science*?

* * *

The thing is, that to classify all the different forms that bacteria can and do assume, in the terms of contemporary microbiology would be a taxicological (taxonomy- the science of classification) nightmare. We knew in school that syphilis microbes could grow as fungal forms, on *old* culture plates. These plates were just ignored and thrown away.

To say that the above syphilis organism began as a protit, somewhere, sometime, in some other generation even, and then went through all the stages that it would take to end up on an old culture plate in some microbiology lab, would require an impossible classification system, if done in the mono-morphistic way.

This begs a **quantum system of classification**, like the definition of vitalism given by Schroedinger above.

(As an aside, when these organisms do change form, for example when the protit changes into a virus, well, it just changes, *instantaneously* - as if it made a quantum jump. You have to watch awhile though, through the microscope, to see this.)

"If Pleomorphism were correct, *scientific investigation of bacteria would be an impossibility*. One grasps one's head to make sure it is still on the shoulders. The whole structure of our science threatens to collapse." (F. Loehnis, 1922)

Winogradsky in (1930) called pleomorphism;

"chaotic...truly, the whole of a researcher's lifetime would hardly be sufficient to follow directly all of the transformations indicated by [Felix Loehnis]."

Hans Zinsser in 1932 stated that;

"If the pleomorphic surmise is a correct one, *the entire structure of our attitude toward the biology of disease must be changed*...If these conclusions are correct, this will bring about a **revolution in biology**...At the present time it is dangerous for the progress of bacteriology to accept this work until it has been satisfactorily demonstrated...Nothing short of absolute proof should be accepted or we may risk making research more difficult than it already is."

To this end, the French microscopist and bacteriologist, Gaston Naessens has described the whole cycle of the Somatid/Protit, maintaining that all bacteria are derived from a single Somatid/Protit.

"Naessens demonstrates and describes each such stage, with return to the starting point, thus meeting an earlier objection as to the idea of a bacterial life cycle. In effect this view rejects all bacterial classification. The French have a proclivity for Pleomorphism, are more radical, and also more theoretical, and contend that the whole of the earth's microbial life constitutes a single collection of genetic material, "GENOME", (the self reproducing portion of a cell),

adequate to supply every microbial genus and species." (*Divided Legacy*, Harris Coulter, pg. 197)

Sonea and Panisset, representing the French view, maintain that;

"each microorganism has access to this genome (genetic pool) and borrows from it genes as needed - employing conjugation, transformation, transduction, and other mechanisms of gene transfer which are still incompletely known. Genes are relinquished when environmental circumstances no longer require their use for survival." (*Ibid* pg. 196)

The German view represented by Günther Enderlein is not much different. Enderlein finds that all microorganisms originate from a Protit that, in its culminant and most degenerative phase, turns into the fungus *Mucor racemosus*. In going from the original Protit to the fungal form, all known bacteria are manifested, if the conditions for their manifestation, are right. This fungus then, *Mucor racemosus*, is the end, of the beginning. After it has decayed all the organic matter present it disintegrates back into the Protit it came from.

* * *

Of all the impediments to the acceptance of Pleomorphism: *Rationalism vs. Empiricism*; the need for *Magic Bullets, specific cures* and disease entities in the face of the epidemic type diseases prevalent at the end of the last century; the "*control*" factor consisting of the contradiction between the patient healing his or herself and the doctor doing the job with allopathic, potentially dangerous drugs; the *religious fanaticism* and *intransigence* of the monomorphists; the inability of modern science to *classify microorganisms* into families etc. and the other inconsistencies contained in the monomorphist 'science' including drug resistance; of all these impediments I feel the most important one is the so called "**complexity**" factor.

"The phenomena are forced into categories which can be manipulated *and named, to make a living from the practice of medicine, as easily as possible.*" (Harris Coulter)

It isn't complex.

You just need to know more than one form of medicine.

LIFE

Here is **what life is, physical life**, and where the power which "animates" it comes from. The Protits of Enderlein are the smallest of living things but there is some point in space and time where even these were begotten from something or 'somewhere' else. Even if the cell were the smallest living thing then where did the first cells come from? This question has never been answered.

The first individual to actually catch a glimpse of this occurrence was Anton Leeuwenhoek who lived in the 17th century. He had ground glass to create the first microscope. In observing some rainwater he collected, he made note that there were teeny creatures moving about. Wondering where they came from, he did an experiment. He collected clean fresh rainwater and sealed it in pipettes. At first, nothing was in the water. Hours and a few days later, nothing still was in the water. But on the fourth day, all of a sudden, little teeny creatures (Protits) appeared. Where did they come from? Was it spontaneous generation? What the germ theory failed to explain then, and fails to explain to this day, is the question; from where exactly do germs come? Where and what is the **mother-father microbe**?

Leeuwenhoek took his research to Robert Boyle, the father of chemistry as we know it, and to Sir Isaac Newton who wrote many of the principles of physics. They did not believe that life could beget from light or in their way of thinking, from nothing. This was a time when the church played a big role in every major decision that was made. To have life you must have procreation, a mother-father union, sex. Since there was no mother or father that created Leeuwenhoek's teeny creatures, his observations were surely flawed, and they were dismissed. Since they had no concrete evidence to answer the question, they left it unanswered and it remains unanswered to this day. In any textbook of science, medicine or biology, there is no explanation of **where the cell, life, comes from** and this is where a new paradigm unfolds.

This new paradigm is Wholistic, pleomorphic and ever changing. It is **Holographic**. The **mother-father microbe is of course the Protit**, which is physical. It is asexual, polypotent (can turn into any life form) and immortal. Every speck of Life from the Protit on up is a holographic projection into this time and space of a Power which is not physical, a Power that manifests as life.

A Power is the ability to accomplish something, in this case Life. What follows is not about what this Life manifesting Power is, it is about where it comes from and how It gets into this three dimensional, material world we find our selves in.

From *Do No Harm, Writers and Research*, by Charlie Pixley; Gaston Naessens has made the following observations concerning his Somatid/Protit:

"Composition of the Somatid: It is probably the link between energy and matter. Energy can take many forms. The Somatid may be the link between the biological sciences and the physical sciences."

According to George Merkel Protits are;

"composed of tiny, pyramid shaped **crystals of ATP**, adenosine triphosphate, the chemical fuel that powers the machines of our bodies. ATP is the energy molecule of the body, the muscles 'burn' ATP when they contract. These crystals are what spawned in the oceans of all worlds to transduce Life down from the bi-directional electromagnetic wave structure in the scalar potential of vacuum". (Genesis II, George Merkel, pg. ii)

These Protits are the physical elements that transduce the energy called Life from the infinite, scalar potential of vacuum, down into this three dimensional, physical world where they physically manifest, pop into existence, protits, for ever, always moving, always, an infinite source of new Protits/Somatides. Where do they come from, what Power keeps creating them, what energy keeps them moving, for ever? We are immersed in a sea of infinite energy called here the scalar potential of vacuum, a Power that is beyond our...it can't even be discussed. This **scalar potential of vacuum** is the electromagnetic potential of vacuum which is;

"the ZERO POINT ENERGY, the energy of nothingness, of vacuum, of chaos. This is the energy that holds all this corporeal existence together. It is Free Energy and it is infinite." (*Tapping The Zero Point Potential*, Moray B. King, pg. iii)

This **energy of nothingness** is completely random energy, incoherent. The energy of vacuum is totally chaotic, unorganized, unmanifest. There are no harmonics or chords in it's chaos. Quantum theory predicts a whole spectrum of virtual particles spanning *every possible wavelength* which is then, by definition, infinite. The higher the wave length the more energy contained in it. Calculating it this way, by adding up all the energy of these virtual particles, the total energy comes out to be 'infinite' or at least, the calculated energy is roughly 120 orders of magnitude larger than the energy contained in all the matter in the universe. That means you take all the energy contained in all the matter in the universe and add 120 zeros to it to get the total vacuum energy!

To **cohere this energy is to organize it into harmonics which manifest as everything we know and see**. This of course includes Life which is what we are talking about here. Out of this sea of infinite energy comes the Protit/Somatid which manifests all physical life.

In the last two chapters of Misner, Thorne and Wheeler's *Gravitation* is the statement that in quantum mechanics there existed an all-pervading energy imbedded in the fabric of space consisting of fluctuations of electricity. The term for this energy, the **zero-point energy**, came from the equations of quantum mechanics in the 1930s. Zero-point refers to the fact that these fluctuations persist even at zero degrees Kelvin (the point, temperature at which all molecular motion stops) and therefore are not thermal in nature. (C. Misner, K. Thorne and J. Wheeler, *Gravitation*, W.H. Freeman and Co., 1970)

In the 1930's Dirac derived the idea that space, vacuum consisted of a virtual sea of fluctuating energy that could manifest electron-positron pairs. The random electrodynamics theory of Boyer mathematically describes how the zero-point energy oscillates in its interaction with matter. In this theory Heisenberg's

Uncertainty Principle allows the Zero-point energy to produce **Brownian motion**, relevant here as the motion of the Protit has been ascribed to Brownian motion.

Wheeler's Geometroynamics showed that the energy density of this "nothingness", of space, vacuum, was enormous, 1093 grams/cm². The energy density of one cubic centimeter, 1 cm³, of matter, contains energy on the order of 10¹⁶ grams/cm², that from Einstein's equation, $E = MC^2$. According to this calculation, there are 77 orders of magnitude more energy contained in 1 cm³ of vacuum than in 1 cm³ of matter. That means there are 1, with 77 zeros after it, times more energy in vacuum than in matter. **It takes more energy to hold matter together than the amount of energy contained in the matter itself.** That only makes sense.

"Quantum mechanics showed that this energy was constantly interacting with matter and the elementary particles in what is called **vacuum polarization**. Quantum electrodynamics shows all particles are intertwined in a vacuum polarization interaction with the zero-point potential and shows how the interaction yields the mass of an elementary particle." (B. Toben, J. Sarfatti, F. Wolf, *Space-Time and Beyond*, E. P. Dutton, New York, 1975)

Concerning this Power of Creation that we have been talking about, since 1991 some very startling discoveries have been made in the fields of astrophysics and cosmology. According to the Big Bang Theory the universe was, at the moment of creation, all clumped together in one 'place'. From there it exploded outward and has been expanding ever since. A basic premise of this idea was though, that one day all the gravity of everything in the universe would start to pull all the expanding stars back together. The expansion would stop and then the universe would start to contract, ending in a giant crunch.

