Leukemia (American English) or leukaemia (Standard English; Greek leukos λευκός, "white"; aima αίμα, "blood") is a cancer of the blood or bone marrow characterized by an abnormal increase of blood cells, usually leukocytes (white blood cells). Leukemia is a broad term covering a spectrum of diseases. In turn, it is part of the even broader group of diseases called hematological neoplasms.

**Classification**

<table>
<thead>
<tr>
<th>Cell type</th>
<th>Acute</th>
<th>Chronic</th>
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<tr>
<td>Lymphocytic leukemia</td>
<td>Acute lymphoblastic leukemia (ALL)</td>
<td>Chronic lymphocytic leukemia (CLL)</td>
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<td>(or &quot;lymphoblastic&quot;)</td>
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<tr>
<td>Myelogenous leukemia</td>
<td>Acute myelogenous leukemia (AML)</td>
<td>Chronic myelogenous leukemia (CML)</td>
</tr>
<tr>
<td>(also &quot;myeloid&quot; or &quot;nonlymphocytic&quot;)</td>
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Leukemia is clinically and pathologically subdivided into a variety of large groups. The first division is between its *acute* and *chronic* forms:
Acute leukemia is characterized by the rapid increase of immature blood cells. This crowding makes the bone marrow unable to produce healthy blood cells. Immediate treatment is required in acute leukemia due to the rapid progression and accumulation of the malignant cells, which then spill over into the bloodstream and spread to other organs of the body. Acute forms of leukemia are the most common forms of leukemia in children.

Chronic leukemia is distinguished by the excessive build up of relatively mature, but still abnormal, white blood cells. Typically taking months or years to progress, the cells are produced at a much higher rate than normal cells, resulting in many abnormal white blood cells in the blood. Whereas acute leukemia must be treated immediately, chronic forms are sometimes monitored for some time before treatment to ensure maximum effectiveness of therapy. Chronic leukemia mostly occurs in older people, but can theoretically occur in any age group.

Additionally, the diseases are subdivided according to which kind of blood cell is affected. This split divides leukemias into lymphoblastic or lymphocytic leukemias and myeloid or myelogenous leukemias:

- In lymphoblastic or lymphocytic leukemias, the cancerous change takes place in a type of marrow cell that normally goes on to form lymphocytes, which are infection-fighting immune system cells. Most lymphocytic leukemias involve a specific subtype of lymphocyte, the B cell.
- In myeloid or myelogenous leukemias, the cancerous change takes place in a type of marrow cell that normally goes on to form red blood cells, some other types of white cells, and platelets.

Combining these two classifications provides a total of four main categories. Within these main categories, there are typically several subcategories. Finally, hairy cell leukemia and T-cell prolymphocytic leukemia are usually considered to be outside of this classification scheme.

- Acute lymphoblastic leukemia (ALL) is the most common type of leukemia in young children. This disease also affects adults, especially those age 65 and older. Standard treatments involve chemotherapy and radiation. The survival rates vary by age: 85% in children and 50% in adults. Subtypes include precursor B acute lymphoblastic leukemia, precursor T acute lymphoblastic leukemia, Burkitt's leukemia, and acute biphenotypic leukemia.
- Chronic lymphocytic leukemia (CLL) most often affects adults over the age of 55. It sometimes occurs in younger adults, but it almost never affects children. Two-thirds of affected people are men. The five-year survival rate is 75%. It is incurable, but there are many effective treatments. One subtype is B-cell prolymphocytic leukemia, a more aggressive disease.
- Acute myelogenous leukemia (AML) occurs more commonly in adults than in children, and more commonly in men than women. AML is treated with chemotherapy. The five-year survival rate is 40%. Subtypes of AML include acute promyelocytic leukemia, acute myeloblastic leukemia, and acute megakaryoblastic leukemia.
- **Chronic myelogenous leukemia** (CML) occurs mainly in adults. A very small number of children also develop this disease. Treatment is with imatinib (Gleevec) or other drugs. The five-year survival rate is 90%. One subtype is **chronic monocytic leukemia**.

- **Hairy cell leukemia** (HCL) is sometimes considered a subset of CLL, but does not fit neatly into this pattern. About 80% of affected people are adult men. There are no reported cases in young children. HCL is incurable, but easily treatable. Survival is 96% to 100% at ten years.

- **T-cell prolymphocytic leukemia** (T-PLL) is a very rare and aggressive leukemia affecting adults; somewhat more men than women are diagnosed with this disease. Despite its overall rarity, it is also the most common type of mature T cell leukemia; nearly all other leukemias involve B cells. It is difficult to treat, and the median survival is measured in months.

- **Large granular lymphocytic leukemia** may involve either T-cells or NK cells; like hairy cell leukemia, which involves solely B cells, it is a rare and indolent (not aggressive) leukemia.

- **Adult T-cell leukemia** is caused by human T-lymphotropic virus (HTLV), a virus similar to HIV. Like HIV, HTLV infects CD4+ T-cells and replicates within them; however, unlike HIV, it does not destroy them. Instead, HTLV "immortalizes" the infected T-cells, giving them the ability to proliferate abnormally.
Common symptoms of chronic or acute leukemia\cite{12}

Damage to the bone marrow, by way of displacing the normal bone marrow cells with higher numbers of immature white blood cells, results in a lack of blood platelets, which are important in the blood clotting process. This means people with leukemia may easily become bruised, bleed excessively, or develop pinprick bleeds (petechiae).

White blood cells, which are involved in fighting pathogens, may be suppressed or dysfunctional. This could cause the patient's immune system to be unable to fight off a simple infection or to start attacking other body cells. Because leukemia prevents the immune system from working normally, some patients experience frequent infection, ranging from infected tonsils, sores in the mouth, or diarrhea to life-threatening pneumonia or opportunistic infections.

Finally, the red blood cell deficiency leads to anemia, which may cause dyspnea and pallor.
Some patients experience other symptoms. These symptoms might include feeling sick, such as having fevers, chills, night sweats and other flu-like symptoms, or feeling fatigued. Some patients experience nausea or a feeling of fullness due to an enlarged liver and spleen; this can result in unintentional weight loss. If the leukemic cells invade the central nervous system, then neurological symptoms (notably headaches) can occur.

All symptoms associated with leukemia can be attributed to other diseases. Consequently, leukemia is always diagnosed through medical tests.

The word leukemia, which means 'white blood', is derived from the disease's namesake high white blood cell counts that most leukemia patients have before treatment. The high number of white blood cells are apparent when a blood sample is viewed under a microscope. Frequently, these extra white blood cells are immature or dysfunctional. The excessive number of cells can also interfere with the level of other cells, causing a harmful imbalance in the blood count.

Some leukemia patients do not have high white blood cell counts visible during a regular blood count. This less-common condition is called aleukemia. The bone marrow still contains cancerous white blood cells which disrupt the normal production of blood cells. However, the leukemic cells are staying in the marrow instead of entering the bloodstream, where they would be visible in a blood test. For an aleukemic patient, the white blood cell counts in the bloodstream can be normal or low. Aleukemia can occur in any of the four major types of leukemia, and is particularly common in hairy cell leukemia. [13]
Causes

No single known cause for all of the different types of leukemia exists. The known causes, which are not generally factors within the control of the average person, account for relatively few cases. The different leukemias likely have different causes.

Leukemia, like other cancers, results from somatic mutations in the DNA. Certain mutations produce leukemia by activating oncogenes or deactivating tumor suppressor genes, and thereby disrupting the regulation of cell death, differentiation or division. These mutations may occur spontaneously or as a result of exposure to radiation or carcinogenic substances, and are likely to be influenced by genetic factors.

- **Exposure to dangerous chemicals such as benzene or formaldehyde.** Workers in the chemical industry may be exposed to these chemicals as part of their daily duties, which places them at increased risk for leukemia.
- **Hot dogs, Processed meats**
- **High Energy Tension wires, (living too close)**
- **Aspartame exposure of SINthetic sweeteners**
- **Parents smoking**
- **Insecticide exposure** *Bt toxin* can target mammalian cells in particular red blood cells lineage resulting in significant damage and abnormality in red blood cells known as anemia. Additionally, Bt toxin can suppress bone marrow proliferation creating abnormal lymphocyte pattern similar to what's known as leukemia.
- **Exposure to high levels of radiation.** Exposure can come from radiation treatment for another cancer, or being near the explosion of a nuclear bomb or the site of a nuclear power plant leak or explosion. Lower levels of radiation, like those used in x-rays have not been shown to increase the risk of developing leukemia.
- **Prior chemotherapy.** Chemotherapy for other cancers, especially with a type of drug known as an alkylating agent, can increase the risk of developing leukemia.
- **Having Downs Syndrome.** The presence of this disorder (or less commonly other disorders) involving abnormalities of the chromosomes can increase the risk of leukemia.
- **Having myelodysplastic syndrome.** Myelodysplastic syndromes (MDS) are a group of diseases in which the bone marrow does not make enough blood cells, or makes blood cells that die quickly once they are in the bloodstream. MDS can be deadly in its own right, even if it does not progress into leukemia. Some consider MDS to be a kind of “pre-leukemia.”
- **Exposed to excess White high glycemic Sugar**

