INTRODUCTION TO
PHARMACEUTICAL
SCIENCE

WITH THE SCIENCE OF HOEMOPATHY

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DOCTORC: READ THIS BOOK BEFORE YOU PRESCRIBE ANOTHER MEDICATION!!!
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** THERE ARE MANY OPINIONS OF THE NATURE OF HOMEOPATHY AND PHARMACOLOGY, THIS BOOK OFFERS SOME NEW AND SCIENTIFIC THEORIES TO COMPLEMENT OTHER MORE ESOTERIC THEORIES. READ, DISCUSS, AND THINK.
INTRODUCTION

Since the beginnings of civilization humanity has recognized the useful and medical effects of certain substances. Plants, animals, mineral and other substances were observed to have certain effects on animals and people. There were instinctive desires to eat certain substances when one had a certain sickness observed in animals and humans. This was the start of pharmacology.

Early medicine started to try to analyze the effects and components of these compounds. Early science revered the natural. Science believed that only nature could make useful medicines. There was the doctrine of signatures that what a plant looked like was an indication of it use. The empiricists believed in the spiritual nature of medicine.

As science progressed so did the understanding of pharmacology. As reductionistic science grew in popularity reductionistic ideas of pharmacology flourished as well. The advent of quantum biology and the understanding of fractals, fuzzy logic, and non linear mathematics have confirmed the problems of reductionism. Reductionistic synthetic pharmacology has lead to vast amounts of iatrogenic disease. Chemical phobias has pervaded society. Over half a century ago our society chose to synthetically duplicate our medicines and harvest our foods. The chemical companies excited the public with false promises of a chemical future. Better living through chemistry was the promoted dream of the companies. They developed a host of medications that worked so called wonders. but the wonders later turned to dust as side effects mounted up and over took the positive results.

The same companies also tried to make synthetic wine, cheese, and other foods. But they just weren't any good. The wine was not palatable. The people at first rejected the synthetic medications when they were liquids for oral use as well. The chemical companies had a way around the implatable taste, they invented the pill. The pill conveniently circumvented the taste effect. But unfortunately the foods and wine could not be made into pills.
So society continued to farm its' foods and wine but not its' medicine. The chemical companies profit from the patented synthetic medicines and they did all they could to discourage the farming of medicines.

The first great excuse was that farming medicines as herbs would result in inconsistencies. As if a good wine from a quality vineyard is inconsistent. As if a quality gourmet coffee is greatly different every time. If there is professional attention to the farming and cultivation there can be satisfactory consistent results that rival the chemical companies. The success and quality of the Oriental herbologist shows us that quality herbs can be harvested and used in medicine with great consistency and safety.

The next excuse was that the herbs contained inert ingredients. These inert ingredients seem to have some safety factors. These other ingredients help to regulate and stabilize the side effects of the more active compounds. Homeopathy and herbology have dramatically less side effects than their synthetic counterparts.

The next excuse was that the herbs worked to slow. The synthetic chemicals were designed for immediate action in emergency or crisis situations. They are a needed part of any emergency ward. But for most patients presenting in a medical office a slower and less harsh medication is indeed safer and better.

The effects of slightly diluted herbs such as in low range homeopathy don't usually have immediate effects. Although immediate effects can be observed, most often the effects are manifested over a 7 to 14 day period. As the pharmaceutical accumulate in the system the desired effect develops slowly allowing stability and thus minimizing side effects. This accumulation occurs as the chemical agents collect in the blood stream, cells, lymphatics etc. Thus sub clinical dosage can increase safety while developing the positive results.

Another excuse from the chemical companies was that there was not enough room to plant all of the herbs. As we move from clinical demanding of action to subclinical accumulation allowing action, we use dilute herbal compounds. In homeopathy we speak of the minimal dose effect of looking for the smallest amount with a patient that can gently encourage homeostasis and health. With this in mind a small quantity of a herbs goes a long way. People are destroying the rhinoceros for his horn. The effect is a supposed aphrodisiac. But the effect can be seen at one part per million in homeopathy dilution. Thus one rhinoceros could make enough medicine for over ten million patient. The natural death of one rhinoceros could satisfy so many as to make needless killing of the animal senseless. The world of herbology has to learn that more is not better. In fact dilution often increase the action.

So as we look into the future of medicine we can see that harvesting our medicines is a dramatic choice that could have several positive effects on society.
The healing of the nations will indeed come from the leaves of the field. The positive effects include minimizing side effects, thus greatly reducing the cost of medicine, helping the environment, and others.

In fact this choice is available now. The general public simply does not know that they can already choose such natural and legal medications. The HPUS is alive and real in America. The HPUS allows for such medications and it is a choice that the public could make.

This book is dedicated to analyzing the field of pharmacology and increasing the information about this choice. This is also a choice that doctors are free to make as well. Doctors can indeed use these medications with their patients as well.

The challenges of reductionism have lead to a greater appreciation of medical arts of homeopathy, herbology, and alternative medicine. But the powers of science has lead to greater understanding of the art and process of pharmacology. The findings of science can now be used to fortify natural pharmacology and nonreductionism.

This book is one attempt to relate the basics of pharmacology from the scientific side and the natural medical side. To explain our current understanding of pharmacology in the light of humility and the recognition that we cannot ever fully understand the natural process. This leads to a new medicine, Which is a blend of the past world of homeopathy, naturopathy and herbology with the scientific world of pharmacology.

This book should also help the reader to understand the growing collection of research in homeopathy science this field is progressing and flourishing. The clinical, experimental, and scientific literature of homeopathy are briefly introduced in this volume. References to other research are supplied in the bibliography

PRINCIPLES OF HOMEOPATHIC PHARMACEUTICAL ACTION

Medical pharmacology is the science of chemicals, herbals, and homeopathics (pharmaceutical) that interact with the human body. These interactions are divided into four classes:
1. pharmacodynamics, the primary effects of the chemical pharmaceutical on the body,
2. pharmacokinetics, the way the body affects the pharmaceutical with time (e.g. absorption, distribution, metabolism and excretion),

3. rebound reaction or the stabilizing secondary reaction to the primary drug effect and

4. energetic regulation the electromagneticstatic regulation of homeostasis. (the electrical trivector effect)

The primary pharmaceutical effects are shown in the figure below. A few drugs (i.e. general pain blocker, laxative, osmotic diuretics, antispasmodic, etc.) act by virtue of their primary physicochemical properties and this is referred to as non-specific pharmaceutical action. Some pharmaceutical act as false pseudo substances or inhibitors for certain transport systems or enzymes. Most pharmaceutical, however, produce their effects by acting on specific protein molecules. These proteins line the cell membrane. These proteins are called receptors (lower part of figure 1). Receptors are designed to respond to endogenous natural chemicals in the body. These complex natural chemicals can be synaptic transmitter substances or hormones. For example, acetylcholine is a transmitter substance released from motor nerve endings and it activates receptors in skeletal muscle initiating a complex intertwine of biocybernetic events that results in contraction of the muscle. Chemicals, herbs, or homeopathics (i.e. acetylcholine or adrenaline) that activate receptors and produce a response are called agonists. Some pharmaceutical, called antagonists, combine with receptors, but do not activate them (like curare a natural herbal blend used in South America). Antagonists lower the probability of the transmitter substance (or another agonist) combining with the receptor and so reduce or block its action.

The activation of receptors by an agonist or hormone is coupled to the physiological or biochemical responses by transduction mechanisms (lower part of figure) that often (but not always) involve molecules called "second messengers".

Nature makes the best pharmaceutical. There is extreme sophistication of these compound and synthetic fake imitation pharmaceutical only approximate the real item. It can definitely be said that to use a synthetic anything is an insult to the body. Natural compounds are the best match and have much less side effects compared to the synthetic counterfeits. The body makes its own natural transmitters and to reestablish balance and health is the ultimate goal of medicine.
The interaction between a pharmaceutical and the binding site of the receptor depends on the complementarity of "electromagneticstatic fit" of the two molecules. There is plasticity in this reaction as that the fit need not be precise.
The closer the fit and the greater the number of bonds (usually non-covalent, or ionic), the stronger will be the attractive forces between them, and the higher the affinity of the pharmaceutical for the receptor. The ability of a pharmaceutical to combine with one particular type of receptor is called specificity. No synthetic pharmaceutical is truly specific but many have a relatively selective action on one type of receptor. (many of the references in this book are from the "Medical Pharmacology at a Glance" by Neal, books 22, where much of this text is paraphrased)

The body is an extremely complex set of cybernetic regulators. For life to exist it must be able to direct and modulate billions of interactions in sensitive feedback loops. The information handshake of cells, organs, organ systems, and organisms is so vastly complex as to be beyond comprehension. (ref. Books 1)

Natural compounds have subtle effects to help promote stabilization. Reductionistic synthetic pharmaceutical are made more for the profitability of patent rights than for diminished side effects. There is absolutely no research that shows that synthetics are equivalent to natural compounds. There is only an incorrect assumption of the equivalency. This is a basic flaw that more and more people recognize. There is in fact a wealth of research that demonstrates a big difference. This research comes mostly from the alternative field, but this research is not widely disseminated by the press. The press is largely controled by the Chemical companies, who would be severely hurt by this data. (ref. Books 1)

Synthetic Pharmaceuticals are given to produce a therapeutic effect but they often produce additional unwanted side effects that range from the trivial (e.g. slight nausea) to the fatal (e.g. aplastic anemia). The list of iatrogenic disease effects is growing with the patent medicine sales. Natural compounds used in homeopathy are designed for minimal dose and made for safety first.

RECEPTORS AND RECEPTOR SITES

These are protein molecules which are activated by transmitters or hormones. They are usually on the cell membrane.

Transmitter substances are chemicals released from nerve terminals. As an action potential arrives and depolarizes the neuron terminal, an influx of Ca^{2+} ions somehow initiates the release of transmitter molecules which diffuse across the synaptic cleft and bind to the receptors. This activates the receptors, presumably by changing their conformation, and triggers a sequence of postsinaptic events resulting in, for example, muscle contraction or glandular secretion. Following its release, the transmitter is inactivated by either enzyme degradation (e.g. acetylcholine) or reuptake (e.g. noradrenaline, \(\lambda\)-aminobutyric acid). (ref. Books 22)
The actual natural process is still unknown so intervention should be as natural and minimal as possible.

Hormones are natural occurring chemicals endocrine released into the blood stream and produce their physiological effects on tissues possessing the necessary specific hormone receptors. Whereas the hormones have inverse effects on opposing tissues. The feedback loops that regulate the extremely complex modulation of homeostasis can easily be upset by the mega dosing of synthetic hormones used by patent medicine. Pharmaceutical may interact with the endocrine systame by inhibiting or increasing hormone release. Other pharmaceutical interact with hormone receptors which may be activated or blocked. Local hormones (autacoid) such as histamine, serotonin (5-hydroxytryptamine, SHT), kinins and prostaglandins are released in pathological process. The effects of histamine can sometimes be blocked with antihistamines and drugs that block prostaglandin synthesis (e.g. aspirin, feverfew, birch bark) are widely used as anti-inflammatory agents. By using natural occurring hormones from glandulars we can help to regulate these processes with small amounts of hormone. This is called sarcodal homeopathy and is a hallmark of homeopathic therapy. (ref. Books 6)

The sophistication of the living cybernetic loops is very sensitive. Extreme care must be taken in intervention. Many chemical companies who use patented sinthetic medicines use statistical techniques to observe mandatory reaction of their compounds. Then dosage is charted just under lethal or damaging limits to maximum safe dosages. Minimal dosing to individual needs makes more sense. In our books on subspace theory we can show a new theory of synaptic cleft function. (ref. Promorpheus, an Advanced treatise on Subspace and Quantum Biology)

TRANSPORT SYSTEMS

The lipid cell membrane maintains a barrier against the transport of hydrophilic molecules into or out of the cell. Nutrients must move into the cell and autotoxins must move out.

Ion-channels are selective pores in the membrane that allow the ready transfer of ions down their electrochemical gradient. The open-closed state of these channels is controlled either by the membrane potential (voltage-sensitive channels) or by transmitter substances. There are channels (e.g. Ca\(^{2+}\) - channels in the heart) where both voltage - and transmitter - sensitive capacitaces exist. Some examples of pharmaceutical that act on ionic-channels are the calcium antagonists, local anesthetics, mineral balancing, certain ultra high dilutions and homeopathic cell salts. (ref. Books 22)
Active transport processes allow transfer of substances against their concentration gradients. They utilize special carrier molecules in the membrane and require metabolic electromagneticstatic energy. Two examples are:

1. Sodium pump. Here Na$^+$ ions are expelled from inside the cell by a mechanism that derives energy from ATP and involves the enzyme ATPase. The carrier is linked to the transfer of K$^+$ into the cell. The cardiac glycosides (such as herbal digitalis purpurea, or digitalis lanata) act by inhibiting the Na$^+$ / K$^+$ -ATPase. (an active form contained in the Heart Liquescence) These have been found safe and active at 6x or one part per million. (ref. journals and studies 9)

Diuretics inhibit Na$^+$ and/or Cl$^-$ transport processes in the kidney. Such herbal safe examples are uva ursi, hydrangea and others contained the Kidney Liquescence. (ref . osmolarity study, studies)

Much of the problems regarding cardiac disturbances caused by sodium pump problems are a result of mineral imbalances. Synthetic pharmaceutical solutions are calcium blockers, which produce a great many side effects. It is now known that a diet rich in natural potassium has more positive effects than synthetic medication.

The electrophysical process of the sodium pump is dependent on the voltage and amperage vectors in the cells. Many behaviors and nutritional problems contribute to disturbances in this area. The synthetic pharmaceutical upset the homeostatic balance in this area and produce much iatrogenic disease.

2. Noradrenaline transport into nerve terminals is responsible for inactivating the transmitter following its release into the synaptic cleft. The synthetic tricyclic antidepressants prolong the action of noradrenaline by blocking its natural reuptake. This produces a host of irregular side effects. Natural treatments include sodium balance, stress reduction, and exercise to produce more active noradrenaline rather than blocking natural reuptake.

STORAGE. A few pharmaceutical affect presynaptic transmitter storage. For example, reserpine (found in rauwolfia serpentina used in treating hypertension) interferes with the storage of noradrenaline by synaptic vesicles and within twenty-four hours can deplete catecholamine in nerve terminals to negligible levels. Safe dosage of the rauwolfia is in a 5x or 6x dose lower dosage of 3x or 4x can be used in stubborn conditions for short periods of time. Lower dosages are not recombined.
ENZYMES

Enzymes are catalytic proteins that increase the rate of chemical reaction in the body. Enzymes are paramagnetic substances that are drawn to substrates by magnetic action. Drugs that act by inhibiting enzymes include anticholinesterases which enhance the action of acetylcholine which is the basis of some insecticides.

Then there is carbonic anhydrase inhibitors which act as diuretics, by effecting mineral and oxygen movement. There is also monoamine oxidase inhibitors which are antidepressants. Another example is inhibitors of cyclo-oxygenase (e.g. aspirin). In fact the overall philosophy of much of allopathic medicine is to block or interfere with natural processes. Homeopathic philosophy attempts to regulate enzymes with subtle energetic modulation while trying to work with natural homeostasis rather than against it.

SECOND MESSENGERS

Second messengers are chemicals whose intracellular concentration increases or, sometimes rarely, decreases, in response to receptor activation by agonists. The second messengers trigger processes that eventually result in a cellular response. The second messengers are part of a complex system of cybernetic feedback needed to regulate natural process. The most investigated second messengers are: Ca\(^{2+}\)-ions, cyclic adenosine monophosphate (cAMP), inositol triphosphate (IP\(_3\)) and diacylglycerol (DG).

cAMP is formed from ATP by the enzyme adenylcyclase when, for example, \(\beta\)-adrenoceptors are stimulated. The cAMP activates an enzyme (A-kinase) which phosphorylates a protein (enzyme) leading to a physiological effect.

IP\(_3\) and DG are formed from membrane phosphatidylinositol, 4,5-biphosphahet by activation of a phosphodiesterase. Both messengers can, like cAMP, activates kinases, but IP\(_3\) does this indirectly by mobilizing intracellular ca-stores. Muscarinic effects of acetylcholine and \(\alpha_1\) - adrenergic effects involve this mechanism.

There are tertiary and quatery messengers as well. The living system is so vastly complex that synthetic intrusion with mega dosing of synthetic single nutrients is ludicrous.
Much of natural alternative medicine has developed using unnatural and synthetic nutrients. Over 90% of what is sold as natural vitamins are actually just synthetic imitators of the natural items. The Chemical companies own and operate much of the vitamin industry. Thus they try to capitalize on the natural trends, but the real problem is the lack of true appreciation of natural medicine.

UNWANTED PHARMACEUTICAL RESULTS
IATROGENIC DISEASE

Adverse effects related to dosage,

There are many types of adverse effects including synthetic incompatibility, upsets in homeostatic feedback balance, addiction to external stimulation, genetic mutation, overburden of detox mechanisms by unnatural excesses of hormones or enzymes, or long term disruption of natural processes. A pharmaceutical that acts on a receptor type which is present in many tissues will cause predictable adverse effects. For example, atropine blocks acetylcholine receptors which are present in the viscera, eye, skin and brain, and whatever the pharmaceutical is given for, it is likely to cause blurred vision, dry mouth, constipation and urinary retention. Some pharmaceuticals act on several different types of receptors. For example, the beneficial effects of chlorpromazine in schizophrenia result from blocking dopamine receptors in the brain, but the pharmaceutical also blocks acetylcholine receptors and may produce the effects described for atropine. Many unwanted effects are simply due to extension of the pharmaceutical's action. Thus overdose of the anticoagulant, heparin, causes bleeding. (ref. books 22)

Adverse effect not related to dosage.

These include hypersensitivity reactions, which are harmful immunological response to pharmaceuticals.
IATROGENIC EFFECTS OF SYNTHETIC PHARMACEUTICALS
1. synthetic incompatibility with biology
2. upsets in homeostatic feedback balance interferes with cybernetic balance
3. addiction to external stimulation, using an external supplement can lower the natural production and produce addiction
4. genetic mutation, overbunden of detox mechanisms by unnatural excesses of hormones or enzymes
5. long term disruption of natural processes.
6. allergic reaction
7. enzyme intolerance effects
8. over dosing
9. improper mixing of drug effects
10. inadequate investigation of drug side effects and long term consequences of use, by chemical company.

Every year there is an average of 120 billion sought against the chemical companies for iatrogenic drug related damages. Over 30 billion is paid each year by the chemical companies in admitted damages. The amount of drug damages is related to the amount of synthetic drug use. Homeopathic use is much safer and there is dramatically less damages. (ref. books 1)

PHARMACEUTICAL - RECEPTOR INTERACTIONS

There are limited responses of the tissues in the body when exposed to agonists (e.g. muscle contraction, glandular secretion). The quantitative relationship between these physiological responses and against concentration is measured by using bioassay. The pharmaceutical-receptor interaction, i.e. the binding of the pharmaceutical to receptors, can be studied in isolation using binding assays. This technique can only approximate the natural process in that much of the secondary, tertiary and other modulation mechanisms are missing in the in vitro experiments.

Research has found that for many tissues and agonists, when the response is plotted against the concentration of the drug, a curve is produced. This curve is often hyperbolic in type and is referred to as the dose-response curve. Often we plot the response against the logarithm of the agonist concentration. This will be referred to as the log dose-response curve.
Assuming that the interaction between the drug (A) and the receptor (R) obeys the law of mass action, we conclude that the concentration of pharmaceutical-receptor complex (AR) is given by:

$$ AR = \frac{[R_0][A]}{K_D + [A]} $$

where

- $R_0$ = total concentration of receptors,
- $A$ = agonist concentration,
- $K_D$ = dissociation constant,
- AR = concentration of occupied receptors.

As we can see from this equation the agonist concentration is on the top and bottom of the division line. So increasing the concentration is not important they cancel out. The dissociation constant doesn't change. The important factor is receptor site concentration. With this in mind mega dosing of large quantities of synthetic drugs is not important. Using microdoses such as in sarcodal endocrine homeopathy makes more sense.

This is the equation for a hyperbola. The shape of the dose-response curve is explained if the response is directly proportional to (AR). This simple theory does not explain another experimental finding. It is found that some agonists, (called partial agonists), cannot elicit the same maximum response as full agonists even if they have the same affinity for the receptor. So an agonist in addition to having affinity for the receptor, also has another chemical property called intrinsic efficacy. Intrinsic efficacy is the ability to elicit a response when an agonist binds to a receptor (ref. books 22).

In fact this synaptic cleft of receptor sites is so small that it defies thermodynamic analysis. In the Quantum Biology we calculate the mass and distance and it proves that the receptor interaction is under quantum mechanics. With this analysis it becomes more apparent that synthetic chemistry is inappropriate. (ref. Promorpheus, Quantum Biology)

A competitive antagonist is a compound with no intrinsic efficacy. A competitive antagonist effectively dilutes the receptor concentration. This causes a parallel shift of the log dose-response curve to the right, but the maximum response is not depressed. In contrast, irreversible antagonists which bind covalently, depress the maximum response. However, at low concentrations a parallel shift of the log dose-response curve may occur without a reduction in the maximum response. Since an irreversible antagonist in effect removes receptors from the system, it is clear that not all the receptors need to be occupied to elicit the maximum response (i.e. there is a receptor reserve). This is further evidence of the homeopathy minimal dose effect.
QUANTIC INTERMOLECULAR FORCES

The pharmaceutical molecules in the environment of receptors are attracted initially by relatively long-range electrostatic forces. These forces can only be described with quantum physics. Then, if the molecule is suitably shaped to fit closely to the binding site of the receptor, weak ionic, hydrogen bonds and van der Waal forces briefly bind the pharmaceutical to the receptor. Irreversible antagonists bind to receptors with strong covalent bonds. The receptor site is electrically sensitive. The existence of a trivector electromagneticstatic field imprinted on water conformity structure could also simulate the receptor site. In our articles on Topology and Shape receptors explains how the liquid crystal memory of water can maintain this electrical polymorphic field. (ref. Topology, Shape receptor) So our evidence indicates that ultra high dilutions properly succused could be pharmacological active. (ref. books 1,2,3,4 )
BINDING AFFINITY

Affinity measures of how avidly a pharmaceutical binds to its receptor site. Affinity can be described by the equilibrium dissociation constant (K_D). This constant is the ratio of rate constants for the reverse (k_−1) and forward (k_+1) reaction between the pharmaceutical and the receptor. The reciprocal of K_D is called the affinity constant (K_A) and (in the absence of receptor reserve, see below) is the concentration of pharmaceutical that produces fifty percent of the maximum response.

IIVTERMOLECULAR FORCES

A R ARC T
Agonist Receptor Agonist Receptor Complex Transducer
ARCT complex

A R AR T ART->response
ANTAGONISTS

These are pharmaceuticals that bind to receptor sites but do not activate them. They may be competitive bound (ionic) or irreversible bound (covalent).

Competitive antagonists bind reversibly with receptors and the tissue response can be returned to normal by increasing the dose of agonist, because this increases the probability of agonist-receptor collision at the expense of antagonist-receptor collisions. The ability of higher doses of agonist to overcome the effects of the antagonist results in parallel shift of the dose-response curve to the right and describes competitive antagonism.

Irreversible antagonists (e.g. phenoxybenzamine and a host of synthetic chemicals) cannot be reversed by increasing the concentration of agonist. This burdens the detox process and overloads a system already burdened by environmental toxins. These environmental toxins such as insecticides, herbicides, etc. are further examples of irreversible antagonists.

RECEPTOR RESERVE

For many tissues, irreversible antagonists initially shift the log doseresponse curve to the right without reducing the maximum response, indicating that the maximum response can be obtained without the agonist occupying all the receptors. This has been described as the Hormetic effect. The excess receptors are sometimes called "spare" receptors. Spare receptors is a deceiving term because the receptors are of some functional significance. They increase both the sensitivity and speed of a system because the concentration of pharmaceutical-receptor complex (and hence the response) depends on the produce of the agonist concentration and the total receptor concentration. Thus the hormetic effect of isodal homeopathy can have stimulating effects on receptor reaction. (ref. Experimental Evid. of Homeo)

PSEUDO OR PARTIAL AGONIST

This is an agonist that cannot produce the same maximum response as a "full" agonist. The reasons for this are unknown but it is surmised that the trivector field changes synergistically in the receptor field. Recently, it has been suggested that agonism depends on the affinity of the drug-receptor complex for a transducer molecule (lower figure).
Thus a full agonist produces a complex with high affinity for the transducer (e.g. the coupling G proteins,) while a partial agonist-receptor complex has a lower affinity for the transducer and so cannot produce the full maximum response. (ref. books 22)

Partial agonists stimulate a physiological response, when acting at receptors alone. However the partial agonists antagonize the effects of a full agonist (e.g. some α-adrenoceptor antagonists). Energetic intermixing of the electromagneticstatic trivector field potentials in one circumstance but neutralizes in another. (ref. books 1,2,3,4)

CONFORMATIONAL INTRINSIC EFFICACY

This is the ability of an agonist to alter the conformation field of a receptor in such a way that it effects a response in the system. It is the affinity of the agonist-receptor complex for a transducer. The conformational field is the polymorphic shape of the agonist or the receptor. This shape type has a quantic probability matrix, which can be triggered by a mutually compatible trivector shape. It is due to the plasticity of this probability field that allows for the ability of a synthetic chemical to imitate a natural compound.

Partial agonists and receptor reserve. A pharmaceutical that is a partial agonist in a tissue with no receptor reserve may be a full agonist in a tissue possessing many "spare" receptors because its poor efficacy can be offset by activating a larger number of receptors than needed by a full agonist.

SYNTHETIC BIOASSAY

Bioassay involves the use of a biological tissue to determine pharmaceutical concentration to a physiological response. Sometimes isolated tissues are used because it is easier to control the pharmaceutical concentration around the tissue and reflex responses are abolished. This is still an in vitro assay because it is performed outside of the natural field of the body. Bioassay can be used to estimate (a) the concentration of aus tissues has been one of the main ways used to classify receptors; pharmaceutical, (b) its binding constants, or (c) its potency relative to another pharmaceutical. Measurement of the relative potencies of a series of agonists on various Adrenoceptors are but one example. The lack of total intertwining of the body field along with the detox process makes the bioassay mostly yield higher results than required. This leads to more complications of iatrogenic disease. (ref. books 22)
BINDING ASSAYS

Binding assays are simple and very adaptable. Membrane fragments from homogenized tissues are incubated with radiolabelled pharmaceutical (usually $^3$H) and then recovered by filtration. After correction for non-specific binding, the $^3$H-pharmaceutical bound to the receptors can be determined and estimations made of $K_A$ and $B_{\text{max}}$ (number of binding sites). Binding assays are widely used to study pharmaceutical receptors, but have the disadvantage that no functional response is measured and often the radiolabelled pharmaceutical does not bind to a single class of receptor.

This reveals another unnatural process as that this only relates the binding capacity in an unnatural exposure to radiation fields. Biology is sensitive to these fields and thus our radiotracing results are also non conclusive.