Discoveries in this decade though have shown that the above idea is not happening. In fact the **expansion of the universe is actually accelerating with time!** In the beginning the universe was expanding much slower than now so that distant supernovae (stars that explode) appear to be 25% fainter than expected, assuming that the universe had been expanding at the same rate since the beginning.

"...an explanation of the unexpected faintness of distant supernovae is that they are farther away than their red shifts suggest." ("Surveying Space-Time with Supernovae," by Craig J. Hogan et al; SCIENTIFIC AMERICAN, pg. 51 January 1999.)

Red shifts show how far away stars are and if they are further away than expected they must be expanding away faster than expected. What strange force is pushing the universe apart?

"According to Einstein's theory, the expansion (of the universe) can speed up if an exotic form of energy fills empty space everywhere. This strange "vacuum energy" is embodied in Einstein's equations as the so called **cosmological constant**. Unlike ordinary forms of matter and energy the vacuum energy adds gravity that is repulsive

(antigravity) and can drive the universe apart at ever increasing speeds (Surveying Space-Time Supernovae," by Craig J. Hogan et al; SCIENTIFIC AMERICAN, Pg. 51 January 1999; and "Cosmological Antigravity," by Lawrence M. Krauss, pg. 52).

The energy associated with this energy **does not depend on position or time (or temperature as above), hence the name "cosmological constant"**.

IT IS EVERYWHERE/ALWAYS.

The force caused by the constant operates even in the complete absence of matter or radiation (vacuum energy). Therefore, its source must be a curious energy that resides in empty space, even the space in front of our noses. The cosmological constant, **like the ether**, endows the void with an almost metaphysical aura.

"Physicists Paul A. M. Dirac and later Richard Feynman, Julian S. Schwinger and Shinichiro Tomonaga showed that empty space was more complicated than anyone had previously imagined. **Elementary particles, it turned out, can spontaneously pop out of nothingness and disappear again.**"(Exploiting Zero-Point Energy, by Philip Yam; SCIENTIFIC AMERICAN, December 1997.) "The aggregate energy represented by these **'virtual' particles**, like other forms of energy, could exert a gravitational force, which could be either attractive or repulsive depending on physical principles that are not yet understood."

We live in a sea of infinite energy. Where there is energy, there is gravity but it turns out that the gravity associated with this energy that is pushing the universe apart is, by nature repulsive.

**It is antigravity.
It is not heavy, it is *Light*.
It creates *life* too.**

* * *

**This energy is infinite,
is pushing the universe apart at an ever increasing rate,
always creating new space, time, matter and energy to fill the resulting
central 'void'.**

**Everything animate and inanimate comes from it.
It is conscious; knows what It is doing, where It is going.**

**It is *alive*,
never dies and is always creating...
universes never ending, worlds without end. Amen.**

* * *

**This is the same 'POWER' or FORCE that animates the PROTIT,
that keeps it alive forever.**

* * *

This puts a rather more optimistic philosophical slant on our existence than the one of being ending in a big crunch.

Where does this energy come from, where is this sea of infinite energy? It does not come from 'this world', this three dimensional existence we live in. Recent experiments have shown that the brightness of the zero-point energy is independent of the existence of reflectors and absorbers. This shows that zero-point energy does not arise from an electromagnetic propagation in our three dimensional space. **It comes from and returns to the fourth dimension and beyond**, all mathematically known and proven with science's giant cyclotrons and computers. These machines are proving the existence of "Spirit", other dimensions, the undeniably indefinable...

Computers can 'think' in 12 dimensions where we can't and by being able to do this, all 'anomalies' in Einstein's equations were resolved. These anomalies were a big problem for Einstein as many of his equations ended with a final answer of zero or infinity, that was the anomaly. These were not satisfactory answers but with the advent of computers that could 'think' in twelve dimensions, this problem was solved. This was a big problem for Einstein. According to current science we live in a ten or twelve-dimensional existence;

"This zero-point energy pops into this third dimension in the form of the electron-positron pairs or tachyons (super fast subatomic particles) which sustain and nourish us." (*Genesis II*, George Merkel.) These are, "scalar waves with opposite oscillation and spin that braid into one single photon, quantum. **The photon is an intermediate between particle matter and Free Energy** and then pairs of photons braid into the electron and electrons braid into protons and neutrons."

* * *

This energy starts out as **LIGHT**;

"Luminous quanta of divine intelligence thrilling out in infinite vibrations of accordance breaking joyously into the rhythm of greater and higher waves of illumination intensifying towards the growing light of a self-existent Knowledge spontaneously awaking to itself as the SUN OF TRUTH receiving the world from the murky depth of an obscure physical bondage into the enlightened height of spiritual freedom by the transforming radiation of ITS glorious Arc-Light."
(*Siva Kalpa*; September 19, 1966, published by The Foundation of Revelation, 59 Scott Street, San Francisco, CA.)

Out of "no where", and under the direction of divine intelligence it organizes. This appears to be contrary to the second law of thermodynamics which states that everything is falling apart. Yet, if the universe is expanding at an accelerating rate due to the continuous formation of 'new' space and matter then perhaps even this second law must be questioned. Life is created. It is happening all the time and is continuous. Life is everywhere. It is pushing the universe apart at a faster and faster rate. Suns form, all the elements, all the time. Protits form in the oceans of our bodies all the time, new life. In new worlds, the primordial soup of those oceans form and as "Luminous quanta of divine intelligence" interact with those oceans, they begin to live. This is a nature of Life too isn't it, to continually birth itself and to never die. Remember Antoine Béchamp's statement;

"Nothing is the prey of death; on the contrary, experience daily proves that everything is the prey of life, that is to say, of what can be nourished and what can be consumed."

In this world Protits form, are created continuously, in the body or in oceans. (*Genesis II*, George Merkel, *Ibid*);

"The hydroxyl (OH ions from water) groups and the protons fill the inner membrane matrix of the Protit as it is formed so as to provide an electrochemical gradient that allows the storage of energy. Its like a drop of water forms with an electrically charged membrane around it, a condenser. This electrical charge creates a magnetic field with the net effect that the condenser membrane of the Protit is being charged with glowing energy. This energy can be used in several ways. It is first stacked up as an ATP reservoir of energy in the chlorophyll of plants and then as the mitochondria in animals, it can be used to induce birth (reproduction) and it is used to disassemble the genetic material of anything that tries to destroy it (the beginning of our immune systems). These Protits in fact enzymatically devour bacteria, viruses or any chemical that may jeopardize the genetic process of mammals, they differentiate into the cells, lymphocytes etc., that do this job." This energy is transmuting all the pollutants in our bodies, is transmuting our bodies, from the inside out."

So, these 'created' Protits evolve too, guided by an 'internal' Intelligence or Will...they become whatever they are needed to turn into. These original Protits differentiate first into chlorophyll (the ATP energy source for plants) and then into mitochondria (the ATP energy source for mammals) and then into cells and then, as per George Merkel;

"...in a foreword direction, they synthesize all living organs, things. These original Protits are stored in the tails of sperm (which are a separate life form from the heads of sperm) and from them all the old things our bodies ever were can be cultured, by genetically growing them in the reverse direction". Isn't that strange. In reverse synthesis one can grow old and even meet our million old ancestors."

Blue green algae and chlorophyll have been grown from shark testes by reverse synthesis. In this manner we can and will recreate or remember our old immune systems, which will reconstruct and start over if you will, that which we lost by growing up in this polluted world we live in. Old organs, our embryonic organs can and will be regenerated from these primordial Protists. You have to pay taxes and die, who says so.

Remember, in utero, while an embryo, our bodies were first one celled things like algae, amoebas, and then fishes, then frogs, then animal. **Ontogeny recapitulates Phylogeny**, the Biogenic Law of Genetics. Our embryonic development (ontogeny) travels through the ancestral forms (phenotypes), as if to say millions of years ago our heritage was evolving in salt water. In the womb the fetus recapitulates, goes through, all the past forms it ever had.

This study of Life is fun, exciting, not dead like medical school. Without the Protist/Somatid life is atheistic, dust to dust. With the Protist/Somatid, as a transducer of energy from "beyond"... the ying and yang of religion and science become the complements they are, not opposites.

The concept of opposites is an illusion. There are no opposites, only *compliments*, as you can't have one without the other.

Scientists have broken matter down into smaller and smaller pieces, the atom, the proton, neutron, electron, then quarks, antiparticles, etc.. In today's giant cyclotrons, what they have found though is that as they break these 'pieces' of matter down further and further, the pieces just finally disappear, "pop in and out of existence" as stated above. The particles enter the fourth dimension, just as they are supposed to, according to these now corrected 'twelve' dimensional formulas of Einstein.

What is even more fascinating is that when these particles disappear and get into this fourth dimension, which is a supra-physical, mental dimension, the scientists find that whether these particles even exist in this dimension or not is controlled by the thought of the observers, by the thought of the scientists themselves.

Quantum theory demands the inclusion of the psyche since the observer effect of any phenomenon will instantaneously alter its state. Einstein, Rosen, and Podolsky postulated this and supported it with flawless mathematical proof, it was called the ERP Effect.

The process of observing and being observed become one. The process of observing does not just effect the results of the experiment, as per the Heisenberg Uncertainty Principle, it determines them. **The observer and that observed have become One.** This is Wholistic.

* * *

HOW WE BECOME ACID

THE DEVELOPMENT OF LATENT "ACIDOSIS"

If we look for common denominators to all diseases, factors that make any disease you have worse, then correcting these factors will help and perhaps cure, whatever is wrong with you.

The fact is, every disease begins, at a cellular level, with those particular cells becoming acid, toxic, polluted. Since the internal environment or *internal milieu* the cells live in effects all diseases, this is the best place to start, no matter what is wrong with you.

The acid/base balance or lack thereof in this *internal milieu*, is easy to evaluate. Simply, you measure how acid your saliva and urine are, at home. This will be explained thoroughly under *Urine and Saliva Testing* and as stated this is an exceedingly useful tool in following your own health.

HOW WE BECOME ACID

First, I would like to describe what a *latent* "acidosis" is and how we get into such a condition. Then I'll go into some detail about the significance of this as the changes that happen in our body as our cells become acid are profound. *Chronic Degenerative Disease* is what develops and is what this is all about.

pH

How acid something is determined by measuring its pH. The pH of anything is set on a scale of from 1 to 14. pH 1 is the most acid, like the acid in your car battery. pH 14 is the most basic, like the lye you spray in an oven to clean it.

Water is supposed to be neutral at a pH of 7.0. The pH of the blood has to remain *exactly* 7.40, all the time...exactly. If the blood's pH rises or falls one tenth of a pH unit you are in intensive care in the hospital where the pH of your blood is monitored very carefully. If it moves two tenths either way it is lethal.