Among adults, the known causes are natural and artificial ionizing radiation, a few viruses such as Human T-lymphotropic virus, and some chemicals, notably benzene and alkylating chemotherapy agents for previous malignancies. Use of tobacco is associated with a small increase in the risk of developing acute myeloid leukemia in adults. Cohort and case-control studies have linked exposure to some petrochemicals and hair dyes to the development of some forms of leukemia. A few cases of maternal-fetal transmission have been reported. Diet has very limited or no effect, although eating more vegetables may confer a small protective benefit.
Viruses have also been linked to some forms of leukemia. Experiments on mice and other mammals have demonstrated the relevance of retroviruses in leukemia, and human retroviruses have also been identified. The first human retrovirus identified was Human T-lymphotropic virus, or HTLV-1, is known to cause adult T-cell leukemia.\[19]\n
Some people have a genetic predisposition towards developing leukemia. This predisposition is demonstrated by family histories and twin studies.\[16]\nThe affected people may have a single gene or multiple genes in common. In some cases, families tend to develop the same kind of leukemia as other members; in other families, affected people may develop different forms of leukemia or related blood cancers.\[16]\n
In addition to these genetic issues, people with chromosomal abnormalities or certain other genetic conditions have a greater risk of leukemia.\[17]\nFor example, people with Down syndrome have a significantly increased risk of developing forms of acute leukemia, and Fanconi anemia is a risk factor for developing acute myeloid leukemia.\[16]\n
Whether non-ionizing radiation causes leukemia has been studied for several decades. The International Agency for Research on Cancer expert working group undertook a detailed review of all data on static and extremely low frequency electromagnetic energy, which occurs naturally and in association with the generation, transmission, and use of electrical power.\[20]\nThey concluded that there is limited evidence that high levels of ELF magnetic (but not electric) fields might cause childhood leukemia. Exposure to significant ELF magnetic fields might result in twofold excess risk for leukemia for children exposed to these high levels of magnetic fields.\[20]\nHowever, the report also says that methodological weaknesses and biases in these studies have likely caused the risk to be overstated.\[20]\nNo evidence for a relationship to leukemia or another form of malignancy in adults has been demonstrated.\[20]\nSince exposure to such levels of ELFs is relatively uncommon, the World Health Organization concludes that ELF exposure, if later proven to be causative, would account for just 100 to 2400 cases worldwide each year, representing 0.2 to 4.95% of the total incidence for that year.\[21]\n
Children eating 12 or more hot dogs per month have 9 times the normal risk of developing leukemia

- University of California Med School

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# Leukemia

## WHAT IS LEUKEMIA
Leukemia is cancer of the blood cells. In a patient with Leukemia, the body (more specifically the bone marrow) produces abnormal white blood cells. The abnormal white blood cells are also referred to as leukemic cells. These leukemic cells do not function normally, and with time, crowd out the normal white blood cells, red blood cells, and platelets.

## RISK FACTORS
Most Leukemia patients do not have any known risk factors, but factors that may increase the chances of Leukemia include:
- Smoking
- Exposure to high levels of radiation
- Exposure to chemicals
- Chemotherapy
- Down Syndrome and certain other genetic diseases
- Infection with Human T-cell Leukemia Virus-I (HTLV-1), a type of HIV
- Myelodysplastic syndromes and certain other blood diseases

## SYMPTOMS
Symptoms of Leukemia may include some or all of the following:
- Unexplainable fevers
- Night sweats
- Frequent infections
- Weakness and fatigue
- Frequent headaches
- Easy bruising of the skin
- Decreased appetite and weight loss

## TREATMENT
Treatment differs depending on the type of Leukemia the patient has. Treatment options may include:
- Chemotherapy
- Biological therapy
- Surgery
- Radiation
- Bone marrow transplant
- Innovative treatments

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Diagnosis

Diagnosis is usually based on repeated complete blood counts and a bone marrow examination following symptoms observed. A lymph node biopsy can be performed as well in order to diagnose certain types of leukemia in certain situations. Following diagnosis, blood chemistry tests can be used to determine the degree of liver and kidney damage or the effects of chemotherapy on the patient. When concerns arise about visible damage due to leukemia, doctors may use an X-ray, MRI, or ultrasound. These can potentially view leukemia's effects on such body parts as bones (X-ray), the brain (MRI), or the kidneys, spleen, and liver (ultrasound). Finally, CT scans are rarely used to check lymph nodes in the chest.

Despite the use of these methods to diagnose whether or not a patient has leukemia, many people have not been diagnosed due to the fact that many of the symptoms are vague, unspecific, and can refer to other diseases. For this reason, the American Cancer Society predicts that at least one-fifth of the people with leukemia have not yet been diagnosed. [13]
English: Age-standardised death rates from Leukaemia by country (per 100,000 inhabitants).

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White Blood Cell Count (WBC) and Differential
White blood cells, or leukocytes, are classified into two main groups: granulocytes and nongranulocytes (also known as agranulocytes).

- The granulocytes, which include neutrophils, eosinophils, and basophils, have granules in their cell cytoplasm. Neutrophils, eosinophils, and basophils also have a multilobed nucleus. As a result they are also called polymorphonuclear leukocytes or "polys." The nuclei of neutrophils also appear to be segmented, so they may also be called segmented neutrophils or "segs."
- The nongranulocyte white blood cells, lymphocytes and monocytes, do not have granules and have nonlobular nuclei. They are sometimes referred to as mononuclear leukocytes.

The lifespan of white blood cells ranges from 13 to 20 days, after which time they are destroyed in the lymphatic system. When immature WBCs are first released from the bone marrow into the peripheral blood, they are called "bands" or "stabs." Leukocytes fight infection through a process known as phagocytosis. During phagocytosis, the leukocytes surround and destroy foreign organisms. White blood cells also produce, transport, and distribute antibodies as part of the body's immune response.

Two measurements of white blood cells are commonly done in a CBC:

- the total number of white blood cells in a microliter (1x10^9 liters) of blood, reported as an absolute number of "X" thousands of white blood cells, and
- the percentage of each of the five types of white blood cells. This test is known as a differential or "diff" and is reported in percentages.

Normal values for total WBC and differential in adult males and females are:

- Total WBC: 4,500 - 10,000
- Bands or stabs: 3 - 5 %
- Granulocytes (or polymorphonuclears)
  - Neutrophils (or segs): 50 - 70% relative value (2500-7000 absolute value)
  - Eosinophils: 1 - 3% relative value (100-300 absolute value)
  - Basophils: 0.4% - 1% relative value (40-100 absolute value)
- Agranulocytes (or mononuclears)
  - Lymphocytes: 25 - 35% relative value (1700-3500 absolute value)
  - Monocytes: 4 - 6% relative value (200-600 absolute value)
Each **differential** always adds up to 100%. To make an accurate assessment, consider both relative and absolute values. For example, a relative value of 70% neutrophils may seem within normal limits; however, if the total WBC is 20,000, the absolute value (70% x 20,000) would be an abnormally high count of 14,000.
Childhood Cancer rises alongside sugar use. Dextrose processed sugar weakens the cancer immune defense.

Cancer increases since 1975 along with increases in SINthetic Chemicals.
ARTERIOSCLEROSIS

On her death bed, I promised mama I wouldn't die of cancer.
Into a small bowl mix ½ cup rich natural flower pollen dark honey with 1 cup crushed black and or blue berries. Add 2 tablespoons of fructose, 2 tablespoons of cumerin, tumeric, 2 tablespoons of crushed agrimony, 2 tablespoons of crushed dried young oranges peel and all (use the oranges when they are about slightly larger than a golf ball, dry thoroughly) try ginger cinnamon and garlic for flavor. Mix and take 1 teaspoon morning and 1 before bed. See the 3D Cancer Book for more
Towards a Cure for Degenerative Disease with the new science of Electronics and Quantum Electrodynamics

ANOTHER GIFT FROM THE Angel

QUANTUM ELECTRODYNAMIC BIOFEEDBACK

The atoms of all things are made of mostly electrons and protons and other miscellaneous sub atomic particles. Everything has an electric field around it because of the electrons and protons that make it up. The workings of these atoms is covered in chemistry. In chemistry we learn that most atoms have imbalances in their outer electron shell. So they seek atoms that can help to fill theses shells. These shells are only explained in quantum physics. All things are only describable with quantum physics. The electrons are placed around the nucleus of the atom. If the nucleus is the size of a golf ball the electron is less than the head of a pin and about a half mile away from the nucleus. The truth is that we are mostly empty space. Space that is full of fields. Fields that interact and make biology possible. To study biology we must study these fields. But these fields are only explainable through electronics or quantum physics.

What we call modern medicine is not modern at all. In fact it is based in antiquated science of thermodynamic Newtonian physics and old style chemistry. Today a truly modern science is based in non linear fractal quantum electrodynamics. We need a more modern medicine. Traditional medicine has just been a puppet for the SYNTHETIC drug companies.

Everything has an electric field around it because of the electrons and protons that make it up. We all know about these fields today especially if you have traveled and had to go thru a metal detector. The metal detector senses the magnetic field of metal. Metals have a strong magnetic field. Other substances have a weaker or paramagnetic field such as water. It has weak field. Some things have an almost nil field and some substances such as bismuth have a negative field. But everything has an electric field around it because of the electrons and protons that make it up.