ABSORPTION DISTRIBUTION AND EXCRETION

When a drug is given orally it can have three types of action.
1. It can be absorbed through the gut wall
2. It can trigger nerves by polymorphic stimulation of shape receptors such as sublingual nerves which initiate subcortical regulatory changes
3. It can have electrical effects on nerval and biological regulation

Intestinal or gut absorption is affected by the lipid solubility factor of the compound. Unionized molecules are easier to absorb because they are more lipid soluble. Compounds absorbed from the GI tract enter the portal circulation and are swept to the liver for metabolization or conjunction of toxins. An exception to this is that large molecules can penetrate the intestinal chylifers and enter the lymphatic circulation, thus by passing the liver.

Polymorphic shape receptors in the nasopharynx can be stimulated and then trigger systemic preparation of the system for what is about to enter the digestive tract. The digestive tract is then programed for specific enzyme and ph release.

Ionized components can trigger electrical sensitive nerves in the sublingual area which are innervated directly to the midbrain and old brain structures. These areas are responsible for systemic regulation of homeostasis. This is the key of much of homeopathic therapy. (ref Registered Wellness Consulatant book)

A lipid soluble drug is rapidly distributed throughout the body after absorption. The distribution is into water compartments. Most drugs become loosely bound to albumin in the plasma. Drugs permanently bound to the plasma protein are not able to exert pharmacological effects. Intervenous drugs spread rapidly to tissues. The rate of drug elimination is great at first.
The drug concentration falls rapidly at first and then decreases in an exponential manner. This is due to a need for the body to detox rapidly in response to a large dose of an unnatural compound such as a synthetic drug. The primary drug elimination processes are:

1. Urine, from filtration of the Kidney
2. Conjunction, metabolism in the liver
3. Uptake by the liver and elimination in the bile
4. Opsonization or reticuloendothelial detox
5. Metabolism in the system elimination in the lungs skin and intestine.

Metabolism via enzymes, buffer, conjunction, absorption etc

Pharmaceuticals have many different modes of administration. The solubility and electrical charge of the substance make different pathways of absorption or influence. Traditional chemical pharmaceuticals are designed for chemical effects, so their mode of administration is for chemical transfer. Low and mid range homeopathy share this modality. However high dilution works more by influence on shape receptors in the neurology of the patient so their administration is to oral nasophamyx where the most shape receptors exist. But since there are shape receptors on all of our cells topical administration can be effective.

**ROUTES OF ADMINISTRATION OF PHARMACETICALS**

1. oral 6. topical
2. Intravenous injection 7. sublingual
3. intramuscular injection 8. rectal
4. subcutaneous injection 9. electrical
5. inhalation

**EXCRETION**

The half life of a pharmaceutical is the time it takes for the concentration of the drug to decrease to one half of its original value. Every drug has a elimination rate which makes up its elimination rate constant. This constant varies from one drug to another. Some drugs that are water soluble have small half life values such as valium which has a half life of 12 hours. DDT the insecticide however has a half life of 2 years.

The volume of distribution is the apparent volume into which a drug is distributed. Certain drugs are retained only in the vascular compartment. Certain drugs are restricted to the extracellular fluid. And certain drugs are distributed throughout the total body waters. The volume of distribution can be used to calculate the clearance of a drug.
The initiation range is the amount of homeostatic regulation that is started by a homeopathic. Once a homeopathic starts to induce a change in the metabolism the change acts as a wave in the homeostasis. A wave of change like a soliton. The size of the wave is the initiation range.

Clearance of a drug is measured in the volume of blood or plasma cleared of a drug in a set unit of time. For the most part we can calculate total clearance by adding liver (metabolic) clearance to kidney (renal) clearance. For maximum health and vitality liver clearance should exceed kidney clearance in the early part of the exposure. The liver dose most of its work in the first few minutes. The kidney does its job over a longer time. The kidney will do most of the detox of the drugs. The total clearance divided by the clearance constant reveals the clearance capacity.

Bioavailability describes the proportion of drug chemistry reaching the systemic circulation. Many drug companies engineer their compounds for maximum Bioavailability. This produces irregularities and long term detox concerns as well as secondary aide effects. Thus unnatural compounds that have longer lasting effects can upset the natural regulation cybemetics most effectively. This is the foundation of iatrogenic disease. To assume that similar bioavailability of a synthetic to a natural is reason enough to assume that the synthetic are equivalent to natural was the biggest mistake of medical science.

Ultra Nigh Dilution UHD Homeopathy makes its imprint and effect on biology Natural compounds are more proficient in triggering the natural system to regulate itself rather than drive the system unnaturally such as with synthetic drugs.
REGULATION OF THE NEUROMUSCULAR

JUNCTION

The neuron conducts the action potential to their terminal. Here adepolarization starts an influx of Ca ions and the release of ACh acetylcholine. This is known as exocytosis. The ACh crosses the junction cleft and binds to a receptor on the surface of the muscle fiber membrane. This forms a reversible combination of ACh with receptor site, which triggers the opening of the cation channels in the muscle. This allows sodium and potassium ions to flow which starts depolarization. If the depolarization is enough an action potential forms and starts muscle contraction. The ACh released in the cleft is broken up by the enzyme acetylcholinesterase (AChE).

This neuromuscular action is increased by diminishing the AChE. Many drugs and insecticides lower the AChE. The muscarinic effects of ACh are potentiated by anticholinesterase are blocked by atropine found in belladonna. Myasthenia gravis is a disease with available ACh, so using antiAChe compounds help to increase available ACh. This is a autoimmune disease where there is a disorder in neuromuscular function. The excess and highly attractive IgG antibodies produce a loss in ACh. Problems of the T-cells from the thymus contribute and surgical solutions of myasthenia gravis include thymectomy. This is completely irregular reasoning. Rather than correct the imbalance you cut out a living organ.

The effects of the neurotransmitter on the receptor site is largely a trivector or electrical pattern shape fit. This means that an electromagneticstatic vector component fits into the receptor. The then triggers the flow of ions. In homeopathy the trivector stored electrical shape imprinted into the liquid crystal effect of water can trigger the same response.(ref. Trivector, shape receptor, topology)

Neuromuscular blocking agents (the most famous being the extract of the Strychnos castelnaei plant or the Chondodendron tomentosum plant otherwise known as curare) act by blocking the receptor site of ACh at the muscular junction. This produces total muscular relaxation in large doses. In small doses or in high dilution there is a reversal effect of stimulation of the muscle active ACh. So high dilutions of curare is useful in myasthenia gravis. Homeopathic treatment of the over active thymus with a mid range sarcode is also beneficial.

Certain compounds block or reduce the release of ACh. The most famous of which is also a natural compound released from the botulinum bacteria. This botulinum endotoxin acts in large amount to block muscle stimulation. In small amounts of high dilution the reverse effects can be manifested.
Excess magnesium and cobalt ions also can have a disabilitating effect on ACh release, so watch over dosing.

Acetylcholine is manufactured in the motoneuron terminal. It is made from choline and acetylcoenzyme A in the presence of the enzyme choline acetyltransferase. We need small amounts of choline, acetic acid (vinegar), pantothenic acid, magnesium, cobalt, coenzyme A, and calcium in our diets to perfect this process. Large amounts of any or all of the later can have disturbing results. When analyzing the medical history of muscle fatigue suspect overdosing first. So moderation in all things.

The body fears change, the body tries to always maintain homeostasis. The older the body is the more resistance to change. We see this in peoples attitudes as well. So medicine is done best when we try to gently encourage change through adaptation. Harsh synthetic drugs have such destabilizing effects that secondary, tertiary or other side effects abound. Homeopathic medicine is based on gentle minimal dosing concepts of letting the patient cure his own body from within.

**NATURAL AND HOMEOPATHIC TREATMENTS**

**MUSCLE FATIGUE**

1. eliminate overdosing of nutrients.
2. supply small amounts of nutrients K, Na, Mg, Ca
3. homeopathic botuninum 9x+
   homeopathic curare 9x+

**MUSCLE RIGIDITY TENSION**

1. 1.100 mg magnesium, 50mcg cobalt,
2. Valarian 2x or 3x, Relax
3. Stress reduction
NATURAL VERSUS SYNTHETIC

There is no studies done by any drug company that compares the clinical invivo effects of synthetic compounds with their natural origins. The chemical companies have done extensive invitro test tube tests. There is vast quantities of nontraditional research that shows there is a significant difference. As an example the any person who enjoys good wine or food will know the difference between synthetic or natural. The best is always the natural. Nature know how to blend the subtleties of complex factors to achieve the best blend of complexities. Gourmet cooks learn how to blend these complexities for maximum flavor and effects. Just as the master herbalists blended herbs for medicines. Reductionistic science , which was so successful with mechanical things was used to analyze herbs. Reductionism was used then to isolate the so called active or reductionistic ingredients. The fact that only synthetic medicines could be patented gave further incentive to chemical companies to reduce more and more herbal medicines to their reductionistic "active " ingredient. The food industry also tried to utilize this patentable reductionism. But this experiment failed attempts to reproduce wine, foods , and flavors failed. The natural living palate of the sophisticated user can detect the superiority of the complex natural flavors. Nature seems to have some subtle secrets in the complexity.

These subtle secrets in herbal medicine seem to help prevent side effects. In most of the herbal medicines used in the past that then were developed into synthetic medicines there is dramatically less side effects appearing in the natural usage. The synthetic compounds seem to have lost some of the modulating or regulatory natural chemicals. The bible says that the healing of the nations will come from the leaves of the field. Perhaps it is time for science to reevaluate this as well.

For some in the alternative medical science this means deregulation of medicine and letting any body make pharmaceuticals in their garage. This would be a tragedy. Professional conduct in attaining herbs and processing these compounds takes just as much professional control as synthetic medicine. The governments of the world all have rules and regulations on these standards. Also it must be pointed out the need for experimental evaluation to satisfy safety and efficacy criteria. In America an NDC number is needed, in Canada an DIN number, in Europe a registration in any of the ECU countries is required. All of these allow for legal development and sale of these natural medicines. These discussions are carried on in greater more scientific detail in the Quantum Biology and Experimental Evidence for Homeopathy.
The central nervous system of the body is made of two parts. The sensory-motor part or the autonomic part. The autonomic system is designed to regulate unconscious processes. Thus it regulates breathing, digestion, endocrine function, etc. There is two parts of this autonomic system. One is the more active or flight fight system known as the sympathetic system and the other is the more passive system of digestion and immunity known as the parasympathetic system.

The transmitter released at the ends of the sympathetic nerves is noradrenaline. They have effects on the alpha, beta 1, and beta 2 adrenoreceptors. Reuptake into the nerve terminal of the transmitter deactivates the transmitter. The sympathetic nerves leave the spine at the thoracic and lumbar areas (T1-L3). Thus this system is named the thoracolumbar system, or the adrenergic system.

The transmitter released from the parasympathetic is acetylcholine (ACh). This acts on the muscarinic receptors. The parasympathetic system leaves the spine at the cranial and sacral areas (cranial nerves 3, 7, 8, 10, and sacral third and fourth roots) Hence the system is called the cranial sacral system or the cholinergic system.

All preganglionic myelinated nerve fibers, both sympathetic or parasympathetic, release acetylcholine. This ACh depolarizes the membrane by activating the nicotinic receptors. Thus we can see just how important ACh is to the whole system regulation. Disruption of this circuit can have severe long-lasting effects.

The adrenal glands sit on top of the kidney. They have an outer cortex and an inner medulla. ACh turns on nicotinic receptors and the medulla depolarizes which starts a calcium inflow and an adrenaline release. The endocrine hormone adrenaline effects the adrenergic sympathetic system of the body. This triggers the fight, flight response, dilates pupils, dilates bronchial tree, increase the heart rate and pressure, vasodilates the skin and viscera, contraction of the spleen, relaxation of the gastrointestinal tract, immune system, and bladder, stimulation of the glycogenolysis and other effects.

There are two main types of adrenoreceptors.
1. alpha-receptors control the excitation of sympathomimetic amines however the smooth muscle of the gut is inhibited by alpha stimulation
2. beta-receptors generally for inhibitory effects, however the heart is excited by beta stimulation
Acetylcholine receptors are of two types.
1. nicotinic in autonomic ganglia in the adrenal medulla blocked by curare stimulated by nicotine
   Nicotinic effects are inclusive of all autonomic ganglia stimulation.
2. muscarinic postganglionic parasympathetic, blocked by atropine
   Muscarinic effects are constriction of pupils, accommodation of near vision, tears, excess salivation, constriction of bronchial tree, asthma, bronchosecretion, hypotension, increased gastric motility, diarrhea, conformation of bladder, and sweating.

Muscarine is a compound found in certain mushrooms. The Amantia Muscaria or Pantheria,Clitoeybe, Inocybe, Boletus, Hebeloma, and Russula mushrooms contain this muscarinic agonist. Homeopathic high dilution doses of these mushrooms can reverse the muscarinic effects listed above. Lower x potencies such as 2x or 3x (eyedrops) can be used as a glaucoma treatment in that it's use on the eye reduces interocular pressure.

Atropine found in the atropinus belladonna is a muscarinic antagonist. So belladonna in low doses causes the person to become red as a beat, dry as a bone, and mad as a hatter. In mid to high doses homeopathic belladonna can reverse these symptoms. Scopololamine works in similar fashion.

Nicotine effects are potentiated by AChE, which neutralize ACh in the synaptic cleft. Nicotine is a powerful stimulant and highly addictive. Its water solubility is it's only redeeming characteristic which stops initial side effects. But since it now responsible for over 3 million deaths per year, we need to recognize its effects and have medical programs ready for addiction withdrawal patients. (ref. Smoking study)
### AUTONOMIC NERVOUS SYSTEM

<table>
<thead>
<tr>
<th>SYMPATHTIC (NORADRENERGIC)</th>
<th>PARASYMPATHETIC (CHOLINERGIC)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>THORACO-LUMBAR EFFECTS</strong></td>
<td><strong>CRANIAL-SACRAL EFFECTS</strong></td>
</tr>
<tr>
<td>dilation of pupils</td>
<td>radial muscle of pupil</td>
</tr>
<tr>
<td>secretion of thick saliva</td>
<td>lacrimal gland</td>
</tr>
<tr>
<td>vasoconstriction</td>
<td>salivary gland</td>
</tr>
<tr>
<td>near vision</td>
<td>blood vessels</td>
</tr>
<tr>
<td>vasodilation</td>
<td>blood vessels</td>
</tr>
<tr>
<td>saliva</td>
<td>salivary glands</td>
</tr>
<tr>
<td>increase rate +force</td>
<td>heart</td>
</tr>
<tr>
<td>broncodilation of airways</td>
<td>lung</td>
</tr>
<tr>
<td>secretion+constric</td>
<td>stomach , intestines</td>
</tr>
<tr>
<td>decrease motility and tone +</td>
<td>stomach+intestines</td>
</tr>
<tr>
<td>glycogenolysis</td>
<td>liver</td>
</tr>
<tr>
<td>neoglcnogenesis</td>
<td>liver</td>
</tr>
<tr>
<td>glucose release to blood</td>
<td>liver</td>
</tr>
<tr>
<td>endocrine and capsule contracts</td>
<td>spleen</td>
</tr>
<tr>
<td>adrenaline</td>
<td>adrenal medula</td>
</tr>
<tr>
<td>relax</td>
<td>bladder</td>
</tr>
<tr>
<td>contraction</td>
<td>bladder</td>
</tr>
<tr>
<td>contract or relax</td>
<td>detrusor</td>
</tr>
<tr>
<td>ejaculation</td>
<td>detrusor</td>
</tr>
<tr>
<td>muscarinic sweating</td>
<td>vas derefens seminal ves.</td>
</tr>
<tr>
<td>pilo-erection hairs</td>
<td>Penis</td>
</tr>
<tr>
<td></td>
<td>exocrine function</td>
</tr>
</tbody>
</table>

### METABOLISM OF DRUGS

The body must be able to detox any drug exposure. The body has several mechanisms for detox and metabolism. The primary metabolism is done by the liver. Most of what we intake orally is processed by the liver. The digestive system passes the intake through the liver by the circulation of the portal system. Some chemicals are completely metabolized by a healthy liver. Some very large molecules or lipophillic ones can be absorbed into the intestinal chilifers and penetrate into the lymphatic system. Once there they can be swept into the blood stream via the inferior vena cava. Thus they can avoid the detox of the liver.

In metabolism of a compound, the compound is first made more hydrophillic. This speeds up the excretion by the kidney. The kidney mostly detoxes the water soluble factors. The more lipid soluble the metabolite, the more easily reabsorbed by the renal tubules. Some drugs are activated by metabolism, most are less active after metabolism.
The liver has two main types of reaction.

1. Phase I reaction- is the biotransformation of a drug to a more polar metabolite. This is done by introducing a functional group like -OH, -NH2, -SH. The oxidation of the metabolite and the catalization is accomplished by the enzymes cytochrome P-450s. This enzyme type is broad based. There can also be reduction and hydrolysis reactions in phase I when needed.

2. Phase II reactions- are done by conjunction. If the are not made polar enough in phase 1, then the liver seeks to conjoin the toxin with a liver made conjunction.

<table>
<thead>
<tr>
<th>PHASE I</th>
<th>PHASE II</th>
</tr>
</thead>
<tbody>
<tr>
<td>METABOLITE------------------------------------</td>
<td>CONJUGATION</td>
</tr>
<tr>
<td>Aromatic hydroxylation</td>
<td>endogenous reactant</td>
</tr>
<tr>
<td>cytochrome oxidation</td>
<td></td>
</tr>
<tr>
<td>RNHCH3---&gt;RNH2</td>
<td>TYPES OF CONJUGATION</td>
</tr>
<tr>
<td>RCH2NH2--&gt;RCHO</td>
<td>glucuronide</td>
</tr>
<tr>
<td>(reduction)</td>
<td>acetyl</td>
</tr>
<tr>
<td>RCOOR2---&gt;RCOOH+R2OH</td>
<td>glutathione</td>
</tr>
<tr>
<td>(hydrolysis)</td>
<td>glycine</td>
</tr>
<tr>
<td>RCONHR----&gt;RCOOH+RNH2</td>
<td>sulphate</td>
</tr>
<tr>
<td>(hydrolysis)</td>
<td>methyl</td>
</tr>
</tbody>
</table>

Cytochrome oxidation for phenobarb, propanolol, phenytoin, amphetamine, wartarin, morephine, amineoxidase, adrenaline.
Reduction for methadone, naloxone.
Hydrolysis for procaine, aspirin, lignocaine

There are detoxifying enzymes in other parts of the body depending on the negative abilities of the system. The genetics, nutrition, and health state of a person determines the overall detox ability. History of drug exposure also influences the detox capabilities.

The intestines, the stomach, and pancreas have considerable enzymatic detox capacities. The lungs have alkalizing and buffering function and can make detoxifying enzymes as well.

The effects of hormetic or isodal homeopathics are seen to increase metabolic detox. (ref. Experimental Evidence of Homeopathy I)
HEART REGULATION

In our book on Cardiology we discuss in detail the mineral balance needed to balance proper heart metabolism. The effects of ACh, muscarine, nicotine, adrenaline, noradrenaline and other autonomic agents needs to be understood. Muscarinic effects increase K+ conductance causes bradycardia, while also decreasing the Ca2+ conductance reduces the force of the contraction. Then the stimulation of smooth muscle results in an increase in Na+ conduction and muscle contraction. (ref. Cardiology)

SYMPATHOMIMETICS

Noradrenaline is the neurotransmitter released in the sympathtetic neural endings. Noradrenaline is the best the hormone to match the symphatetic receptor site. Adrenaline is released form the adrenal medulla when there is stress. Most drugs that limit these compounds block reuptake. Sympathomimetics are compounds that imitate adrenergic action and activate the adrenergic receptor.

Sympathomimetics act either directly on the alpha or beta adrenoreceptors or indirectly on the presynaptic terminals. They cause the release of noradrenaline. Amphetamine possess a alpha methyl group and is resistant to MAO (Monoamine Oxidase). The action of amphetamine are central stimulants from catecholamine release, and peripheral tachycardia and hypertension. Dexamphetamine is used in narcolepsy and in hyperactive children. Amphetamines and methylamphetamines are addictive. Diethylpropion, phentermine, and mazindol have less stimulant effects on the central nervous system thus are used as appetite suppressants for obesity. But there effects on neurology makes them sometimes even more dangerous.

Cocaine is a local anesthetic and a sympathomimetic. But it also inhibits reuptake of the noradrenaline which thus greatly increases its stimulant powers. This makes it a very disturbing drug that can have secondary and tertiary effects years after use.

When taken orally adrenaline and noradrenaline are broken down in the gut. Thus they lose their immediate effects, so allopathic medicine has chosen not to use them. But the components are easily reassembled by the body thru the natural process which then is controlled by the millions of natural cybemetic feedback loops. So using adrenaline in low dose homeopathy can be effective over the longer course of therapy. Our work with adrenaline 3, 4, and 5 x has shown this hypothesis to be true. The results can be demonstrated over the course of a few weeks.
Then we recommend switching to higher dilutions such as 6, 12, 30, 100 etc which do not supply hormone but supply protomorphic information on hormone regulation. This is discussed in the chapter on the theory of homeopathic sarcode therapy.

**RECEPTOR ANTAGONISTS**

Sympathometrics act either directly on the alpha or beta adrenoreceptors or indirectly on the presynaptic terminals. They cause the release of noradrenaline. The action of this stimulus is by an electrical vector signal or polymorphic match of agonist (stimulus compound) and receptor site. All chemicals are in reality just electron probability clouds. They are not hard lock and keys that we interact with in the gross thermodynamic world. These clouds vary in size, shape, capacitance strength, inductance strength, conductance strength, quantic valent patterns and possibly other criteria as well. Homeopathy has shown that water and alcohol can absorb this polymorphic shape to some degree and in some limited ways duplicate the receptor stimulus.

The effects of this false stimulation of the homeopathic is limited and short lived. The effects are on the initial receptor sites in the oral cavity and nasal pharynx. There is no actual substance following to effect deeper receptor sites in the body. So the effect is a reversal effect of preparing for a substance that never comes. This is how the Ultra high dilution of receptor stimulus compounds works in homeopathy.

So using ultra high dilution homeopathic Sympathometrics results in a reverse reaction. The adrenergic effects of a compound such as adrenaline can be reversed with ultra high diluted homeopathic adrenaline. Homeopathy thus offers a very safe way to stimulate homeostasis in states of excessive adrenergic or cholinergic conditions.

Homeopathy thus can act indirectly as a receptor antagonist. The following chart shows just some of the indirect reversal effects of ultra high dilution homeopathy. Our work on the trivector receptor dynamics and the polymorphic shape transfer further explains the subtle effects of homeopathy on homeostasis.

*** not all compounds reverse

| Positive action | xxxxxx | see Amdt Schultz law
| xxx | xxxxx |

| No action | concentrated | increased dilution | ultra high dilution |
| xxx | xxxxxxx |

<p>| Reversal action | xxxxxxxxxxxxxxxx |</p>
<table>
<thead>
<tr>
<th>COMPOUND</th>
<th>CHEMICAL EFFECT</th>
<th>UHDHOMEOPATHIC EFFECT</th>
</tr>
</thead>
<tbody>
<tr>
<td>caffeine</td>
<td>stimulant, restless</td>
<td>Cure for insomnia,</td>
</tr>
<tr>
<td>opium</td>
<td>depression, stupor</td>
<td>reverses all of the</td>
</tr>
<tr>
<td>chemical</td>
<td>drowsy, painless</td>
<td>effects</td>
</tr>
<tr>
<td></td>
<td>sluggish, duNed</td>
<td></td>
</tr>
<tr>
<td></td>
<td>sweaty skin</td>
<td></td>
</tr>
<tr>
<td>nicotine</td>
<td>nicotinic receptors</td>
<td>used to reverse the</td>
</tr>
<tr>
<td>chemical</td>
<td>nausea, pallor,</td>
<td>effects</td>
</tr>
<tr>
<td></td>
<td>intermittent pulse</td>
<td></td>
</tr>
<tr>
<td></td>
<td>arteriosclerosis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>breathless angina</td>
<td></td>
</tr>
<tr>
<td></td>
<td>cough, rasp, mucous</td>
<td></td>
</tr>
<tr>
<td>amyl nitrite</td>
<td>dilates arteries</td>
<td>cures chemical effects</td>
</tr>
<tr>
<td></td>
<td>palpitations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>anxiety, flush</td>
<td></td>
</tr>
<tr>
<td>atropine</td>
<td>anticholinergic effects</td>
<td>cures chemical effect by</td>
</tr>
<tr>
<td></td>
<td>redness, dryness</td>
<td>reversal</td>
</tr>
<tr>
<td></td>
<td>madness</td>
<td></td>
</tr>
<tr>
<td>cannabis</td>
<td>reduced motivation</td>
<td>reverses chemical effects</td>
</tr>
<tr>
<td></td>
<td>stuttering</td>
<td></td>
</tr>
<tr>
<td></td>
<td>fatigue, confusion</td>
<td></td>
</tr>
<tr>
<td>cocaine</td>
<td>anesthetic, talkative</td>
<td>reverses chemical effects</td>
</tr>
<tr>
<td></td>
<td>delusions of grandeur</td>
<td></td>
</tr>
<tr>
<td></td>
<td>jealousy, paranoia</td>
<td></td>
</tr>
<tr>
<td></td>
<td>elation, insomnia</td>
<td></td>
</tr>
<tr>
<td>curare</td>
<td>muscular paralysis</td>
<td>reduces paralysis</td>
</tr>
</tbody>
</table>
CHEMICAL ADRENOCEPTOR ANTAGONISTS

One of the most famous antagonists is the beta blocker. They vary in lipid solubility and cardioselectivity. Their purpose is to block beta1 receptor sites. Thus they are used to lower blood pressure and treat angina. The greater the lipid solubility the more rapidly absorbed from the gut and metabolized by the liver. The greater the lipid solubility the more likely it can enter the brain and create bad dreams and central effects. Other problems with beta blockade include peripheral vasoconstriction and stimulation of neoglucogenesis in the liver producing exercise induced hypoglycemia. Some of the beta blockers can start bronchospasm in patients tending towards asthma.

The allopathic philosophy of symptom treatment thru blocking natural action is as discussed usual counter productive. The upsetting of the natural homeostasis and cybernetic feedback usual results in long term problems, hence the vast rise in iatrogenic disease. Prevention, early primary treatment, and naturopathy have superior long term success.

Alpha blockers reduce arteriolar and venous tone. This results in a decrease in peripheral resistance and thus hypotension. Alpha blockers reverse the pressor effects of adrenaline, the vasoconstriction effects are unopposed. Tachycardia can result. We should seek to balance the system without trying to block the flow.

HOMEOPATHIC INFORMATION TRANSFER

History has given homeopathy a strict test of time. The first recorded view of homeopathy was offered by Hipocrates. Later in the 1700's Samual Hanehman constructed a structured form of medicine based on the idea that what caused a disease could be used to cure it. He called it homeopathy.

Hanheeman also coined the word allopathy for the medical art of treating the symptoms. Allopathy sees the symptom as the enemy and works to relieve the symptom. Homeopathy sees the symptoms as signposts or messengers of the deeper disease. Where alopathy attempts to shoot the messenger, homeopathy seeks to try to find, understand, and correct the deeper imbalances. A deeper analysis of the differences between these arts is presented in our books on homeopathy. (see the Bibliography books 1,2,3,4,5,6,7)
Homeopathy is a medical art that flourishes around the world. In America it is gaining strength and popularity everyday. One of the problems with homeopathy is the perceived lack of scientific inquiry. In fact the last two decades have brought a wealth of research that has been just recently brought out.