How the blood always maintains a constant pH is a very complex matter and one that everything in the body helps to maintain, as everything in the body depends on this sameness. Healthy blood just transports things, in and out. It doesn't change in composition itself, it can't and be healthy.

As hospital medicine is only concerned with serious illnesses, this is the only place in regular medicine that pH is taken seriously. Arterial blood pH is measured frequently in intensive care because here the pH of the blood itself does change. This is considered a *real* acidosis, as compared to a *latent* one, and is a very serious condition.

As far as preventative or regular day to day medicine is concerned these concepts are completely disregarded by modern, allopathic doctors. Because this process of becoming acid correlates directly with the onset of old age and the development

of chronic degenerative disease it becomes more important, in a way, to deal with it first, as an 'outpatient', than as a patient in the hospital.

* * *

Strong Acids, Weak Acids and Protein

The strong acids in our bodies are those that are formed by the degradation of protein. These are *sulfuric acid*, *phosphoric acid* and *nitric acid*. These are strong, like the battery acid in your car. Strong acids are strong in contradistinction to weak acids such as vinegar and citrus juices. Weak acids do not *ionize* (break apart completely) when in solution whereas strong acids do. This is why vinegar does not burn holes in your clothes, or dissolve your bones; it does not break apart completely into an acid and a base part, it remains partly a salt. A salt is formed when an acid and a base combine and neutralized each other.

In fact, vinegar, although an acid when you eat it, does not stay that way. Weak acids like the acetic acid in vinegar, tartaric acid and the acids in most fruits and lemons contain lots of minerals which are basic, along with their weak acid part. The weak acid part combines with water and is converted into carbonic acid which then breaks apart into carbon dioxide and water. You breathe out the carbon dioxide and pass the water out through your kidneys. The minerals remain behind to *replenish* deficient minerals so in fact these weak acids in the end, alkalinize the body by adding more minerals to it.

The opposite happens with the excretion of strong acids as they take out or leach minerals out of the body.

This is where the problem lies.

The Main Reason We Become Acid Is From Over-consumption Of Protein

When protein breaks down in our bodies, it breaks down into the above mentioned strong acids. These three acids must be excreted by the kidneys because they contain sulfur, phosphorus or nitrogen which cannot break down into water and carbon dioxide to be eliminated as the weak acids are. In their passage through the kidneys these strong acids *must* take a basic mineral with them because in this way they are converted into their neutral salts and don't burn the kidneys on their way out as would happen if these acids were excreted in their free acid form.

Sulfuric acid or any of the strong acids are excreted mainly as the salts of sodium, potassium, magnesium or calcium as these are the main basic minerals of the body, the ones that are the most plentiful. The sulfur in sulfuric acid can and does combine with the calcium in your bones for one and is excreted as the corresponding salt which is called calcium sulfate. This salt does not harm the kidneys on its way through them but it does rob the body of the needed basic calcium.

By taking all these basic minerals out of the body you make the body relatively more acid. A *latent "acidosis"* develops then *because* the body becomes relatively *base deficient*. Becoming BASE

DEFICIENT is the same as becoming acid, right? *Latent "acidosis"* is not the frank or real acidosis (so the quotes) of hospital medicine because the pH of the blood itself does not change.

We need protein, obviously, but *all* we need is 40 grams a day, a training athlete may need 80 grams a day. The average American diet on the other hand contains as much as 200 grams of protein per day, that's bacon and eggs for breakfast, etc.. We all know that the "richer" we became as a civilization and more "advanced", the more meat we eat. Plato knew this in ancient Greece and toward the end of that civilization I'm sure they had all the 'modern' degenerative diseases that plague us today and, "fast foods".

This is a reason postulated for the extinction of the Mayan Indians, their skeletons are demineralized, as if they too had been soaked in excess acid. Maybe toward the end they became so rich they ate Big-Mac Hamburgers too.

* * *

The Colloid Connective Tissue Organ Of Shade

As the blood can not change, it picks up the acids and transports them first to the connective tissues of the body where they are stored. This is the largest organ of the body really and in Europe it is called the *colloid connective tissue organ of SCHADE*. The collagen fibers of the body are specific acid catchers. It is also called a pre-kidney as that is how it functions, storing acids prior to delivery to the kidneys for excretion. Also it is the organ that connects, holds everything in our bodies in place. It is composed of ligaments, tendons and the like obviously but as these break down into finer and finer fibers it becomes literally the scaffolding that holds every single cell in our bodies in place. If too many acids need storing in this organ, which includes the muscles, inflammation and pain develop. *Fibromyalgia* is an acid disease for sure.

The space enclosed by these finer and finer fibers, is called PISHINGER'S SPACE, from the German scientist that described it. Essentially, this is the extracellular space that contains the fluids that bathe and feed each and every cell while carrying away the wastes from those same cells. There is no mention of this organ in American, physiology text books, there is the extracellular space but no organ that stores acids like this, no pre-kidney.

Base Flood And Base Tide

There is also a daily rhythm to this acid-base, ebb and flow called by Friedrich Sander the *Base Flood* and *Base Tide*. The stored acids are mobilized from the connective tissues and Pishinger's Space while we sleep. These acids reach their maximum (base tide) concentration in this fluid, and thereby the urine, at 2:00 AM, so the urine is the most acid at this time. The acid content of the urine directly reflects the acid content of the fluid in Pishinger's Space, the extracellular fluid compartment of the body.

By the time you get up though, in the morning, all the acids consumed and generated the day before should be gone, excreted while you slept, contained in your bladder and ready to be voided when you wake. This first urine *should be* acid when you get up in the A.M.. The urine pH you should check though is the pH of the urine measured the second time you empty your bladder in the morning as this reflects the pH of the body fluids at that time, in the morning, not the pH of the urine from the night before.

Therefore, your A.M. urine, the second voided specimen after you get up, should be back to about neutral, close to pH 7.00 (pH 6.8 to be exact). Because most everyone is acid, this is hardly ever the case. More and more acids accumulate day after day and chronic, degenerative disease develops as the direct result of the pleomorphic changes that take place in the blood as discussed above. Each day we add to the acids not disposed of the day before.

On the other hand, this Pishinger's Space, becomes most alkaline around 2:00 PM, the *Base Flood*, as then the most bicarbonate is being generated by the cover cells of the stomach (see below), after lunch and breakfast have been metabolized, actually. If your urine is not alkaline at 2:00 P.M. you are definitely in an acid condition.

* * *

BICARBONATE

In the normal situation, hydrochloric acid is produced by the cover cells of the stomach. Table salt, sodium chloride, is split into hydrochloric acid and sodium bicarbonate. The production of each molecule of hydrochloric acid is matched by the production of an equivalent molecule of sodium bicarbonate

The acid goes into the stomach and the sodium bicarbonate goes into the blood stream and circulates all around, first flushing out the excess acid in the tissues and especially, freeing the collagen fibers and the colloidal connective tissue organ from the adsorbed acids stored there. *Any bicarb that is left over*, is picked up by the alkaline glands, the liver, pancreas, etc..

Of course, this is why our bodies are most alkaline around 2:00 P.M. . This is after our stomachs have pretty well digested breakfast and lunch. The stomachs have made all the hydrochloric acid they needed for that and the equivalent amount of sodium bicarbonate needed to neutralize the body and refill the alkaline glands of the body, pancreas, liver, etc.. After those glands digested the breakfast and lunch they need filled up again too! Where does their alkalinity come from? It comes from the blood and from the alkaline food we eat, our fruits and vegetables as will be described below.

An imbalance happens, of course, if enough alkaline food is not eaten and because the sodium bicarbonate generated by the stomach's cover cells, does not all go to the alkaline glands (pancreas, liver, salivary glands and the alkaline glands in the duodenum). On the way through the body to those glands, some of it gets used up by neutralizing acid residues from the previous meal and ones stored in the connective tissue organ from before.

If there is not enough base left over after a meal,
enough base to neutralize and clear the acids stored in the connective tissues,
a relative base deficiency develops which is again,
the latent "acidosis".

When this happens the liver and pancreas don't end up with enough alkaline
juices to
ensure proper digestion.

Digestion can't proceed without enough of these alkaline juices for the liver and
pancreas, etc., so the stomach has to produce more acid, in order to make
enough base, *ad nauseam*, and one can develop stomach ulcers. The ulcer is not
the result of too much acid, on the contrary, it is the result of too little base!

The 'excess' acid is there as a necessary by product as the organism has to
generate it so more bicarb can be made to satisfy the needs of the liver and
pancreas.

* * *

REPLACEMENT OF MINERALS

If minerals are lost because they are excreted with the excess protein acids we
consume, we can either cut down on such consumption and/or replace the
minerals.

THESE LOST BASE MINERALS CAN ONLY BE REPLACED
WITH FRUITS AND VEGETABLES.

We have to eat our fruits and vegetables!

"An apple a day does keep the doctor away."

This is so because the minerals from plants, organic minerals, are the only ones
our bodies can use. Organic minerals are much different than the minerals from
rocks, inorganic minerals. Sodium from a plant for example, is much different than
the sodium from table salt. For the basis of this discussion it would be best to
assume that they are not the same at all. You can eat all the table salt you want
and the cells themselves can still be sodium or base deficient. The sodium used
for building cells has to be organic, from plants and it is the main base mineral we
have because there is so much of it. Sodium chloride or table salt serves an
entirely different function in the body.

In the same way, calcium from a plant is a lot different from say "Tums for the
Tummy". Tums are calcium carbonate or limestone, a ground up rock.

We can't digest rocks, that's what plants do.

We simply don't eat enough fruits and vegetables to compensate for the minerals lost, because of our "rich", fast life diets. If we are BASE DEFICIENT, and most of us are, then our whole body is in a relatively acid condition. That is all there is to it.

* * *

LATENT "ACIDOSIS"

So, in this acid condition we are talking about, we aren't "acidotic" in so many words, rather we are *base deficient*. This is why 80 or 90 year old, old folks, are shrunk up, little people. They have no mineral stores left. When all the minerals are gone, so are we, our battery runs down.

It is just like a battery. The cells of our body do carry a charge that can be measured as the oxidation/reduction potential of the blood. This energy potential decreases with aging, just as the minerals do. We become more oxidized (so the need for antioxidants). Both things occur because of hyper-proteinization, too much protein.