In a major Medical University Study done with over 100,000 patients, 7,000 patients with cancer were treated by qualified QED biofeedback therapists. There was over a thirty percent cure rate. The future of medicine is in modernizing away from SYNthetic chemistry towards the body Electric and QED.
LEUKEMIA

Part of the Following:

Large Scale Study of the Safety and Efficacy of the SCIO Device

Chief Editor:

Andreea Taflan DBF IMUNE

Edited and Validated By Medical Staff:

Mezei Iosif MD, Romania
Sarca Ovidiu MD, Romania
Igor Cetojevic MD, Cyprus
Matthias Heiliger M.D. Germany/Switzerland
Klara Hilf M.D. Hungary
Anna Maria Cako M.D. Hungary
Debbie Drake M.D. Canada
Bacean Aurel MD Romania

Consultant:

International Ethics, Lebedei 58,
Oradea, Romania
John Kelsey Phd, ND N.Z. ENG,
Gage Tarrant LBT, C.H.T, USA, Somlea Livia Romania
Richard Atkinson MCSP, Physical Therapist, West Yorkshire England

Developed By:

This study was performed in the field by practicing Biofeedback technicians. Data was collected and the study supervised by the Ethics International Institutional Review Board of Romania. The Data analysis and study presentation is done By the Centro Ricerche, University of Venice + Padova, Italy

Abstract:

This study demonstrates the safety and effective qualities of the SCIO device used in a large scale study. A large scale study of over 97,000 patients with over 275,000 patient visits reported their diseases. Many of them reported this disease. And the results of their therapy is reported in this study. 287 patients with leukemia were treated and 45% had dramatic results.

Introduction:

Over View:

This Large scale research was designed to produce a extensive study of people with a wide variety of diseases to see who gets or feels better while using the SCIO for stress reduction and patient monitoring. The SCIO is a evoked potential Universal ElectroPhysiological Medical apparatus that gauges how a individual reacts to miscellaneous homeopathic substances. The device is registered in Europe, America, Canada, S Africa, Australia, S. America, Mexico and elsewhere. The traditional software is fully registered. Some additional functions where determined by the manufacturer to be worthy of evaluation. Thus a study was necessary to determine safety and efficacy. (As a result of these studies these additional functions are now registered within the EC)

An European ethics committee was officially registered and governmental permission attained to do the insignificant risk study. Qualified registered and or licensed Biofeedback therapists where enlisted to perform the study. Therapists were enrolled from all over the world including N. America, Europe, Africa, Australia, Asia, and S. America. They were trained in the aspects of the study and how to attain informed consent and transmit the results to the ethics committee or IRB (Institutional Review Board).

2,569 therapists enlisted in the study. There were 98,760 patients. 69% had more than one visit. 43% had over two visits. There were over 275,000 patient visits recorded. The therapists were trained and supervised by medical staff. They were to perform the SCIO therapy and analysis. They were to report any medical suspected or confirmed diagnosis. Therapists personnel are not to diagnose outside of the realm of their scope of practice. Then the therapist is to inquire on any reported changes during the meeting and on follow-ups any measured variations. It must be pointed out that the Therapists were free to do any additional therapies they wish such as homeopathy, nutrition, exercise, etc. Therapists were told to not recommend synthetic drugs. Thus the evaluation was not reduced to just the device but to the total effect of seeing a SCIO therapist.

Part 1. The emphasis was on substantiating safety followed by efficacy of the SCIO.

Part 2. Proving the efficacy of the SCIO on diseases (emphasis on degenerative disease)

Part 3. Proving the efficacy of the SCIO on the avant garde therapies of Complementary Med

Part 4. QQC standardization

Methods and Materials:

SCIO Device:

The SCIO is an evoked potential Universal Electro-Physiological Medical device that measures how a person reacts to items. It is designed to measure reactions for allergy, homeopathy, nutrition, sarcodes, nosodes, vitamins, minerals, enzymes and many more items. Biofeedback is used for pre-diagnostic work and or therapy.
The QXCI software will allow the unconscious of the patient to guide to repair electrical and vibrational aberrations in your body. For complete functional details and pictures, see appendix.

**Subspace Software:**

The QXCI software is designed for electro-physiological connection to the patient to allow reactivity testing and rectification of subtle abnormalities of the body electric. If a patient is not available a subspace or distance healing link has been designed for subspace therapeutics. Many reports of the success of the subspace have been reported and thus the effectiveness and the safety of the subspace link is part of this test. Many companies have tried to copy the subspace of Prof. Nelson and their counterfeit attempts have ended in failure.

**SOC Index:**

The SCIO interview opens with a behavioral medicine interview. This is called the SOC Index. Named after the work of Samuel Hahneman the father of homeopathy, he said that the body heals itself with it’s innate knowledge. But the patient can suppress or obstruct the healing process with some behavior. Hahneman said that the worst way to interfere with the healing natural process was allopathy or synthetic drugs. Theses upset the natural healing process by unnatural intervention and regulation disturbance. Other ways to Suppress or Obstruct the Cure are smoking, mercury amalgams, stress, lack of water, exercise and many others. This behavioral survey then gives an index of SOC.

The scores relate to the risk of Suppression and Obstruction to the natural Cure. The higher the scores the more the Suppression and or Obstruction. The scores of 100 or lower are ideal. A copy of the SOC index questions appear in the appendix.

**Study Technicians:**

The study technicians were educated and supervised by medical officers. The study technicians were to execute the SCIO therapy and analysis. All were trained to the standards of the International Medical University of Natural Education. Therapists from all over the world including N. America, Europe, Africa, Australia, Asia, S. America and elsewhere were enlisted to perform the study according to the Helsinki study ethics regulations.

They were to chronicle any medical suspected or confirmed diagnosis. Therapists personnel are not to diagnose outside of the realm of their scope of practice. Then the study technician is to inquire on any disclosed observations during the test and on follow-ups report any measured changes.

To test the device as subspace against the placebo effect, two of the 2,500+ therapists were given placebo SCIO devices that were totally outwardly the same but were not functional. These two blind therapists were then assigned 35 patients each (only 63 showed). This was to assess the double blind factor of the placebo effect as compared to the device. Thus the studied groups were

A. placebo group, B. subspace group, and C. attached harness group.

Cross placebo group manipulation was used to further evaluate the effect.

**Important Questions:** these are the key questions of the study

1. *Define Diseases or Patient Concerns*

2. *Percentage of Improvement in Symptoms*
3. Percentage of Improvement in Feeling Better

4. Percentage of Improvement Measured

5. Percentage of Improvement in Stress Reduction

6. Percentage of Improvement in SOC Behavior

7. What Measured+How (relevant measures to the patient’s health situation)

8. If Patient worsened please describe in detail involving SOC_

   After the patient visit is was complete the data was e-mailed to the Ethics Committee or IRB for storage and then analysis. This maneuver minimized the risk of data loss or tampering. Case studies were reported separately in the disease analysis.

MEDICAL DETAILS

A disease of unknown cause characterized by rapid and abnormal proliferation of leukocytes in the blood-forming organs and the presence of immature leukocytes in peripheral circulation. May be acute or chronic but inevitably fatal.

Like chronic myelogenous leukemia, this neoplastic disorder is characterized by a very high white count.

In more than 50 per cent of the cases it exceeds 50,000 cells/su. mm., and counts of 200,000 cells/cu. mm. are frequent. Only a small portion of patients have counts below 10,000 cells/cu. mm. Most of these cells are small lymphocytes, but occasionally the larger variety appear. In many cases a persistent anemia that seems to have an autoimmune basis is usual. In contrast to CGL (chronic myelogenous leukemia), an increased platelet count is unusual; more often it is reduced. Lymphocytes make up 30 to 80 per cent of the bone marrow. This characteristic will differentiate this condition from infectious lymphocytosis and other disorders. Hypogammaglobulinemia is often found in the later stages of the disease. Both the spleen and lymph nodes are enlarged by the lymphocytic proliferation and infiltration. A lymph node biopsy may be useful where malignant lymphoma is suspected on clinical grounds.

Summary of Laboratory Findings:

Red cell count: Decreased

Platelet count: Decreased

Total white cell count: Marked increase

Differential: Lymphocytosis

Cell morphology: Lymphoblasts and immature lymphocytes infrequent.

- Fatigue
- Anorexia and weight loss
- Bone tenderness
LEUKAEMIA AND MYELOPROLIFERATIVE DISORDERS

These disorders are characterised by replacement of the bone marrow by the progeny of a neoplastic stem cell resulting in disordered haematopoiesis. In acute leukaemia the marrow is rapidly replaced by a population of immature cells which leads to the acute effects of marrow failure _ anaemia, bleeding and susceptibility to infection. In myelodysplasia the marrow is gradually replaced by a neoplastic clone which results in ineffective haemopoiesis with release of abnormal cells into the circulation, inadequate production (pancytopenia), and a variable rate of evolution towards acute leukaemia. A chronic myeloproliferative disorder (CMPD) is one in which the presence of an abnormal clone leads to the over_production of one or more cell lines which can be either red cells, granulocytes, platelets or bone marrow stromal cells. However, these distinctions are blurred by the tendency for both myelodysplasia and chronic myeloproliferative disorders to undergo transformation to leukaemias. CMPD may undergo blast transformation leading to the production of immature cells, frequently of lymphoid type.

Acute Leukemia

Acute leukaemia may arise de novo as well as developing from myelodysplasia or by blast transformation of CMPD. It is divided into myeloid (AML) and lymphoid (lymphoblastic _ ALL) types. These are subdivided according to T or B or common differentiation and by some aspects of cellular morphology. Thus AML is subclassified according to whether there is differentiation towards granulocytes, monocytes, erythroid cells or megakaryocytes.