The research is showing us the multitudes of ways that homeopathy works in clinical practice. Nutrition, herbology, and a host of other alternative medical therapies are also comming to light. The growing recognition of the failure of reductionistic science in medicine, is bringing a new inquiry to the fields of homeopathy, herbology, and alternative medicines. Unfortunately many of the companies involved with production and sales of these alternative remedies, don't do the proper studies or professionalism to study the compounds they use. We hope with this book and our others to correct this deficiency.

New Vistas Pharmaceuticals and the College of Practical Homeopathy in London England have worked to correct the lack of research in Homeopathy.

Possible Mechanisms of Homeopathic Information Transfer Homeopathy is a medical art used for centuries to treat illness. But what are the ways in which a homeopathic can work? At this time, we can speculate on the list below:

1. PharmaCology: Low potency products which in dilute form follow two laws:
   
   Arundt Schultz Law: A very small dose of a poison has reverse effects of the larger megadose, i.e., homeopathic belladonna relieves the redness and dryness that raw belladonna produces.

   Law of Initial Values: As the quantity of substance is proportionately reduced the potent effectiveness can elevate, paradoxically reverse, or reduce depending on the substance itself. also known as Wilder's law

2. Imprinting of a message into the polymorphic structure of the carrier water and alcohol mixture. Here the clath rate structure of water is changed to receive a message and transfer this message to a patient. The receptors for this message would be on the cell membrane and be similar to olfactory receptors of the nose. This might explain the ability of strong odors to block homeopathy.
3. QuantiC StOrage Of infOrmatiOn in the quantic states of the electrons, atoms and molecules of the carrier fluid. This transfer would be disrupted by sunlight, x-ray, or other photon or particle release. Homeopathics are sensitive to the same. Energy is needed for this shift and possibly could be supplied by succussion. (There seems to be a minimum of times a product needs to be succussed, 10 to 15 times.)

4. Energetic and electrica! pattern of the homeopathic. Ez analyzing the spectral reactions of the homeopathic to conductance, electrons, inductance (magnetic relativity), and capacitance (static reactance). This gives us a trivector analysis of the electrical signature of the homeopathic.

5. Storage might take place in dimensions beyond the 1st, 2nd, 3rd, and 4th. Some shift of matter in dimensions 4, 5, and fi might be a possible place for memory storage of a homeopathic. This might explain the imponderables of homeopathy or the power of energy healing. This is measured by correlating the virtual bio-photons of a homeopathic.

In mode number 2, we speak of the memory ability of water and alcohol. This phenomena can be studied through photon scattering tests, nuclear magnetic resonance and simplest of all, freezing. If the water holds a plastic amorphous memory in liquid form as it enters solid form, this shape should have some effects on the ice patterns. A freezer that maintains -5c within 1 degree was used to crystallize the substances. The homeopathics used were less than 5% alcohol to allow proper freezing. They were put into 1 in. circular 1/8 in. deep trays, then allowed to cool in the refrigerator for 2 hours at +5c before insertion into the freezer at -5c. After 12 hours the disks were frozen and allowed investigation. Patterns would form on the homeopathics. There was indeed some shape transfer even beyond 25x where probabilities of product existing are minuscule.

Another easy way to measure energetic homeopathics is through Kirlian photography. This involves simply placing the product in a highly charged electrical field through a container or rare electron gases. The electric charge fluoresces the gas, but the homeopathic acts as a prism to direct the charge and each homeopathic produces its own fingerprint or pattern of colors to identify it. These charged particles will be enhanced by the polymorphic shape of the water, the quantic states of the submolecular bodies and perhaps by the quasi dimensional memory.
It is also interesting to note that so called duplicated remedies show no fingerprint under freezing or Kirlian photography. (See Quantum Quality Control Book, by Dr. William Nelson.)

Duplicated Remedies and Homeopathic Information Transfer

As we have discussed, there are several possible modes of information transfer. Duplicators work on a supposed magnetic transfer. In mode number 1 which involves chemical action, magnetics would not work for information transfer. In modes number 2 and 3, the mechanical force of succussion could change electron or molecular quantic states. Magnetics cannot effect this change. If magnetics could indeed do so, then homeopathy would be useless. The magnetic interference from a T.V. set or a telephone unit would change the information. Transport of a homeopathic through the magnetic lines of the earth would change the information and nullify homeopathic effectiveness.

As mentioned, duplicated remedies show no change in freezing patterns or in Kirlian photography. Duplicated remedies are probably advanced placebo at best. To test this supposition, an experiment was performed with double blind capacity.

Procedure: 35 patients were chosen from a Naturopathic Doctor's practice. All patients were using certain homeopathics on a regular basis and knew what results to expect. Some patients used a Candida nosode to control bloating or other body symptoms; others used Belladonna or Lachesis for symptoms. All were familiar with their remedy's effect.

Each patient was given either a regular homeopathic or a duplicated remedy. Each patient was also given either a placebo sugar pill, or a pill with 5mg. Narcan (Naloxone). Naloxone is used to block endorphin response and has been found to block the placebo effect in placebo responsive patients. Patient profiles were chosen to exclude those with symptoms of pain as Naloxone can increase pain perception. The test was double blind with neither patient or practitioner knowing which formula was given. Patients were given questionnaires to evaluate the efficacy of the remedy. Results of the effectiveness are shown in the accompanying diagram.
Results: The tests show that the duplicated remedy performed significantly lower than the real remedy with the placebo (63% is approximately the predicted placebo effect). The placebo blocking Narcan pill significantly lowered efficacy.

Perhaps the information transfer of mode number 4 (multi-dimensional transfer) could account for the transfer of duplicators, the Narcan with its endorphin blocking action might also block other dimensional information transfer. Even so, the study shows a markedly decreased efficacy with the duplicated remedy. Radionic remedies have no pharmacology, quantic state or polymorphic state; thus, they are not homeopathics and homeopathy is continually blamed for radionic remedies that fail.

Here again, quality is often not paramount to homeopaths. Some prefer the greater monetary reward duplicators or imprinters provide. This lack of focus on quality and maximization of effectiveness could erode our industry. Only through quality and dedication to developing and delivering the finest homeopathics can we truly succeed.

DUPLICATION STUDY RESULTS

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<th>PLACEBO</th>
<th>DUPlicated REAL (IMPRINTED)</th>
<th>HOMEOPATHIC</th>
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<tr>
<td>PLACEBO</td>
<td>55%</td>
<td>63%</td>
<td>97%</td>
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<tr>
<td>NARCAN</td>
<td>10%</td>
<td>11%</td>
<td>96</td>
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TYPES OF HOMEOPATHY

1. ALLERSODES: Using allergy causing compounds such as weed pollen to desensitize a weed pollen allergy.
2. CLASSICAL: Age old homeopathic remedies
3. ISODES: Using synthetic toxins to desensitize or for hormetic effects.
4. NOSODES: Uses organic diseased or disease causing tissue.
5. SARCODES: Uses the healthy tissues, hormones, secretions etc of healthy animals.

ALLERSODES

In modern medicine small amounts of allergens are used to promote desensitization. This is usually given as an injection, and many children get their allergy shots. In homeopathy we apply the same reasoning and use small or dilute amounts of these allergy causing compounds. This has been shown to help lower the allergic reaction and antibody response.

Most of the successful research on ultra high dilution UHD homeopathy has been in the field of allergy desensitization. The work of Beneviste related an effect of ultra high diluted antigen on blood coagulation. The recent success of ultra high dilution homeopathics on asthma, rhinitis, hay fever, and hives has hit the traditional publication press right between the eyes.
Alergic reactions are now showing science that the mind is so crucially involved. Cases of multiple personalities can have different allergic reactions for each personality. A patient having multiple personalities can have wheat rubbed on one arm and milk on another. One personality can be present and the wheat arm show reactive hives. The patient can then switch to another personality, reactive to milk. The hives on the wheat arm immediately die down and the arm with the milk develop hives immediately. This shows dramatically the mind body link of allergic reaction.

CLASSICAL HOMEOPATHICS

Since UHD homeopathy works well on allergic sensivities we might understand the mind body link effect of homeopathy. Classical homeopathy is taught and used as a psychology by most practicing homeopaths. The practice of classical homeopathy is one of an indepth personality interview. The psychological interface of therapist and client is intimate and interpersonal. The Therapist develops personality typing judgements of his client that guide him in remedy choice. But the field of UHD and classical homeopathy seems to fail in statistical challenges with other disease types. This success with allergies is followed by failure with pain, mobility, infection and others. Anecdotal evidence exists and the therapist all swear success but double challenge shows sometimes that even placebo therapy has better results.

But the challenge with mid range and low dose potencies do show dramatic results with a host of such diseases. Homeopathy and herbology have much in common. They share a common ancestry and background. Herbology is where the medicine of pharmacology started. The basic research and development of herbs then was modified in several directions.

Reductionistic synthetic medicine took the herbology and sought to find synthetic duplicates for natural compounds. Homeopathy took the analysis of herbal reactions and started to use more and more dilute quantities. The financial success of the drug companies started to feed marketing and education for synthetic medications in marketing driven capitalistic societies. In other societies medicine still used the time old successful herbal therapies. But there was a lack of professionalism and research for herbology to flourish. Classical homeopathy with UHD offers some very intriguing and potentialy earth shaterring abilities to deal with psychological disturbances.
ISODES

The field of hormetic research has developed recently and shown the powerfull effects of small amounts of toxins. A small amount of a toxin can have potentially powerfull positive and healthfull effects on people. Mid range potencies of toxins such as DDT can help produce desensitization, stimulat detox, and even extend life spans. By using dilute amounts well past the toxic reaction, the detox effects can be observed. DDT can have detrimental effects at dilutions of one part per million. By using homeopathics at one part per trillion detox of DDT is stimulated and repair of destroyed tissue is promoted.

As the toxic barage of our planet continues, medicine needs better resources to measure and treat subtle toxic exposure.

NOSODES

By using small amounts of bacteria, virus, fungus, and other infections, we can stimulate the natural immune system to defeat the intruder. There was growing evidence that what causes a disease might be used to cure it. Homeopathy extended this proposition dramatically in the early 19th century. Jenner and others sought to investigate this phenomena of like treating like and it led to the development of immunization. The midrange homeopathics have also been shown to have a positive effect on antibodies.

Nosodal homeopathy has been used successfully with many plaques and epidemics. The successes are rarely documented by stat fearing homeopaths. But history shows dramatic evidence of the ability of homeopathy to respond to epidemic conditions.

The recent research into endotoxins has further confirmed the ability of a small amount of a micobial toxin to promote the immune system response. In fact much research has shown the effects of ceraint nosodes to promote the entire immune system. The so called nonspecific immune system effect has lead to the development of a new medical response to bacteria infections. The press abounds with ever increasing evidence of the problems of antibiotics. The medical community is searching for a new alternative to antibiotics and homeopathy seems to have the answer.

Nosode Homeopathy offers a more safe treatment of a host of disease staes. Recent research into fungus, bacteria, ameoba, parasites, viruses and even AIDS has shown that the future of this form of homeopathy is indeed bright. Increasing the immune function rather than attacking the intruder direct makes much more sense.
SARCODES

Just as important as the origins of herbology was important to medicine, the discovery of organic interaction of hormones was just as important. Research that started with glandulars then was directed into the reductionistic synthetic pharmaceutical industry. They developed synthetic inadequate copies of hormones and used them in medical situations. But these imitation compounds caused dramatic side effects including dependency.

The field of homeopathy used the protomorphic laws to use much more dilute forms of these hormones. This was a much more safe form of hormonal therapy. The effectiveness was still high. Thus sarcodal homeopathy can help reestablish homeostasis and health.

THE BASIC PHARMACOLOGY OF THE EYE

The Eye is a sealed sphere containing a fluid known as the aqueous humor. There is a natural pressure in this fluid usual about 15 mmHg. This is balanced between the manufacturing of the fluid in the ciliary body and the out flow through the trabecular meshwork and flowing thru the canal of Schlemm. Excessive pressure (over 24mmHg) is known as Glaucoma and results form excess fluid production or blockage in production. The outflow of the fluid can be stimulated by drugs such as muscarinic agonists (pilocarpine, amanita 3x), or by homeopathic sarcode stimulation of the lymphatic flow of the eye. Some beta blockers can reduce the fluid formation as can homeopathic aconite and atropine and adrenal sarcoes.

Inflammation of the eye is the most common of disorders. The average person will get conjunctivitis usual once every two years. Infective conjunctivitis can be treated allopathically with steroids, but this results in systemic disturbances, dependencies, toxicities, and disturbed homeostasis of the eye. Homeopathic treatment with the eye drops from New Vistas offers better long lasting relief.

For more details on ophthalmic treatments and conditions please refer to the book on HOMEOPATHIC TREATMENTS of OPHTHALMOLOGY.(ref books 25)
ALLERGIC ASTHMA

Asthma, anaphylaxis, and allergic bronchitis or hay fever are caused by exactly the same thing. When IgE antibodies attach to mast cell and await the next exposure to the same antigen, upon second or more exposure the mast cells degranulate releasing and producing mediators. Sometimes the release is localized. When localized in the bronchial tree asthma can result, if massive anaphylaxis. Allergies produce this reaction

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Allergic patients have unusually high IgE levels, sometimes 100 times normal. This is most often a result of childhood fear or sensitivity which results in a heightened immune reaction gradually building up IgE levels. The Antigen or allergic compound cross links to the IgE which binds its’ F portion to the mast cell receptors. This starts degranulation of the mast cell which depends on calcium influx. Mast cells occur everywhere in the body. The mast cells contain histamine bound with heparin and ATP. When released the histamine causes swelling and redness of surrounding tissues. This process can cascade and produce disturbing results. In Finland and many other countries they use saunas (heat therapy) with some light beating or massage of the skin (with green twigs). This releases excess histamine from the cells and helps to limit future allergic reaction. When coupled with aerobic sport the effect is greater.

Thus Naturopathic treatments include relaxation techniques, mental fear release, heat and massage, sport therapy, adrenergic therapy with glandulars and homeopathic sarcodes, desensitization techniques with allersodal homeopathy, vitamin therapy, and balancing calcium and potassium utilization for proper autonomic function.

Pharmacological treatments of allergy include

<table>
<thead>
<tr>
<th>DRUG TYPE</th>
<th>SIDE EFFECTS</th>
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<tbody>
<tr>
<td>antihistamines</td>
<td>sedation psychomotor impairment,</td>
</tr>
<tr>
<td>dependency</td>
<td></td>
</tr>
<tr>
<td>adrenoceptor agonist</td>
<td>dryness, dependency, weakens</td>
</tr>
<tr>
<td>immunity</td>
<td></td>
</tr>
<tr>
<td>bronchial dilator</td>
<td>tremors, nervous tension, tachycardia,</td>
</tr>
<tr>
<td></td>
<td>dependency, disturbs digestion</td>
</tr>
<tr>
<td>steroids-glucocorticoids</td>
<td>impaired immunity, toxicity,</td>
</tr>
<tr>
<td>dependency</td>
<td></td>
</tr>
<tr>
<td>ephedra (ma-hung)</td>
<td>dryness, disturbs digestion</td>
</tr>
<tr>
<td>yerba santa</td>
<td>little if any</td>
</tr>
</tbody>
</table>
PHARMACOLOGY OF THE GASTROINTESTINAL TRACT

The muscles of the gut are normally under autonomic control, but in cases of bulimia or with practice the person can control these muscles. The enzyme and other secretions are definitely autonomic but the evidence for psychological control is profound. In fact most of the problems concerning the digestive tract can be treated to some extent with stress reduction and meditation. We should take the time to discuss stress reduction after eating and overall mental control exercises with all of our patients.

The smooth muscle of the alimentary tract is enervated with excitatory fibers of the parasympathetic vagus nerve (originating in the cranial area), and inhibitory fibers from the sympathetic nerves (originating from the thoracic area). So Cholinergic drugs and adrenergic blockers will increase motility, stimulate extra secretions, aggravate or cause colic or diarrhoea, or treat constipation. Adrenergic drugs will slightly diminish gastrointestinal function. But cholinergic blockers (antagonists) are much better in reducing bowel spasm. These are often referred to as antispasmodics.
In the stomach there are many digestive secretions. The most important being the hydrochloric acid formed and released from the parietal cells in the stomach wall. This secretion is stimulated by:

1. acetylcholine, vagal secretion
2. gastrin, the G cells release gastrin into the bloodstream when they detect food in the stomach.
3. histamine, released from the mast cells in the stomach stimulated by stress and worry.

Ulcers can form in the stomach or intestine when excess secretions attach the alimentary lining. To treat ulcers we need to provide the following:

1. **Reduce acid secretion.** Pharmacological solutions include histamine H2-receptor antagonists (climetidine, ranitidine both of which inhibit liver enzyme function). Cholinergic antagonists such as pirenzepine block rector sites but risk dry mouth, blurred vision, and urinary problems. Homeopathic treatment with herbal combinations such as the digestive enzyme Liquescence are just as effective. Stress reduction during and after meals is also a must.

2. **Increase mucosal resistance**
   Some aluminum salts such as sucrafate are used to bind with proteins and form a protective layer. The risk of aluminum toxicity is great. Bismuth can be used in a similar way. Bismuth which adds the pink color to some antacids should not be taken with foods, bismuth can for inappropriate food complexes which will be burdensome to release. Bismuth also can blacken teeth and effect stool formation adversely. Glycyrrhiza and licorice are excellent herbal choices that stimulate mucous, prolong gastric cell live but excess use can complicate sodium and water retention risking hypertension and hypokalemia.

3. **Antacids**
   Digestion in the stomach needs an acid condition. The acidity varies with different types of food. When the pH rises (becomes more alkaline) to a certain point then the food is likely to be ready for the intestine and the pyloric valve opens to move the mixture along. Antacids, although they help in over acid conditions, destroy the quality of the mixture by prompting its movement prematurely. Then the unprepared mixture is not dealt with properly by the digestive tract and a host of diseases can ensue. In fact all disease states are accentuated by this disturbance in digestion. The short term allopathic results should not cloud our pursuit for long term health.
Antacids also stimulate gastrin release which can sometimes produce an extra acid release known as acid rebound.

Usual antacids include sodium bicarb, which complicate sodium and water retention causing hypertension and possible heart failure. So a better choice is potassium bicarb. Other antacids include magnesium hydroxide, or aluminum hydroxide, both of which have disturbing effects on the proper digestion.

4. Healing for the stomach or intestine lesion.
   Once the damage is done to the wall of the tract just stopping the overacid cause does not repair the lesion. Because the body has been deprived of proper nutrition for the course of this long term disease we can assume that there is probably some dietary deficiencies that might need to be corrected to help in lesion repair. (ref. Studies Gastric esophagus)
   Anemia is the first most probable disturbance. Some extra iron foods are excellent for helping to correct the problem. Vitamin K is needed for its clotting factor. Cabbage is rich in Vitamin K. Since the body needs the nutrients of cabbage and lettuce etc, and there is a weakness in absorption juicing of these vegetables is an excellent idea. In fact cabbage, lettuce, and a touch of parsley juice has cured many an ulcer on its own.

Constipation is another common problem confronting modern man. When the stool is not properly released putrefaction and reabsorption of autotoxins can result. The major types of laxatives and treatments for constipation include:
1. Bulk and fiber treatments (dietary fruits and vegetables)
2. Stimulant laxatives(Herbal laxative New Vistas supplies lost potassium)
3. Lubricants( water is an excellent one)
4. Treat stomach and intestine allergies(food allergies can cause intestinal swelling and thus restriction
5. Treat acid deficiency

Diarrhea pharmaceutical treatment includes:
1. Antibiotics or antilagyl for infective dysentery
2. Adsorpants to absorb bacterial toxins
3. Morphine like drugs to reduce paralysis
4. Compensate for mineral and nutrient loss
DIURETICS

Certain compounds stimulate urine production or release, these are known as diuretics. They mostly work on reducing the reabsorption of electrolytes by the tubules of the kidney. Stimulating electrolyte excretion stimulates water excretion, to balance osmotic pressure. Oedema conditions such as congestive heart failure, hepatic cirrhosis, nephritis, or nephrosis can be helped by treatments with diuretics. Synthetic Diuretics were used in the past to treat hypertension but they caused diabetes and disturbances of pancreatic function. (ref. Osmolarity)

Thiazides are converted carbonic anhydrase inhibitors. They act on the distal tubule and inhibit NaCl reabsorption. Excretion of the Na and Cl stimulates water release as well. This stimulates Na exchange with K and H which are also released in the urine causing the patient to have hypokalemia and metabolic acidosis. This complicates to fatigue, impotence and sometimes skin rashes. With the hypokalemia comes cardiac arrhythmia (worse if taking digitalis), uric acid build up (gout), increased Cholesterol, and diabetes.

Some newer diuretics act on aldosterone responsive segments of the distal nephron. These are called potassium sparring diuretics. They control K homeostasis by mimicking aldosterone. These drugs can cause severe hyperkalemia and heart failure.

HYPERTENSION TREATMENT

High blood pressure is medically diagnosed when the systolic pressure exceeds 140 mmHg or the diastolic pressure exceeds 95 mmHg. There are many causes for hypertension. These include:
1. Renal disease
2. Endocrine disease
3. Mid brain dysfunction
4. Barometric sensor dysfunction
5. Musculoskeletal tension
6. Overweight
7. Lack of conditioning
8. Drug abuse, smoking is chief concern
9. Autonomic nerval disease
High blood pressure rarely is detectable by the patient, although the patients always think they can detect it. Left untreated it can decrease the life span, produce heart failure, cerebral hemorrhage, renal failure, retinopathy, and other diseases. The excess fatty food diet of most people must be changed to a diet of fruits and vegetables. When potassium is diminished in ratio to calcium in the diet the blood pressure tends upward. Sodium in excess also tends to push blood pressure upwards. Research has proven that a diet rich in natural potassium low in sodium (potassium occurs mostly in fruits and vegetables) is better at controlling normal blood pressure problems than the hypertensive synthetic medications. In fact stopping smoking, weight reduction, fruits and vegetable diet, light exercise and stress reduction after meals is so powerful a hypertensive program it rarely fails. When it does let's discuss some alternatives.

Synthetic Diuretics help to lower bp but the side effects are tremendous as we described in the last section. Beta blockers reduce cardiac output and thus lower bp. Calcium blockers can lower the effective calcium potassium ratio and also vasodilate. This reduces peripheral resistance. Adverse reactions include flushing, dizziness, headaches, and oedema. Adrenergic blockers help to decrease the available adrenaline in the system. The side effects include postural hypotension, diarrhoea, fatigue, and impotence. Converting enzyme inhibitors are also used but they often risk developing lupus. In fact the world of synthetic drug treatments for hypertension has produced a vast and profitable new disease industry from iatrogenic damage.

Homeopathy offers us a much less risky therapy for the stubborn bp patient. First we must prescribe the diet, exercise and life style program outlined. Then the herbal diuretic has sarcoodes for glandular stabilization, herbs such as rauwolfia serpentina, and homeopathics to help stabilize the blood pressure. The rauwolfia is a centrally acting pharmaceutical that helps to balance autonomic function by decreasing the sympathetic vasoconstriction tone. This reduces the peripheral resistance. The homeopathic dilution (6x) makes it a much safer formula. If still stubborn then prescribe a 4x or 3x of the rauwolfia. Use till the lifestyle changes help naturally. (ref. Hypertension study)

Most of the problem with bp concerns bad diet, smoking and lifestyle. The true problem is often addiction. Addiction to fatty foods, sugars, smoking, alcohol, stress, and overeating must be conquered. If not we are just helping the addiction and spreading the problem to the children who eat the bad food see the bad behaviors and think that medicine will save them.

Good doctors must now face the drug revolution and advise patients better.
ANGINA

When a working muscle has problems with oxygen supply to its tissues, pain results. The muscle converts the energy ATP to lactic acid which produces the pain. The coronary artery supplys the heart with blood and thus oxygen. When there is a problem with Blood supply to the heart then pain can result. Pain in the heart area from lack of blood flow to the heart is called angina. Many people can have severe disturbance of the flow and not have angina pain. So don't let pain be your only diagnostic criteria. Also it must be expressed that pain can result from many other reasons. So rule out indigestion, intercostal neuralgia, muscle strains, etc. See Cardiology book.

Heart related angina usual is provoked by stress, exertion, and exposure to cold air. The cardiac muscle's force of contraction is dependent on the preloading and afterloading. The preload is the degree of stretching of the myocardium before it contracts. This is dependent on the venous return. The afterload is the resistance against which the blood is expelled. This is also the arterial pressure. A decrease in either pre or after load will reduce the potential work capacity of the heart. This will also reduce the oxygen demand as well. Stable angina is when there is little change in the pain or frequency of attacks. Unstable angina occurs when there is sudden or recent onset and a progressive severity and frequency.

The usual synthetic pharmacological treatments try to reduce the work by the heart and thus it's oxygen demand. This results in an allopathic symptomatic therapy which is disruptive on the rest of the organism and is not curative.

Some synthetic pharmaceutical solutions include:

1. Nitrates- they cause peripheral vasodilation. (mostly venous) The blood pools into the veins, reduces the venous return, the ventricular volume is decreased, followed by reduction in the distention of the heart wall and decrease in oxygen demand. These are known as the nitroglycerine formulas given sublinguaaly or via skin patches.
They convert to nitric oxide (NO a powerful free radical). This activates guanylate cyclase. The results is an increase in the intracellular concentration of cyclic GMP. This binds the free calcium and lowers the amount of calcium that could trigger muscle contraction.

2. Calcium blockers- The diets deficient in good natural potassium upset the balance of potassium-calcium ratio. Calcium antagonists produce lots of subtle long term problems.

3. Beta blockers work by blocking the adrenergic tone of the system. This reduces the oxygen demand. The side effects are many as they upset the balance of the system. There are certain forms of angina that result from muscular spasms which constrict the vessels in the absence of arterial blockage. This is referred to as prinzmetsals or variant angina. Beta blockers aggravate this type of angina.

Tobacco smoking is a major aggravation to angina. Tobacco reduces coronary blood flow, raises heart rate, increases blood pressure, and limits blood oxygen. Stop smoking is a must for all angina patients.

Coronary by passes are the usual surgical answer. New research has shown that over 75% of all the open heart surgery do nothing or less for the patients. If they change lifestyles they can benefit from the surgery, but if they change the lifestyle they benefit without the surgery.

Our homeopathic solutions show conclusively that we can greatly reduce the risk of infarction while having positive effects on angina. The long term studies done in Kiev and Budapest point in this direction.

The Heart Liquescence seems to prevent infarction by preventing total occlusion of the coronary arteries. This compound seems to have vagal stimulation tendencies and vasodilation effects. These effects have profound protection for the arteries. This compound has herbal digitalis at one part per million, which is a pharmaceutical safe dose. The mixture is a blend of cardiological beneficial herbs and minerals know for cardiological benefits. {ref Brenner angina study)
The Angina homeopathic complex is a blend of homeopathic agents known to be helpful in angina conditions. To help in any angina case we need to recommend life style changes as well.

ANTIARRHYTHMIC DRUGS

The sinoatrial node of the heart contains pacemaker cells that regulate the rhythm of the heart. The electrical activity starts here and fires through the rest of the heart. Supraventricular arrhythmia starts in the atrioventricular node. Ventricular arrhythmia starts in the ventricles. Ectopic focus arrhythmia happens when the heart starts firing at a higher rate than normal. Reentry arrhythmia is more common and results from improper echoing or conduction of heart signals.