We aren't acidotic as they say in a hospital, in shock, when things have gone so bad that the very pH of the blood itself begins to change, Code Blue. Rather, in a state of *latent "acidosis"* we are full of stored acid residues, residues stored in the Pishinger space waiting for a ride out on base minerals that aren't there. This is the latent in *latent "acidosis"*. Blood values have not started to change yet, so the acidosis is stored in the tissues as it were. The tissues are acid but technically this is not an acidosis either as the blood appears normal.

If things get worse, this *latent "acidosis"* can proceed into what is called a *compensated acidosis*. This means the blood pH itself still hasn't started to change but other values in the blood have had to change to keep the blood pH the same 7.40 that it is supposed to be. *Decompensated acidosis* is when the blood pH itself is effected.

* * *

Hospital Based Acid/Base Medicine

As the blood itself begins to be effected the *compensated metabolic acidosis* of regular medicine is the next to develop. This is when the blood pH begins to be stressed if you will. Compensated means the blood pH really doesn't change, yet. When it begins to change it is no longer compensated, it has become decompensated.

In a *compensated acidosis* the first event that happens to begin the compensation process is that the breathing rate increases in order to blow off more carbonic acid which helps keeps the pH "normal", at 7.4, not lower which is acid. This is revealed in the arterial blood gasses as a lower PCO₂ concentration which is the measure of how much carbon dioxide there is in the blood. Carbon dioxide, CO₂, combines with water, H₂O, to form carbonic acid, H₂CO₃. Blow off carbonic acid which will lower the carbon dioxide content of the blood and you will increase the pH of the blood. This increased breathing rate happens in diabetic acidosis for the same reason.

Also the plasma bicarbonate level [HCO₃⁻] which is measured as part of the blood gasses, is decreased. Because of the relative base deficiency, the stomach can no longer produce the required amount of stomach acid so the corresponding bicarbonate that should come from the reverse synthesis of the hydrochloric acid, just isn't there.

Also since the sodium and other base minerals are decreased, bicarbonate is actually lost out the kidneys because there aren't enough bases like sodium to connect with the bicarbonate so the kidneys can reabsorb them. This point will be covered more below.

This is the *compensated metabolic acidosis* of hospital medicine then, low PCO₂ concentration, decreased bicarbonate level [HCO₃⁻] with little effect on blood pH yet.

In the type of *latent "acidosis"* we are talking about there are no changes in the blood gasses. The blood pH, PCO₂, [HCO₃⁻], are all normal. The *latent "acidosis"* we are talking about hasn't developed into the *compensated metabolic acidosis* described above.

When the breathing rate can no longer get any faster and when the kidneys can no longer increase their function to keep up with the acid load then, the blood pH itself does start to change, it can fall from 7.4 down to 7.2. This is *decompensated metabolic acidosis* and is a most serious condition. At blood pH of 6.95 the heart relaxes with coma and death.

* * *

Acids That Come From Outside The Body

The Latent acidosis described above is through the development of exogenous (the problem comes from the outside of the body) base under-nourishment, not eating enough fruits and vegetables and consuming too much acid protein. This of course produces the relative base deficiency that we call "latent acidosis".

Acids That Come From Inside The Body

The second way this "latent acidosis" can develop or be aggravated is through the pathological formation of acids in the organism. These are called endogenous acids (come from inside the body).

This frequently happens as a consequence of intestinal fermentation in the intestine, too many of the wrong kinds of bacteria there (see below, Dysbiosis). This can also happen if there is a malfunctioning organ in the body, heart, liver, whatever, a diseased organ, an organ injured in an accident or one inherited that way. Anything that doesn't work right, produces toxic, acid byproducts, oxidants.

These acid by products then can be the end result of the base under nourishment or malfunctioning organs with the symptoms described above or they can be the forerunners of and cause of further degeneration of organs. When this happens

there is no more "latent", acidosis. It becomes a frank acidotic condition, compensated to decompensated acidosis, diabetic coma and the like.

With the above scenario come the diseases that call forth, through anomalies of their own metabolism, the more serious acid producing conditions such as diabetes, uremia or kidney failure, hepatic failure, heart failure and other such illnesses. In these conditions the acidosis is only latent in its beginning state.

As the illness progresses the endogenous (from in the body) production of toxic, metabolic acids quickly becomes worse, attacking not only the alkala-reserve of the body, from the liver, pancreas, etc., but also the alkala-reserve of the blood itself.

EFFECTS ON DIGESTION

Acidification of the intestines

As we get base deficient, the digestion itself is also effected. The bile from the gall bladder and the digestive juices from the pancreas all have to have a lot of base in them, sodium bicarb actually, to be able to neutralize the stomach acid as it passes out of the stomach and into the intestine and in order to activate the enzymes from the pancreas that require an alkaline medium in which to work. If the acid from the stomach isn't neutralized, colitis or inflammation of the intestine can happen.

As stated above, the main problem with decreased acid in the stomach is that as the cells that make the acid in the stomach make acid, they also make the base, sodium bicarbonate. If these cells don't make enough acid they don't make enough base either.

Again, the sodium bicarbonate/base that is made as the stomach makes its hydrochloric acid is carried by the blood stream to the salivary glands, the gall bladder system, glands in the pylorus (the part of the intestine the stomach is connected to) and the pancreas. These are the alkaline glands of the body and essentially they neutralize the acid contents of the stomach. If there is not enough base to neutralize the acid from the stomach the intestines become acid too. Without enough of this sodium bicarbonate/base for these organs, digestion cannot proceed properly and indigestion occurs.

Dysbiosis

Also if the pH of the intestines is not right, different bacteria and eventually yeast can grow there, dysbiosis (wrong growth), in place of the bacteria that should be there. This causes its own set of problems.

If the environment of the intestines is not alkaline but acid, dysbiosis (wrong growth) occurs. The gut fills with and supports the growth of the wrong kind of bacteria, fungus, yeast, Candida sp., etc.. These bacteria in turn generate their

own acidic, toxic byproducts of metabolism that further aggravate and maintain the already latent "acidotic" condition.

When this dys-biosis or wrong growth begins, it begins with fermentation and as fermentation is the process of eating, metabolizing and excreting that bacteria do, alcohol is produced. Fermentation like this can even cause cirrhosis of the liver in patients that have never drunk alcohol in their life.

As when making wine, this fermentation process can go 'bad' and begin to rot. Vinegar and other rotten things are produced. This vinegar acid and the other things can cause "heart burn" too, along with the bloating and gas that come with the fermentation process but this kind of heart burn is not from too much acid, hydrochloric acid, it is from not enough. In this kind of heart burn, that comes an hour or two after you eat, other acids form, acetic acid as in vinegar and other putrefactive acids. These acids cause the "heart" burn. The meal is not digesting well as with a good amount of hydrochloric acid, it is fermenting instead.

These rotten things are reabsorbed back into the body and picked up by the blood like anything in the gut. These rotting things in the gut just don't make you feel well. It's why there are constipation headaches, sleepless nights from food eaten too late to digest (nights where undigested food just ferments and rots all night, makes bad dreams). The skin also tries to expel such toxins, pimples, rashes and other skin problems develop.

With this kind of "heart burn" one hurts after eating, right away or an hour or two later, rather than before as with an ulcer. This can burn with reflux up the esophagus, worse while lying down, or it can be just pressure over the whole abdomen from the gas. This gas can actually push the stomach through the diaphragm into the lung cavity, producing a hiatal hernia. Food also does not help this dysbiotic type of heart burn while it does help the pain of an ulcer especially when the stomach is empty, say at night.

The Indican Urine Test

Indican is one of these rotten byproducts that is formed in the dysbiotic gut and it too is reabsorbed from the intestines, back into the blood stream to be finally excreted in the urine. The Indican Urine Test measures the amount of Indican in the urine. There should be none of course and this test can be used to measure the degree of dysbiosis occurring in a patient.

Digestive Enzymes

One can live without a stomach. That there is not enough acid to activate some of the digestive enzymes in the stomach is not the real problem as far as this indigestion is concerned. It is because there is not enough base in the liver, pancreas, etc..

Pepsin excreted by the stomach cells needs an acid environment in the stomach to work. Pepsin digests proteins. If there is no acid and no pepsin or if there is ineffective pepsin from the stomach because of no acid (or if there is no stomach) the protein passes into the intestine where the enzyme trypsin from the pancreas does digest it. Trypsin can only work in an alkaline environment. Most of the digestion takes place in the alkaline environment of the intestines, not in the stomach.

Indigestion

If the food can't be digested properly, too much acid, not enough base, the wrong kind of bacteria in the intestines, whatever, one gets *in-digestion*, means just what it says. Things just don't digest right. This includes bloating and pressure because if the food doesn't digest, it in fact ferments and then rots. The fermentation part causes gas, the rotting part causes the obvious. Every organ is effected. The body is Wholistic.

This whole process of deacidification, the use of *Balanced Base Powder*, recharges the stomach acid system really, like a battery, whether there is too much or not enough acid produced by the stomach cells. When the stomach cells make acid, they split the resulting NaCl or salt into separate sodium and chloride ions and this takes a tremendous amount of energy. Sucking acid out of the stomach with *Balanced Base Powder* makes the stomach produce more acid and thereby more base, of course, which goes on its merry way into the blood stream ready to clean up acid residues and replenish the alkaline digestive glands.

Increased Acid In The Stomach

As we know, as one gets acidotic, first the body develops a latent "acidosis". If there is not enough base left over when the hydrochloric acid of the stomach is produced, the relative base deficiency develops, the latent "acidosis", because the liver and pancreas don't have enough alkaline juices.

Digestion can't proceed without enough of these alkaline juices so the stomach has to produce more acid, in order to make just a little more alkaline, basic, juices ad nauseam. The stomach lining fills up with stored hydrochloric acid, the tissues start to break down from the excess acid, ulcers form and then the *Hylicobacter pylori* bacteria come out of the cells and finish the job, cleaning up the ulcer in the process.

The stomach and its ulcers are one of the body's ways of trying to get rid of acid, through the only acid producing organ in the body, the stomach. By the time an ulcer has formed in the body, Pischinger's Space, all the connective tissues, everything will have become saturated with acid residues. In such a condition the body is trying desperately to rid itself of too much acid.

In the above condition the stomach makes more hydrochloric acid than the body needs just so it can make a little extra bicarbonate for the pancreas and liver. This

acid is actually stored in the stomach itself and so this is the "deposit-hydrochloric acid" of Friederich Sander. The following quotes are from, The Acid-Base Household of the Human Organism and its cooperation with the NaCl circulation and the rhythm of the Liver, Friederich F. Sander, about 1930, translated from the German by Robert Miller, D.C. This book is not yet in print in English.