Myelodysplasia

Myelodysplasia (MDS) is probably quite common but in many people remains as a sub_clinical condition. Dysplastic changes can be found as a secondary phenomenon in a large number of conditions such as marrow replacement by carcinoma and following drug treatment. The primary form, however, is characterised by several chromosomal abnormalities including monosomy 7 which points to its essentially neoplastic nature. The proportion of immature myeloid cells in the marrow appears to determine the prognosis: when less than 5% MDS is an indolent disease whereas with levels between 5 and 30% survival declines rapidly. When the proportion of myeloblasts exceeds 30% the diagnosis becomes acute leukaemia.
Chronic myeloproliferative disorders

Overproduction of granulocytes, red cells, platelets and stromal cells gives rise to:

1. Chronic myeloid leukaemia (CML) characterised by:
   (i) Fever
   (ii) Splenomegaly
   (iii) Anaemia
   (iv) Bleeding
   (v) Hyperviscosity
   (vi) Progression to acute leukaemia
   (vii) Presence of the Philadelphia chromosome, a translocation between chromosomes 9 and 22 which results in the transcription of a hybrid gene composed of c_abl_bcr.

2. Primary proliferative polycythaemia (PPP or polycythaemia rubra vera)
   (i) Raised haemoglobin and packed cell volume
   (ii) Thrombotic tendency _ splenic and renal infarcts
   (iii) Bleeding

3. Primary thrombocythaemia
   Although there are increased numbers of platelets, bleeding occurs because there is a poor response to aggregating agents. Thrombosis in small vessels is another consequence.

4. Myelofibrosis
   (i) Splenomegaly
   (ii) Extra_medullary haemopoiesis
   (iii) Normocytic, normochromic anaemia
   (iv) Deformed red cells _ tear_drop poikilocytes
   (v) Leucoerythroblastic cells

Results:
Before we review the direct disease improvement profiles, we need to review the overall results. The first most basic of question in the results is the basic feedback of the generic patient conditions.

1. **Percentage of Improvement in Symptoms**

2. **Percentage of Improvement in Feeling Better**

3. **Percentage of Improvement Measured**

4. **Percentage of Improvement in Stress Reduction**

5. **Percentage of Improvement in SOC Behavior**

The SOC index gives us great insight to this study. Each disease has a different cut off where the ability of the SCIO to help was compromised. As a general index scores of 200 + where much less successful.

**LEUKEMIA**

This groups significant SOC cut off was 75.

The Large scale study had over 98,000 patients and 275,000 patient visits we have direct evidence of the safety and efficacy. A placebo group was used for the large scale test to help validate the results.

This disease group total number of patients was **287**

**Subspace Treatment 121 patients, 166 SCIO Harness Patients**

**OVERALL ASSESSMENT**

A. **Subspace Treatment 211 patient visits**

There were 0 cases of patients who reported a negative Improvement. None of these cases reported any major difficulty.

There were

- 0 cases reporting no improvement of Symptoms, 0% of Subgroup
- 0 cases reporting no improvement in feeling better, .0% of Subgroup
- 0 cases reporting no improvement in stress reduction 0% of Subgroup

32%--- **Percentage of Improvement in Symptoms**

12%--- **Percentage of Improvement in Feeling Better**

23%--- **Percentage of Improvement Measured**

32%-- **Percentage of Improvement in Stress Reduction**
1 %-----Percentage of Improvement in SOC Behavior

B. SCIO Harness Treatment 299 patient visits

There were 0 cases of patients who reported a negative Improvement.

None of these cases reported any major difficulty.

There were

0 cases reporting no improvement of Symptoms, 0% of Subgroup
0 cases reporting no improvement in feeling better, 0% of Subgroup
0 cases reporting no improvement in stress reduction 0% of Subgroup

45%----Percentage of Improvement in Symptoms

54%----Percentage of Improvement in Feeling Better

67%----Percentage of Improvement Measured

67%--Percentage of Improvement in Stress Reduction

2 %-----Percentage of Improvement in SOC Behavior

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SCIO TREATMENT SUGGESTED

Color - set patient's favorite if desired, or choose color by chakra that is deficient, red and green stim immunity

Cosmic: set 1 for physical body, 2 for astral, 3 for etheric, 4 for mental, 5 for cosmic, 6 for other

Magnetic Method - 1+10 is universal, 7 for detox, 8 for regrowth of new tissue, 3 for injury, 2 for metabolic correction, 5 for inflammation, 6 for infection, 9 for psych stress, 2 for energy stimulation, 4 for immunity

Frequency ___ 653hz_965hz, 5321___5787hz

Zap for 10 min once a day in early stages once a week in later stage

Cancer therapy for 30 min once a month in early stages once a week in later stage.

Scalar for 30 min once a month in early stages once a week in later stage

Trivector for 10 min once a month in early stages once a week in later stage
Clinicul Evaluation: S C I O E D U C T O R

Measures & Treats

Volts and Oscillations (EMG, EEG)
Amps and Oscillations (ECG)
Resistance (GSR)
Hydration
Oxidation (Redox potential)
Ph acid vs alkalinity
Reactivity evoked potential to voltammetric fields of substances (TVEP) over 228,000 measures a second of these energetic factors

Brain wave and emotions with (MCES)
Pain with (MENS) (TENS)

Trauma or wounds (EWH)
Electro Weakness Ph, Redox disorder (VARHOPE Correction)
Trickle charge the body electric

All designed to detect + reduce Electro-stress and Balance the Body Electric Automatically

If you need more information on the SCIO and purchase details please get in touch with us
web: www.qxsubspace.com
e-mail: info@qxsubspace.com
How Arsenic Can Cure One Type Of Leukemia

Date: April 19, 2008

Arsenic is a remarkably effective treatment against a rare form of leukemia. Researchers have shown how arsenic cures one type of leukemia. This research should lead to a better understanding of the therapy, and thus to medical strategies which are better adapted to this disease.
Arsenic is a poison which has been used in medicine for more than 3000 years. It is now regularly used to treat acute promyelocytic leukemia. This type of leukemia is characterized by the fusion of PML and RARA proteins, which is sufficient to make cells leukemic. Earlier, Pr. Hugues de Thé’s team had shown that arsenic induces the SUMOylation of PML/RARA, SUMO being a peptide that regulates interaction between proteins. But the nature of the degradation pathway remained a mystery, because SUMO generally works against degradation.

A new enzyme which participates in this mechanism, RNF4, has recently been identified by the researchers. This enzyme plays a key role in the recognition and degradation of PML/RARA forms which have been modified by arsenic (PML/RARA-SUMO). The work of the French team, like that of an English team publishing in the same journal, shows that RNF4 binds to PML-SUMO or PML/RARA-SUMO. It then fixes another peptide, ubiquitin, onto this complex. Ubiquitin is known to lead to the degradation of proteins to which it binds. Ubiquitin then modifies the PML/RARA-SUMO protein. The existence of a degradation pathway, initiated by SUMO and completed by ubiquitin, had been predicted by genetic studies on yeast, but no substrate had been identified. This research should lead to a better understanding of the molecular bases for therapy, and to better strategies for treating this illness.


**Introduction: The History of Arsenic Trioxide in Cancer Therapy**

1. **Karen H. Antman**
   
   **Author Affiliations**
   
   1. Columbia University College of Physicians and Surgeons, New York, New York, USA

   Karen H. Antman, M.D., Wu Professor of Medicine and Professor of Pharmacology, Milstein Hospital Building-6N-435, Division of Oncology, 177 Ft. Washington Avenue, Columbia University, New York, New York 10032, USA.

   Telephone: 212-305-8602; Fax: 212-305-3035; e-mail: kha4@columbia.edu

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   **ABSTRACT**

   Although arsenic can be poisonous, and chronic arsenic exposure from industrial or natural sources can cause serious toxicity, arsenic has been used therapeutically for more than 2,400 years. Thomas Fowler's potassium bicarbonate-based solution of arsenic trioxide (As$_2$O$_3$) was used empirically to treat a variety of disorders, and in 1878, was reported to reduce white blood cell counts in two normal individuals and one with “leucocythemia.” Salvarsan, an organic arsenical for treating syphilis and trypanosomiasis, was developed in 1910 by Paul Ehrlich. In
the 1930s, arsenic was reported to be effective in chronic myelogenous leukemia. After a decline in the use of arsenic during the mid-20th century, reports from China described a high proportion of hematologic responses in patients with acute promyelocytic leukemia (APL) who were treated with arsenic trioxide. Randomized clinical trials in the U.S. led to FDA approval of arsenic trioxide for relapsed or refractory APL in September 2000.

- **Acute promyelocytic leukemia**

Because of its significant medicinal properties, arsenic has been used as a therapeutic agent for more than 2,400 years [1]. In the 15th century, William Withering, who discovered digitalis, was a strong proponent of arsenic-based therapies. He argued, “Poisons in small doses are the best medicines; and the best medicines in too large doses are poisonous” [2]. In the 18th century, Thomas Fowler compounded a potassium bicarbonate-based solution of arsenic trioxide (As$_2$O$_3$) that would bear his name. Following its introduction, Fowler’s solution was used empirically to treat a variety of diseases during the 18th, 19th, and early 20th centuries [3]. Pharmacology texts of the 1880s describe the use of arsenical pastes for cancers of the skin and breast, and arsenous acid was used to treat hypertension, bleeding gastric ulcers, heartburn, and chronic rheumatism [2]. Arsenic’s reputation as a therapeutic agent was enhanced in 1910 when Nobel laureate Paul Ehrlich developed salvarsan, an organic arsenical for treating syphilis and trypanosomiasis. However, as medicine evolved in the 20th century, enthusiasm for medicinal arsenic waned rapidly [2].