The major synthetic pharmaceuticals solutions are to use local anesthetics or calcium blockers. the most used are:

1. VENTRICULAR AND SUPRAVENTRICULAR, Quinidine, a cardiac depressant, raise the threshold for excitation while prolonging the refractory period. Its adverse effects include myocardial depression, hypotension, slowed A-V conduction, cinchonism, thrombocytopenia purpura and hepatic dysfunction. Procainamide is similar but its possible side effects include lupus. Disopyramide flecainide lorcainide encainide and others fall into this class.

2. VENTRICULAR , Lignocaine is a first line treatment for ventricular arrhythmia. It is used intravenously because it is not absorbed orally. Mexiletine and phenytoin are also used with side effects that include agitation , drowsiness, and convulsions.

3. BETA ADRENORECEPTOR BLOCKERS. USED WITH EXCESS CATECHOLAMINE IN CONDITIONS SUCH AS EMOTIONS, thyrotoxicosis, pheochromocytoma.

4. AMIODARONE this drug is used in many cases of arrhythmia. Side effects include liver damage, thyroid damage, neuropathy, and pulmonary alveolitis.

5. SUPRAVENTRICULAR Verapamil blocks the slow Ca-current and effects the AVN. Digitalis slows conduction and prolongs the refractory period of the AVN and the bundle of HIS. It is used with congestive heart failure with accompanying atrial fibrillations.
Surgical solutions include artificial pacemakers. Homeopathy offers some interesting results. The irregular beat complex homeopathic formula of New Vistas works to correct the basic organic dysfunction. It's curative powers have been demonstrated on a wide variety of arrhythmic disorders.

TREATING ANAEMIA

The manufacturing of red blood cells (erythropoiesis) requires iron, intrinsic factor, B12, folic acid, pyridoxine B6, mineral support, proper enzyme action, and a healthy metabolism. Disturbances in any of these areas can result in anaemia. Intake of the needed nutrients is important but absorption is even more important. It's not what we eat that makes us but what we absorb. Disorders of absorption such as preulcer states or stress eating can disturb absorption and cause low grade anemia.

General fatigue, weakness, and lethargy can then result. The patient can present as a chronic fatigue case or ME. They might take a simple vitamin pill and feel better. The patient could think they have been cured of a more disturbing disease and tell all their friends about the miracle cure. Low grade anaemia is easy to treat in most cases.

IRON DEFICIENCY is also known as microcytic hypochronic anaemia. The iron deficient person can put about 50-100 mg of iron into haemoglobin per day. At peak strength the absorption of iron is about 25% of intake. The foods richest in iron are the green leafy vegetables, sprouts, red meat, and fish. If the gastric tract is not at peak efficiency then juicing or liquid forms of iron foods will be more likely to be absorbed. We can prescribe 200-400 mg of an iron salt in extreme deficiency. If there is low grade anaemia then 50-100 mg might be adequate. If the dose is not tolerated then constipation, nausea, diarrhea, or intestinal pain might result. Any of these symptoms should prompt the dosage to be halved, if it continues the next day lower again till the dose is tolerated. Remember food is the best medicine.

PERNICIOUS ANAEMIA occurs when the B12 is not properly delivered to the red cell. The stomach under normal conditions produces the intrinsic factor as part of the mucous of the stomach protection. This factor assists the B12 absorption.
B12 can be taken in from our foods or in the absence of intake can be assimilated by the e-coli bacteria in the large intestine. So disorders of the stomach or bowel flora can produce this type of anaemia.

MEGALOBLASTIC ANAEMIA usualy results from folic acid deficiency states. This occurs in pregnancy or malabsorption syndrome or in impaired DNA synthesis. Folic acid stores in the body are small (5-20 mg ). So in deficiency states anaemia can result in as little as 1 month. 50 to 400 mg of folic acid can be helpful in these conditions.

PYRIDOXICAL ANAEMIA results in deficiency of B6. AS with any B vitamin deficiency state neurological degeneration progresses. The classic deficiency signs are the 3 Ds of Diarrhea, Dermatitis, or Depression or Dementia.

IRON EXCESS ANAEMIA results from excess prescribed iron supplements. Use supplements wisely and not daily.

ALCOHOLIC ANAEMIA results from excess alcohol taken in daily. Even 3 drinks a day can produce this type of inactivation of theiron. The patient may have no other symptoms of alcohol disturbance but can have the low grade fatigue of anaemia.Suppement will help at first but the body will soon tolerate the dosage and reproduce the symptoms.

The Blood Liquescence of New Vistas is designed to naturally help all anaemia cases. It is safe for children and should work on the low grade anaemia patients. For the more severe case , prescribe the needed nutrient with the Blood Liq. for one to two weeks then just use the liq. till the food and life style problems are controlled.(ref. arrthymia study)

HYPNOTIC PHARMACFUTICALS

The most popular type of sleep inducing treatment in synthetic drugs is with benzodiazepines. They are used in treating anxiety states and some mood disorders as well. In high doses they produce sleep. Low doses produce sedation. Dose tolerance happens readily with the benzodiazepines(BDZ). The body adjust to the dose because the active disorder or disease is not dealt with properly so the body tolerates the dose and the symptoms return. The human body is rarely sick because of BDZ deficiency. This drug famity can be useful in short term use as a muscle relaxant, anticonvulsant, hypnotic, or antianxiety compound. The BDZ drugs increase inhibition of the post synaptic gama amino benzoic acid GABA. Since GABA is one of the major stabilizers of the brain inhibiting its action can stop its action as an activator of stable or conscious signals.
50% of the synapses in the brain are GABAergic, the vast majority of which are short interneurons. So the barbiturates and the BDZ family greatly inhibit the GABA SIGNALS and disturb a wide variety of neuronal function. This family of drugs have a wide range of known side effects and the potential for vast unrecognized side effects. The drugs are toxic to the liver, produce drowsiness and impaired psychomotor and consciousness. They block REM sleep and produce dependency. The REM rebound that occurs after prolonged use and other post use effects makes this dependency one of the worst to overcome. In drug detox barbiturates can be harder to overcome than heroin addiction. There is much evidence for some major destruction of the neuronal post synaptic membrane sensitivity to transmitters after as little as 2 months of barbiturate use.

In fact the whole use of barbiturates and BDZ upsets so many internal functions many of which are unknown to the doctor that their use has too many risks to be part of a modern day practice.

They are used for sleep induction and antianxiety therapy. Both of these concerns have their origins in psychological or sociological areas. Too cover up the problem with a risky systemic disruptive agent such as barbiturates makes no sense. The natural method would be more correct. Deal with the cause of the disease and then deal with the symptom with a safer form of pharmaceutical therapy such as homeopathy.

Another form of hypnotic used widely are the narcotic analgesics. These include opium, morphine, codeine, and their chemical family. These compounds effect pain transmission. Pain receptors in and on the body stimulate firing of the primary afferent fibers. The fibers synapse in laminae I and II of the dorsal horn in the spinal cord. Relay neurones in the dorsal horn transmit the pain info to the cortex of the brain. In the dorsal horn their are inhibitory input sites. These include opioid peptide releasing interneuron(local) and descending noradrenergic and serotonergic fibers. These descending fibers originate in the brain stem and are activated by met-enkephalin. Enkephalin release in both the brain stem and the spinal cord produces analgesia by reduction of the relay neurone activity. The effects of the enkephalin is under the control of the opiate receptors. There are three types of opiate receptor.
1. mu receptors; most concentrated in the antinociceptive area (major activity of morphine)
2. delta receptors; enkephalin affinity
3. kappa receptors; dynorphin affinity
4. sigma receptors; though not a real opiate receptor (not blocked by naloxone) some analgesics work on this site(pentazocine)
Endorphins, dynorphins, and enkepalins are the natural substances that activate these pain blocking receptors. The opium substances work because of their chemical and electrical similarities to these natural compounds. They can produce a sense of high or well being. They also produce analgesia, sedation, constipation and respiratory depression. Naloxone blocks these opiate receptors and is used to treat the opium, morphine or other overdose. Research at the Albert Einstein College of Medicine in New York has also shown that placebo therapy is abolished by naloxone. Other research has shown that naloxone can also abolish the positive effects of electroacupuncture. This suggests that certain "new age" therapies are just placebo expectation. (ref. books 22)

This points definitely to the need for double blind testing of products or therapies. It also has been shown that the Nelson effect of consciousness transfer is weakened by the naloxone. Pointing to the possible endorphin receptor link to the phenomena.

The origins of opium date back eons to the origins of mankind. There is evidence for the use of these opiates in the ancient cultures of China, Greece, Egypt, and others. These compounds have been a part of medicine for eons. Their use leads easily to addiction and thus they need some control over its use.

Valium is yet another mild hypnotic. In lower doses it's main use is as a muscle relaxant and anxiety reliever. Its herbal form is the herb Valarian. This is a root that has been, used for muscle relaxation, and anxiety control for thousands of years. Today there are about 100 million users of valium in the world, there are also about 100 million users of Valarian herb today as well.

This allows us to do a comparative analysis between the herb and its synthetic counter part. We see that there are over 30 million cases of valium toxicity and no cases of valerian toxicity. The reductionistic world of synthetic chemistry seems to be missing something. The profit driven drug companies has missed a key criteria. In many herbs there are subtle stabilizers that help prevent problems. Reductionism does not take into consideration the vastness of the complexity of the living being. And the research is more developed on activity rather than safety. Her in the last 100 words we see two examples of herbal medicine in Valarian and opium. So we can definitely see that all natural compounds are not safe just because its natural. We can also definitely see that just because the chemistry is there as in the synthetic does not make it the same. So we must look for solutions that develop professionalism and research into areas of medicine that have offered solutions in the past. They now have solutions for the future.
Homeopathy is the science of the minimal dose. Safety first is the anthem. So in solution to the problems of muscle relaxants, anxiety, and minor seizure control.

Using low dose Valarian at 3x or 4x is one powerful way to treat muscle stiffness. The benefits of valium and the safety of Valarian have been tested in the Relax compound from New Vistas. Our medical team has shown its multiple benefits in years of testing in a clinical setting. For insomnia not coupled with muscle stress we resort to the reversibility factor of part of homeopathy. Certain substances such as coffee, and nicotine are stimulants in the raw dose, but in lower doses of say fix, 9x, 12x the reverse is seen. So a blend of homeopathics for the treatment of insomnia has been developed and tested by the New Vistas team. This compound has been used on thousands of insomnia patients with great success. The anti epilepsy formula has similar development and is a good formula for pre epilepsy, clonus and certain midbrain disorders of mild seizure. Homeopathy indeed has a safer form of medicine for today’s user.

PSYCHOSIS AND NEUROLEPTIC

Psychosis is a delusional state where the patient has a problem with reality. Hallucinations can present with hearing voices, seeing visions, feeling sensations, cognitive disturbances, or other sensory distortion. In certain patients with enlarged cerebro-ventricular areas or corpus callosum enlargement the prognosis is poor. These patients need pharmaceutical therapy to allow them to have any type of life and to stop them from hurting themselves or others. Some patients have emotional disruption and biochemical disturbances that are just transitory. Treating them with pharmaceutical treatment further upsets the balance and makes the treatment become an addiction. The treatment assures that the patient cannot return to normal as that the body chemistry is further damaged by the pharmaceuticals. It is suggested that the schizophrenic psychotic has an increased activity in the dopaminergic mesolimbic pathway. The symptoms of schizophrenic psychotic is improved by dopamine receptor blockers known as neuroleptic.

The psychosis is aggravated by amphetamines which cause a dopamine and noradrenaline release. In fact amphetamines, speed, diet pills, or even caffeine can induce a psychotic state in the normal patient.
The neuroleptic increase the fring rate of the dopaminergic neurons in both the mesolimbic and nigrostriatal pathways. They reduce activity in the GABA inhibitory feedback loop. This increases the dopamine release but is overcome by the dopamine receptor blocking action. If the drug is continued for too long the homeostatic regulatory mechanism fails and the dopaminergic cells go into depolarizing block.

Then the dopamine release is reduced and the antipsychotic effects are realized. The use of these drugs is not seen the first day but after several days of use. The major problem with these drugs is the damage to the natural regulatory controls which now secure the patients life as a mental patient. The patient now needs these drugs just to maintain minimal function. The secondary side effects is damage to the extrapyramidal tract. Because they block the D2 receptors in the basal ganglia, these drugs can cause side effects that range from mild akinesia to extreme Parkinsonian rigidity.

There can be damage to the GABAergic neurons which can produce tardive dyskinesia. This is mostly irreversible. The patient protrudes the tongue and slurs speech and does so for life. So we can see that the way into the psychiatric hospital is often a one way trip. Symptom management is one thing but when these drugs produce such violent disruption of nature shouldn't the search for new types of therapy be encouraged. But no, even this book will be fought as that the drug companies don't want doctors to even think about alternatives. The drug companies want these drug addicts using their drugs for life. Cure is a dirty word to most allopaths. Sedation of symptoms becomes so important that the long term effects wane in importance.

Now lets look at some natural medicine solutions. First we should look at causes of this disease. Let's recognize that there are definitely some inherited and trauma cases that have larger cerebroventricular areas. These patients need the drug therapy. But other patients have more situational disease caused by too strong or too confronting a emotional issue that the patient develops this psychosis as a defense. In our clinical experience the issue of sexual identity or sexual trauma can present such a challenge to the ego or conscious vision of self that the mind can't deal with the another possibility. Situational psychosis results. In so many cases the male patient relates the first homosexual experience as starting the psychosis. In most cases the patient can freely describe the experience without emotion, so some therapists don't make much of it. When in fact the problem is producing chemical changes deep beneath the thought cerebrum in the limbic and nigrostriatal area. Females that interpret sexual abuse of almost any nature can also start this process as can males although less likely from abuse.
There is a major change in the bowel flora which precedes any psychotic state. The absorption of nutrients in the intestine is disturbed. Another cause for this disease is the spiritual development journey that many young and old people undertake in their lifetime. Often this journey opens the person to new ways of seeing. Ways that if not controlled will effect how the person interacts. These patient start biochemical changes which need attention and they also need attention to the cognitive or ego challenging ideation. Just counseling won't suffice. Counseling is most successful with desensitization and possibility exploration. The changes in the bowel can be measured with a thermometer. The rectal temperature raises 1 or more degrees at the start of a psychosis state. There are changes in the absorption of all B vitamins, serotonin, dopamine, and other hormonal precursors. Patient taught to control the rectal temperature with biofeedback or imagery benefit. Much research has shown some benefit of megadosing B vitamins where as the real problem is in absorption.

Healthy bowel flora is a must. Also stopping processed sugar, caffeine, nicotine, salt, and all stimulants is also vital. Often these patients are subjected to just drug therapy and given large doses of sugar, coffee and cigarettes. Then the prognosis is poor and all that can be hoped for is drug dependency. Stress reduction is also vital as it lowers the adrenergic levels. Low dose Homeopathy and herbology offer some intriguing possibilities. The complex homeopathic Psych has been used for its pharmacological results. The Brain liq. supplies needed B vitamins, the microflora helps balance the bowel flora, and antistress formula helps lower the adrenergic tension. There are many other formulas and suggestions that need to be tailored to the individual. Through short term low dose homeopathy and long term lifestyle and stress reduction the counseling benefits can be maximized and cure envisioned for many of these before mistreated subjects.

AFFECTIVE DISORDERS

Mood disorders are an ever growing problem in our society. Depression is the worst of these maladies. There is alterations in behavior, energy, appetite, sleep, weight, world view, and self perception. There are extremes of mania to severe depression.
In the mania state there is extreme elation, intensely enthused, and loses control of normal abilities to judge the adverse consequences of their behavior. They charge their credit to the max, have affairs with unsuitable lovers, and make promises they can't fulfill. The other side is the extreme depression that can often lead to suicide. In general depression is easily treated.

The Synthetic pharmaceutical treatment most used is the tricylic antidepressants. Often monoamine oxidase inhibitors are used. MAO inhibitors have far more side effects. Mostly the benefits of the depression drug therapies don't take place for 2 to 3 weeks. If there is no benefits the allopathic solution is sometimes electroconvulsive therapy. Other solutions include thyroid hormone, lithium, counseling and homeopathy. The Tricyclic antidepressants block the reuptake of noradrenalin, and serotonin into the central nerve endings. Drugs that deplete the brain of serotonin and noradrenalin cause depression. Drugs that block the reuptake of amine transmitters (tricyclics) or increase the concentration (MAO inhib) are antidepressants. So the drug model states that the lack of active intercleft noradrenalin or serotonin is the reason for depression. Alcohol as in a beverage also frees up adren and serotonin. But as with most drugs once we stop the dosage there is a rebound of the activity. So is any of these chemical treatments a cure or is it just placation. We all heard have a drink you'll feel better. but we also heard that after the drink your troubles don't go away.

Continuous antidepressants use decreases the serotonin receptors while increases the sensitivity of some adrenergic receptors. This shows how the effects of even these drugs exert changes on normal biochemistry. We need to pursue more natural therapies. The other side effects of the antidepressants include blocking of histamine and muscarinic receptors so as to produce dry mouth, blurred vision, constipation, urinary retention thus bloating, hypotension, tachycardia, arrhythmias, rashes, convulsions, hemolytic anaemia, hepatic disorders and advanced blood disease. Central nervous effects include drowsiness, tremors, elation, and hallucinations. Another problem with MAO inhibs is the "cheese effect" Foods containing tyramine (mostly cheese) should be metabolized in the gut wall by MAO. If the MAO is inhibited the rush of tyramine can trigger a hypertensive reaction. The tyramine causes the release of noradrenaline which can even start a cerebral hemorrhage or cerebral accident there after (sometimes days after). The stroke victim sometimes never recognizes the drug causative effect.

The more natural treatments of depression depend on more psychological causative effects with pharmaceutical treatments secondary. The three primary causes for depression include:
1. Loss of a reinforcer. When a person loses something that made him feel good depression results. Mostly loss of a loved one, friend, self esteem, good job, tasty food or even some trivial rewarding behavior. This loss triggers a deficiency in the adrenergic and serotonin release. The loss of such a reinforcer must be replaced with a more healthy reinforcer such as exercise, networking, healthy food, or positive thought pattern.

2. Aggression directed inward. When a person is angry at themselves they most often turn the aggression to depression. Forgiveness of self and others is a primary part of depression treatment. Having the patient forgive themselves in writing 70 times a day for one week or seven days is one good tool for forgiveness training.

3. Deficiency of catecholamine and indolamines. There is a progressive loss of adrenaline and serotonin in depressed patients. They feel depressed then do less, this makes less catecholamine, they feel more depressed, do less, make less, feel worse, do less, etc. This cycle needs to be broken.

   The Adrenal liq. and the Serotonin dopamine liq. supply needed hormones to fight depression. If the patient can then get up and interact, exercise, go places and do more then the depression can abate. We must find ways to defeat the negativity that accompanies the depression. This negative feeling of the world and self is always present in depression. If not present then the patient is lying or the diagnosis is in correct. This negativity supplies an inertia to starting anything. Your best chance of overcoming the negativity is when you start the Liquescence therapy. By supply the active adrenaline and serotonin from natural sources with all the natural regulators we can turn these affective disorders around easily. Drug therapy upsets regulation and doesn't let the situation heal. Depression complex homeopathics have been tested and proven safe and effective for treating depression. (ref. depression studies.)

THYROID

The thyroid gland secretes two iodinated hormones called triiodothyronine (T3) and thyroxine (tetraiodothyronine, T4) which are responsible for the optimal growth, development, function and maintenance of body tissues. Another hormone, calcitonin, is produced by the parafollicular cells and is involved in the regulation of calcium metabolism. (ref. thyroid study)
The synthesis of T3 and T4 requires iodine, which is normally ingested (as iodide) in the diet. An active, thyrotrophin-dependent pump concentrates the iodide in the follicular cells where it is rapidly oxidized by a peroxidase catalyzed reaction to the more reactive iodine. The iodine reacts with tyrosine residues present in thyroglobulin ("organification") and units of T3 and T4 are formed. The thyroglobulin containing these iodothyronines is then secreted into the follicles and stored as colloid.

The release of T3 and T4 is controlled by a negative feedback system. When the circulating levels of T3 and T4 fall, thyrotrophin (TSH) is released from the anterior pituitary gland and stimulates the transport of colloid into the follicular cells. Then, the colloid droplets fuse with lysosomes, and protease enzymes degrade the thyroglobulin, releasing T3 and T4 into the circulation. Both thyroid hormones act on receptors in the plasma membrane and on intracellular receptors to produce a variety of actions.

Thyroid hyperfunction and hypofunction occur in about 2% of the population and together with diabetes mellitus (2-3% of the population) are the commonest endocrine disorders. In Graves' disease, hyperthyroidism is produced by an antibody that causes prolonged activation of the TSH receptors and results in excessive secretion of T3 and T4. Thyroid activity can be reduced with drugs that reduce hormone synthesis or by the destruction of the gland with radiation or surgery. Hyperthyroidism often causes increased sympathetic effects which can be blocked with Beta-adrenoceptor antagonists (e.g. propranolol). Graves' disease is often associated with ophthalmopathy which is often difficult to control and may be a distinct organ-specific autoimmune disease.

Primary hypothyroidism (myxedema) probably results in most cases from a cell-mediated immune response directed against the thyroid follicular cells. Thyroxine is the drug of choice for replacement therapy.

NONSTEROIDAL ANTIINFLAMMATORIES (NSAIDS)

NSAIDs are commonly used in the United Kingdom for the treatment of rheumatic complaints. These drugs contain analgesic, antipyretic and anti-inflammatory actions. The principle form of this drug is the over the counter (OTC) ability to by most of them
Over the last few years some of these drugs have been proven unsafe and withdrawn from the market. Most of these drugs inhibit cyclo-oxygenase. This inhibits prostaglandin synthesis which is the major effect of the drug. But inhibition of the prostaglandin in the stomach of the gastric mucosa causes a lack of protection that results in gastric irritation, ulcers, and digestive disturbance. Most of the NSAIDs have their origins in herbal therapy. The American Indians used willow bark, the Europeans used the astringallis (where aspirin gets it's name), The Egyptians used a water weed, and the aborigines used the roots of one of their sacred plants. The herbs worked well and they were almost completely safe, but they weren't commercial so the Synthetic drug companies sought to develop the synthetic patents on the key ingredients. Hence the field of synthetic NSAIDs was started. Some of the key ones are:

**Aspirin**: is particularly an effective low grade analgesic and is very helpful in treating the pain of bone cancer. It helps most in nonvisceral inflammatory pain (arthritis, gout). It will not help in visceral pain (such as myocardial angina, renal colic, abdominal, hepatic etc). Some people tolerate the gastric side effects some do not. Aspirin also is a blood thinner, so it has become a popular treatment for the aged. Aspirin also has derogatory effects on memory. It should not be taken by students before a test. The antipyretic effect of aspirin (acetylsalicylic acid) is because it causes the prostaglandins in the brain to fall. The aspirin has an inhibitory effect on the prostaglandin synthesis. The effect in children under 13 can cause Reye's syndrome. This is a catastrophic disease of encephalopathy and fatty changes in the liver. Signs of an aspirin overdose include tinnitus, occult blood loss, dyspepsia.

**Aracidonic acid**: is a fatty acid with 20 carbons, unsaturated, formed from phospholipids in the cell membrane when required for prostaglandin synthesis. Arachidonic acid is richest in the adrenals, where it is needed for metabolism. Adrenal deficiency is brought on by deprivation of aracidonic acid. Small levels of this acid as in the Fatty acid liq. are helpful for adrenal performance and as a general antinflammatory.

**Propionic acids**: naproxen, ibuprofen, are antinflammatory drugs for joint pain. Rashes and dyspepsia are the side effects.

**Acetic acids**: indomethacin uses for antinflammatory disease but can cause blood dyscrasias.

**Homeopathic Complex treatment**: the action of these homeopathic is through the reversal phenomena. By giving what might induce a fever at a small dose the body reverses back and over regulates by reducing the inflammation. Compounds such as the Antiinflammation of New Vistas has been shown safe and effective.
herbal compounds: as pointed out before the start of NSAID was with herbology. The herbs appear to have safer utilization than their synthetic counter parts. Herbs such as feverfew, willowbark, etc are used today by millions of users the planet over with profound success.

NSAIDS PATHWAY OF ACTION

Stimulus

phospholipids       lipocortin^ ACTH
phospholipidase-A2
arachidonic acid ----> lipoxygenase—>hydroxy fatty acids
cyclo-oxygenase-->   leucotrienes
endperoxides

Prostaglandins       Thromboxane-A2       Prostacyclin (PGI2)
PGE2, PGD2, PGF2     decrease platelet cAMP, aggregation   increase platelet cAMP
                      vasoconstriction                     vasodilation

STEROIDAL PHARMACEUTICALS

The body manufactures natural steroid hormones. Some are made in the adrenal cortex. The two types made there are
1. minéralcorticoids, mostly aldosterone made in the zona glomerulosa, used to control salt retaining activity
2. glucocorticoids, mostly cortisol made in the zona fasciculata and zona reticularis they effect protein and carbohydrate metabolism
The steroids are known as gene active hormones because they promote the synthesis of specific messenger RNA (mRNA) that stimulates the synthesis of proteins inside of cells. These proteins produce the characteristics of the hormone. Because the steroids have to stimulate the cells to manufacture the specific proteins there is a delay of 1 to 3 hours for them to work. The release of these steroids is under the master control of the hypothalamus and the pituitary. When the plasma levels are low the hypothalamus stimulates the pituitary to release corticotrophin (ACTH) which then stimulates the adrenals to release their cortisol. Aldosterone is affected by ACTH but are influenced by the renin-angiotensin system and the plasma potassium. Once the steroid are released they enter the cell bind, irreversibly to a specific cytoplasmic reector, undergoes an activation reaction, enters the nucleus of the cell, binds to the chromatin, regulates the transcription of RNA to mRNA, mRNA leaves the cell nucleus, binds to ribosomes, produces the corresponding amino acid sequences for specific proteins and enzymes.

There are three major effects
1. antiinflamatory, the major and impressive effect. The steroids reduce the immune system in several ways. by reducing the immune cells and the macrophages the secondary inflammation effect of these cells is reduced.
2. immunosuppressive effects, steroids inhibit complement, migration, T and B cell function, and decrease the number and the virility of the macrophage and lymphocyte.
3. metabolic effect, steroids stimulate gluconeogenesis by increasing the enzyme and amino acid activity in the liver and kidneys. The rise in blood glucose causes insulin release. In short these steroids are needed in nature to balance the immune activity.

These steroids block the natural reaction of the immune system, block the natural reaction to stress, and are thus the great coverups of the drug world. Whatever your reacting to steroids can cover up the problem and deal with the system. The real problem is left uncorrected but now a second problem is developing. Steroids form one of the greatest iatrogenic disease causing agents of our time. There are a host of drastic side effects. They include adrenal suppression, increased susceptibility to infections, increased infections, diabetes, muscle wasting, growth suppression in children, osteoporosis, psychosis, peptic ulcers, sodium and water retention, hypertension, fatigue, moon face, bruising, cataracts, glaucoma, tuberculosis, response to stress is diminished, and others. The oil solubility and the detox process of these compounds make them last long in the body. It can take over 1 to 2 years to detox and recover lost adrenal function.
The steroids suppress the natural adrenal function because the natural adrenal does not have to work so adrenal atrophy sets in. The steroids also are extremely dangerous because they lower the immune system function which allows more infections, but because they block the symptoms of the operant infections the infectious disease may not be noticed.