Deposit Hydrochloric Acid

The intestines become acid with a base deficiency because, the stomach is pushed to make more base (and as a byproduct more acid). At first, the excess acid made in response to the need for bicarbonate, is actually stored as the deposit-hydrochloric acid in the stomach, causing ulcers, gastritis and the like. Again and more importantly, if the stomach doesn't make acid it doesn't make the base, sodium bicarbonate, which is the more important of the two for digestion. "The real problem here is that of a one sided scenario where regular medicine only views the stomach as a digestive organ, not a depot or deposit organ (for excess acid from the body itself) or as a regulation organ for the Acid-Base Household."

"As soon as one sees the stomach cells also as a deposit-organ, not only a digestive organ, for those hydrochloric acids which are being formed in the cover cells because those cover cells are being forced to produce sodium bicarbonate as a consequence of the base-deficiency of the organism."

When one sees this and then sees that the stomach cells store the excess acid of the body (as do all cells of the body) so that the bicarbonate produced when the HCl was produced, can be used to make up for the bicarb used up in its passage through the body in the blood stream, cleaning up and neutralizing acid 'sludge' all along the way.

Decreased Acid In The Stomach

Achlorhydria, Absent or Decreased Acid causes indigestion for sure and is more common than "heart burn" or real over acid production, especially in older folks. As above, this condition begins as the over-stimulation of the cover cells of the stomach, over-stimulated so they can make more bicarbonate for the liver and pancreas because of the underlying latent "acidosis" and relative base deficiency. After awhile the stomach cells just can't do it anymore, make more and more acid while trying to generate more base to correct the base deficiency, the latent acidosis.

The Treatment Of The Over-acid And Under-acid Conditions Is the Same as It Is With Any Other Disease.

TREATMENT IS WHOLISTIC AND GENERIC.

When the stomach makes too little acid, the whole process of using up the hydrochloric acid in the stomach with the Base Powder does, recharge, the system, makes it work harder and in time better. Digestion improves.

In the over acid condition the Base Powder sucks the excess acid out of the system, the whole system or body. In time the acid residues are cleared and the base deficiency restored so the stomach doesn't have to make so much acid anymore.

In the under acid condition the baking soda stimulates the production of more hydrochloric acid, and therefore blood born bicarbonate, which clears the latent "acidosis", restores the base mineral deficit and the stomach cells can heal. This, in time, really works. Baking soda IVs speed both these processes up considerably. The treatment for both conditions is the same as one is just an extension of the other, the hyperacid condition leading to the condition where little or no hydrochloric acid is produced by the cover cells of the stomach.

* * *

Cows Milk

This phenomenon of hyperproteinization is best illustrated by the drinking of milk. Cow's milk has three times as more protein in it than human, mother's milk. It is easy to measure the amount of calcium one puts in one's mouth and the amounts that are passed through the urine and feces. This large amount of protein is converted into acids of course and these acids leach more calcium out of the bones than was provided by the milk in the first place! Cow's milk causes osteoporosis. It is an absolute lie when they say, "Milk builds strong bones". Add to this the fact that 50% of the calcium that is ingested by the drinking of pasteurized milk is not absorbed, just because it is pasteurized. Also pasteurization does not kill all of the bacteria in the milk. Salmonella is transmitted via pasteurized milk as a matter of fact. This all means to me that something that is not right. As far as pasteurized milk is concerned, any farmer knows that if you feed a baby calf pasteurized milk for a few months it will die. We aren't even baby cows.

Add to this that about 80% of people are allergic to milk and it seems to be not such a good food to eat.

Cholesterol

These facts are not unknown. In 1977, the senator George McGovern introduced a list of dietary guidelines for the American people. On the top of the list was the recommendation that we decrease our consumption of protein. One year later this was removed from the record by the meat and dairy industries and replaced with the cholesterol scare. Cholesterol is not the problem, protein is.

Protein Is Stimulatory And Is Therefore A Negative Energy Source

Besides this, in the long run protein is not a positive energy source. Although protein can, in starvation, yield 4 kilo calories per gram of body mass, the same as carbohydrate (compared to 9 kilo calories per gram of body fat) its effect is mainly stimulatory. Next to drugs, pharmaceutical or otherwise, protein is the most stimulating thing we consume. Coffee for example, will get you going for about an hour. A T-bone steak on the other hand will keep you pumped up for four to five hours.

The fact is that, it takes so much energy for the body to process protein, digest it and then eliminate it, that it ends up being a negative energy source, taking more energy from the body than it gives to it. This is the basis of the so called 'high protein', weight reduction diets. You will loose weigh on a high protein diet but the long term consequences of this are untold by those that advertise such procedures.

Drugs

As far as acids are concerned, the only things more acid than protein are drugs, all of them. Most drugs are alkaloids that, as with protein, contain nitrogen. These drugs have to be converted first to their corresponding strong acid, nitric acid in this case, and then to the mineral salt, sodium, potassium or calcium nitrate before they can be excreted.

Aspirin, Motrin, all such anti-inflammatory medicines for arthritis, make the arthritis worse in the long run. This is so because the aspirin and the rest are alkaloids which are converted to strong acids in their excretion. Strong acids don't help joints and aching bones. When the body can't deal with the excess acids we consume, one of the places these acids are stored is in the joints. Fluid taken from a swollen joint is always acid

Coffee is a drug, herbal medicines are drugs. All things like these have alkaloids as their active ingredients and are drugs. Pharmaceutical drugs are essentially synthetic alkaloids, made from petroleum.

Over The Counter Antacid Drugs

Pepcid, Zantac, Axid, Tagamet and the like, block this excess acid outpouring. These drugs stop the acid production of the stomach. This produces only symptomatic relief.

One of the bigger crimes of the petro-chemical drug industry in recent times has been the ease with which these now, over-the-counter, Histamine, H2-blockers can be obtained. These include Tagamet, Pepcid, Zantac, Axid and a host of newer more expensive ones. They are all the same. These drugs block the production of the hydrochloric acid by the stomach, and thereby relieve "acid indigestion".

If one blocks hydrochloric acid production by the stomach with these medicines, where does this excess acid go (it is excess or one wouldn't have an ulcer)? Does the toxic acid then become buried, impregnated in the body somewhere? Does

this then proceed on to the Neoplasm phase or does the excess acid just accumulate more in the muscles and tendons, causing you to hurt more or whatever? Do your bones dissolve more or your heart skip more beats, etc., etc.? It takes awhile to know all this, years, so the pharmaceutical companies won't be held libel. As these medicines are relatively new, the side effects of the blocked acid excretion "remain to be seen" as far as regular medicine is concerned.

But, if the problem is, that the body is so full of stored acids that the stomach has to work overtime to get rid of them, then to block the excretion of those acids -- how does that help? Where does that blocked hydrochloric acid go? It aggravates the acid condition that caused its over production in the first place so it has to back up farther in the system. It just puts the acid problem off until later, symptomatic relief.

Still, that you can buy these over the counter now, without a prescription even, is, for lack of a better word, abominable. They shouldn't be used even with a prescription, except in a hospital setting, say with an actively bleeding ulcer where there is no other recourse.

To get at the cause of the excess acid production, rather than blocking it with pharmaceutical H2 blockers, is the obvious and most desirable therapy.

* * *

CHRONIC DEGENERATIVE DISEASE, WHAT IS IT?

The point of all this is, then, that
if this condition of "latent acidosis" is not acknowledged,
if the above nonspecific symptoms are not recognized and dealt with for what they
are, then,

SPECIFIC DISEASES do develop.

The above GENERIC SYMPTOMS, 'localize'

in the body's weakest place,

the *locus minoris resistentiae*,

and frank organ degeneration begins to take place.

THE ABOVE IS CHRONIC DEGENERATIVE DISEASE.

This "localization in the body's place of least resistance"
can take the form of any of the SPECIFIC, NAMED, CHRONIC, DEGENERATIVE,
DISEASES THAT THERE ARE.

**CHRONIC DEGENERATIVE DISEASE IS WHOLISTIC, IT EFFECTS THE
WHOLE BODY.**

AS THIS BASE DEFICIENCY BEGINS TO DEVELOP ALL THE THINGS MENTIONED ABOVE BEGIN TO HAPPEN:

The General Results Of Base Deficiency:

1. The acidity leads to the pleomorphic changes in the blood. As stated above, whenever there is anything in nature that is dying, beginning to decay, something comes and eats it up. When things get old in the body, acid and toxic, organisms do come out of the cells, organisms that devour the old

cells they came out of in the first place. In other words, the Protists in the cells change, stick together and become the viruses, bacteria and so on. That is what the microbes, germs, are for.

2. Sodium becomes deficient first from the blood serum (most of the sodium in the body is in the serum whereas the potassium is inside the cells). The acids and even excess protein itself can be, as one of the last resorts, stored in the cells themselves. This causes the cells to swell and edema develops. Of course one is sick by this time. The cells swell in order to dilute the acids in them, the acids that shouldn't be there. High blood pressure can develop because of this.
3. Potassium leaves the cells and weakness, tiredness, and wasting develop. Low blood pressure can be a result of this.
4. Calcium leaves the bones and you have osteoporosis. The bone calcium goes into the blood and you get muscle cramps. The blood has to get rid of the "extra" calcium very quickly or one develops tetany. Tetany is a Charlie Horse type cramp, of every muscle in the body. The body doesn't mess around with calcium, it gets rid of it, deposits it or excretes it. So, why should we, mess around with calcium? It should only be used, as a medicine, in a hospital. All the organic, good calcium that our bodies can use, is contained in the vegetables, especially the dark, green leafy ones. We don't need milk, we don't need extra calcium supplements.

* * *

There are many studies from around the world that show that the more protein a society consumes, the more osteoporosis they have. Osteoporosis is definitely an acid disease. The calcium is just leached out of the bones by these metabolic acids. Calcium, or lack thereof, is not the problem, over acidification is.

This calcium has to be excreted by the kidneys or in the feces or it will be deposited, somewhere in the body. It can be measured in the urine. It can be deposited in the lining of the arteries, kidney or gallbladder -- stones can develop. It can be deposited in the brain causing dementia or arthritic deposits form, on and on...and then the microbes come out of the acidic, hurt, swollen cells to help get rid of the deposits. Inflammation develops, pain, more swelling, blocked arteries. The amount of calcification in the body correlates directly with the onset of 'old age'. Also, all these old micro-organisms are being re-discovered, inside the diseased tissues effected by Chronic Degenerative Disease, cancer, the bacteria *Chlamydia pneumoniae* being isolated from the arteries in most cases of hardening of the arteries...Stomach ulcers have been treated for some time with antibiotics. Where is this going? Vaccines and antibiotics for arterial disease that is for sure.