In modern times, arsenic acquired a reputation as a toxic compound and a poison. Chronic arsenic exposure is a serious public health problem in some parts of the world [4]. Intoxication by this heavy metal can result from breathing sawdust, workplace air, or smoke from arsenic-preserved wood, or from ingesting contaminated water, food, or soil [5]. Arsenic is present in high concentrations in well water in many parts of the western United States, South America, and Taiwan. In Bangladesh, the health of millions of people has been adversely affected by contamination of the groundwater by naturally occurring arsenic [6]. Widespread use of arsenic-containing herbicides and pesticides, its incorporation into feed as a substance to promote the growth of livestock and poultry, and its industrial use have caused the environmental dispersion of this compound. Furthermore, environmental arsenic is concentrated in many species of fish and shellfish. Consequently, the average daily human intake of arsenic is approximately 300 μg, virtually all of this ingested with food and water [1, 3].

Arsenic poisoning has been a common method of homicide since the Middle Ages. For example, Napoleon may have been poisoned by arsenic-tainted wine that was served to him in exile [7]. The odorless and tasteless properties of most arsenic compounds make them attractive poisons [5]. Unlike strychnine, which is bitter, and other detectable poisons, arsenic is not easily recognized, and victims are unaware of its presence. Furthermore, both acute and chronic poisoning results in symptoms that can be confused with a variety of other natural disorders, including hemorrhagic gastroenteritis, cardiac arrhythmias, and psychiatric disease.
Arse
nic’s antileukemic activity was first reported in the late 1800s. In 1878, a report from Boston City Hospital described the effect of Fowler’s solution on the reduction of white blood cell counts in two normal people and one patient with “leucocythemia” [3, 8]. Subsequently, As₂O₃ was administered as a primary antileukemic agent until it was replaced by radiation therapy. However, the hematologic use of arsenic experienced a resurgence in popularity in the 1930s when its efficacy was reported in patients with chronic myelogenous leukemia (CML) [9]. Until supplanted by modern chemotherapy, arsenic trioxide after radiation was considered the most effective treatment for CML and other types of leukemia. Recently, reports from China have described the induction of clinical and hematologic responses by arsenic trioxide in patients with de novo and relapsed acute promyelocytic leukemia (APL) [10–12]. The activity of arsenic trioxide in patients with APL is an important observation, inasmuch as approximately 20% to 30% of patients with this form of acute myelogenous leukemia relapse despite treatment with all–trans retinoic acid and combination chemotherapy. In one report from China, arsenic trioxide monotherapy produced complete clinical responses in 9 of 10 patients with relapsed APL [12]. Treatment was not associated with bone marrow suppression and produced only limited side effects. The results of these observational studies have been confirmed in randomized clinical trials in the U.S. [13, 14]. Consequently, arsenic trioxide (Trisenox™) was approved for the treatment of relapsed or refractory APL by the U.S. Food and Drug Administration in September 2000.

This event prompted the convening of a closed roundtable meeting of experts in hematology/oncology, The Promise of Trisenox™: Charting an Appropriate Scientific and Clinical Course, in New York on July 19, 2000. The meeting participants were charged with the following: discuss the role of arsenic trioxide in the therapy of APL, other hematologic cancers, and solid tumors; clarify the risk/benefit profile of arsenic trioxide and discuss and interpret the results of the clinical trials of arsenic trioxide (Trisenox™) in hematologic malignancies. This supplement is based on the proceedings of that meeting.

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REFERENCES


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Discussion:

The results show significant improvement in symptoms and feeling better. The Collective results show a dramatic benefit to the SCIO therapist visit.

CASE STUDY REPORT CONDENSATION:

“I am working with the SCIO-System since 4 years. In my practice my patients are mainly chronically ill patients with e.g. following diseases:
Auto aggressive diseases like ALS, Multiple Sclerosis, Crohn Disease, Colitis Ulcerosa, Lupus e.,
Chronically digestion Problems
Rheumatism, Fibromyalgia, Spinal Column Problems,
Various Cancer Diseases like Lung Cancer, Mammary Cancer, Leukemia,
Stomach Cancer, Liver Cancer,
Neurologically Diseases like ADS, Depressions, Trauma, Brain Injuries,
Allergies
Skin Diseases like Neuro-Dermatitis, Psoriasis
Migraine
I have used the SCIO to measure my patient's reactance to many various items which electrical patterns are digitally stored in the system.. I have used the device for therapy on my patients and it is highly accepted from them, because it is safe, showing no side-effects and is non invasive.
The SCIO-System treats the body's electric in a safe biofeedback way which helps the body to reactivate its body's own healing capacitance to finally come back to a well functioning body-regulation-system. It might appear a little futuristic if you do not know the background of the system, but if you would take the chance to look a little deeper, I am sure you would agree on its scientific validity and benefits.

Bottrop, Germany”

“Almost one year ago I had to rush my mother to emergency because she was passing blood. After spending few days in the hospital when I thought that this situation had been under control the doctors decided to have a meeting with us. My mother had two blood transfusions and her haemoglobin could not be stabilized. The bone marrow test was done and the results were not final but very negative. When the doctors decided to discharge her temporally till all the test results were coming in I thought that was a great mistake.

How will I cope with all the trauma, when she was receiving morphine in the hospital, she had chest pain, her spleen was extremely enlarged and on top she was developing shingles witch that alone was a very painful experience. I had no time, emotionally I could not cope seeing my mother going so fast. The only chance I had in this very difficult time, I remember that in September I was introduced to Quantum energy and being a very busy person, I thought this is
great news but I had so many seminars to attend, that I was preserving my learning capacity for those events. Nevertheless few months down the road I was facing the greatest tragedy of my life suddenly I was losing my mother without having even the time to prepare for it. My intention was if I can buy one month at least I can prepare emotionally. In this difficult time I decided that my mother should try Quantum Energy. My mother got discharged on January the 30th 2007 that was a Tuesday and I managed to book an appointment for the next day with a practitioner. The traveling was long but I made the commitment to give it a try. Even though that day driving alone with my mother toward the clinic I had another emotional experience, because my mother was in excruciating pain because of the shingles, in a moment of silence I thought that I lost her. Finally I found my way to the place which had brought a great hope and joy to our life, that today a year later my mother is alive she is 70 years old and she is living on her own. Actually she traveled alone back to her country, leaving Canada to go back to Romania is not a short trip. Thank you professor Nelson me and my family we are very grateful for this scientific accomplishment.

City unknown"

“1. Female - age 33 diagnosed with liver cancer she had regular weekly visits with the EPFX for an entire year. She is now cancer free it's been 4 months as of this writing.

2. Male - age 54 diagnosed with lymphoma he had regular weekly visits for 6 months. He is now free of cancer.

3. Female - age 72 diagnosed with Leukemia. She had regular weekly sessions for 6 months as of today her medication is half what she was taking. She has more energy and also now a boyfriend he's 80.

4. Male age 55 - severe back pain could not move or get out of bed. One session and an evening of rest he was back at work. His partner of 6 years stated it takes him weeks to recover, she has never seen a recovery that fast.

5. Female age 51 - severe food poisoning one session an evening of rest and back in class the next day.

6. Boy age 12 - ADHD 3 months of weekly sessions this was in 2004. His mother took him off medication ON HER OWN I do not advise or diagnose - she called me last week to say he's graduating.
“Female age 71

Diagnosed with Leukemia. She had spent 6 months going through Chemo. Before, during and after she had weekly sessions. After 1 yr her Leukemia was in full remission. She says that the EPFX helped her most with her depressions. After each session she would notice different changes. Like the pain in the leg that lightened and even went away after a few weeks.

City Unknown”

**USUAL or CUSTOMARY TREATMENT PLAN:**

**Leukemia Nosode; Immune Stim; Lymph/Spleen/Mammary; Chyrosplenium**

**PLANTS THAT FIGHT FEVER**

A fever is one of the body’s responses to illness. By heating up, the body is fighting off the invading germs. Many herbs have properties that lend themselves to natural treatment for fever.

Symptoms of a fever may include a high temperature, headache, muscle ache, shivering, loss of appetite, burning eyes, coated tongue, a feeling of heaviness and nausea and an excessive production of saliva.

### Pineapple
- Eat fresh pineapple or drink the juice. The juice can prevent dehydration while pineapple’s natural anti-inflammatory properties fight the fever.

### Basil
- Mix 1 teaspoon of basil with ½ teaspoon of black pepper and allow it to steep in 1 cup of hot water for a few minutes to make a tea. Drink this 2 or 3 times per day.

### Oregano
- Make a tea from 1 teaspoon of oregano and 1 teaspoon of marjoram in a pint of boiling water. Allow the mixture to steep for half an hour. Strain and drink the tea a couple times per day. It should be consumed warm.

### Linden Flower
- This herb promotes sweating and is often used when a fever induces chills. Pour 1 cup of boiling water over 1 teaspoon of dried linden flowers. steep the solution, and then strain out the herbs. Drink 1 or 2 cups per day.