In homeopathy we discuss how the symptoms are not the enemy but the sign posts of correct treatment. With this in mind steroids become the enemy of the mindful doctor, because they cover up symptoms. Steroids are part of the emergency world of medicine. But they must be used as sparingly as possible. Doctors resorting to steroid medicine on the first visit without correct case analysis are poor doctors and possibly should seek employment elsewhere. The healing art is an exacting profession and needs dedicated seekers of truth and ways to help people not quick cover ups.

DIABETIC DRUGS

Insulin is a hormone secreted by the Beta-cells of the islets of the pancreas. Various stimuli release insulin, but the main one is excess glucose in the blood (Hyperglycemia): Insulin binds to specific receptors in the cell membranes, initiating a number of actions including an increase in glucose uptake by muscle, liver and adipose tissue.

In diabetes mellitus there is a relative or total absence of insulin. The resulting decrease in glucose entry into muscle and adipose tissue and the increase in blood glucose have serious consequences. Because the intracellular levels of glucose are low, energy is obtained by increased catabolism of protein and fats, the depletion of which results in weakness and loss of weight. Lipolysis is stimulated and the blood levels of free fatty acids and glycerol rise. An excess of acetyl-CoA is produced in the liver and converted to acetoacetic acid, which is then either reduced to Beta-hydroxybutyric acid or decarboxylated to acetone. These "ketone bodies" accumulate in the blood causing an acidosis (ketoacidosis).

About 25% of diabetics have a severe deficiency of insulin. This Type I or insulin-dependent diabetes is associated with HLA antigens and immunological selective Beta-cell destruction. In these patients, ketosis is common and they require insulin and dieting. Various insulin preparations are available. Short-acting soluble insulin and medium-acting isophane and zinc suspensions are the main types used, either singly or in combination. Regimens involving one to four subcutaneous injections a day may be required.
There is evidence that metabolic control early in the course of the disease may prevent or delay the onset of diabetic complications. Some of these complications are believed to be due to cell swelling caused by the accumulation of sorbitol and fructose. They may prove to be prevented by aldose reductase inhibitors (e.g. sorbinil).

In Type II or non-insulin-dependent diabetes the aetiology is unknown, but strong inheritance is present. There is a resistance to circulating insulin, which does, however, protect the patient from ketosis. There is a reduction in the number of insulin receptors which is often associated with obesity. Loss of weight (diet and exercise) reduces insulin "resistance" and controls about 70% of Type II diabetics. The remainder are treated with oral antidiabetic rugs, usually a sulfonylurea.(ref. blood sugar, and diabetes study)

SEX HORMONES AND PHARMACEUTICAL THERAPIES

The essence of life depends on our hormones and enzymes. The male and female have some interesting differences in the hormones of the body. The adrenals in both make all the hormones male and female. The liver must detox the excess in the system. The ovaries and the testes develop either oestrogens or androgens, these determine the sex effects of the person. There are many diseases that can be helped with sex hormonal therapy. The pituitary release the gonadotropins luteinizing hormone (LH), and follicle stimulating hormone (FSH).

The hypothalamus controls this pituitary release by short pulses of gonadotropin releasing hormone (GnRH). The mood, attitude, past tendencies, expectations, hopes, memories, and the mind in general control the hypothalamus. The hormones released by the body or taken in via drugs then effect subtle sensors in the brain and hypothalamus. The pathway is always intertwined and part of a homeostatic sophisticated cybernetic feedback system. This is an example of the psychosomatic and soma psychic loop. Interference with this delicate process should be as subtle as possible. Miscues can effect the patient for life.

In the male the FSH and testosterone need to be present for sperm to be made. They are made in the seminiferous tubules. The nurse white blood cells take care of the sperm till time for delivery. This process must take place at temperatures below 97.5 F. This is why the testes is the only organ outside the body.
It needs cooler temperatures. Many men become temporarily infertile because they do too much sport or too many hot tubs or baths and bring the testes to a higher temperature.

The testosterone is made in the interstitial cells in response to LH released from the pituitary. Testosterone produces the male characteristics of beard, moustache, deep voice, aggression, sex desire, growth, and muscle or protein synthesis.

Real testosterone is disassembled by the digestive tract (mostly liver after absorption) and is easily reassembled in the system under natural control and process. Synthetic testosterone is not inactivated thus it produces an unnatural high level of blood testosterone. This is used in castrated adults or in cases of pituitary disease or testes disease. The natural testosterone form low dose homeopathy has been shown to be effective in raising these levels in research. (ref. Sarcode research)

The point of pharmaceutical therapy is to treat the affliction not just reduce symptoms. When we use the synthetic hormones we treat the symptom but aggravate or cause the imbalances in the homeostasis regulation. By using glandular therapy or protomorphogen therapy we supply the building blocks, which are the low dose glandulars, and the blue prints for organ development, the protomorphogenetic effect. Between the two the natural system can now better manufacture needed hormone within the scope of it's own natural homeostatic regulation. Even disorders, of homeostasis respond to these sarcodal therapies as that they encourage proper regulation. Sarcodal homeopathy is an attempt to bridge the gap between the drug utilization and classic homeopathy. Research into protomorphology is not funded by the drug companies. They want the use of synthetics that they can patent. The drive for symptom control (allopathy) and marketing profitability (patentability) has lead medicine away from natural, safe, and minimal dose medicine. Its time to return. FSH and LH stimulate the development of the follicle in the ovary. Estrogen is developed in the granulosa cells of the follicle. Early in the follicle development low estrogen levels in the blood are detected by the hypothalamus and exerts a negative feedback effect on the FSH. This is to secure that the dominant follicle will ripen. Halfway through the cycle the estrogen levels are highest. This has a positive effect on the LH secretion. At maximum levels the LH surge causes ovulation. Then the ruptured follicle becomes the corpus luteum. The corpus Luteum secretes estrogen and mostly progesterone till the end of the cycle. The first half of the cycle is known as the follicular stage and estrogen stimulates the growth of the endometrium.

The second half of the cycle is the luteal stage where increased levels of progesterone stimulates the maturation of the endometrium and at peak levels the shedding of the endometrium in the act of menstruation. The homeostatic balance is extremely sensitive.
The disorders of the female cycle are many but here are a few of the most common ones:

Endometriosis is overgrowth of the tissue that respond to the hormones of the first part of the cycle. Stress and poor diet are the primary causes. Caffeine products and sugar contribute to the formation of the excess tissues. Stress causes the hypothalamus to release growth factor more often. Treatment needs to involve stress reduction and diet awareness. The progestex from New Vistas has herbal and glandular progesterone. This formula will prompt a cleansing of the endometrium tissues.

The patient can have a strong period release. Use the progestex for just one month to prompt cleansing while supplying deficient progesterone. The endometriosis nosode has also been shown to have positive effects on endometriosis. (ref. endometriosis)

Premenstrual tension occurs as depression, bloating, irritability, or cramping before the period. If it relieved at the onset of the period then it is premenstrual and involves problems with progesterone. It is most usual deficiency of progesterone.

The same program as with endometriosis is useful. The PMS formula from New Vistas can be very helpful with the accompanying symptoms. With any female or male disease suspect possible hypothalamus, pituitary, or emotional disease. Treat accordingly.

Menopause and Hormonal replacement therapy, is another major problem with middle aged women. Normal synthetic pharmaceutical treatment use synthetic hormones which can disturb the balance. Natural treatments with low dose homeopathy is much better.(ref. menopause study)
With the coming of the middle ages the ovaries run out of their eggs and eventually the ovaries retire production of the needed hormone as well. The adrenals should take up the slack and produce the needed estrogen. In an age of more and more adrenal stress and a social struggle to stay young, estrogen replacement is asked for. Premarin is the most prescribed drug in America today. But their are some more natural ways with much less risks available to doctors to use. Stress reduction and diets of less processed sugar, caffeine, and no smoking are musts today. Stress reduction is a must as well. Estrogen like compounds can be utilized for some help. Some safe ones are vitamin E, wild yam herb, and unsugared licorice to name a few.

The Meno formula from New Vistas is an excellent formula for treating the hot flashes. And estrogen replacement can be accomplished naturally with the Female liq. in low to moderate needs. For a stronger type of hormone replacement I have used with hundreds of patients quite successfully involves a combination homeopathic of the three major hormones and one glandular. Combination of
1. estrogen 6x to start, lower to 5, 4, or 3 till hot flashes diminish.
2. progesterone 9x to start lower to 8, 7, or 6x till depression diminishes.
3. testosterone 12x to start raise to 16, 24, or 30 till irritability and aggression diminishes.
4. hypothalamus 12x

This formula supplies the needed factors of hormone replacement therapy from all natural sources. There are many more subtle disease that can be treated with natural medicine as well.

DRUGS AND PHARMACEUTICALS USED IN TREATING CANCER

Cancer or neoplasia cells develop in the healthiest of patients. The immune system has to find and destroy these cells. It is part of the natural process that certain cells should be mutated and have different greater growth rates. Viruses can cause the mutation but usual need to be activated by some toxin. Thus there are sometimes cofactors that need to be copresent such as the virus and the toxin or the mutated DNA and the toxin. Sometimes just chance catches up.

This comes from the mathematical nature of the genetic code that eventually gives forth some mutation. If the immune system fails to handle the chore then cancer grows and can eventually take the life of the patient.
We know the factors that cause many cancers and we call them carcinogenics. These are toxic agents that either increase the probability of mutation and the cancer genes or they weaken the immune response to the neoplastic tissue. Preventive treatments require removal of the carcinogens contact, and keeping the immune system in peak (not over peak) performance. A hyperimmune system can be just as deadly (see lupus).

Traditional medical techniques of the last few decades depend on attacking the cancer tissue itself. These techniques include:
1. surgery, removal of the lesion
2. chemotherapy, giving a toxin to all cells that is more toxic to the cancer cells with their heightened metabolism of growth.
3. radiation, using ionizing radiation to destroy the cancer cells.

In the state of Colorado in the USA there is a cancer law that states that if someone even expresses publicly that another type of therapy could possibly help a cancer patient that person can go to jail. Such is the fear of traditional medicine of new techniques. The Nobel prize in medicine about 7 years ago was awarded to a team of researchers who proved their thesis that using chemotherapy, surgery and radiation is bad medicine and largely unproductive. Their idea was that stimulating the natural immune system was the best way to treat cancer. To read this Nobel prize winning paper in public in Colorado can get you into jail. In the land of free speech, we have the biggest hypocrisy. Your speech is free as long as you don't tread on chemical company or traditional medicine toes.

But let's explore the world of chemotherapy. First we must realize that deficiency of chemotherapy is not the cause of cancer. In fact if we give chemotoxic agents to healthy organisms we increase the tendency towards cancer. The first signs of treatment came from farmers who noticed that the healthy cows, pigs, horses etc ate certain plants. When they got cancer they ate different plants that they avoided when healthy. One of these plants was the periwinkle or vinca. This led to investigation and later to the patent on a pharmaceutical derivative of the vinca. These are the vinca alkaloids (vinblastine, vincristine). The drugs used in cancer should inhibit the mechanisms of cell growth or proliferation. So they are toxic to all cells especially cells that proliferate often. Examples are hair follicles, bone marrow, intestinal lining, pancreatic cells, etc.

Since the nutrition is sacrificed and the bone marrow where the immune cells of the immune system are made, we can see just some of the ways the chemotherapy interteres with the immune system.

The anticancer drugs are classified according to the site of action. Some drugs are phase specific and have action on part of the cell cycle.
Others are cycle specific and have action throughout the whole cycle. The Vinca alkaloids are examples of phase specific agents. They work on the mitotic part of the cycle by blocking the spindle. Examples of cycle specificity are mustine, cyclophosphamide, and busulphan. They work by covalent binding to cross link DNA. Certain antifungals and antibiotics such as nystatin and actinomycinD also are cycle specific and alter DNA function.

There is a lack of research on microdosing or minimal dose technique. In other words research is usual directed at selling the most amount of a chemical. So the dosage is usual set at one deviation below the toxic dose. In our research on cancer we have found that low dose of these herbs in natural not synthetic forms and at homeopathic activation we could increase the anticancer effects and stop the derogatory immune effects. In fact our study in Kiev showed that the immune systems were strengthened. The traditional treatment of synthetic chemotherapy had less results while almost destroying the immune systems.

Combination drugs have recently been shown to be more effective in treating cancer. The theory is that by using multiple drugs we can affect different pathways of drug metabolism and hopefully beat the toxin. The selectivity of anticancer drugs is questionable at best. The toxic effects on the bone marrow is the best indication of drastic side effects. The studies with the Homeopathic treatment showed positive effects on the cell formation in the bone marrow rather than negative effects seen with traditional chemotherapy. (ref. cancer studies by Vinnitsky, Nostra)

Some tumors are hormonal receptor type and certain hormones such as the sex hormones feed and drive the growth of these tumors. Treatment involves hormonal antagonists or castration to remove hormonal supply. Stress reduction is very important for such tumors.

Herbal treatments for cancer include the chemotaxic herbs as one therapy and immune fortification as another. Homeopathic treatments include the same idea but also include detoxifiers or hormetics to help reverse the damage done by the original carcinogen.

Some of the herbs such as the mustard poultice from New Vistas apply heat and alkaling agents to the topical area. This formula can penetrate almost an inch into the skin to have degrading effects on cancerous tissue. The herbal blend first used by Hoxy, have had excellent clinical results.

Other herbal mixtures have been engineered for oral use as chemotaxic agents. The Degex Liq. is such a blend and as such should only be used in the presence of known cancer. It is not an immune stimulator but a chemotaxic agent.

Immune stimulation is yet another field of homeopathic cancer treatment. Interteron a,b,c and interleuken 1,2,3 all are shown to have positive effects on the immune system. Cobra venom causes degeneration in raw doses but in homeopathic dilution the effect is reversed.
Viscum alb is also a homeopathic treatment for cancer. All of these are combined in the degex homeopathic by New Vistas which is designed for cancer treatment and prevention. Patients with genetic tendencies towards cancer should take this as a preventative.

Another field of endeavor in cancer treatment is nutrition. Many fatty acid and vitamin deficiencies and problems with absorption cause or aggravate cancer. Chemotherapy compromises the gastrointestinal epithelium and pancreatic function. Supplying enzymes and nutrient is crucial for therapy. Chemotherapy victims especially need excess nutrients and enzymes for their absorption is critically impaired. Stress reduction and mental imagery is also needed for any cancer therapy.

The documentation of the psychoneurologicalimmuno link is ever growing. So as we can see the world of natural medicine has many proven and scientific types of help for the cancer patients.

AUTO IMMUNE DEFICIENCY SYNDROME AND PHARMACEUTICAL TREATMENT

The discovery of the HIV virus and the aftereffects has dealt a death blow to the antibiotic generation. The idea that your immune system is unimportant and that antibiotics can do the job is now known to be faulty. In fact the immune system is integral and essential. The antibiotics are actually a bigger problem than solution for medicine. If the antibiotics were all they were tooted to be no one would die of immune deficiency. In fact the antibiotics are only a short term symptom relief at best.

The antibiotic generation came along about the same time as sewage. Sewage improved the disease picture immensely, but the antibiotics got most of the credit. The antibiotics were designed to attack the microorganism intruder directly. They then left the immune system to atrophy. The antibiotics destroyed the bowel flora balance and further upset the system balance in several ways. They became overprescribed used in all of our animal husbandry fields and given to our children for everything from colds to sprains. Over half of the time the prescriptions to our children of antibiotics were inappropriate, used in conditions that they weren't designed for. But they were so easy to use by the physicians, and their use became a marketing extravaganza for the drug companies. Then the worst happened the antibiotics with their immunosuppression effect became a cofactor for an immune suppression disease. A disease which was to become known as AIDS.
Not everybody exposed to the virus gets HIV or develops AIDS. The recent theories involve the existence of cofactors. Cofactors are agents that allow the infection to take hold and speed up the progression. The detrimental effects of antibiotics on the bowel flora and the immunosuppressant effect make them a cofactor. The reason that so many homosexuals get AIDS is that they are used to massive doses of antibiotics for the treatment of Syphilus. Syphilus being yet another cofactor. (ref. books 23)

The treatment for AIDS cases is usual done with agents such as AZT which are designed to stop proliferation of the virus. Other treatments are to fortify the immune system or to attack opportunistic infections. Since the HIV virus is a retrovirus, stopping its replication is difficult. AZT seems to be the best agent but its burden on the vital organs of liver and kidney complicate its use. Often times patient die of the cure not the disease. In our studies on the virus we have found some herbal formulas that are 75% as effective in tests as AZT. This formula called Hemo A liq by New Vistas has no side effects. In fact it had a positive effect on the liver at the maximum effective dose. (ref. AIDS studies) These results were with the first generation of the formula. Recent improvements on the formula are anticipated to have even better effects on neutralizing the virus. Testing is in progress.

Another treatment for the virus is the homeopathic nosode. An individual nosode is made of the patients own serum or blood to treat the retro variations presenting in the patient at the time of treatment.

Fatty acid deficiency is also treated to provide the needed nutrient to stop viral intrusion. The aids patient also needs lots of good nutrition and to stop as much immunosuppression as possible. This eliminating sugar, smoking, limiting stress and avoiding drugs even antibiotics. Towards a complete therapy suggestion see the book on AIDS therapy. (ref. AIDS studyies Nagy)

ANTIBIOTICS

The discovery of the world of microorganisms lead to the development of the germ theory. The passing of laws that only allowed patents for synthetic items gave incentive to develop synthetic compounds. The lack of understanding about long term side effects of unnatural compounds allowed the mass manufacturing of chemicals. The monetary control that chemical companies had over medical schools made sure that every doctor knew how to prescribe antibiotics.
Mix these all together in the same decades and we get an uncontrolled problem with antibiotics. Scientists the world over have now recognized the problem with antibiotic use. Antibiotics accelerate AIDS, and all immune disease.

ENDOTOXINS:
Exotoxins are excreted from living microorganisms, whereas endotoxins are retained inside the cell. The endotoxins are set free when the organism dies. These toxins have powerful stimulating capacities on the immune system. They stimulate antibody production, antitoxins, T-cell, B-cell, and immune cell formation, and immune cell efficiency. One mechanism is that these toxins are modified to inactivate the toxicophore group of the molecule, leaving the antigenic group unchanged.(ref.Tyler, Brady, Robbers 1988). These exo and endotoxins can be used to build immunity as in immunization. Certain of these endotoxins however produce general stimulation of the immune system. In other words they increase and fortify the entire immune system towards all intruders. (ref.Tyler, Brady & Robbers.1988)
Over one hundred years ago Jules Bordet first detected the presence of factors that could augment and stimulate antigen-antibody combination. This led to the complement fixation test. The most important part of the complement activation involve the third complement component C3. The proposed classical pathway of activation and conversion appears in the second figure.

There are many other ways that endotoxins can help the body. The endotoxins are rich in lipopolysaccharides (LPS) which are contained in the cell wall of gram-negative bacteria. These bacteria are essential for life and must be part of the healthy bowel flora. In the bowel they help in nutrient absorption, assimilation, detoxification, and systemic regulation of immunity.
Endotoxins can also act to excite B-cell activity and they are thus also known as polyclonal B-cell simulators. The next figure demonstrates this.

T–CELL
------->
helps (stimulated by endotoxin)
------->

B–CELL----antibody-seeks invader
POLYCLONAL STIMULATION OF B-CELL BY T-CELL
Thus the endotoxins are nonspecific stimulators of the entire immune system. Research has shown LPS to be involved in metabolism, immunology, physiology, toxicity, and biosynthesis (ref. Strain 1983, Munford 1981, Morrison 1981, Galanos 1977, Kurtz 1982, Openheim 1986, Rick 1982, Skelly 1979) LPS are shown to induce synthesis of interleukins and T independent antigens. However in large quantities they are pyrogenic.

**CLASSICAL PATHWAY**

- **activation**
  - C1q:rs
    - (calcium needed)

**ALTERNATE PATHWAY**

- **stabilization**
  - P ——> C3bBb*
    - (magnesium needed)

- C3bB

*(stimulated by C-reactive proteins, polyannions, polycations, some virus membranes, and most efficiently by lipid A of bacterial endotoxins)*

**CLASSICAL PATHWAY**

- C4 + C2+ (magnesium needed) ——> C4b2a ——> C3bBbP ——> immune
  - . . adherence

- C3b

- . (proteases needed)
  - C3 ——> C3a
  - . C5a-inflammation
  - C5 ——> C5b+C6+C7=
  - C5b67+C8+C9=
  - C5b-9 complex
  - **membrane lysis**

*(Rapidly dissociates unless stabilization factors are present such as endotoxins, some IgA or IgG) (ref. Reeves and Todd, 1990) **(end product stimulated immunity)*

The research has demonstrated positive effects of these endotoxins on immune function, alcohol damaged livers, radiation defence, ACTH level, serum T4, lymphotropic sensitivity, peripheral lymphocyte number and effectiveness, trauma recovery, serum ribonuclease activity, catecholamine storage, digestion, and positive effects on bowel flora. The research has also demonstrated certain cofactors that enhance the endotoxin effect. Stability and safe methods of administration have also been investigated.1994 saw the start of a specific journal for endotoxins.(ref Studies, Endotoxins,1995)

In fact vast Quantities of new research has shown a new wealth of immunomodulation and immune stimulation effects of a host of bacterial residues or endotoxins. Staph and Strep endotoxins show positive treatment for cancer. Nocardia and other mycobacterial endotoxins have shown positive immunostimulation effects in many conditions. (ref.Books,19,Guenounou,1995)

PROBLEMS WITH ANTIBIOTICS:

The antibiotic revolution seemed to offer so much for medicine. Many previously stubborn diseases responded to their touch. But was it just a short term result that then would have later complications. The problems of antibiotics came not only from overuse but from a allopathic short fix philosophy. The most severe problem of antibiotic use was the secondary immunosuppression they caused. By defeating the bacteria directly they robbed the immune system of its livelihood and produced weakness. Antibiotics disrupted bowel flora balance and thus further disturbed immune function as well as nutrient absorption and detox. Nature responded to the antibiotics by producing resistant strains which make current use questionable. By upsetting the natural balance of microflora in the body and the environment the antibiotics allowed for an increase in fungal and viral diseases.

Also antibiotics are the most misprescribed medication, being given for viral colds and flu inappropriately. Much has been spoken about this in the press and medicine seeks new solutions.
Encouraging nature is the best answer. By helping the natural process we are participating in the most technologically advanced process in the world.(ref Newsweek)

BACKGROUND ON HOMEOPATHY TREATMENT OF INFECTION

Homeopathy is a hundred year old art of medicine that today is legal in the United States, Europe, India, and most of the world. The art started with the concept that what causes a disease is best to use to cure. Jenner and the founding fathers of immunization also agreed with this philosophy. Homeopathy concentrates on the minimal dosage or safest dosage and thus lost favor with an ever increasing fast food culture. Antibiotics were developed for fast results and to attack the intruder directly. But immunosuppression, disease resistant strains, and side effects resulted. Leaving modern medicine looking for help. Homeopathy can help.

Homeopathy also offers antifungal and antiviral capacities that make misprescribing much less likely. This can have a major impact on improving patient care. This is nosodal homeopathy.

Since endotoxins are toxic in large quantities, using the dilution principles of homeopathic succussion will offer a solution. By using a 7 x or 1 part per 10 million and combining the LPS derived from the bacterium we can engineer a combination homeopathic that could take the place of antibiotics. This compound will work to stimulate a weak immune system. In cases of extremely weak immune function other homeopathic stimulation will be desirable. This is called sarcodal homeopathy.

Homeopathy has been clinically shown effective for stimulating antibodies, treating infections, and stimulating the immune system. (ref. Nelson papers) The minimal dose philosophy of homeopathy along with its experience makes it an ideal vehicle for helping medicine. To review these papers access the internet at http://usa>net/qmed.

A patented Homeopathic process has blended a combination homeopathic that captures the endotoxins with homeopathic stabilizers and enhancers to achieve a refined substitute for antibiotics. The product type has been clinically tested and produced in an FDA registered laboratory for your medical use.

Complex homeopathy is an ever growing form of medicine that can be easily learned. The College of Practical Homeopathy in London England even offers Continuing Education at the post graduate level via the internet address.
CLINICAL SUGGESTIONS:

In our medical clinic in Budapest we almost exclusively use the BAC for all the bacterial conditions we see. Our Clinical experience has been excellent. We always also recommend stress reduction, good nutrition, exercise and avoidance of all immunosuppressants.

The product comes as a liquid and is designed to be taken 7 to ten drops twice a day. If the infection is in an acute state the take 4 drops every 30 min. till the condition starts to abate. Then let the natural immune system take over while continuing the twice daily administration for ten to fourteen days. This formula can also be used as a preventive taken during cold and flu season. It is safe for children and the elderly but half dosage is recommended for toddlers and infants. No contraindications with other remedies other than extreme alcohol sensitivity are reported.

DRUGS EFFECTING THE CENTRAL NERVOUS SYSTEM

The most popular substances sold in the world today, are the substances that act on the central nervous system. The nature of the human consciousness is to seek some change in the norm of consciousness. Thus an altered state of consciousness is welcomed.

If it is subtle and control can be maintained, then the substance will be popular to the masses. Substances that alter the consciousness dramatically or risk control of behavior will be very popular but only to a few. Thus coffee, alcohol, and tobacco are popular to the masses, while cocaine, marijuana, and others are very popular to a few. The sale of the illegal drugs tops 600 billion a year. The sales of tobacco top 700 billion. The sales of alcohol approach a trillion, and the sales of coffee are near a trillion as well. All of the substances that stimulate these receptors can be addictive in some sense of the word. Each of them has had some degree of legal control as well.

The scientific explanation for the action of these substances is in flux. There appears to be a universal agreement that there is some effect on the synaptic cleft of central nervous system. But there is belief that there must some other effects also.

Another type of stimulus that is often not recognized by the scientific community is the effects of emotional, cognitive, and social stimulus on the synaptic cleft. To list just some of the possible stimulant of the central nervous system we would include love, reverence, friendship, intellectual stimulation, sex, athletics, giving, sharing, eating, drinking, meditation, and a host of others.
Let's not forget completion. When a reasonable task is completed there is a hormonal release and a stimulus of the system. Positive thoughts are a stimulus. Just as in Peter Pan where a good thought could let the person fly, a positive thought can let the spirit fly. The effects of these positive mental states provides possibly the best stimulus of the central nervous system. Love being the most powerful of all. Our analysis of medicine and pharmacology must now include the factors of positive mental states on health and healing. The ignorance of the past by medicine for the powers of the mind and consciousness must be replaced with the embrace of the mental abilities and their positive effects.

Science is now recognizing the positive effects of consciousness. The development of so-called drugless therapies is everwidening. But we are still effecting the inner pharmacology of the patient. Soon we will realize that food and thought are the best medicines.

Everyone suffers and everyone has the capacity of joy and positive feelings. In medicine we must look beyond the relief of symptoms to the pursuit of happiness. Many drugs have long term detriment to the pursuit of happiness. The addiction of false stimulation of the CNS, can actually degrade the ability of a patient to make autohormones, and find self fulfillment.