The Symptoms of Being Acid

The acidity, the pH of the body, it's fluids and cells, is the most important homeostatic or balancing act the body has to perform. The acidity of the blood has to remain exactly the same all the time. The fact that we are alkaline beings by design but acid generating beings by function makes this the most basic function the body has to perform, no pun intended, **besides and including breathing and pumping one's blood around.**

As we become more and more acid, accumulate and store more acids in our connective tissues this is what happens;

- A. First, there is an increased sense of well being from the "**stimulatory**" reaction of the bodies regulatory system that operates in high gear to process the excess acid.
- B. The patient therefore believes her or his self to be totally well.
- C. This type of person tends to be an over achiever, active, **always running.**
- D. The person is **overly ambitious** due to the acidic irritation of the nerves.
- E. **Later, as the process progresses the patient becomes;**
 1. **irritable** and difficult to please
 2. **exhausted**, fatigued
 3. **listless** and inability to get anything done
 4. constantly finds fault
 5. sees only the pessimistic side of life
 6. **can't sleep** restfully
 7. wakes tired in the A.M.
 8. generalized **aches and pains**
 9. I. loss of **appetite** or ravenous hunger
 10. J. obstipation (difficulty moving bowels) to **constipation** gallbladder pains and frequent headaches
 11. frequent redness of the nose or parts of the nose
 12. **hardness** and pain of the neck and shoulder muscles with pressure, and pain of the back of the head nerves with pressure
 13. often coated tongue and halitosis, enlarged tonsils
 14. moist hands with poor blood supply, **cold hands**, pale to white
 15. tendency to **sweat**, tendency to development of skin rashes
 16. **susceptibility to colds** and bronchitis with large mucous secretions as an attempt to rid the body of acid, the excretion and reaction phases of Homotoxicology
 17. women tend to be pale with scant, heavy or **irregular periods**
 18. blood pressure tends to be lower at first
 19. The **Indicin-Test** of the Urine (see below) is usually positive. This is a test for rotten products in the intestine that are reabsorbed by the blood stream and re-excreted out the urine when the intestines are in a dysbiotic condition, when abnormal bacteria are growing there because of the latent acidosis
 20. **shows aging** as the sodium is depleted from the body fluids and potassium from muscles causing wasting and weakness, and then calcium from the bones which is osteoporosis, arthritis and the like.

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URINE AND SALIVA TESTING

This is an old and simple test of urine and saliva that was used extensively before modern blood tests came into existence. The amount of information it provides is considerable and forms a basis that unites all forms of medicine, makes them all work if you will.

As stated above, the basic premise is that as societies become more "advanced", protein consumption, fast foods, (not necessarily, fat, cholesterol) become the basic foods. These foods are converted to strong acids which must be eliminated by the kidneys. Every acid molecule that is passed through the kidneys must take a mineral with it so we develop a relative base deficiency, i.e. we become acid. As a result, pleomorphic organisms come out of the blood, out of the cells themselves to clean up the mess. This is chronic degenerative disease.

So, the healing process, no matter what is wrong with you, begins with RE-MINERALIZATION. The only way you can replace these minerals is by consuming fruits and vegetables. You can take mineral supplements but these only work temporarily. These type of minerals are basically ground up rocks and cannot be incorporated into the body cells. Plants can digest rocks, people can't. We have to eat our fruits and vegetables.

This urine/saliva tests shows basically how many minerals are left in our bodies, i.e. what the MINERAL RESERVES of the body are and what we must do to remineralize it. This lays the foundation for any and all healing therapies.

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The test is simple:

1. **Saliva test upon waking.** First thing in the morning right when you get out of bed, lick and wet the end of an acid test strip with saliva. Note the color change and write down that pH number. Do this before brushing your teeth, drinking, smoking, or even thinking of eating any food. **This pH should be 6.8.**
2. Then test your **second urine of the morning.** The urine stored in your bladder during the night, that is ready to be eliminated when you get up, should be acid so you don't want to test that. Drain your bladder in the morning, the last time you get up if you get up during the night and then see what that urine pH is. Again, record this number. This number should be the pH of your urine after you got rid of your acid load from the day before. The acids should be gone the second time you go to the bathroom so your **urine pH should be around 6.8 also.**
3. Eat breakfast, an apple will do, anything, and five minutes after breakfast check your saliva again. Write this number down also. This number should go up from what it was before you ate, the more the better.

4. and 5. Then check your urine pH between meals, i.e. between breakfast and lunch and between lunch and dinner. **The pH should always be 7.0 to 8.5, a couple of hours after meals.**

These five tests show the following:

1. How well your digestive system dealt with what you ate the night before, i.e. the **AM urine pH**. These numbers may change from day to day depending on what you did eat the night before.

2. How well we treat ourselves in general, i.e. how "strong" the liver is. This is the **AM saliva pH**. This number shows the overall state of our health, the condition of the alkaline reserve of our bodies which reflects the diet we have eaten over the last months to years. This number stays rather constant and will only change after some work has been done in re-mineralizing the body.

Since the saliva pH is an indicator of intracellular pH, saliva pH readings should never be below the pK of the phosphate buffer system, 6.8. (see below). The most accurate reading of saliva pH is recorded **immediately upon awakening**--after sleeping at least five hours and before brushing the teeth. It is during sleep that the body removes waste and is in an anabolic state restoring and replenishing the body. If the patient has a saliva pH of 5.5 at this time and only 5.6 after eating, you know that this person has no alkaline reserve and that his body is devoid of the minerals necessary to process food properly--his body cannot adequately respond to the physiological crisis of handling food.

3. The pH of your saliva after you eat gives an indication of what the mineral reserves of your body are (the pH number should increase after you eat). My son just thought of a lemon for a minute and the pH of his saliva went up a whole point. He had enough reserve minerals, which are basic, to pull into his digestive system to begin the digestive process.

The ideal saliva pH pattern is **6.8 on awakening, 7.0 before eating and 8.5 following breakfast.**

Besides just thinking of a lemon one can eat one. This is a simple test that can be done at most any time of the day. It too checks the adequacy of the alkaline reserve of the body. When a healthy person with adequate alkaline reserves takes a bite of highly acid lemon, the saliva pH drops sharply for an instant but returns almost immediately to pH 8.5. The more acidic the food that is eaten, the more rapid the response of the alkaline reserve, and the higher the saliva pH should be following a meal.

4. The **pH's of the urine between meals** should be kept in the basic range, **pH 7.0 to 8.5**. After one eats, the stomach generates the necessary acid to digest the food. While doing this, it also performs the opposite action, i.e. it makes an equivalent amount of base or

baking soda, sodium bicarbonate, that is picked up by the blood stream and delivered to the alkaline glands of the body, the saliva, the pancreas and the liver. **The maximum amount of base in the blood and therefore in the urine occurs one to two hours after you eat.**

This rhythm of the acid and base flow of the body, is called by Frederick F Sander, the Base-floods and the Base-tides of the Acid-Base household. This information is from, The Acid-Base Household of the Human Organism and its cooperation with the nail circulation and the rhythm of the Liver, Frederick F. Sander, about 1930, translated from the German by Robert Miller, D.C. This book is not yet in print in English.

Actually the body fluids and therefore the **urine is most acid at 2:00 A.M.** (pH 5.0 to 6.8) in the morning (the base tide) and **most alkaline at 2:00 P.M.** (pH 7.0 to 8.5) in the afternoon (base flood).

"The ideal pH numbers depend on the time of day. Plotted on a curve it looks like the double hump of the back of a camel. Two times a day the urine should be alkaline and that is the top of the humps and corresponds to 10 A.M. and 2 P.M., the alkaline tide after meals. During the rest of the day the pH should be between 6.6 and 6.8. This is optimal urine. The first urine in the morning should be more acidic because of the decalcification that takes place during the night."

If all the acids are not all flushed out during the night they accumulate, day after day. It hurts for one thing and the cycle of chronic disease begins. It effects different people in different ways; heart disease in one, arthritis, osteoporosis, stones, ulcers, cancer, in others.

If what you are doing to get better isn't working, if you are sick, be it with modern allopathic medicines or any of the alternative, complementary therapies, it is probably because you haven't dealt with this acid problem, first.

Definitely, this puts the responsibility of caring for one's own health back into a patient's hands. It guides your therapy and shows you if what you are doing is working or not.

You do the above tests a month or so after you did the initial ones. The numbers should be less acid, if you are doing the right thing. If not, you and your doctor should, re-consult. It all takes time.

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Simple pH Indicator Solution

A simple way to prepare a pH indicator, instead of using pH strips, is to use the spice, **Turmeric**. Turmeric is a yellow powder but in a basic solution it turns a ruby red color. Actually, it turns color right at a pH of 6.8. the pH that the urine and saliva should be, most of the time.

To prepare this pH indicator solution you just add a teaspoon of Turmeric to a pint of rubbing alcohol. Shake it up and let it settle.

To use it pour some of the yellow, alcohol/Turmeric solution into a test tube or similar container. A small drinking glass will do. Add a few drops of urine or saliva and if it turns red it means that whatever was added had a pH greater than 6.8, that it was alkaline. If it stays yellow the pH is acid, less than 6.8, need more fruits and vegetables.

If your urine is acid you need Base Powder. You take enough Base Powder so that the Turmeric solution stays red most of the time. After awhile it will stay red all by itself and then you will know what it means to be in pH balance. You will simply just feel good.

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THE TREATMENT OF BEING ACID

CAUSAL THERAPY FOR LATENT ACIDOSIS

Getting at the cause, the Causal Therapy for the removal of the deposit-hydrochloric-acid consists then of removing this excess acid from the organism while decreasing the intake of protein acids. This Causal Therapy can be done basically in two ways; by adding bases (sodium, potassium bicarb etc.) or by removing acid.

1. The first thing to do obviously is to cut down protein consumption. Proteins are;

1. eggs,
2. all meats (it doesn't matter if it is beef, fish or chicken),
3. all dairy products,
4. lots of grains, beans (a handful of kidney beans for example has a much protein in it as a lamb chop) and cereals (oatmeal is one of the highest protein containing foods)
5. and nuts.

2. Increase the intake of fruits and vegetables.

An "apple a day does keep the doctor away". Protein depletes us of our main minerals; sodium, potassium, magnesium, calcium and chloride. These are the main ones so they are called macro-minerals, because we need a lot of them. In the final analysis, we must get from fruits and vegetables.