### Elderberry
- Drink elderberry tea to encourage perspiration and break a fever. Take 3 cups a day.

### Uva Ursi
- Add uva ursi to your herbal tea to cleanse the kidneys, since they are affected during a fever.

Other herbal teas that are useful during fever include yarrow, andrographis, chamomile, mint and sage.
Black Foods for Disease

List of Superfoods that Benefit the Cure of Diabetes, Heart Disease, and Cancer

Black Superfoods are dark fruits, vegetables, and grains that are nutritional power foods. Their color comes from plant pigments that may help lower the risks of diabetes, heart disease, and cancer, so it’s health smart to eat them.

Black foods have more antioxidants than light-colored foods because of their high pigment content.

Chromium makes foods Dark or Black

Black cumin: The secret miracle heal-all remedy

What if we told you there was a seed so densely packed with healing compounds that cancer, bacteria, viruses, ulcers, diabetes, chronic inflammation, and many other common health conditions hardly stand a chance in its presence?
Black Cumin Seed Oil: The Most Powerful Oil In The World?

The Prophet Muhammad called Black Cumin Seed “the remedy for every illness except death”, it was used by Cleopatra as a beauty treatment and Hippocrates used it to cure metabolic and digestive disorders. Some of the conditions found to have been improved through the use of Black Cumin Seed Oil include: allergies, anxiety, cold and flu, diabetes, hair loss, headaches and migraines, high blood pressure, insomnia, depression + more.

Eucalyptus, Peppermint, Wintergreen in a candle can increase the vaso-dilation of the lungs to carry the herbs deeper to kill fungus, treat cancer, and or remedy other lung diseases.
Cancer is a dramatic disease that can be cured. Everyone has cancer cells from time to time. Our immune system destroys them before they can proliferate. When there is an immune dysfunction the cells grow and multiply into the cancer mass. There can be an overall weakness or perhaps just an irregularity that stops proper recognition of the tumor cells. The Noble prize in medicine some years ago was awarded to an Argentinean research team that discovered that stimulating the immune system was the best way to deal with cancer and that the techniques of chemotherapy, radiation, and surgery were poor ways to deal with cancer. In my experience the techniques of chemotherapy, radiation, and surgery kill more patients than cancer. It seems that the more they get it robs the body of the ability to deal with the cancer itself.

I have seen many natural therapies that have some degree of efficacy. So I have decided to put it into this book for all to read and for some to use. Our technique depends on the immune system dealing with the disease. If there is too great a weakness in the life force or too great a SOC index (Suppression and Obstruction to Cure) then perhaps techniques of chemotherapy, radiation, and surgery are for you. But if you want to choose another path or use this with the medical techniques then this article is for you.

The QXCI device can have powerful effects on your system. The therapy needs some help from the patient to not only improve the lifestyle but to push the immune system.

Responsibility, dedication, steadfastness, positivity, awareness, non judgmental, and faith are necessary. This path is work and requires diligence, perseverance, patience, and composure. There is no quick fix, no magic bullet. But for those who want health it is worth the confrontation. In continental Europe the people talk about taking the cure. Here they go to a spa, to relax, eat well, exercise, and use a variety of naturopathic healing techniques. For over two decades, I have been a consultant at several of the best spa of the world and I have designed many of the techniques used around the world. This article is designed for those of you who can’t afford the $2,000usd a day some of these spas cost. This article will help you at home, so now it is your turn to #take the cure#.

What we are going to ask is to read this article, come back and ask questions of your therapist, and work for some time to produce results.

For more information on a natural lifestyle see the natural switch book, which can be ordered from IMUNE. This manual has a list of ways to achieve a more natural life style. Let’s start with the toughest assignment the rules of the stomach.
RULES FOR THE STOMACH

The stomach is an important part of our anatomy. Food entering our mouths must be properly prepared for digestion. After being chewed and masticated by the mouth, the food is now sent to the stomach for further processing. The stomach mixes the food in an acid bath for further breakup of the nutrients. When the acid shifts alkaline to about 5.5 ph the pylorus valve at the base of the stomach opens and the food is passed along to the primary digestive organ the small intestine.

Nature has provided us with a nervous system that regulates this process. This nervous system is designed to prefer muscle action over digestion. So if a threat or stress comes to us after a meal, such as a lion attack, our body will shift its energy from digestion to the muscles and we can survive by running away. In our present society we have few lions, but our nerves can still stop digestion just as easily.

When we allow the stomach to empty its contents prematurely the small intestine is over burdened. The food is not properly prepared for digestion. Then we get an increase in large undigested proteins and large undigested fats that can be absorbed into the lymphatic system. This will enter the free fatty acid and amino acid pool and either clog up the lymphatic system or be used to make cells. Cells which will now be made of poor quality parts. It is not much of a problem if we circumvent the stomach just now and then, but for some the patients, this becomes a way of life.

They constantly use ant acids, too much liquid with meals, coffee, milk, or a variety of ways to empty the stomach too early. When the stomach empties there is a release of CCK a hormone which has a slight anti depression or euphoria. This and the release of the stuffy stomach feeling intensifies the addictive quality of the effect. But the long term effects on nutrition are very detrimental. There are rules of the stomach that can maximize nutrition.

The majority of our patients are partially sick because they violate the rules of the stomach. This is the key to weight loss and the healing of a host of other disease. We are
seeing more and more evidence of what good nutrition can do. But it is not just what we eat that is important, but what we absorb. Even the best meal or nutrition can result in inappropriate nutrition if we violate the rules of the stomach.

Food combining is just part of the answer. As that different foods have different times for stomach digestion. So the stomach can open prematurely from that.

**RULES OF THE STOMACH**

1. Fluids alone (no more than 4oz. Of fluid with a meal, or for two hours after a meal)
2. No coffee at meals (wait for 1.5 to 2 hours after or 1 hour before eating)
3. No milk with meals (wait for 1.5 to 2 hours after or 1 hour before eating)
4. Fruits alone (wait for 1.5 to 2 hours after or 1 hour before eating)
5. Melons alone (wait for 1.5 to 2 hours after or 1 hour before eating)
6. Small meal is better Quality of nutrition not quantity
7. Slow meals Savor, enjoy, rejoice, and celebrate the meal
8. Eat for nutrition not for stimulation, Eat when hungry, not when bored
9. Rest comfortably after eating for at least 35 to 45 min to maximize stomach function
10. Make and eat food with love and kindness, no violent or negative emotions
11. No antacids
12. Do not sleep for 3 hours after eating.
When the stomach is weak the signs will be craving fluids with a meal, bloating after a meal, itching skin especially rectum, belching, and gas. The patient will have a difficult time digesting raw vegetables. They will complain that raw vegetables can not be digested. This is not a fluke of their digestion or an inherited weakness. This is a sign of a weak stomach. Sometimes our children come home from school and say, Daddy I don't want to go to school any more, it makes my head hurt. We must say back I know it is hard, but you must develop slowly and work to become better. This is what we must say to those with weak stomachs. You must work slowly, day by day building up the stomach by taking some vegetables as juice. Maybe even very dilute juice and slowly increasing the amount till your stomach develops the strength to process your food properly. The nutrient content of fruits and vegetables is immense, and being able to break up the nutrients and stimulate absorption is needed for complete health and recovery.

The addictive quality of this problem is seen as our society more and more allows for breaking the rules of the stomach. The greater your disease or especially if your disease is critical the more you will need to observe the rules of the stomach. This is a must for proper healing.
Lifestyle Changes.

Stress reduction must be worked into the lifestyle. Everyone needs to first realize to celebrate each meal and relax afterward to maximize nutritional absorption. This shift to the parasympathetic system will allow the body to use the enzymatic capacity of the body to the max. Stress reduction should be worked into the rest of the life as well. The fast paced life in modern society is so stressful that a release valve is needed. The vacation is designed as a time to relax. Often times the vacation becomes a further source of stress, as when people travel they sometimes become even more obsessed with seeing things or going places. A time that could be spent relaxing can be changed into further stress. Affirmations, meditation, exercise, music, a hobby can all help with stress reduction. But for highly charged executive types start with relaxing after meals.

Avoid high fat content foods. Fat has nine time more calories than other components of food. So even a food that is 50% fat can be overcharged with bad empty calories. The fat collects into the arteries and lymphatics as well as excess adipose tissue. All of these put undo stress on the body.

The conditioning of the patient is also important. The body is designed to chop wood and carry water. An exercise program is essential for health. Yoga and stretching of the body is also important. The natural switch book from the International Journal of the Medical art of Homeopathy will outline more detail on exercise and nutrition.

Obeying the rules of the stomach is also very important.
Biofeedback Equipment

People have been interested in personal development throughout history. But, what is interesting is what is happening today. Never in history has there been as much interest in personal development and self help material as there has been in all history.

Before the printing press was invented by Gutenberg being into self help was not what almost all of the people were interested in. In those times it was difficult to find places or people with good personal development information.

Responsibility Training, Drugless Therapy Available for you NOW

IMUNE
International Medical University for Natural Education
Evidence Based Natural Energetic Medicine Education
Special DIET SUGGESTIONS:

MORNINGS: start the day with 10 oz. of citrus juice, alternate grapefruit, orange, lemon, lime, pineapple. Use 100% juice absolutely no sugar allowed. Feel free to mix juices freely. Mix with water by 50% if juice is too strong and most store bought juice is often too strong. This will help to clean the lymphatic chilifers of the intestine.