There are several types of central nervous transmitters. There are the fast point to point transmitters, the slow regulating neuroleptic and monoamine, alcohol type, and general stimulus type.

The fast neural circuits are amino acids. Glutamate and aspartate are excitatory and depolarize neurons by triggering an increase in membrane sodium conductance. This demonstrates how the nutrasweet compounds containing aspartate sweeteners have a low degree of addictiveness. Another effect is the popularity of glutamate as a food additive, as in Chinese foods. This is a subtle stimulation effect that doesn't last long. More important is the allergic and irritant capacities of these amino acids. GABA is an inhibitory transmitter. GABA is contained in over 35% of all central nervous synapses. GABA hyperpolarizes neurons by increasing their membrane Chlorine conductance. This stabilizes the resting potential of the membrane near the Chlorine equilibrium potential deactivating the Sodium. Glycine is also an inhibitory transmitter in the spinal cord. Glycine is antagonized by strychnine and it's release is blocked by the tetanus toxin.

There is also a more diffuse regulatory system that uses monoamine transmitters. These monoamines include dopamine, noradrenaline, adrenaline, acetylcholine, and serotonin (5HT). The cell bodies of these branched axons project into almost every area of the brain.
The release of these transmitters occurs diffusely from many points along the varicose terminal networks of monoaminergic neurons affecting vast quantities of target cells. These have stabilizing and quantitizing effects on the entire state of consciousness. In fact they dictate the backdrop or framework where all other thoughts are expressed. The setting of our personality is a chemical expression of the consciousness state of our personality. This is an over simplification of an exceedingly complex system. There are so many levels of interaction. The emphasis of this book is the chemical expression. We must emphasize that the chemicals are a result of consciousness not the other way around. We can study the chemistry and effect patients health with chemistry, but the real doctor should recognize the consciousness and work with the natural growth of our patients. Then a good doctor will see that the problems of the patients are often just signposts of deeper disease. Then medicine becomes a dedication of growth and consciousness.

Another type of transmitter type is the peptide. Peptides are found in central neurones and nerve terminals. Such neropeptides are substance P, enkephalin (met, leu), angiotensin, somatostatin, luteinizing hormone releasing hormone (LHRH), Endorphins, and calcitonin peptide. These peptides have slow regulating signals. Giving these peptides can produce a variety of behavioral responses such as:

- angiotensin: drinking behavior
- substance P: locomotor activity
- opioid peptides: analgesia
- calcitonin: tachycardia, raised blood pressure
- oxytocin: bonding emotion
- LHRH: female sexual behavior even in men

Ultra high dilutions or low dose potencies of these hormones have similar effects.

Alcohol has several effects on the CNS. The first few drinks have the effects of releasing serotonin and adrenaline. The serotonin release accounts for the initial feeling of well being. This effect is temporary. The adrenaline release then increases the risk of aggression or temper. The other effect of alcohol is that it makes the synaptic clefts act funny. The water in the brain becomes somewhat unpredictable. The brain must some degree of indeterminacy as shown in the Quantum Biology. When the indeterminacy is increased as with alcohol the effects are drunkenness. The liver is now taxed with the job of detoxing the alcohol. In the normal adult the alcohol is converted to acetic acid in the metabolic process. This accumulation of acetic acid makes the person feel toxic and the alcohol tastes worse as the body tries to reduce consumption.
In some people, the genetic code is such that the person makes more THIQ than normal in the process of alcohol metabolism. This THIQ is a strong opiate-like receptor stimulator. Thus these persons produce more and more of their own opium with each drink. Certain drugs like opium are so powerful a CNS stimulant that they override toxic effects and produce increased and out of control cravings. The alcoholic craves more and more and sometimes can't stop drinking. The American Indian and Eskimo all seem to have this gene. This accounts for their social trouble with alcohol.

The effects of CNS stimulants point out the need for social and emotional control. Perhaps if the suppression of human emotion was elevated then people might be free to use emotion and natural methods to stimulate themselves rather than drugs. Medicine has a lot to learn about drugless therapy.

SCIENTIFIC, CLINICAL AND EXPERIMENTAL PROOF OF HOMEOPATHY

In this short chapter we wish to summarize ten years of extensive research on homeopathy. We have completed an extensive literature review of many studies on homeopathy. We have performed over twenty laboratory analyses including cell culture studies and animal studies, and we have performed over seventy different clinical studies involving patients.

We have also undertaken extensive research into the propositions behind homeopathy. We may now conclude that homeopathy can be proven scientifically, mathematically, clinically, and experiential.

Our study directors have actively performed medical and clinical studies on well over one thousand patients with seventy types of disease. This is the largest clinical evaluation study of homeopathy we are aware of. The results show conclusively that homeopathy does indeed work, and deserves a daily place in medicine.

Introduction:

In 1991 the British Medical Journal presented an article by Jos Kleijnen and Paul Knipschild. These Danish researchers reviewed over one hundred articles on homeopathy. The researchers are from Maastricht in the Netherlands, where the European community treaty (the Maastricht Treaty) was first generated [Journals:1].
In their article Kleijn and Knipschild found that the science presented in the articles they reviewed was inclusive of worthwhile clinical and scientific data. The conclusion of their article was that homeopathy, because of its wide usage and because of these articles, was indeed a legitimate science of medicine.

In our literature review we also reviewed the articles used in their study. But a host of research was overlooked by these authors; research that was done in America and Eastern Europe. The purpose of this article is to summarize some of the additional research not included in the Maastricht paper.

In the paper from Kleijn and Knipschild we can see that their review showed that homeopathy had little effectiveness in some of the arthritis cases. Our studies have shown that the type of homeopathy we have used has had more successful results [Nelson:11].

In articles contributing to the review mentioned above, we have also seen how homeopathy has possible treatment for otitis media. A very good study on meningitis was done on the effects of homeopathic treatment on a large population in Brazil [Journals:16]. Other positive effects were found concerning homeopathy's ability to deal with allergy relief, sinusitis, inflammation, and other areas [Nelson: 9, 39,11].

Scientific Background:

A vast number of writings on homeopathy over the last fifteen years have been done in India and Eastern Europe. There have been many good articles written in America, as well. On the scientific foundation of homeopathy, there has been much research undertaken on the quantum energy fields and the proton, or hydrogen bonding, effect. This research has scientifically proven the existence of homeopathy as an energy medium transferred through water and alcohol [Zhalkl-Titarenko:1].

Some of this research has been developed by Olga Zhalkl-Titarenko at the research center in Lekon of the Natural Academy of Sciences in the Ukraine. In Olga's research on the hydrogen bonding effect she was able to prove that homeopathy is capable of transferring various shape information through a change in the hydrogen bonding structure from one succussion to the next [Zhalkl-Titarenko: 2]. This succussion principle thereby allows for a polymorphic structural change in the water molecule that can be detected through nuclear magnetic resonance. Also, the effects of these homeopathics on the conformational states of certain proteins (specifically albumen) were found to be significant when compared to controlled water and alcohol.

Beneviste's work in France also proved the ability of water to have memory of a chemical property. He used high x potencies (without chemicals) to activate antibodies, similar to allergen-antigen activation. His work was challenged world wide.
Now he has redone his experiments under the most controlled circumstances, and his results are the same. High-potency homeopathy works [Journals:12].

Work on the trivector field has found that there is a capacitance and magnetic and resistance structure to a homeopathic is detectable at high potencies versus controlled water and alcohol. Thus homeopathy has been found in these research studies to have a transfer not only of shape, but of energy patterns that can be deduced from a high-x homeopathic [Zhalkl-Titarenko: 2; Nelson: 43, 45, 48, 53, 55, 63, 65, 67; 73, 62, 57; Journals:15]. The studies showed that in comparison to normal water and alcohol, homeopathics indeed have a distinct energy pattern that differs significantly from one homeopathic to another. This was used to develop the quality control techniques used today for homeopathic products (Books: 5).

The book, Experimental Evidence for Homeopathy, outlines a much more in-depth analysis of the science behind these electrical and shape structural or morphic-like discoveries in the transfer of information of a homeopathic [Books: 6].

Also in homeopathy, there has been some interesting work done in Kirlian photography and energy fields [Nelson: 61]. This work was started by the Reckewig people in Germany; and has spread to America, other parts of Europe, and is being done in Ireland.

These types of developed detection systems have been used not only for validating the concept of an energy field around a homeopathic, but could also be used also be used for quality control by manufacturers.

In reviewing the work of Del Giudice, the Maitreya Institute and Fröehlich, we can see that there is indeed a scientific principle of information transfer that allows for a new scientific explanation [Zhalkl-Titarenko: 2]. This scientific explanation allows us to understand what a homeopathic is and is not in the development of product quality control, and allows us to show the world that homeopathy has a rational and scientific basis (Nelson: 51).

It is not the purpose of this short presentation to discuss in depth all the analytical factors regarding the scientific process of homeopathy. In this paper we want to simply review the basic nature of this scientific analysis, and point out to the reader that this scientific analysis is continuing on a world-wide level by many different types of researchers.

In answering some of the questions about the future of homeopathy, we definitely must realize that more effort and attention must be drawn to the scientific work that can help to explain the concept of homeopathy to the scientific medical powers that be: people who want to have a more in-depth understanding of something before they begin to use it.

Homeopaths have classically been more trusting of therapies, and are more readily willing to utilize therapies, that have mystical explanations, where classical medical practitioners are not. The future of homeopathy will hinge on our making more scientific inroads for them to bridge their gaps in understanding and belief, so that they might more confidently involve homeopathy in the practice of medicine.

We point the reader to the referenced articles and texts in the Bibliography, so that they might deepen their understanding of the scientific analysis of homeopathy.
Philosophy:

Homeopathy also has a philosophical basis as a medical technique. We now see that iatrogenic (doctor-caused) disease is prevalent throughout the world. Billions of dollars are paid by drug companies for damage caused by their iatrogenic poisoning.

The idea of allopathy as a basic form of medicine is an archaic one in today’s scientific analysis. Reductionism, which has fostered most of allopathy, is now extremely passé as a science. We now know that the body is not a reductionistic item, and that only treating a reductionistic symptom is philosophically flawed if we truly want to help an organism. True help for an organism would constitute looking at the total nature of the person and his entire symptomatology, and also realizing that the symptoms might just be sign posts of a deeper morphology.

Homeopathy, by working from within rather than from without, attempts to incur balance and help people to return to homeostasis. The dramatic interest in self-help programs, the return of people to a more natural philosophy, and a chemophobia (fear of synthetic chemicals) are all contributing to a global philosophical change that will also allow homeopathy to flourish.

The basic philosophy of homeopathy is that there is a natural life force within that must be motivated and stimulated in order to seek out health and balance. Hahnemann pointed out that using external intervention, such as allopathy, is a suppression to cure. He believed that using various types of stimulants, drugs, surgery, and other allopathic philosophical techniques could also obstruct cure, in that they intrude on the basic, natural life force.

We must look at the perfect example of what was revealed in Newsweek recently; antibiotics and many drugs are not working as originally stated. The amount of allopathic, iatrogenic damage is escalating from year to year and creating increasing disturbances.

In the article "Obstruction to Cure" [Journals: 4] we outline a technique used by the doctors in our clinic of evaluating the amount of iatrogenic, allopathic lifestyle and environmental disturbances that can suppress and obstruct cure. We are now realizing that the chemical companies that have polluted our seas, air and ecology have also been polluting our bodies and producing many different disturbances. This is becoming increasingly socially acceptable, and further opens the door for the philosophy of homeopathy to take its place in medicine.

In our article on "A Practical Definition of Homeopathy" [Nelson: 8] we also present a more in-depth analysis of this type of iatrogenic disturbance created throughout the world. In this article we compare some of the lawsuits against allopathic chemical companies with lawsuits against homeopathic companies. We see dramatic differences, in that the allopathic disturbances result in billions per year sought in damages: in homeopathy there are very, very few.
There are many books for the layman and the basic practitioner that go into a deeper analysis of the practice of homeopathy, and also the philosophical and intellectual rationale for using this type of medicine. But as in any type of medicine, the true measure of success is found in clinical use of the product. As we mentioned earlier, most of the one hundred articles reviewed in the British Medical Journal were about the clinical use of different homeopathic products.

Clinical and Experimental Data:

Behind the old Iron Curtain, our organization and others working with us have done many different research studies on a large number of patients, cell cultures, and animals to determine the effectiveness of homeopathy.

At the Institute of Oncology in Kiev, Vladimir Vinnitsky's cell culture work has shown homeopathic products to be successful in treating cancer. Mice with cancer were also successfully treated using homeopathic products (Vinnitsky:1).

The astonishing results show that homeopathy is not placebo, as good results were achieved in animal populations. Studies on this were performed under controlled conditions in double blind experiments with cell cultures and mice.

Hormesis as a theory of biology has also received recent press coverage. Our analysis of hormesis as a varied form of homeopathy has also shown that homeopathy can be used to detoxify. This is being evaluated in research by the Institute of Gerontology and the Institute of Biophysics, both in the Ukraine.

Research has been undertaken in diseases such as leukemia and cancer, as mentioned before. There has also been research pursued on the topics of myocardial infarction, infectious diseases of bacterial and fungal origins, virology diseases, and a host of other diseases. Over a number of years scientists in our field have been able to perform successful studies involving over one thousand patients with a wide variety of diseases. A list of these studies is included in the Bibliography [Nelson:1-54].

One of the studies we performed showed how homeopathy was able to help osteoporosis and significantly increase bone calcium [Nelson:11]. Homeopathy was also observed to be effective in dealing with infections. The effects of homeopathy were significant in several of our experiments with fungus, bacteria and viral infections [Nelson:14]. In these studies we were able to show how homeopathics increased the ability of the immune system to focus in on microorganism intruders. Thus the pathogens were not treated by the homeopathics directly, but the immune system was enhanced to deal with the infection itself.

Another series of homeopathic treatments we investigated was that of pain. Several studies were performed that showed how homeopathics were able to deal with a wide variety of pain issues [Journals: 7], [Nelson: 4,16, 37, 28].

Using a type of homeopathy known as the sarcode, we showed that regrowth of vertebral nerve tissue could be stimulated by homeopathics, and that pain could be treated by classical homeopathic techniques. In over twelve studies we found that sarcoidal homeopathy was effective in stimulating regrowth of tissue in areas such as the thyroid, adrenal glands, prostate, liver, and other parts of the body.
In our studies on nosodes, work was done with detoxification and with treatment of some of the more severe diseases known to man (cancer, leukemia, and others) [Journals: 8], [Nelson: 4, 39]. The results of these studies are sometimes barely significant, but are often highly significant and astonishing.

Another type of homeopathy was investigated in our studies was allergy relief, using allersodes. Several of our medical doctors directed research on the treatment of allergy-related diseases using allersodal homeopathy. The results were also quite astonishing [Nelson: 9, 28].

In the heart infarction study patients were evaluated who were categorized as infarction risk patients. These patients had either had an infarction, or were at extreme statistical risk of a first myocardial infarction, or heart attack. The homeopathic remedy evaluated was completely successful in preventing heart attack; infarctions only occurred in the control group. Even though no major change in heart morphology was observed, the infarction risk was brought under control [Journals:10].

Our studies also analyzed circulatory function, high blood pressure (hypertension) [Nelson:18], and low blood pressure (hypotension) [Nelson: 50]. Our studies were successful in showing that homeopathics can be used as a meaningful, legitimate medicine for these types of disease.

Studies in nephrology were performed, and we determined that homeopathics could be a worthwhile treatment for kidney stones and other inflammatory kidney diseases [Nelson:12]. Homeopathics were also evaluated in the study on "Homeopathic Treatment of Prostatitis", where it was found that homeopathic treatment of prostate hypertrophy was successful [Nelson: 31 ].

Another study in Europe constitutes a five-year continuous effort in studying the toxic exposure of a group in Camelford, England. This group was exposed to a water supply which became toxic when the local water filtering plant unintentionally dumped an excess (ten tons) of aluminum sulphate into the water supply. This produced an extreme toxicity, which we followed up with a homeopathy program for five years. In doing this we showed homeopathy's ability to handle toxic crises [Journals: 2].

Thus for five years, we have evaluated homeopathy in many different ways, including long-term studies as well as short-term interventions.

We have been able to show that homeopathy is a successful medical treatment, and is quite capable of being the primary medicine used in any medical clinic. In fact, the four doctors who work in our clinic use homeopathy exclusively. The twenty patients in the clinic can be treated with homeopathy by our medical doctors. This gives us a fantastic opportunity to perform studies and to observe patients.

It should be pointed out that although the vast majority of articles and investigations have shown positive results, some with closed or stubborn minds are not persuaded. Homeopathy is not successful in every case; there are diseases for which homeopathic treatment appears ineffective.
This type of treatment is sought when patients' bodies are incapable of responding to homeopathic treatment, and they need external help provided by medical hospitals.

Promisingly, these hospitals are slowly realizing the value of homeopathy, and are now bringing it into daily use with their patients, as well. It can be readily observed that the patients for whom homeopathy does not work comprise less than ten percent of the total patient population presenting in the doctor's office.

The value and extensiveness of our study gives it extreme value in helping homeopathy to grow in the world; these homeopathic techniques are much less expensive than their allopathic counterparts and surgical interventions.

We are extremely fortunate to have a medical doctor on our clinical staff as well, who has been able to help us with natural medicine and who was responsible for guiding us into the basic flow of homeopathy. The culmination of these five years of research, thus, is a dramatic affirmation for homeopathy.

In order to properly confirm the results, these studies (see Bibliography) have involved contributing editors who are medical, osteopathic and other practitioners who have validated and tried these medical techniques on their own patient populations. We now have medical practitioners in Germany, England, Ireland, Denmark, Italy, Austria, Hungary, and in the Ukraine, Russia and Scandinavia. These other contributing editors are told to reevaluate the results of these statistical reports to find out whether they meet clinical, daily evaluations in their practices. When the researcher is satisfied, as the English researcher Dr. Peter Smith is, then he becomes a contributing editor listed on the title pages of the studies.

Thus with a pan-European profile, these experimental results have been shown not to be mere trivial discussions, but an actual profile of sound medical results that will work and are working in patient populations.

Thus our staff has been able to conduct a very extensive literature review, an in-depth scientific analysis of homeopathics, and the largest clinical testing project ever performed on homeopathy by a team of scientists and medical doctors, and this study continues even now.

Our answer is an emphatic "yes": Homeopathy is a viable form of medicine. It does work, and it has dramatic potential for bring help to the entire spectrum of human disease.

Conclusion:

Our tests and inquiries on homeopathy have shown that homeopathy can meet the scientific test, the test of time, and the test of clinical challenge.

Homeopathy offers a more acceptable philosophical medium, a historical, much more safe form of pharmaceutical therapy, and an experiential history going back almost two hundred years. It was written into the law of America, and written on the first page of the FDA Act about the existence of the Homeopathic Pharmacopeia of the United States, and how a homeopathic
In fact, the FDA was started by a homeopath named Dr. Clayton, who sought to protect homeopathy and developed the FDA in America as an institution to protect homeopathy. Homeopathy is responsible for ninety-five percent of the medicine in India, Pakistan and Bangladesh. Eighty-five percent of pharmaceuticals sold in France are homeopathic, or natural, pharmaceuticals. Homeopathy is undeniably a legal and philosophically-attractive precept of medicine. As intelligent people we must now realize that homeopathy is a viable and logical medical alternative for the future. Homeopathy thus is proven scientifically, clinically and experimentally.

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Internet: 100574,503 compuserve
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LECTURE NOTES

INTRODUCTION
TO
HOMOEOPATHIC
AND
HERBAL
PHARMACOLOGY
BY
WILLIAM CHARLES NELSON
TEXTBOOK
FOR
THE DEPARTMENT OF COMPLEX HOMOEOPATHY
AND
BIOENERGETIC MEDICINE
OF
THE COLLEGE OF PRACTICAL HOMOEOPATHY
LONDON
INTRODUCTION;

DEAR READER:

This book contains some brief and lay discussions of some complex homeopathic solutions to some of the most common problems presenting to health practitioners everywhere. All of these formulas and more have been clinically, scientifically and experimentally tested.

This research in Homeopathy has proven sarcodes as organ rebuilders, nosodes as immune builders, allersodes as desensitizers, isodes as detoxifiers, and herbals as complex systems of medical treatment. Part of the research has also shown that reductionistic forms of medicine such as reductionistic synthetic pharmacology are incomplete and incompatible with living organisms. So we depend on clinical results and historical usage to determine pharmaceutical action.

The studies about these formulas can be reviewed by accessing the Quantum Medicine Internet page on the internet. This vast quantity of data represents over a decade of research. New research is being added almost daily. If you wish to learn more continuing education is even available on the internet. Access:

http://usa>net/qmed

Questions and discussion is also available on the internet. So we welcome you to the world of complex homeopathy. If you have downloaded this program from the internet you might not have the full diagrams. The full book with diagrams can be attained from the College of Practical Homeopathy.

Sincerely

WILLIAM CHARLES NELSON
ALLERSODE THERAPY, Allergy Sensitivy

1. Using an allergy producing compound to desentize is a the treatment of allergy desensitization.

2. Medical doctors have used allergy shots to desensitize for years.

3. In homeopathy we take the allergy causing compound such as milk and homeopathically dilute it. This has been shown to reduce an allergy attack.

4. Allergies to inhalants, foods and many other compounds have been clinically and experimentally shown effective. (allergy work).

5. *OPSIN I and *OPSIN II contain histamine and adrenalin along with low potency herbals to help with detoxification of food and inhalant allergens, as well as providing symptomatic relief by stimulating the organism to lower the antibody response to the allergin.

6. These products can be used for light to moderate food and inhalant allergy symptoms. For tougher allergies, utilize *COURSE I, II, III, IV. These are polychords of singular remedies and are more demonstrative in their ability to lower the antibody cascade (ref. Allergy Study).
ANEMIA

1. Anemia is a condition with many potential causes. Hemolytic anemia results from a deficiency of iron or the inability to activate iron in the blood. Pernicious Anemia comes from the inability of B-12 either from deficiency or activity to activate in the blood cells. Pyridoxal anemia results from a deficiency of B6. Iron toxicity anemia and alcoholic anemia occur from toxic accumulation of iron in the body. Megablastic anemia results from a deficiency of folic acid and can occur during pregnancy.

2. Anemia can result from a nutritional deficiency and can develop from internal ulcers in the stomach, small intestine, or large intestine which robs blood. Anemia can also occur due to hormonal imbalance and in women during their menstrual cycle.

3. Signs of anemia are low energy states, fatigue, paleness of the skin, a whitish condition found underneath the eyeballs by pulling down the lower eyelid, pains in the kidney and back, a perpetual tiredness, and the inability to get up in the morning.

4. *BLOOD LIQUESCENCE has homeopathic, mineral and vitamin compounds to acid in a wide variety of anemic conditions. *BLOOD LIQUESCENCE puts back into the blood stream the various factors needed to correct anemia as well as to stabilize the energetic factors of anemia.

5. In treating low grade anemia, good nutrition, removing addiction dependencies, reduction of stress and exercise are beneficial.

6. When the body has good healthy white blood cells in adequate numbers, oxygen is transmitted easily from inside the lung into the red blood cells which is than carried to all parts of the body. The measure of health to an organ is how well it uses oxygen. Oxygen is important in the of health and wellness. *BLOOD LIQUESCENCE helps in the transfer of oxygen into the cells.

7. Another formula which helps with oxygenation is *HERBAL LIQUID BEE POLLEN which is a blend of herbs, minerals, vitamins, and other compounds that have been well researched for their assistance in oxygenation (ref. Anemia Study and Herbal Liquid Bee Pollen Study).
ANGINA, Chest Pain

1. Angina or chest pain result from a variety of different factors. It can result from a lack of oxygen to the cardiac muscles. This usually involves cardiovascular disease. It can result from intercostal neuralgia or rib cage pain, which can be activated by palpating the spots on the rib cage. This is one way to differentiate between intercostal neuralgia and true cardiovascular angina. Cardiovascular angina will not be activated by palpation. Angina can also be provoked by indigestion or disturbances of the gastric-esophageal area.

2. Cardiovascular angina can occur when there is insufficient oxygen to the muscles of the heart. These muscular skeletal spasms of the muscles around the arterial wall may be the result from metabolic mineral imbalance disturbance, stress, emotional disturbances and fatty acid. Blocking can also occur due to clogging of the arteries which is built up of calcium as in stenosis, or accumulation of plaque tissue from excess cholesterol and triglycerides.

3. The diagnostic criteria of cardiovascular angina will be the presence of angina, aggravated by cold temperatures and exertion. It will not be relieved by pressure on the chest as in the case of indigestion and will not be activated by palpation of the rib cage, as in the case of intercostal neuralgia.

4. *ANGINA is a homeopathic of selected compounds for cardiovascular angina type of chest pain.* *ANGINA can be used 10 drops, 2 times a day as a preventative and 2 drops under the tongue every 15 minutes in the presence of angina (ref. Angina Study).

5. Another superb formula for this condition is *HEART LIQUESCENCE.* This formula has been shown to be beneficial in cardiovascular disease. *HEART LIQUESCENCE helps to vasodilate the arteries, supply proper nutrition, and prevent the risk of heart attack (ref. Infraction Risk Study).

6. With any of these therapies proper medical consultation is a must to help deal with the overall disturbance. Nutrition, light exercise, stress reduction, no smoking, limiting alcohol consumption, reducing high cholesterol, fatty and fried foods, must be incorporated to help deal with the cause of this disease.
ASTHMA, Asthmatic Bronchitis

1. Asthma is an inflammatory disease where inflammation of the bronchial tree restrict air flow out of the lungs. In most cases air will be sequestered in the lung, making it harder to get rid of air, than it is to bring air in. Most asthma is air retained in the lungs.

2. The primary cause of this inflammation in the bronchial tree is that of inflammation and swelling of tissues provoked by allergies.

3. Infections in the lungs can also cause swelling in the tissues. Susceptibility to both the inflammation and infection from allergies are contributed by nutritional problems such as calcium deficiency, pantothenic acid deficiency, fatty acid deficiency, B-6, magnesium, niacin deficiencies, and other nutritional disturbances.

4. *ASTHMA helps the tissues to their inflammation. Combine *LUNG LIQUESCENCE to helps supply needed nutrients, minerals, and sarcodald support to healthy lung tissue to develop help (ref. Asthma Study).

5. Behavioral programs such as exercise, meditation and relaxation techniques are also suggested to help reduce asthma.
CIRCULATION DISORDERS

1. The body must circulate blood from the arterioles which are rich in oxygen and nutrients to all the parts of the body. The blood then passes through capillaries and recovers toxins and carbon dioxide in the venous function, and brings these back to the pulmonary parts of the heart and lungs to be restored with nutrients and oxygen. In the lung, carbon dioxide is released which can then be expelled.

2. This entire process happens in a cycle of the blood going through the body several times a minute. This overall flow is known as the circulation.

3. Disorders of circulation result in cold extremities, lack of hair growth on the feet and knuckles, poor quality skin and hair, and even a lack of the moon growth on the fingernails of the fingers toward the small fingers. The numbers on form death in the world today is due to some type of circulation disorder. This can result in cardiovascular disease or a host of other types of circulatory disturbances. Problems of circulation to the brain or blockage can result in a stroke or infarction which is also a major killer.