3. Balanced Base Powder

One can take, by mouth, the necessary quick bases (sodium and potassium bicarbonate, both macro minerals that the body needs a lot of) that the body needs to neutralize the stored acids in the body and correct the relative base deficiency, correct the "latent acidosis". This is what the Balanced Base Powder does. This powder also provides the necessary chloride ions in the form of *Celtic sea salt* and *potassium chloride* that are needed to recharge the hydrochloric acid producing ability of the stomach, and thereby and more importantly, the sodium bicarbonate producing ability of the same.

Take 1/2 to 1 teaspoon in water or juice between meals of Balanced Base Powder or, if this is not available, use the same amount of *baking soda* in water or fruit juice, between meals and before bed, i.e. three times a day.

The important thing is to take it on an empty stomach, so it can suck out the excess "deposit acid" from the acid producing cells lining the stomach (thereby generating more bicarbonate which goes into the blood stream) and not interfere with the acid that is needed at the times of eating. One needs acid in the stomach to digest food obviously so the Balanced Base Powder or baking soda should not be taken around meal times.

If you eat breakfast at 8:00 A.M. and lunch at noon then you would take the first dose of Base Powder at 10:00 A.M., the same between lunch and dinner. It is best to sip it even, so it can suck out acid from the stomach over a longer time, not all at once as with one big gulp. If there isn't time to sip it, just drink it anyway. This, done consistently, over time, is what makes the difference.>

It is best not to eat before you retire at night. If you don't eat before bed time then you can take 1/2 to 1 tsp. of Base Powder before bed also. If you do eat before bed then you would not take the Base Powder that night.

To determine the amount of Base Powder you should take you should check your urine pH at the same times as you would take the Base Powder (don't take the Base Powder and check your urine on the same day), i.e. between meals, say at 10:00 A.M. or 2:00 P.M.. The urine should be kept at a pH of 7.0 to 8.0 at all such times. If it is below this number, i.e. if it still acid then you need more Base Powder. If the pH stays between 7.0 and 8.0 then you can try to decrease the amount of powder.

It is not necessary to check these pHs often, the pH of the urine at 10:00 A.M. and 2:00 P.M., once every week, month, is sufficient.

It took a long time for us to become acid, for the connective tissues and cells of the body to become saturated with the stored acids. For the same reasons, it will take some time to de-acidify the body, to neutralize and excrete all the stored acids. This process can take one to two years depending on how ill and/or old the patient is. This is not a quick fix as described above, but it will prevent and eliminate the problems that come from being too acid, namely the problems of *pleo-morphic, chronic, degenerative disease*.

4. Magnesium

This is another macro mineral that needs replaced. It is not included in the Base Powder because of its laxative effects. Everyone that is in any state of acidosis requires extra potassium and magnesium as these are lost from the urine and cells when acid. The Potassium is in the Base Powder and an easy way to replace magnesium is with *Magnesium citrate*, obtained from a drug store. It is quite cheap, is a liquid in small pop shaped bottles and is in the laxative section of drug stores. If you drink the whole bottle it will clean you out quite well but instead, take *1 tablespoon upon arising* and *1 tablespoon full upon retiring*. Minerals are best taken on an empty stomach. After opening the bottle keep it refrigerated and it will be O.K..>

5. Vomiting

Vomiting also rids the body of excess acid. Perhaps old time doctors were justified in their use of emetics, medicines that help you vomit. Emetics (Apomorphine, Ipecac) or any emetic, were frequently used for this purpose and can help. The only problem here is that as the hydrochloric acid (HCl) is expelled, the excess acid (H⁺) ion is eliminated as needed but the chloride (Cl⁻) ion is also eliminated and this can result in a relative chloride deficiency. With vomiting this chloride ion must be replaced. This can be done by taking small amounts of NaCl or table salt.

Making yourself vomit after eating something you 'shouldn't have eaten', is not bulimia, just because you did it. In the process, it does rid the body of the 'dietary indiscretion' along with, excess acid.

6. I.V. sodium bicarbonate

This is quite simple, harmless and cheap. The simplest form is to add 35 cc of 8.4% Sodium Bicarbonate (70 meq) plus 24 cc of 20% Magnesium chloride (70 meq) in 500 cc of sterile water. This solution is of course isotonic and variations can be made to suite the situation. This can be given over a period of one hour or more. The only problem I have ever had with this is in one patient, in kidney failure (ready for dialysis) and heart failure in which case it was necessary to give him lasix. I would usually give it one time per week, except in very ill patients where it can be given every day. All types of patients were treated with IVs like this. In the condition being discussed, ulcers, in time would just go away.

7. Take extra micro-minerals or trace minerals too.

There are some ninety of them, gold, silver, and other strange ones. These get depleted also. These trace minerals used to come from plants, as they were in the ground the plants grew in. Most of our farm land has been over farmed with just the replacement of the minerals potassium, phosphorus and nitrogen that are contained in the chemical fertilizers used today. The trace minerals are gone.

There are a few ways to get extra trace minerals. You can use sea salt, *Celtic Sea Salt* is the best, a little every day. You can also drink a third of a glass of sea water every day. Eating sea-weeds, kelp, spirulina and the like are good as are all sea foods.

Of the trace mineral supplements the liquid ones are preferred. *Clark's Minerals* is the oldest, least expensive and best of these. These liquid trace minerals come from the mud of volcanoes. The trace minerals are still present deep under ground. Another way is to fertilize your garden with coal dust. Coal, being crushed dinosaurs and the like, has all the trace minerals in it too.

8. Drainage Remedies

Use herbal remedies to increase the flow of the excretory organs of the body, namely the kidneys, the liver and the intestinal system, in that order. These organs of course are the organs that have to do the work in eliminating the toxins and acids.

Short of that, *we can quit putting toxins into our bodies*. But 'we all know that' so really we don't talk about that one. We pay doctors to say they can 'take care of' our indiscretions but personally I feel it has very little to do with medicine. >

Pathagoras, after a trying career as a physician which he did also, ended up saying too that the only medicine was good air, diet, exercise etc., etc., etc.. Every physician is 'trying', trying to heal, to help yet there is a basic paradox contained in the concept of "healing". Who *is* kidding who? We, as doctors don't heal anybody. God does that, and the patient sometimes, if they are in the mood. So as doctors we can use less and less harmful 'medicines' at least, more and more natural, less and less expensive - give God and Nature a break. If you don't give a healthy person poison, why would you do that to a sick person? All drugs are poisons, herbal medicines, homeopathics, all of them. If they aren't poisons they are foods.

Tongue in cheek, the kidneys are the most difficult to stimulate and take the longest. Therefore this should be started first and kept up for some time. Herbs that help the kidneys are such things as *dandelion* (the most specific herb for the kidneys), *uva ursi*, *bucchu*, *horsetail* tea (a good mineral tea), *juniper berries* (a good diuretic), *golden rod*, *asparagus* and *parsley*. *Parsley* is the food *par excellence* for the kidneys, it nourishes them specifically. *Uva Ursi* contains a chemical that is changed by the kidneys, as it passes through them, into phenol as in Lysol. This is a urinary disinfectant and works. Fresh asparagus juice is an excellent diuretic. Solidago is Golden Rod and is for acute and chronic conditions of the renal system, promoting diuresis and excretion of matter usually eliminated with the urine. Bucco is somewhat stronger than Solidago. *Horsetail Tea* is used in Germany as a diuretic for edema, gout, enuresis, and dysuria and *Plantina-Asparagus Tablets* (used by Hippocrates as well as Paracelsus for urinary conditions, a good diuretic, for gout, skin conditions etc.) are excellent combination herbal drainage remedies from *Marco Pharma, Intl.*, Specialist in Drainage Remedies, 303-716-1033.

Arginex (arginase enzyme source) is used for kidney overload and is an excellent kidney detoxifying product as is Renafood which combines Arginex with a kidney glandular for regeneration. Take 1 or 2 with meals. These last two products are from *Standard Process*, 1200 West Royal Lee Drive, Palmyra, WI 53156, 1-800-848-5061.

The liver is the most important detoxifying organ of the body and in most of us needs the utmost attention. Herbs that stimulate the liver to 'clean the blood' are such things as *greater celandine*, *burdock*, *yellow dock*, *dandelion*, *echinacea* *barberry*, etc. There are liver extracts called *liver glandulars* and *liver liquescences* that help regenerate the liver. One can also manually 'pump' the liver by pressing up and under the left, lower rib cage where the liver is. Castor oil packs over the liver area are helpful as is the drinking of lemon juice.

Hepatica (recommended for detoxification of the liver and gall bladder) and Cholenest (gall bladder indications; constipation; stasis of the portal vein; hemorrhoids; hepatopathy with constipation) from *Standard Process* are herbal tinctures for liver drainage. Herbal Hepatox (*Professional Health Products*) is an excellent tablet as is Livotrit Plus (*Biotics Research*, 5801 Biotics Research Drive, Rosenberg, TX 77471, 800-231-5777) and Livaplex (for liver detoxification, fat metabolism and general liver support from *Standard Process*).

Care of the intestinal system, elimination of foods that one is allergic too and replenishment of the normal bacteria of the intestine is a topic unto itself and will be covered later.

You can also stimulate the skin, which is the fourth largest excretory organ of the body, the kidneys, liver and intestines being the others. While bathing use a *Lufa Sponge* or rough wash cloth and rub your skin until it gets pink. This gets rid of old skin cells, which are acid deposits, and stimulates the lymph and glands of the skin so they excrete more.

9. Eliminate Unwanted Toxins

The best way to "eliminate" toxins from the body is to refrain from consuming more of them or avoid exposure to them. These include such things as fluoride in toothpaste and the water, mercury from amalgam fillings in the teeth and exposure to all heavy metals, exposure to pesticides in the food and environment and unnecessary intake of medicines.

Sweating is an excellent elimination process obviously. A simple way besides the obvious ways is to take a hot bath, as hot as you can stand it, for 'awhile', 15 minutes, a half an hour. You can put Baking Soda in the bath, a pound is not too much, along with say, a cup or so of Epsom Salts. These suck acid out of your body and supply Magnesium which is absorbed through the skin. (Epsom Salts are Magnesium sulphate).

Then, get out of the bath and bundle up in clothes, a bath robe, whatever and get under the covers in bed. Lay there for a half hour or so and you will loose a pound of sweat. It is rather amazing and feels extremely good.

10. Deep Breathing

Protein is not the only source of acids in our body. As stated protein and drugs, alkaloids, produce the hard or strong acids, namely sulfuric, nitric and phosphoric acids.