1 hour later you can have breakfast, but on 5 days a week just fruit till noon. This is for cleansing and detox.

TEAS and HERBS: these are herbal forms of chemotherapy. These teas can be used freely but make weak not strong: Periwinkle (Vinca Minor), Burdock, Mistletoe, Plantain, Blood root (Sanguinaria), almond, blackberry, Green tea, dandelion. Orange peel, lemon peel, grapefruit peel, ginger, ginseng, cinnamon, tang kuei, licorice, kelp, musk, myrrh, California yew, peony, angelica, aloe, sesame seed, apricot seed, Mentha, rhubarb, bull thistle

mix freely for taste. Rotate

VITAMINS: good all-around natural liquid is best. But extra vitamin C, vitamin A, vitamin E, Fatty acids, lecithin, pantothenic acid, and B12.

CHEW, CHEW, CHEW: food digestion starts in the mouth. Here is where the food needs to be masticated, lubricated, and enzyme processing starts. The enzymes are carbohydrate type so sugar is released in the mouth as carbohydrates become saccarhides. It is very important to chew food very well and slowly. As the food breaks up the parts of the food are released. So good nutritious food will improve in flavor as we chew. But bad food such as processed carbohydrates taste worse as you chew.

So we are conditioned in our society to eat fast and chew fast. Now as you shift to good natural food chew slowly. Each mouthful needs to be chewed 30 to 40 times. When the flavor peaks and your natural juicer your teeth have juiced the food it is time to swallow.

Eat three to four mouthfuls of broccoli, and one to two sprigs of parsley per day and chew each 100 times. Treat it like chewing gum and set totally free all of the nutrients. Get over the bad attitude this could save your life. This is a powerful anti-cancer therapy.
JUICES: During the day take at least Two large glasses of broccoli, cauliflower, parsley, nutmeg, pear, blackberry, blueberry, apricot, carrot, beet and green pepper juice. Concentrate on the broccoli. Fresh juice not more than one day old. Mix to best taste.

________________________________________________________________________

FOODS TO EAT MORE OF:

Fresh and raw fruits and vegetables are the main suggestion but some foods are stimulants to the immune system. Use organic when possible. These foods are rich in lectins that stimulate the immune system, see article at the end.

1. Jequirity Bean
2. Jack Bean
3. Soybean (unprocessed)
4. Lentil (rich in opsonins)
5. Sweet Pea
6. Red Kidney Bean
7. Pea
8. Wheat Germ
9. Sambucca Bean
10. Aloe vera
11. Cloves

________________________________________________________________________

ENZYME INHIBITORS: seeds can last virtually forever in dry circumstances. There are powerful enzyme inhibitors at work to stop germination. When the inside of the seed is exposed to water the enzyme inhibitors (which are water soluble) wash away and the enzymes trigger germination. Any seed product, bean or nut must be germinated to remove the enzyme inhibitors and the nutrition improved. Thus any sprouts are necessary in the diet of any one desperately ill. For all beans, nuts and seed products, cover them with a damp cloth or submerse them in water for 12 to 24 hours. Dry in the sun or at temperatures below 106 degrees F.
TEMPERATURE: Most cancer start with a deficiency of fatty acids, these are essential for life, but are heat sensitive. Some are destroyed even temperatures as low as 106 degrees F. So we must get plenty of fresh and raw fruits and vegetables in our diet. Over cooking and disobeying the rules of the stomach are two of the most important problems in modern life. These decrease the nutritional deficiency problem. The answer is not just in what we eat but how we eat.

DETOX: Toxins are a major cause of cancer as well. We all know about carcinogenic toxins. When the immune system breaks down cancer cells there is a rush of autotoxins. So it is extremely important for the body to detox. Extra fiber in the diet from fruits and vegetables helps. We need to keep the bowels working daily. Good regular bowel movements are the best detoxifier. But if there is ever a problem with constipation, then we need to use an enema or something to promote stool.

Also we need to detox from sweat. Antiperspirants, deodorants, and others can stop the detox do not use them. Use aroma therapy for your body, natural only.

We also need to remove toxins with urination, so water intake is very important.

WATER: Most of us do not drink enough water. The regulating process in our brain that controls thirst seem to malfunction after the age of 20. We need to remind ourselves to drink more water. Filtered RO water is best, Charcoal or carbon filtered water is good, bottled water is often good but expensive, but even tap water is better than no water at all. For you to get better drink at least 8 glasses of water a day.

MEDITATION: Focusing the mind can stimulate the immune system. There are spas where people with cancer pay large sums of money for meditation help. This type of guided imagery is essential for healing dramatic disease. A tape of relaxation exercises for the cancer patient is in the program. You can play it on the computer or make a tape of it for use at home. Mentally releasing the negativity and increasing awareness of the self is very important to the cure. Most people need help with this. Seek out networks and support to share ideas and foster growth. Keep in mind the best sign of mental health is the ability to laugh at yourself.

EXERCISE: The conditioning of the patient is also important. The body is designed to chop wood and carry water. An exercise program is essential for health. Yoga and
stretching of the body is also important. The natural switch book from the International Journal of the Medical art of Homeopathy will outline more detail on exercise. Some form of exercise routine can be designed for any patient. Even just imagining exercise has benefits. So a mental exercise program can be used by bed ridden patients.

The wellness of an organism is best measured by its ability to oxygenate. So the better shape you’re in the better you’ll be able to heal yourself. Take it easy take it slow, too much too fast can aggravate disease.

HOME SPA: The main thing of the European spas is reduced stress. For your home spa, get the family to cooperate by helping to reduce stress. Change some small things at home to create a new atmosphere to stimulate the mind. The mind likes some change. A new poster in the bath, a candle near the bath tub a new conditioner or aroma therapy. Some new music, some new massage technique.

Put the phone on hold. Clear the time for you to focus on the relaxation needs your body needs for healing. For every minute you spend on preparation, spend ten minutes in relaxation. So don't over do things in preparation.

AT BEDTIME: no solid food for three hours before bed. One glass of pineapple or papaya juice and a multiple natural enzyme tablet. The enzymes at bed on an empty stomach will help to circulate into the blood stream to breakup congested lymph and attack the membrane of tumor cells. A desiccated Liver supplement at bed time once a week is also helpful. Twice a month take one tablespoon of sodium or potassium bicarb at bed with the enzymes. This is to strengthen the pancreas as well.

SOME RECIPES FOR HEALING

Prof. Nelson's SALSA: take one cup (mixed germinated soybeans, jackbeans, peas, snow peas, red kidney bean) and one cup onion, two cups tomatoes, and one cup of sprouts. Put into a food processor and mix into a salsa. Use corn chips unless there is candida or fungus(candida grows best on or with corn meal). Use oat or wheat bran crackers to eat this nutritious and immune stimulating meal.
Prof. Nelson’s salad Oil: to get all of your fatty acids you must use cold processed oils of many types. Blend sesame, safflower, soybean, sunflower, olive, and avocado oil in equal parts, to get some of the high end fatty acids soak finely crushed nutmeg, cloves, mustard seed and parsley in canola oil or sesame oil. Let it sit in the sun for 2 days. Blend this into the oil and this will make a fine source of all your fatty acids. If you can get nutmeg, parsley, mustard, or clove oil all the better then you won’t have to make it.

This is important for all diseases and for maintaining health. Any nervous disease, degeneration, and immunity disease will respond much better if the patient takes some of this oil. A small quantity is all that is needed. Just put some on bread, or a salad.

Prof. Nelson’s better butter:

For those of you who are not ready to give up the taste of butter, this is an excellent way to reduce your saturated fats. It combines the saturated fats in butter with the polyunsaturated fats in sunflower oil. By using cold pressed oil, you are giving yourself the essential fatty acids your body needs so much. If you eat the same amount of Better Butter as plain butter, you are cutting your saturated fat intake by half.

¼ pound all natural butter at room temperature

1/3 cup cold pressed oil combo from above

Blend with a fork and refrigerate. Makes ¼ pound. It will soften quickly in the heat.

WHOLE GRAIN PANCAKES

These pancakes are wheat free and can be made with a variety of grains. One grain should be sticky, such as oats. You can change the recipe by adding millet or buckwheat, ground into flour in a small seed grinder, a little rye flour, or anything else that happens to be around. A few whole grain pancakes in the morning makes a delicious breakfast.

They contain no added fats and, if you eat them with a little unsweetened jam or blend fruits (blueberries, grapes, strawberries etc) into a compote for a syrup. However, the psychological freedom that comes from eating pancakes can be exhilarating to someone who is used to dieting.

Mix together:

2 cups of whole grain flours (either the ones suggested here or our variations):
1 cup corn meal, or add or mix cat tail pollen for an extra culinary treat (put a paper bag over a cat tail this pollen season. Shake vigorously. The pollen will be released into the bag.) Mix with grain.

½ cup brown rice flour
3 tablespoons of wheat germ
½ cup oat flour (grind oatmeal in blender)

Add:

1 ½ cups of low-fat milk or soy milk
1 egg
½ teaspoon baking powder (use Rumford brand or other brand without aluminum)

Serves a hungry family of four. Save any leftover batter in the refrigerator for another breakfast. Use natural fruit compost in a blender, and sorghum or maple syrup for topping.

**Eggplant Pancakes:**

Use the same batter as above. Cut off and slice skin of eggplant into circles. Dip circles into batter and fry in sunflower oil till brown.