4. The overall flow of blood is usually blocked by stenosis, calcium, build up of plaque or cholesterol, uric acid and oxalic acid, pathogenic compounds, muscular skeletal stress, muscle spasms around muscles of the circulatory arteries and veins, accumulation of thrombosis and platelets, and congealed blood in the circulatory system.

5. *CIRCULATION is a blend of vitamins, minerals, sarcodes, and venoms designed to help break-up circulatory blockages very slowly. *CONVALERIA is another product which helps to restore circulation to the brain (ref. Cerebral Ischemia Study).

6. *CIRCULATION should be taken as follows: 10 drops/2 times per day, for a period of 4 to 6 months to help break-up the circulatory blockage. If the circulatory blockage is broken-up too quickly, this can result in a more severe disturbance. Thus, *CIRCULATION works on a slow bases to help the circulation to recover slowly (ref. Microvascularity Study).

7. When using *CIRCULATION we must realize that often times we are going to restore circulation to parts of the body which have not had proper circulation for some time. The body sometimes sequesters toxins or reduces blood flow to an area for its own particular reason. Often times when blood is restored to an area that has not had proper blood flow for some time, this may produce pain or discomfort. Much like blood returns to your arm after having slept on it. At first their is numbness, then after the blood returns it develops some pain. This is usually short-lived,
DIGESTIVE DISORDERS

1. Digestion is a continuous process of enzymatic action to help digest the foods that we eat.

2. Digestion starts in the mouth. Food is masticated and combined with ptyalin and saliva for lubrication and the beginning of carbohydrate digestion. It is then masticated into a bolus.

3. The bolus is then transmitted into the stomach, which secretes stomach acid, additional lipase for fat digestion, and other enzymes which allow for the proper emulsification and further break-up of the compounds in our food. In the stomach, this is called chyme.

4. When food is properly prepared for digestion, the pyloric valve should open and allow the chyme to come into the small intestine. Here the pancreas dumps in sodium bicarb to neutralize the acid as well as supplying pancreatic enzymes, which now become the major factors in digestion. The liver should then release bile and bile pigments to further emulsify the food mixture. This results in a micelle. Micelle has to have an electrical balance because digestion and absorption in the small intestine is largely an electrical process. Hence the need for fiber to help stimulate the electrical nature.

5. After the food has gone through the three stages of the small intestine, there is selective absorption of nutrients at different sites where the body can absorb its nutrients. Inflammation or infections at different sites can disrupt the absorption.

6. The food then flows into the large intestine where support symbiotic micro-organisms such as bacteria and fungus further assist digestion and help in the absorption of B vitamins. Many which are manufactured in the large intestine. The major bacteria of the bile is that of bacteroides which constitutes 70 percent of the stool.

7. This makes up the "FOSSIL LAP" process which includes: food, oral, stomach, small intestine, ileocecal value, large intestine, liver, autonomic nerve system, and pancreas. All these factors are highly important for the processing of digestion (ref. RWC - Fossil Lap).

8. *DIGESTIVE ENZYME LIQUESCENCE is superb in its ability to balance the entire digestion track and aids in stabilizing enzyme releases from the body. *DIGESTIVE ENZYME LIQUESCENCE does not contain large amounts of these enzymes, but contains homeopathic amounts which thereby helps the body to stabilize its own production of enzymes (ref. Digestion Study).
ILEO-CECAL VALVE
LARGEINTESTINE
LIVER
AUTONOMIC NERVAL SYSTEM
PANCREAS

103
FEMALE DISORDER, PMS PMT PREMENSTRUAL STRESS OR TENSION

1. Female problems are very complex and are often the result from an imbalance of hormones. Stress, improper nutritional toxins, drugs, and lifestyle produce female problems.

2. Hormonal disturbances can develop due to excess or deficient estrogen which is released from the ovaries; excess or deficient progesterone which is released from the corpus luteum, an organ which is developed every month in the female up until menopause; excess growth hormones produced in the hypothalamic/pituitary area which can contribute to endometriosis (ref. Endometriosis Study).

3. Disorders of the liver can also produce problems because the liver has to help metabolize the excess of any one of these hormones. Disorders can result from stress and emotional problems, as well as nutritional deficiencies and excesses. Caffeine from cola, chocolate, coffee and tea as well as nicotine have more profound disturbing effects on the female system. Also fatty acid deficiencies contribute to these disorders because the different regulatory hormones need to be made out of fatty acid components. Proper mineral balancing is also important. Toxins can disrupt this. Toxins such as these found in beauty shop compounds and the environment can also place a burden on the female system. Many synthetic pharmaceuticals also cause female problems.

4. *FEMALE LIQUESCENCE* contains an estrogen-based compound and can be used as a form of hormone replacement therapy in low grade conditions. For more hormone replacement therapy, a homeopathic of 3x estrogen with 6x progesterone can also be utilized. FEM-PRO is a complex homeopathic that helps any and all female problems.

5. In conditions involving testosterone and adrenalin production, stress reduction is very important as well as prescribing *KINDEY/OVARIAN/ADRENAL* which helps to stabilize these hormones. *PROGESTEX* is used when a build-up of bad tissues occurs in the vaginal and uterus area due to excess progesterone. This product helps to provoke a cleansing of the bad tissues and is a natural form of DNC.

6. The diagnostic criteria of a progesterone problem will usually result in a pre-mestrual stress and/or tension that is usually relieved upon the onset of the period. This is a diagnostic criteria that tells us that the problems is in a progesterone imbalance. The use of PROGESTEX for one month can help in relieving this condition.

7. The diagnostic criteria for an estrogen type disorder is that the condition would ensue the entire month or would mostly ensue at the release of the period and then occur for a week after the period. A combination homeopathic of ESTROGEN 3x with PROGESTERONE 6x, taken 10 drops/3 times a day for one month along with *FEMALE LIQUESCENCE* taken for three months, 1 teaspoon per day (ref. Natural Hormone Study).

8. If there is a problem with irritability, this is diagnostic of a testosterone and/or adrenal disturbance. *KIDNEY/OVARIAN/ADRENAL* should be taken 10 drops/3 times a day.
9. In treating hormonal disturbances, remember a healthy liver function is always important as well as good nutrition, stress reduction, and reducing exposure to toxins.
EMOTIONS AND ATTITUDES EFFECT AND CONTROL
HYPOTHALAMUS PITUITARY PINEAL REULATES ALL FUNCTIONS
FLEXIBILITY, Restricted Range of Motion

1. The muscles, cartilage and ligaments of the body are largely responsible for the flexibility of the spine and extremities.

2. Restrictions in flexibility may result from poor nutrition, lack of exercise, diseases such as arthritis and rheumatism, physical injuries and infectious states. Lack of oxygen flow to and from cartilage of ligament and carbon dioxide build up makes them inflexible. When a ligament pops it releases carbon dioxide making the pop sound. This is a release of carbon dioxide and allows oxygen to come in.

3. *FLEX* is a blend of Chinese herbs which have been reported to have essential application for increasing flexibility. The action of *FLEX* is through its herbal and homeopathic effect in helping the body to restore flexibility to the joints. When used in conjunction with *CONNECTIVE TISSUE LIQUESCENCE*, a formula designed to assist the growth of good connective tissue by supplying necessary minerals, vitamins and sarcodes, these two formulas work to increase range of motion (ref. range of motion study).

4. Combine good exercise, good nutrition, and stress reduction for a complete therapy in restoring flexibility. Also, look for any organic connective tissue disease as well.

MUSCLE       BONE
LIGAMENTS    TENDONS
CARTILAGE    JOINTS

The FLEX FORMULA and the CONNECTIVE TISSUE LIQUESCENCE increases joint by supplying needed nutrients and increasing connective tissue oxygenation.
GASTRIC-ESOPHAGEAL REFLUX-HIATAL HERNIA

1. Gastric reflux and hiatal hernia are both disorders of the upper stomach and esophagus. This is due to either an inflammation, an inability of the gastric sphincter to close properly, or a distention of the stomach into the abdominal muscles.

2. This produces heartburn that is often severe and can feel like a heart attack by the patient.

3. A common symptom with gastric reflux or hiatal hernia is belching. Belching usually improves the condition by releasing gas. There is usually some regurgitation of food or acid from the stomach into the mouth. Pushing on the stomach below the septum into the hiatal hernia area either improves or disturbs the condition.

4. Stress, fatty foods, alcohol, cigarettes, coffee, eating too fast or eating too much, effervescent beverage and improper food coming are major contributing factors of gastric reflux and most indigestion. These factors aggravate digestion because they excessively push the sympathetic system.

5. *ESOPHAGUS FORMULA* is an age old blend of Chinese herbs. *ESOPHAGUS FORMULA* and *DIGESTIVE ENZYME LIQUESCENCE* help relax the nerves of the esophagus muscles and thus helps to relieve the various types of esophageal disorders (ref. Gastric Study).

6. Reduce the risk factors. Elevate the head of the bed six inches help to prevent gastric reflux disturbances at night. Relaxing and stress reduction after meals is also very important to assist the *ESOPHAGUS FORMULA* and *DIGESTIVE ENZYME LIQUESCENCE*.
HYPOADRENIA, Weak Adrenals

1. The adrenal glands rest on top of each kidney and produce adrenaline. Adrenaline is needed to defend against stress, inflammation, and fatigue. Adrenaline initiates activity. Adrenaline is essential for life. Our stress filled society has produced an extreme burden on the adrenal glands and hypoadrenia or weak adrenal function is very common. It usually accompanies chronic fatigue or M.E.

2. Symptoms of hypoadrenia include dizziness when raising, low grade depression, systemic weakness, susceptibility to colds and flu, inflammations throughout the body, increased allergy susceptibility, fatigue in the afternoon, often times disinterest in life, and an inability to tolerate stress.

3. *ADRENAL LIQUESCENCE is a liquid extract of vitamins, herbs, adrenal glands and homeopathic adrenalin. this formula is designed to push adrenal performance.

4. In cases of hypoadrenia, *ADRENAL LIQUESCENCE should be used for one or two months. It is suggested that after 30 to 60 days switch to the homeopathic *KIDNEY/PROSTATE/ADRENAL OR *KIDNEY/OVARIAN/ADRENAL for long-term hormonal balance. Do not develop dependency on *ADRENAL LIQUESCENCE. *ADRENAL LIQUESCENCE should be used as a jump-start. In extreme cases of hypoadrenia, *ADRENAL LIQUESCENCE may be used for three of four months (ref. Adrenal Study).

5. *ANTI-STRESS has been proven clinically to assist in reducing stress. *ANTI-STRESS is not a relaxant, but works on an emotional level to help ease stressful situations.

6. Combine good nutrition, behavioral therapy, emotional counselling, chiropractic adjustment, and osteopathic adjustments with medical therapy.

EMOTIONS
PITUITARY PINEAL HYPOTHALAMUS
AUTOMONIC NERVAL SYSTEM

Stress improper nutrition, toxins and inflections can weaken the adrenals and cause hypoadrenia.
HYPOGLYCEMIA Oscillating Blood Sugar

1. The body must maintain a balance of blood sugar to supply energy, but too much blood sugar can be destructive and attack organs. The major organs involved in blood sugar balancing are the hypothalamus, pituitary, pancreas, liver, adrenals.

2. Hypoglycemia occurs when there is an inability to regulate blood sugar. This causes blood sugar to cascade upwards and downwards to many different extremes. Excessive periods of low blood sugar is known as hypoglycemia. When there is too much blood sugar this is known as diabetes.

3. Symptoms of hypoglycemia include fatigue which is relieved by eating, thus the desire to eat during the day and tiredness in the afternoon hours between 3:00 and 6:00 which is produced by hormonal regulation of blood sugar. Hypoglycemia often produces excess sweating or diaphoresis. An overall fatigue often contributes towards an addiction for stimulation i.e., drugs, alcohol, coffee, cigarettes, food, and sugar.

4. Excess processed sugar and complex carbohydrates cause the body to release extra amounts of insulin which then can produce hypoglycemia. Stress, especially after eating, can contribute to hypoglycemia as well as nutritional deficiencies i.e., chromium, selenium, other minerals and fatty acids.

5. The body must use these minerals and fatty acids to develop mineral glucocorticoid which are responsible in regulating blood sugar. Over eating and having too many meals puts further burden on the pancreas and digestive system which are probably already weak. Even though this helps to maintain blood sugar it is harmful in the long run and does not deal with the true cause of the disease.

6. *HYPOGLYCEMIA is engineered with homeopathic sarcodes and herbs to help balance blood sugar metabolism. It also helps to supply needed minerals for blood sugar regulation (ref. Blood Sugar study).

7. Stress reduction after meals, good nutrition, proper fatty acids, amino acids, and mineral are also suggested to help balance the disturb in blood sugar cascade (ref. RWC).
LIVER GLYCOGEN-TO GLUCOSE PANCREAS RELEASES INSULIN
(Processed carbohydrates stimulate excess release)

(refined sugar enters the cells so quickly it upsets the BALANCE)

ADRENALS RELEASES ENERGY DEMANDING HORMONES

INSULIN LETS GLUCOSE ENTER THE CELLS WHERE IT AND OXYGEN ARE CONVERTED INTO ENERGY

The HYGHLY FORMULA helps to balance the blood sugar regulating system and stop the high and low fluctuations.
HYPOTHYROID, Weak Thyroid

1. The thyroid gland is a bow-tie shaped organ located in the front of the neck.

2. The thyroid gland secretes hormones which are used in regulating metabolism, storage of fort, and placement of calcium into the bone, among other hormonal functions.

3. Signs of a hypothyroid condition include weight gain or an inability to lose weight, always cold or cannot tolerate cold temperatures, heavy calluses on feet, small loss of hearing, low grade depression, and poor quality of skin and hair. Most hypo-thyroid cases are also fatty acid deficient.

4. Hypothyroid is often diagnosed through the symptoms, blood analysis, as well as through a basal metabolic rate analysis or axillary body temperature. Axillary body temperature is the temperature taken underneath the arm pit. Normal temperature is 97.6. Numbers below 95.6 indicate hypothyroid disease.

5. *THYROID LIQUESCENCE supplies the needed thyroid hormones and fatty acids in an oil suspended blend to help the body to recover from low thyroid function.

6. In cases where the thyroid gland has been removed, *THYROID LIQUESCENCE should be used daily. For a low functioning thyroid, *THYROID LIQUESCENCE should be used for one month to help restore the thyroid gland back to balance. After one month, switch to *THYMUS/ THYROID/PARATHYROID for its homeopathic action. *THYMUS/ THYROID/ PARATHYROID supplies less hormone and is helpful in correcting the energetic imbalances. Don’t instill dependence on the thyroid hormone if the thyroid gland is in fact. Encourage its correction (ref. Hyper and Hypo-thyroid study).

PITUITARY

THYROID

PARATHYROID

The pituitary stimulates the thyroid to regulate metabolism and weight displacement. The parathyroid glands regulate Calcium.
HOMEOPATHIC IMMUNIZATION PROGRAM

PRODUCTS MAY BE TAKEN IN THE FOLLOWING SEQUENCE FOR NINE DAYS.

1. BAC: 3 drops, 3 times a day, for 3 days.
2. VIR: 3 drops, 3 times a day, for 3 days.
3. FNG: 3 drops, 3 times a day, for 3 days.

GENERAL DIRECTIONS:

Products should be taken for nine days, following the dosage information below. If necessary, two products may be taken during a 24-hour period. It is suggested that products be taken individually, in the order shown above. Do not take all three products (BAC, VIR and FNG) together in the same 24-hour period.

Infant to 2 Years

3 drops, 3 times a day, for nine-day cycle, each month. Administer drops into navel, using the child's finger to rub the drops into the navel.

2 to 5 Years

3 drops, 3 times a day, for nine-day cycle, every other month. Take orally.

5 to 9 Years

3 drops, 3 times a day, for nine-day cycle, every fourth month. Take orally.

9 Years to Adult

3 drops, 3 times a day, for nine-day cycle, every six months. Take orally.

NOTE:

Add Vaccinnum to sequence if vaccination is going to be used. It helps negate the side effects of vaccination. (3 drops, 3 times a day, for 3 days.)

Singulars of high-risk pathogens (Influecinum, Parotitis, Diphtheria, etc.) can also be used in homochord potencies if there are specific diseases of concern. (3 drops, 3 times a day, for 3 days.)

Please note that this is not a recognized treatment/prevention immunization program in the United States. However, England and other places do recognize a similar approach.
INTRODUCTION TO ALLERSONES

"Allersodes" is the homeopathic word for antigenic therapy. The compound that might induce the allergy, in a weakened or dilute manner, can be used as an allersode to desensitize patients. This is very similar to antigenic therapy, although in homeopathy the usual mode of administration is in the oral cavity through the nasal pharynx. Traditional antigenic therapy usually involves shots.

The Homeopathic Pharmacopeia of the United States (the HPUS), in its Supplement A, 1982, refers to allersodes in the following way:

"Class M Allersodes: Allersodes are homeopathic attenuations of antigens, that is, substances which under suitable conditions can induce the formation of antibodies. Antigens include toxins, ferments, precipitogens, agglutinogens, opsonogens, lysogenes, venins, agglutinins, complements, opsonins, amboceptors, precipitins, and most native proteins. Allersodes are prepared according to homeopathic specifications, provided the basic substance is not altered, and the final product is not adulterated by any pathogen or other deleterious substance."

This is allersode therapy as indicated by the HPUS. Patients with allergies, in an ever-allergic world, could benefit from this allersode therapy. It is known that the hyper-immune system, the immediate immune system, or the humoral immune system, consists mostly of the B (white) cell, and this immediate immune system, if out of balance, can produce allergies. The antibodies from the B cell or other blood antibodies can, in an over-intense way, induce histamine response, and thereby, tissue swelling and other allergic conditions. This can result in rhinitis, asthma, intestinal blockage, hives, and the like. It has for a long time been speculated that the B cell general, or the governor of the B cell army, might be the lymphatic connection of lymphoid tissue, between the adenoids, tonsils and appendix.

... destruction of these lymphoid tissues might offer a possible understanding as to the ever-increasing allergy picture in America.

Other complications that have weakened or upset the balance of the immune system produce tendencies toward allergies. These include: processed sugars, stress, toxic exposure, etc., to further entice the body into a more allergic response.
Allersode therapy offers us a possible desensitization. In the work of the French doctors, which was quoted in "Nature", studying homeopathy and antigenic response, it was found that the cells of the body could respond and basically have reactions to even high-potency homeopathics, beyond 30x. This allowed for the understanding of how homeopathy might be a much safer course of allersode treatment. The following articles are experimental studies on allersode therapy, and how it can be used to desensitize people.

In homeopathy we might start with a course of 16x or higher, which is very dilute. A 6x, which is one part per million, is equivalent to one drop of original substance in fourteen gallons of water and alcohol. A 12x, thereby, is equivalent to one drop in over thirty gallons of water and alcohol. These dilute substances, potentized through succussion, at each tenth increment, impart an energy to the compound that is not experienced in stirred compounds, or other types of antigenic therapy. Homeopathy, through its succussion process, might be a very good way to produce desensitization of the allergic response.
PHENOLS

ACC
Acetaldehyde
Acetic Acid
Acetone
Adenine
Aflatoxins
dl-Alanine
Aldehyde
Allyl Butyrate
Allyl Tiglate
Amygdalin
Anethole
Rpiol
Arginine
Asparagine
Benzaldehyde
Benzoic Acid
Benzothiazole
Benzyl
Benzyl Butyrate
Benzyl Tiglate
BHA
BHT (Butylated Hydroxytoluene)
d-Biotin
Bioflavenoids
Brain Substance
Butanoic Acid
Butyric Acid
Caffeic Acid
Caffeine
Calcium Chelate
Camphor
Candida
Capsaicin
Carotene
L-Carnitine Hydrochloricze
Decanoic Acid
N,N Dimethylglycine Hydrochloride
L-Dopa
Dopamine
Ellagids Acid
Ephedrine HCl
Esters (30 types)
Estrogen
Ethyl Butyrate
Ethyl Heptanoate
Ethyl Hexanoate
Ethyl Octanoate
Ethyl Propionate
Ethyl Pyruvate
Ethyl Valerate
Eugenol
FD&C Blue No. 1
FD&C Blue No. 2
FD&C Green No. 3
FD&C Red No. 2

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FD&C Red No. 3
FD&C Red No. 40
FD&C Yellow No. 5
FD&C Yellow No. 6
FD&C Violet No. 1
Folic Acid
Formaldehyde
Furfural
Furfuryl Butyrate
Furfuryl Heptanoate
Furfuryl Hexanoate
Furfuryl Octanoate
Furfuryl Pentanoate
Furfuryl Propionate
GABA (Gamma-Amino Butyric Acid)
Gallic Acid
Genistein (Biochanin A)
Germanium
1-Glutamic Acid
1-Glutamine
L-Glutathione
Glutin
Glycine
Glycyrrhizinate
Heart Substance
Hemoglobin
Hesperetin
Histamine
Hydrocinnamic Acid
Hypothalamus Substance
Indole
Inosine
Inositol
Isoascorbic Acid
Isoleucine
Isopropyl Butyrate
Isopropyl Tiglate
alpha-Keto Glutaric Acid
Lymphatic Substance
Lysine
Malic Acid
Maltose
Malvin
Manganese Chelate
Mannan
Menadione
Methionine
Menthol
Methyl Butyrate.
Methyl Salicylate
Methyl Tiglate
Molybdenum Chelate
Naringenin
Nicotine
Norepinephrine
Octacosanol
Octanoic Acid
Octopamine
Orchic Substance
Ovarian Substance
PABA (Para Amino Benzoic Acid)
Pancreatin
Pancrelipase
Pentose
Phenethyl 2-Methylbutyrate
Phenylalanine
Phenylisothio
Phloridzin
Pinene
Piperine
Piperonal
Pituitary Substance
Progesterone
Propyl Butyrate
Propyl Tiglate
Putresine
Pyrrole
Pyridoxal-5-Phosphate
Pyridoxine Hydrochloride (Vitamin B-6)
Phytic Acid
Pyruvic
Quercetin
Red Bone Marrow
Riboflavin (Vitamin B-2)
Rutin
Safrole
Salsolinol
Serotonin
Skatol
Spleen Substance
Succinic Acid
Suprarenal/Adrenal Substance
Suprarenal Cortex
Taurine
Thiamine Hydrochloride (Vitamin B-1)
Thujone
Thymol
Thymine
Uterus Substance
Valeraldehyde
Vanillin
d-Xylose

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# ALLERGINS, ANTIGENS, FOODS

<table>
<thead>
<tr>
<th>Allergen/Meat</th>
<th>Antigen/Fruit/Grain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angora (Goat Mohair)</td>
<td>Hickory Mix</td>
</tr>
<tr>
<td>Apple</td>
<td>Horse</td>
</tr>
<tr>
<td>Banana</td>
<td>Juniper</td>
</tr>
<tr>
<td>Bean</td>
<td>Kapok</td>
</tr>
<tr>
<td>Birch Mix</td>
<td>Kelp-Iodine</td>
</tr>
<tr>
<td>Brewers Yeast</td>
<td>Lemon</td>
</tr>
<tr>
<td>Broccoli</td>
<td>Lettuce</td>
</tr>
<tr>
<td>Cabbage</td>
<td>Maple Mix</td>
</tr>
<tr>
<td>Carrot</td>
<td>Milk</td>
</tr>
<tr>
<td>Cat</td>
<td>Mold Mix</td>
</tr>
<tr>
<td>Cattle</td>
<td>Mulberry</td>
</tr>
<tr>
<td>Cauliflower</td>
<td>Mushroom</td>
</tr>
<tr>
<td>Celery</td>
<td>Nut Mix (Almond)</td>
</tr>
<tr>
<td>Cheese</td>
<td>Nut Mix (Brazil)</td>
</tr>
<tr>
<td>Cheddar Mix</td>
<td>Nut Mix (Cashew)</td>
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<td>Chicken</td>
<td>Nut Mix (Coconut)</td>
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<td>Chocolate</td>
<td>Nut Mix (English Walnut)</td>
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<tr>
<td>Citrus</td>
<td>Nut Mix (Peanut)</td>
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<tr>
<td>Coffee</td>
<td>Nut Mix (Pecan)</td>
</tr>
<tr>
<td>Corn Pollen</td>
<td>Onion</td>
</tr>
<tr>
<td>Cotton Seed</td>
<td>Orange</td>
</tr>
<tr>
<td>Cotton Wood</td>
<td>Penicillium (Chrysogenum)</td>
</tr>
<tr>
<td>Cucumber</td>
<td>Penicillium (Digitatum)</td>
</tr>
<tr>
<td>Dock Sorrel</td>
<td>Penicillium (Notatuer)</td>
</tr>
<tr>
<td>Dog</td>
<td>Penicillium (Roquefort)</td>
</tr>
<tr>
<td>Dust Mix (House)</td>
<td>Perfume Mix</td>
</tr>
<tr>
<td>Dust Mix (Mattress)</td>
<td>Pine Mix</td>
</tr>
<tr>
<td>Dust Mix (Rug)</td>
<td>Pollen (Amaranthus)</td>
</tr>
<tr>
<td>Dust Mix (Upholstery)</td>
<td>Pollen (Chenopodium)</td>
</tr>
<tr>
<td>Eastern Oak</td>
<td>Pollen (Cockle Bur)</td>
</tr>
<tr>
<td>Egg White (Chicken)</td>
<td>Pollen (Daisy)</td>
</tr>
<tr>
<td>Elm Mix</td>
<td>Pollen (Dandelion)</td>
</tr>
<tr>
<td>Feathers (Chicken, Goose, Duck)</td>
<td>Pollen (Grass)</td>
</tr>
<tr>
<td>Flax Seed</td>
<td>Pollen (Honey Suckle)</td>
</tr>
<tr>
<td>Flower Pollen I</td>
<td>Pollen (Marsh Elder)</td>
</tr>
<tr>
<td>Flower Pollen II</td>
<td>Pollen (Mugwort)</td>
</tr>
<tr>
<td>Grass (Meadow Fescue)</td>
<td>Sheep Wool</td>
</tr>
<tr>
<td>----------------------</td>
<td>--------------</td>
</tr>
<tr>
<td>Grass (Orchard)</td>
<td>Shellfish (Clam)</td>
</tr>
<tr>
<td>Grass (Perennial Rye)</td>
<td>Shellfish (Crab)</td>
</tr>
<tr>
<td>Grass (Red Clover)</td>
<td>Shellfish (Oyster)</td>
</tr>
<tr>
<td>Grass (Red Top)</td>
<td>Shellfish (Scallop)</td>
</tr>
<tr>
<td>Grass (Sweet Vernal)</td>
<td>Shellfish (Shrimp)</td>
</tr>
<tr>
<td>Grass (Timothy)</td>
<td>Soybean</td>
</tr>
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<td>Green Pepper</td>
<td>Spinach</td>
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<td>Hair Spray</td>
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<tr>
<td>Tobacco</td>
<td></td>
</tr>
<tr>
<td>Tomato</td>
<td></td>
</tr>
<tr>
<td>Western Oak Mix</td>
<td></td>
</tr>
</tbody>
</table>
In the Experimental Evidence for Homeopathy I and II by Dr. William Nelson we can see that isodal homeopathy includes using different synthetic compounds that can cause disease, and using body secretions. The form of isodal therapy that we will concentrate on is that of synthetic compounds and pollutants that can cause disease. To this end Dr. Nelson has devised many combinations, known as xenobiotics, which allow us to deal with broad-based detoxifications. We also have a large list of pollutants that can be developed in homeopathic form and various combinations for our trained homeopath to use in different conditions.