There are also the weak acids that are produced in the body by the burning of carbohydrates, sugar, fat and the like. Exercise also produces lactic acid, a weak acid, as does stress. >

These weak acids all work in about the same way. These acids are not eliminated like protein, rather they are broken down into water (eliminated by the kidneys) and carbon dioxide (which is breathed out through the lungs). These soft or weak acids, therefore, do not take minerals with them as protein does. None the less they are acids and can aggravate an already acid condition.

For this reason deep breathing is a very important part of eliminating the acid load of the body. We don't breath enough. *Prana Yoga*, becoming one with one's breathing, is a science of breathing. Take slow, deep breaths as often as you think of it, relax. Of course aerobic exercise helps here too.

11. Support the lymph system

The lymph system is the detoxifying 'organ' of the body. The lymph comes from the fluid that surrounds the cells and therefore is the fluid that eliminates the toxins and metabolic acids that the cells themselves produce.

Rebounding

Rebounding is an old method. This consists these days of bouncing up and down on a trampoline or some such device. This promotes the flow of lymph through the body and therefore helps eliminate unwanted acids and toxins. Massage also does this as does the use of a 'slant board'. You can lay on a board or whatever that puts your feet higher than your head. This helps the lymph flow out of the lower parts of the body. Exercises such as standing on your head do the same thing but many people cannot do this type of thing.

12. Increase the oxygenation of the body

Oxygen burns, acids, toxins and so on and therefore helps in their elimination. This too is a topic unto itself and will be covered later also but things that can help are products such as Co-enzyme Q-10, herbs containing the ubiquinones and so on.

13. Stress Reduction

Do this by any means possible. Not to make light of this, but it surely as another topic unto itself. Personally one night without sleep (severe stress for me), makes me extremely acid by the next day.

Stomach Ulcers to Indigestion from Too Little Acid in the Stomach

That which follows is a definitive way of healing acid problems of the digestive system. Persisted in, it can take care of a myriad of symptoms because the essential problem of a "*latent*" acidosis is corrected.

The following defines the pathogenesis (how a disease forms) of ulcers and many similar conditions. Knowing these things, one can clear up the underlying central problem, i.e. the accompanying '*latent*' acidosis, and the ulcer or other acid problems will just go away. You treat the cause, not the symptoms, obviously. The treatment is the same as under the topic, **Treatment**, on the Home Page.

I would hope that this could be a model for a collective "agreement" about what is the best way to care for any particular, physical, vital or mental, dis-ease or lack of ease. The following includes **Homotoxicology** as a point of synthesis for this, along with the concept of 'latent' acidosis, do explain and solve the acid problems the beset the gastro-intestinal system. This is a **New System of Medicine** as far as caring for the acid conditions of the body, both too much and too little acid production and all the attendant problems that accompany these two conditions.

Stomach and Gastrointestinal problems, too much or too little stomach acid.

Acid and Ulcers are the body's way of trying to get rid of acid through the only acid producing organ in the body, the stomach. By the time an ulcer has formed in the body, Pischinger's Space, all the connective tissues, everything will have become saturated with acid residues. In such a condition the body is trying desperately to rid itself of too much acid.

If there is a *latent acidosis* developing in the body , by which the tissues and alkaline organs suffer from a base deficiency, while the blood still possesses its physiological alkali-reserve, **then the stomach has to produce more acid.**

As an example of how this "**deposit hydrochloric acid**" manifests clinically;

"after eating, the acid produced for that purpose is used up as it were by the alkaline substances in the duodenum. If a person has a latent acidosis though, the excess hydrochloric acid *deposited* in the cover cells of this stomach produce a second outpouring of hydrochloric acid into the now empty stomach, so that more alkaline bicarb can be made for the deficient alkaline organs.

This second outpouring produces a *double stomach pain*; first the pain, which immediately appears during the food intake, which corresponds with the outpouring of the "digestion hydrochloric acid" into the stomach; the second one comes after finishing the digestion.

This "late pain" originates from the out pouring of the "deposit hydrochloric acid" into the then empty stomach.

Patients like this, with stomach or pyloric ulcers, gastritis etc., in which there constantly exists a latent acidosis with its attendant inappropriate outpouring of acid in a stomach not needing food, eat because acid is present in the empty stomach, while the healthy person in reverse, produced stomach-acid, because he has eaten." (*Household of the Human Organism*, F. Sander, pg. 98, circa 1930, translated by Robert Miller, D.C., 1998)

So, the excess acids in one with "latent acidosis" get stored in the stomach, they get **deposited** there. What significance does this have? Does this **cause** the ulcer?

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Homotoxicology

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To explain this it will be necessary to digress a little in order to explain Homotoxicology, the study, in essence, of the deposition of toxins in the body.

When the body can't excrete toxins, acids, it creates inflammation to try to get rid of them. If this can't do, *it has to deposit those toxins* somewhere in the body where they will be out of the picture, so to speak, walled off and isolated from the rest of the body.

In fact, if the acid that was trying to be excreted can't be excreted, it backs up more and is **deposited** deeper and deeper in the system or, in other words, in deeper, more vital organs, in the arteries, the heart - in short it gets deposited in the weakest organ of the body, the ***locus minoris resistentiae***. It can't be excreted so the body makes depots for it, deposits it.

This is the basis of **Homotoxicology**, formulated by the German doctor Dr. Hans-Heinrich Reckeweg in 1955 as a unifying approach, based on homeopathy, in his attempt at a synthesis of medicine. *Diseases in this view are expressions of the battle of the organism against toxins, in its attempt to counteract and expel them.* When the body can no longer expel them, for whatever reason, the organism tries through increased pathological means to make up for the damage already sustained. This process goes in six distinct phases:

1. *Excretion phase* or the expulsion of toxins through body orifices, e.g. diarrhea, vomiting;
2. *Reaction phase* - where toxins are removed by the body reacting against them, e.g. fever, inflammation and mobilization of white blood cells to consume the toxins;

3. *Deposition phase* - storage followed by deactivation of the toxins in connective and fat tissue and in the vascular system;

The above phases are naturally "reversible". The following phases become more and more difficult to deal with as in these processes damage occurs to the organs themselves.

4. *Impregnation phase* - severe disease occurs in a "locus minoris resistentiae", the body's weakest organ;

5. *Degeneration phase* - the organ is increasingly and irreversibly damaged, with alteration of the cellular enzymes and in the organic structure;

6. *Neoplasm or Cancer phase*- the cell genes are damaged.

[From *Homotoxicology*, The Core of a Probiotic and Holistic Approach to Medicine by Claus-F. Claussen, M., Aurelia-Verlag Baden-Baden, 1990]

In review, here is what happens as one develops an ulcer...

First, in the ***Excretion phase***, one expels the excess gastrointestinal secretions that contain toxins and acids through the feces, sweat and urine. This could be in the form of diarrhea, mucous in the stool, sweating easily or at night, or burning with urination, increased menses. It could also take the form of or aggravate the irritation of the other mucous membranes of the body, runny nose, bronchitis, allergies and so on.

In the ***Reaction phase*** one can develop inflammatory conditions like heart burn, colitis, enteritis where white blood cells and the like are mobilized to eat up the acid/toxins. Hopefully in the process the toxins are destroyed and that is the end of it.

If the reaction phase can't do its job the ***Deposition phase*** occurs. Here the toxins can no longer be excreted or expelled by inflammation so they begin to be 'walled' off, stored, deposited and inactivated, especially in the very cells of the intestinal tract itself as the stomach *is* the most acid organ in the body. They get stored elsewhere too obviously. With this come polyps of the mucous membranes, constipation and other symptoms of congestion.

Then, as things become more deeply involved, imbedded, tending toward chronicity, comes the ulcer, the ***Impregnation phase***. A tattoo is an impregnation process, introducing a toxin into the skin. The area that ulcerates becomes *impregnated* with toxins, acids, "**deposit hydrochloric acid**" as above and then the area so involved breaks down and ulcerates. If you introduce too much tattooing material into the skin it will ulcerate too. Other factors are involved here too such as spasm of the irritated arteries in the area of a would be ulcer but it all comes from the same thing.

Next comes the ***Degeneration phase***. Tuberculosis of the intestine can represent the degeneration phase as can the appearance of the bacteria ***Helicobacter***

pylori. After *impregnation* comes *degeneration* as the impregnated, in this case ulcerated cells, die. These bacteria appear only to clean up the mess.

"There is now little doubt that *Helicobacter pylori*, found in the stomachs of a third of adults in the United States, cause inflammation of the stomach lining. In 20 percent of infected people it produces and ulcer. Nearly everyone with a duodenal ulcer is infected. H. pylori infections can be readily diagnosed with endoscopic biopsy tests, a blood test for antibodies, or a breath test. In 90 percent of cases the infections can be cured in less than a month with antibiotics." (*The Atlantic Monthly, A New Germ Theory* by Judith Hooper, February 1999, pg. 46)

So, the excess acids in one with "latent acidosis" get stored in the stomach, they get **deposited** there. What significance does this have? Does this **cause** the ulcer?

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***Helicobacter* is the result of an ulcer.**

***Latent acidosis* is the cause of an ulcer.**

* * *

These Helicobacteria come then, appear from out of the stomach cells themselves, to eat up the dead, ulcerated cells that have become impregnated with acid toxins. Dead cells that have become full of toxins are eaten by these bacteria just because there is no other way to get rid of them. Such organ cells, destroyed and eliminated in this manner, don't tend to regenerate. The only way the body could eliminate the toxin ridden cells was to destroy them.

Certainly this bacteria is not the cause of the ulcer but, it is there 90% of the time and like any bacterial infection, can get out of hand. Like any bacterial infection that gets out of hand, antibiotics can be necessary too.

* * *

Of course cancer of the stomach, colon, represent the ***Neoplasm phase***, a last ditch effort at 're-generation'. The toxins have become so impregnated and the cells so degenerate that the DNA of the cells themselves is effected. The intoxicated cells begin reproducing without control, just to stay alive. The toxins rot in the middle of the tumor which is teeming with microorganisms. These organisms have been called different names over the years but of late they have been called *Siphonospora polymorpha v. Brehmer* by Virginia Livingston and *Fasciolopsis buskii* by Hulda Clark in her book *The Cure For All Diseases*.

The small intestine, into which the liver discharges its alkaline bile and the pancreas its alkaline digestive juices, hardly ever, never, gets cancerous - as it is alkaline all the time, not acid like the rest of the body. Cancer is the most acid of all diseases.