Within this chapter is a list of pollutants and disease-causing factors from heavy metals, insecticides, food additives, etc. This challenging form of homeopathy offers exciting new techniques to deal with our ever increasing polluted world. Many of these compounds have the potential to be extremely dangerous and must have strict controls, which are exercised by New Vistas. They make sure that the items rendered are within the licenses of doctors and safe for use. To this end we point one now to the pledge of New Vistas that safety is of first importance.

We welcome the reader to an exciting new world of expanded homeopathy, a world that was unknown to Hahnemann, as many of these chemicals did not exist in his age. Yet they are a vital part of the disease structure today. Our patients must be cleansed and detoxified of these noxious chemicals. In the The Experimental Evidence for Homeopathy books we offer evidence for homeopathy's effectiveness in this area. The new field of hormesis research also offers additional evidence for isodal homeopathy's ability to help the patient.

These isodes are detoxifiers that need to be used in an ever-increasingly toxic world. New Vistas has developed many different remedies utilizing polychord techniques, developed with the Quantum Quality Control (QQCTM) process:

These remedies can be utilized very safely and easily in an acupurlcturist's, chiropractor's or naturopathy's practice along the guidelines of homeopathy and natural treatment, which can be utilized in a drug-free mode.

Within the last hundred years, man through synthetic development, has drastically increased our toxic exposure. Present-day scientists have found in a new study of hormesis that tickle doses, small trace doses of a toxin can have stimulatory effects on the body. Hormesis stimulates a cell's defense system. In hormesis the homeostatic balance is tipped, forcing the body to take measures to protect itself.
INTRODUCTION TO ISODES

Isodes are commonly called detoxifying substances in homeopathy. Isodes are compounds that, in raw dose, produce toxic events in the body, as the body tries to deal with releasing these toxic items. In homeopathy we might use a very dilute form in the high x, a non-toxic form completely free of the toxic environment but full of the energy of this toxin, to help the body to address the detoxification process.

The Homeopathic Pharmacopeia of the United States (the HPUS), in its Supplement A, 1982, refers to isodes in the following way:

"Class N Isodes: Isodes, sometimes called detoxisodes, are homeopathic attenuations of botanical, biological, chemical, or synthetic substances, or drugs, including icsipients or binders which have been ingested or otherwise absorbed by the body, and are believed to have produced a disease or disorder which interferes with homeostasis. Isodes are prepared according to homeopathic specifications, provided the basic substance is not altered, and the final product is not adulterated by any pathogens or other deleterious substances."

Isodes can be helpful to the body as heavy metals in homeopathic form, or environmental pollutants, or even radiation compounds. These all help the body to deal with unnatural exposures to these items. The study of xenobiotics is the study of toxicity in the body, and it is not only included in external synthetic toxins, but also has its place in understanding the toxins made within the body, such as histamines and other compounds which are toxic in their production within the body.

The following articles are operating on the possible assumption that the effectiveness of isodal therapy in biology acts through the "beefing up" of the body's natural process of detoxification. The individual isode, such as aluminum, taken in a 30x, might possibly build up the defence that the body has for aluminum, to sweep it from the body. This is the speculative point, of which we now introduce some scientific research on isodal therapy.

Isodes are fairly broad-based, and have such variant qualifications and definitions that most anything we would think of could at one time or another be classified an isode.
ISODES

XENOBiotics

<table>
<thead>
<tr>
<th>Name</th>
<th>Description</th>
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<tbody>
<tr>
<td>Adex</td>
<td>insecticide and food additive detox</td>
</tr>
<tr>
<td>Algin</td>
<td>radiation detox</td>
</tr>
<tr>
<td>Amalgam</td>
<td>dental toxins</td>
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<tr>
<td>Amebex</td>
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<tr>
<td>Asbestox</td>
<td>asbestos detox</td>
</tr>
<tr>
<td>BAC</td>
<td>bacterial detox and immune stimulation</td>
</tr>
<tr>
<td>Beautox</td>
<td>beauty shop toxins detox</td>
</tr>
<tr>
<td>Chemex</td>
<td>synthetic pharmaceutical detox</td>
</tr>
<tr>
<td>Chlorex</td>
<td>chlorine flourine and water pollution detox</td>
</tr>
<tr>
<td>Envirox</td>
<td>environmental pollution and petroleum detox</td>
</tr>
<tr>
<td>FNG</td>
<td>fungal detox and immune stimulation</td>
</tr>
<tr>
<td>Industriox</td>
<td>industrial pollution detox</td>
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<tr>
<td>Metab</td>
<td>genetic disturbance correction</td>
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<tr>
<td>Vermex</td>
<td>parasite worms and flukes detox</td>
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<tr>
<td>Opsln 1</td>
<td>food allergy detox</td>
</tr>
<tr>
<td>Opsin 2</td>
<td>inhalent allergy detox</td>
</tr>
<tr>
<td>VIR</td>
<td>virus detox and immune stimulation</td>
</tr>
</tbody>
</table>

AMINO ACIDS

Alanine (L-Alalaminamide)  
Arginine (L-Argininamide)  
Asparagine (Na-t-BOC-N-y-Xanthyl-L-Asparaginel)  
Aspartic Acid (L-Aspartic Acid Amide)  
Aspartic Acid (p-Nitrophenyl Ester)  
Cysteine  
Glutamic Acid  
Glutamin  
Glycine  
Glycinamide (Glycine t-Butyl Ester)  
Histidine  
Isoglutamine  
Isoleucine  
Leucine
Proline
Pyroglutamic Acid
Sarcosine
Serine
Statine
Taurine
Threonine
Tryptophan
Tyrosine
Valine

Miscellaneous

N-t-BOC-y-Aminobutyric Acid

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N-t-BOC-L-Eomoserine
N-CBZ-y-Amino-n-butyric Acid
N-CBZ-e- Amino-n-caproic Acid
N-CBZ-L-Homoserine
N-CBZ-D-3-(2-Naphthyl) alanine

LIPIDS

Fatty Acid Anhydrides

<table>
<thead>
<tr>
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<th>Name</th>
</tr>
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<tbody>
<tr>
<td>2:0</td>
<td>Acetic</td>
</tr>
<tr>
<td>4:0</td>
<td>Butyric</td>
</tr>
<tr>
<td>6:0</td>
<td>Caproic</td>
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<tr>
<td>8:0</td>
<td>Caprylic</td>
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<td>Heptadecanoic</td>
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<tr>
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<td>Stearic</td>
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<tr>
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<td>Oleic</td>
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<td>Elaidic</td>
</tr>
<tr>
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<td>Linoleic</td>
</tr>
<tr>
<td>20:0</td>
<td>Arachidonic</td>
</tr>
<tr>
<td>20:1</td>
<td>11-Eicosenoic</td>
</tr>
<tr>
<td>22:0</td>
<td>Behenic</td>
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Diglycerides

<table>
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<th>Name</th>
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</thead>
<tbody>
<tr>
<td>6:0</td>
<td>Dicaprin, 1,3 isomer</td>
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<tr>
<td>8:0</td>
<td>Dicaprylin, 1,2-, 1,3- and mixed isomers</td>
</tr>
<tr>
<td>10:0</td>
<td>Dicaprin, 1,2-, 1,3- and mixed isomers</td>
</tr>
<tr>
<td>12:0</td>
<td>Dilaurin, 1,2-, 1,3- and mixed isomers</td>
</tr>
<tr>
<td>14:0</td>
<td>Dimyristin, 1,2-, 1,3- and mixed isomers</td>
</tr>
<tr>
<td>15:0</td>
<td>Dipentadecanoin, 1,3-isomer</td>
</tr>
<tr>
<td>16:0</td>
<td>Dipalmitin, 1,2-, 1,3- and mixed isomers</td>
</tr>
<tr>
<td>18:0</td>
<td>Distearin, 1,2-, 1,3- and mixed isomers</td>
</tr>
<tr>
<td>18:1</td>
<td>Diolein, 1,2- 1,3- and mixed isomers</td>
</tr>
</tbody>
</table>
Monoglycerides

C 8:0 1-Monocapryloyl-rac-glycerol
C 10:0 1-Monodecanoyl-rac-glycerol
C 12:0 1-Monolauroyl-zac-glycerol
C 14:0 1-Monomyristoyl-rac-glycerol
C 16:0 1-Monopalmitoyl-rac-glycerol
C 16:1, cis-9 1-Monopalmitoleoyl-rac-glycerol
C 18:0 1-Monostearoyl-rac-glycerol
C 18:1, cis-9 1-Monooleoyl-rac-glycerol
C 18:1, trans-9 Monoelaidin
C 18:2, cis-9,12 1-Monolinoleoyl-rac-glycerol
C 18:3, cis-9,12,15 1-Monolinolenoyl-rac-glycerol
C 20:1, cis-11 Mono-11-eicosenooin, 1-isomer
C 22:1, cis-13 Monoerucin, 1-isomer

Triglycerides

C 2:0 Triacetin
C 4:0 Tributyzin
C 6:0 Tricaproin
C 8:0     Tricaprylin
C 9:0     Trinonanoin
C 10:0    Tricaprin
C 12:0    Trilaurin
C 13:0    Tritridecanoin
C 14:0    Trimyristin
C 14:1, cis-9  Trimyristolein
C 15:0    Tripentadecanoin
C 16:0    Tripalmitin
C 16:1, cis-9  Trielaidin
C 17:0    Triheptadecanoin
C 18:0    Tristearin
C 18:1, trans-9  Trielaidin
C 18:1, cis-9    Triolein
C 18:1, cis-6    Tripetroselinin
C 18:2, cis-9, 12  Trilinolelaidin
C 18:3, cis-9,12,15  Trilinolenin
C 19:0    Trinonadecanoin
C 20:     Triarachidin
C 20:1, cis-5,8,11,14  Triarachidonin
C 22:0,    Tribehenin
C 22:1, cis-13    Trierucin
C 24:1, cis-15    Trinervonin

VITAMINS

CoEnzyme Q6 (Ubiquinone 30)
CoEnzyme Q7 (Ubiquinone 35)
CoEnzyme Q9 (Ubiquinone 45)
CoEnzyme Q10 (Ubiquinone 50)
Vitamin B1 (Thiamine)
Vitamin B2 (Riboflavin)
Vitamin B3 (Niacin)
Vitamin B4 (Niacinamide)
Vitamin BS (Pantothenic Acid)
Vitamin B6 (Pyridoxine)
Vitamin B7 (Folic Acid)
Vitamin B8 (CoEnzyme A)
Vitamin B9 (PABA)
Vitamin B10 (Biotin)
Vitamin B11 (Inositol)
Vitamin B12 (Cyanocobalamin)
Vitamin B13 (Choline)
Vitamin B14 (Betaine)
Vitamin B15 (Pangamate Acid)
Vitamin B16 (Oxythiamine Chloride)
Vitamin B17 (Zaetride)
Vitamin B18 (FAD)
Vitamin B19 (FNIN)
Vitamin B20 (Carnitine)
Vitamin D2 (Ergocalciferol)
Vitamin D3 (Cholecalciferol)
Vitamin E (Alpha-tocopherol)
Vitamin K (Menadione)
Vitamin U (Methionine-s-Methyl Sulfonium Bromide)

SARCODES
Sarcodeal homeopathy involves using healthy glandular tissue, which occurs within a healthy organism, to treat sick conditions within the body.
For an expanded view of sarcodes and the experimental context behind them, we point the reader to The Experimental Evidence for Homeopathy I and II by Dr. William Nelson. In these texts we outline exactly some ways that sarcodal homeopathy works in the patient. Sarcodal homeopathy seems to promote the growth and development of healthy glandular tissue.

Within this chapter we wish to classify many sarcodes that can be utilized by a knowledgeable homeopath. The list of sarcodal tissues utilized in this document is vast, and beyond the grasp of many homeopaths. There are a variety of tissues, used by homeopaths in many ways. Since we find that these sarcodal tissues help to rebuild tissue, help tissue to organize properly, and increase the probability of the presence of healthy tissue over old tissue, we can see how homeopathy can be used.

Sarcodal tissue can go beyond mere tissue to secretions; which include hormones, enzymes, coenzymes, RNA, DNA, and other factors. Thus we can see from our list that there is a wide range of sarcodal tissues that can be brought beyond just tissue, to include some secretions of the body. This vast array of secretions is broadened to include as many different hormones and enzymes known by Dr. Nelson at this time.

Sarcodal therapy in the 6x and above homochord is a very safe type of homeopathy that can be given to children and the elderly, with virtually no risk. The reactivity of these depends on the condition of the tissues and also the types of tissues that are treated. Intestinal tissues build rapidly, in that there is rapid cell turnover; whereas tissues of nerves and eyes are very slow in their treatment. But sarcodes can be used in a wide range of activity.

These sarcodes can be utilized by chiropractors, acupuncturists and naturopaths. Here they only must know where the focus of disease is, or might be. This is safe, and there is no risk to patients. The doctor only needs to supply the sarcode needed for the tissue needing reconstruction. Thus the sarcodes and the life force of the body will slowly rebuild that area, and help to fortify those tissues.

Sarcode remedies have been utilized for many years in homeopathy to help rebuild correct tissues when organ structures are in disease states. Damage caused by disease states to organs can result in malfunctioning on an organic level. The Dr. Recommends’ restorative remedies help the tissue areas to rebuild. Energetic studies have shown that a potentized glandular can rectify an energetic imbalance where there is no organic disturbance. This is covered in The Experimental Data on Homeopathy by Dr. Nelson, and allows us to see the uses and proposed mechanisms of sarcodal homeopathy.
Sarcodial homeopathy offers the safest and most gentle form of homeopathy. Results are often the slowest to be seen due to the correct rebuilding of the degenerative cells in the organs. The restorative remedies will work more quickly and successfully in younger patients than in older patients. In the older patient these remedies can at times be utilized to stimulate cleansing and to stabilize and reduce the risk of healing crisis.

SARCODES

BIOACTIVE PEPTIDES

Adrenocorticotropic Hormone (ACTH; Corticotropin A)  
Angiotensin I  
Angiotensin II (Hypertensin II)  
Angiotensin III  
Angiotensin III Inhibitor  
Angiotensin-Converting Enzyme Inhibitor (pGlu-Trp-Pro-Arg-Pr9o-Gin-lie-Pro-Pro)  
Angiotensinogen (Fragment 1-14)  
Renin  
Bradykinin (Arg-Pro-Pro-Gly-Phe-Ser-Pro-Phe-Arg)  
Bradykinin Potentiator B (pGlu-Gly-Leu-Pro-Pro-Arg-Pro-Lys-Ile-Pro-Pro)  
Bradykinin Potentiator C (pGlu-Gly-Leu-Pro-Pro-Gly-Pro-Pro-Ile-Pro-Pro)

CHEMOTACTIC PEPTIDES

N-Acetyl-L-Methionyl-L-Leucyl-L-Phenylalanine  
L-Alanylglucyl-L-Seryl-L-Glutamic Acid (Eosinophil chemotactic factor of anaphylaxis)  
N-t-BOC-L-Methionyl-L-Leucyl-L-Phenylalanine (Chemotactic peptide antagonist)  
N-t-BOC-L-Phenylalananyl-L-Leucyl-L-Phenylalananyl-D-Leucyl-L-Phenylalanine (Chemotactic peptide inhibitor)  
N-Formyl-L-Methionyl-L-Leucyl-L-Phenylalanine Methyl Ester (A potent chemotactic peptide for human blood monocytes)  
N-Formyl-L-Methionyl-L-Leucyl-L-Phenylalananyl-L-Lysine (Acetate salt)  
N-Formyl-L-Methionyl-L-Leucyl-L-Tyrosine (Dicyclohexylammonium salt)  
N-Formyl-L-Methionyl-L-Phenylalananyl-L-Methionine  
N-Formyl-L-Norleucyl-L-Leucyl-L-Phenylalanine (Chemotactic peptide)  
N-Formyl-L-Norleucyl-L-Leucyl-L-Phenylalananyl-L-Tyrosine  
L-Methionyl-L-Leucyl-L-Phenylalanine (Acetate Salt - Exhibits very weak chemotactic properties)  
Val-Gly-Val-Ala-Pro-Gly (Elastin chemotactic fragment)
Leucine Enkephalin-Lys
Enkephalinamide
Methionine Enkephaline (Tyr-Gly-Gly-Phe-Leu-Lys)
[D-Trp\(^2\)]-Methionine Enkephalin
Proenkephalin
Syndyphilin-20
L-Tyrosylglycylglycine

**ENZYME INHIBITORS**

Amastatin
Angiotensin-Converting Enzyme Inhibitor

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Antipain
Chymostatin
Leupeptin

GASTROINTESTINAL PEPTIDES

Caerulein
Cholecystokinin
Galanin
Gastric Inhibitory Polypeptide
Gastrin
Gastrin I Fragments
Gastrin II (Sulfated)
Gastrin Releasing Peptide (Porcine)
Glucagon (Crystalline)
Pancreatic Polypeptide
Pancreozymin
Peptide YY
Secretin
Growth Hormone Releasing Factor (1-44)
a-Melanocyte Stimulating Hormone
Neurotensin

OPIOID PEPTIDES

Adrenal Peptide E
B-Casomorphin
Dermorphin
Kyotorphin
Morphiceptin
Oxytocin
Pressinoic Acid
Vasopressin
Vasotocin
Somatostatin
Somatostatin 25
Somatostatin 28 (Fragment 1-14)
Corticotropic Releasing Factor
Elastin Chemotactic Fragment
Eledoisin
Erythropoietin
Glucagon
Glutathione
Insulin
Katacalcin
Kentsin
Neuromedin C
Pancreozymin
Proctolin
Proenkephalin
Thymosin α₁
Thyrocacitonin
Xenopsin

EAR

Auricle or Pinna
Cochlea
Malleus
Meatus
Membrana Tympani
Promont.
Stapes
Tragicus

**EYE**

Anterior Chamber
Aqueous Humor
Canal for Central Artery
Canal of Petit
Canal of Schlem
Cavity Occupied by Vitreous Humor
Choroid Coat
Ciliary Body
Ciliary Processes
Cones
Conjunctiva
Cornea
Crystalline Lens
Eyelids
Internal Rectus Muscle
Lachrymal Gland
Meibomian Glands
Nerve Sheath
Optic Nerve
Posterior Chamber
Puncta Lachrymalia
Sclerotic Coat
Retina
Rods

**SINUSES**

Carotid Sinus
Cavernous Sinuses
Circular Sinus
Sphenoidal Sinus
Superior Petrosal Sinuses
Transverse Sinus

**NERVES**

Anterior Crural
Auditory
Buccal
Cardiac
Cervical
Cranial
Digital
Dental
Dorsi-Lumbar
Facial
Genito-Crural
Glosso-Pharyngeal
Gustaory
Hepatic-Hypoglossal
Inferior Maxillary
Intercostal

142
Lumbar
Lumbo-Sacral
Ninth
Olfactory
Ophthalmic
Optic
Petrosal-Splanchnic
Pulmonary
Sacral
Sciatic
Sixth
Tenth
Thoracic
Thyro-hyoid
Tympanic
Ulnar
Uterine
Vaginal
Vagus
Vestibular

HORMONES

ADP
ATP (Calcium Salt)
ATP (DiBarium Salt)
Adenosine 5'-Triphosphatase (ATP)
Angiotensin I
Atropine
Azo Gantanol
B-Endorphin
Compound 48/80
d-Aldosterone
d-Biotin (Vitamin H)
DL-Carnitine
DL-Thyroxine
L-Carnitine
Enterokinase
Immunoglobulin A
Immunoglobulin G, Human
Insulin
Insulin Biotin
Interferon
Intrinsic Factor
Parathyroid Acetonoe Bovine
Parathyroid Hormone
Progesterone
Prostaglandin D2
Prostaglandin E
Prostaglandin F2
Pyridoxine (B6)
Renin
Rennin (Chymosin)
Somatostatin
Somatotropin
Testosterone
Thyrocalcitonin
Thyrotropin Releasing Hormone
Vitamin B12
ENZYMES
Acetylesterase
Acid Phosphatase
Adenosine 5'-Diphosphatase
Alkaline Phosphatase
Alkaline Protease
Amino Acid Decarboxylases
Amino Acid Oxidase
Aminobutyric Acid Transaminase
a-Amylase
B-Amylase
Angiotensin Converting Enzyme
Arginase
Ascorbate Oxidase
Asparaginase
ATPase
Bile Acid Dehydrogenase
Bromelain
Candida Pseudotronicalis
Candida Utilis
Carbonic Anhydrase
Catalase
Cellulase
Chloroperoxidase
Cholesterol Esterase
Cholesterol Oxidase
Choline Acetyltransferase
Choline Kinase
Choline Oxidase
Cholinesterase, Acetyl
Cholinesterase, Butyryl
a-Chymotrypsin
Cocarboxylase
Coenzyme A Dehydrogenase
Cortisone Reductase
Creatinase
Creatine Phosphokinase
Creatininase
DNA Ligase
DNA Polymerase
Dopamine B-Hydroxylase
Elastase
Enterokinase
Formaldehyde Dehydrogenase
Fucose Dehydrogenase
Gabase
Glucose Dehydrogenase
Glutamic Decarboxylase
Glutamic Dehydrogenase
Glutathione Peroxidase
Gluathione Reductase
Glycogen Phosphorylase
Glycogen Synthetase
Histaminase
Histidase
Hydroxypyruvate Reductase
Invertase
Isoamylase
Isocitrate Lyase
Isomaltase
Lactase
Lactate Dehydrogenase
Lactate 2-Monooxygenase
Lactate Oxidase
Lactic Dehydrogenase
Lactoperoxidase
Lecithinase A
Lecithinase C
Lecithinase D
Leucine Dehydrogenase
Lipase
Lipoxidase
Lysin
Lysozyme
Lytic Enzymes
Maltase
Monoamine Oxidase
Myosin
NADase
Neuzazninidase
Nuclease
Ornithine Decarboxylase
Oxalate Oxidase
Pancreatin
Panczeozymin
Papain
Parathion Hydrolase
Pectinase
Pectolyase
Penicillinase
Pepsin
Pepsinogen
Peptidase
Peroxidase
Phosphatase, Acid
Phospholipase A$_2$
Phytase
Prostaglandin Dehydrogenase
Protease
Pseudocholinesterase
Pyruvate Kinase
Pyruvate Oxidase
Renin
Rennin
Ribonuclease  
Steroid Dehydrogenase  
Sucrase  
Trypsin  
Trypsinogen  
Tryptophanase  
Tyrosinase  
Vanilmandelic Acid Dehydrogenase  
Xanthine Oxidase

**ENDOCRINE**

Adrenal  
Hypophysis (Pituitary)  
Ovaries  
Pancreas  
Paratriyroid  
Testis

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Nosodal therapy involves using disease-causing or disease-containing tissues and diluting them to cause reversal effects. This is the basic principle of vaccination and of homeopathy. Diseased tissue can be used to alleviate disease conditions. This is the science of nosodal homeopathy. A nosode is a homeopathic or diluted and energized form of the diseased entity. Within this chapter we include a list of medical nosodes of various diseases and diseased tissues.

Thus we can see that there is a wide range of nosodal factors used by modern homeopaths. Those known to Dr. Nelson are contained in this document. To reference some experimental data behind nosodal homeopathy we point the reader to The Experimental Evidence for Homeopathy I and II by Dr. William Nelson. Within those books we can see how nosodal homeopathy is used to reverse disease conditions.

We can see that homeopathy offers a safe alternative to vaccination, which has very similar modes of operation. Even new ideas of DNA and RNA theory can be ascertained with this nouveau homeopathy.

These nosodes, which have been developed into different combinations, can be used safely and correctly in an acupuncturist's, chiropractor's or naturopath's practice. Thus we may utilize these various compounds in a nosodal way to beef up the immunity of the patient to deal with issues regarding pathogenic activity.
NOSODES

DENTAL

Acute Bacterial Ostitis of the Jaw
Acute Pulpitis
Apical Granuloma
Caries
Chron. Bact. Ostitis of Jaw
Chron. Pulpitis
Corynebacterium Anaerob7
Cyst Epithelial
Dental Sack
Ear Sclerosis
Epulis
Exudative Ostitis
Fatty Ostitis of Jaw
Fistula Dentalis
Folliculare Cyst
Fundus Abscess
Gangranose Pulpa
Gingivitis
Granuloma Purulent
Jaw Ostitis
Necrotic Gingivitis
Osteosclerosis of the Jaw
Parodontose
Parotis Dental Calculi
Parulis (Staph. Aux)
Parulis (Streptoc. Muc.)
Periodontal Fibrom
Periodontal Pocket
Periodontitis
Pulpal Stone
Radicular Cyst
Root Granulomium
Root Canal TX
Ulcerative Gingivitis
Cataracta Complicat               Wilson
Chron Cystitis + Endometrosis
Contaracta Senilis
Encephalomyelomalacia
Endometritis Tuberculossa
Hepatitis
Lupus
Lupus Erythematosis
Multiple Sclerosis
Neuralgie
Neurofibrom
Pleuritis
Progressive Muscular Dystrophie
Psoriasis
Sinusitis Frontalis
Sinusitis Maxillaris

MICRO-ORGANISMS (possible pathogenic)

Acidophilus
Adnexitis
Aerobacter Cum Coli
Amoeba
Amoeba Hepar Abscessus
Ascaridinum
Bacteroides
Bac. Morgan
Bifidus
Botulinum
Caries
Chlamydia Trachomatis
Common Wart Bulgarus
Conjunctivitis
Coxsackie
Diptherinum
Dysentery
Elephantiasis
Encephalitis
Enterococcinum
Epstein Barr
Eschericia
Flu 83
Flu 84
Flu 85
Flu 86
Flu 87
Flu 88
Flu 89
Flu 90
Fungas Flora
Haemophilus Influenzae
Herpes Progenitalis
Herpes Simplex
Herpes Zoster
Human Papiloma Virus
Infectiosis Mononucleosis
Influenicum
Influenicum (Berlin 55)
Influenicum Vesiculorum
Mycosis Fungoides
Oxyuren
Peptostreptococcus Anaer.
Planters Warts
Poliomyelitis
Pneumococcin
Progenium
Pyrogenium (Beef)
Pyrogenium (Chicken)
Pyrogenium (Crab)
Pyrogenium (Fish)
Pyrogenium (Lobster)
Pyrogenium (Pork)
Pyrogenium (Shrimp)
Pyrogenium (Tuna)
Pyrogenium (Turkey)
Proteus
Pyocyaneus
Q-Fever
Rauwolfia
Retro-Virus III
Retro-Virus IV

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Retro-Virus V
Rhinopneumonitis
Rocky Mountain Spotted Fever
Rubeola
Salmonella TP
Scarlatinum
Shiga Kruse
Shigella Paradysenteriae
Staphylococcin
Streptococcin
Streptococcus Haemolyticus
Swine Influencinum
Tetanus
Tinea Curitis and Curvis
Toxoplasmosis
Trichinosis
Tuberculinum
Typhoidinum
Typhus
Vaccinum
Vapch Grippe
V Grippe; V-2 Grippe
V-3 Grippe; V-4 Grippe
V-5 Grippe
V-75 Grippe
V-76 Grippe
VA-2 Grippe; VA-2L Grippe
Virus (cold/vail)