**OATMEAL WITH APPLE JUICE**

Try this if you like hot cereal and want to avoid both cow’s milk and soy milk. It is a pre_sweetened, moist cereal without sugar or honey that cooks while you are dressing in the morning. Nothing could be simpler to prepare or more beneficial to help eliminate cholesterol buildup, keep blood sugar level, and provide natural fiber. Besides, it tastes good.

¼ to ½ cup of dry rolled oats (oatmeal)

Cover with apple juice diluted by half with water.

Bring to boil and simmer, covered, 5 to 10 minutes. Add more juice if additional moisture or sweetener is desired. Add a small quantity of berries or fruit to taste. Makes one serving.
SOY MILK Almond Milk

When you want to cut back on dairy products to prevent calcium overkill or because of a dairy sensitivity, non GMO soy milk or almond milk an excellent substitute both in cooking and with cereal.

DO_IT_ YOURSELF PROTEIN DRINK

Germinated seeds and nuts are added to soy protein for this variation of the standard protein powder and juice drink. To germinate, simply soak the nuts and seeds overnight. Their protein content is increased and their fat content decreased through germination. Rinse and refrigerate any extra to be used later in the week.

The refrigerated nuts and seeds should be rinsed once a day to keep them fresh. Soy milk or tofu can be used in place of more expensive protein powder, which often contains unwanted sugar.

Blend together:

½ cup soy milk or 1/6 pound tofu

¼ cup apple juice

½ cup berries or ½ piece of fruit (banana, peach, or other)

6 germinated almonds

6 germinated Sambuca seeds
3 tablespoons of wheat germ

1 tablespoon germinated sunflower seeds

Makes one serving. For added B vitamins and energy, add brewer's yeast powder or flakes. Begin with ½ teaspoon and gradually build up to 2 tablespoons. If you begin with too much at first, you could get gas. A gradual increase avoids this problem.

Prof. Nelson’s immune cookie

1/6 pound tofu

1 cup apple juice

½ cup berries or ½ piece of fruit (banana, peach, or other)

16 ground germinated almonds

8 ground germinated Sambuca seeds

3 tablespoons of wheat germ

15 tablespoons germinated sesame seeds

15 tablespoons of honey

5 ounces of sprouts, rinsed, germinated and drained

Use kidney bean, jack bean, black bean, soybean, pea, snow pea, lentil, sesame seed

Mince ingredients and blend pour on a cookie pan and cook at 250 degrees for twenty minutes. Serve as cookies.

Prof. Nelson’s immunity building soup and dip

BEAN SOUP or BEAN DIP

1 large red onion, chopped

# cup thinly sliced celery

1 teaspoon dried minced garlic

3 cups de-fatted chicken broth
1 tablespoon Worcestershire sauce
1 tablespoon kelp
2 teaspoons tamari soy sauce
1/8 teaspoon pepper
1/8 teaspoon ginger
45 ounces of beans, rinsed, germinated and drained

Use kidney bean, jack bean, black bean, soybean, pea, snow pea, lentil, sesame seed

Brown onion. Add celery and garlic. Cook one more minute. Add rest of ingredients. Simmer 15 minutes. Remove from Dutch oven and puree in a food processor or blender.

Return to Dutch oven. Simmer 30 more minutes. Serve over brown rice and top with chopped onion. Serves four to six.

LENTIL BARLEY SOUP

1 cup germinated lentils
1 cup germinated barley
1 cup of beans, rinsed, germinated and drained

Use kidney bean, jack bean, black bean, soybean, pea, snow pea, lentil, sesame seed

1-16 ounce can tomatoes, chopped
1 cup sliced celery
1 cup chopped onion
1/2 cup sliced carrot
2 tablespoons tamari soy sauce

1 1/2 teaspoon pepper
1 teaspoon dried dill weed
1 teaspoon garlic powder
10 cups de-fatted chicken broth
Place all ingredients in a large saucepan. Bring to a boil. Cover and reduce heat to simmer. Cook 50 minutes, stirring occasionally. Add water if soup becomes too thick. Serves six to eight.

Prof. Nelson’s cocktail:

Sambucca is an immune stimulant, as is red wine. Mix equal parts of each or use port for the red wine and take only one glass a day. Only use when needed not everyday. The relaxation effects are good and there is a slight immune stimulating effect.

Prof. Nelson’s sorbet:

Use no white sugar and only natural fruit, mix pineapple and papaya, possible to use berries in the mix, or use melon separately. For extra sugar you can use some fructose or honey. Mix into puree and freeze while stirring regularly. Chop and blend after into a sorbet. This makes an excellent enzyme rich desert.

Prof. Nelson’s stir fry:

1 teaspoon olive oil or sunflower oil
1 teaspoon low sodium soy sauce
¼ cup broccoli
¼ cup carrots
¼ cup onions
¼ cup peppers
¼ cup peas
¼ cup red kidney bean
¼ cup soybean
¼ cup snow peas
¼ cup sprouts
¼ cup mushrooms (you may substitute based on availability of ingredients)

4 ounces tofu, diced fine

Seasonings: choose from fresh ginger, basil thyme, oregano, parsley, cilantro, scallions, garlic, shallots

Stir fry in very hot skillet. Serve over 2/3 cup rice or pasta. Makes one serving.

BUCKWHEAT PIZZA CRUST

Add beans, raw vegetables and fruits to your pizza.

1 tablespoon active dry yeast Use germinated seed flower if possible

¼ cup warm water

1 ½ cup hard whole wheat flour

½ cup buckwheat flour

3 tablespoons of wheat germ

1 teaspoon sea salt or herbal salt substitute

1 tablespoon cold pressed vegetable oil


Prof. Nelson’s sprout salad:

¼ cup broccoli

¼ cup carrots

¼ cup onions

¼ cup peppers
¼ cup sprouted peas
¼ cup sprouted red kidney bean
¼ cup sprouted soybean
¼ cup sprouted snow peas
¼ cup other misc. sprouts

lettuce, kale,
¼ cup mushrooms (you may substitute based on availability of ingredients)

4 ounces tofu, diced fine

Seasonings: choose from fresh ginger, basil thyme, oregano, parsley, cilantro, scallions, garlic, shallots use the oil combo from above with vinegar as a dressing

TWELVE WAYS FOR GOOD HEALTH

Less Meat      More Vegetables
Less Salt      More Vinegar
Less Sugar     More Fruit
Less Worry     More Sleep
Less Hatred    More Love
Less Eating    More Chewing
Less Riding    More Walking
Less Anger     More True Smiles
Less Judgements More Acceptance
Less Greed     More Giving
Less Talk      More Deeds
Less Petti Criticisms uf Oothers More Growth Of Self
Prof. Nelson’s anti-cancer Massage Oil:

Use the oil we made above as a base, add an equal amount of olive oil. Grind up one part cinnamon, one part cascara, two parts myrrh, two parts cloves, one part eucalyptus, one part wintergreen, one part blood root, one part dried pineapple and papaya, mix into the oil and let sit in the sun for two days. Massage into the skin and pour over any lesion, rub in softly.
Cancer More notes on food

For overall prevention: green leafy vegetables, with emphasis on these six – broccoli, spinach, cabbage, kale, Brussel’s sprouts and leaf lettuce. Other high_fiber vegetables, fruits, grains, and legumes. Also, radishes, chard, tomatoes, citrus fruits, dried fruits (apricots, prunes, raisins), strawberries and deep and cold water fish high in omega_3 fatty acids may help prevent various kinds of cancer. Garlic, onions, kelp, olive oil, tea (especially green tea), as well as seed foods, such as legumes, nuts, rice, and grains, are rich in anticancer chemicals. Fresh and raw: plenty of vegetables, juices, and fiber are best.

**Bladder:** carrots, milk, broccoli, brussels sprouts, cabbage, cauliflower, coleslaw, kale, parsnips, turnips.

**Breast:** yogurt. Fruits and vegetables high in carotenoids.

**Colon:** green leafy vegetables, notably cabbage, broccoli, brussels sprouts. Also cauliflower. Acidophilus milk or yogurt, especially that made with acidophilus culture. Wide mixture of vegetable juices. Wheat bran.

**Esophagus:** green and yellow vegetables, apples, cherries, grapes, melons, onions, peas, beans, plums, pumpkin.

**Larynx:** green and yellow vegetables.

**Lung:** carrots, kale, spinach, broccoli, dark yellow squash, pumpkin, sweet potatoes, apricot. All dark green and dark orange vegetables, red and yellow fruits high in carotenoids. If you have ever smoked, load up on these foods. They may help prevent lung cancer years later.

**Pancreatic:** Citrus fruits, carrots.

**Prostate:** yellow and green vegetables. Carrots, tomatoes, cabbage, sunflower and pumpkin seeds, peas, broccoli, brussels sprouts, cauliflower, bee pollen. Reduce stress.

**Stomach:** raw carrots, coleslaw, lettuce, cabbage, tomatoes, corn, eggplant, milk, onion, sweet potatoes, squash.

**Avoid:** high fat and meat diets (which predispose to cancer), sugar, processed foods, overeating.
HEALTHY DIET

Foods Which Are Allowed:

**Beverages:**
- Herb teas (no caffeine),
- Fresh fruit juice, fresh coffee,
- Vegetable juice no more than one glass pasteurized juices, per day
- Only One small glass of alcohol per day

**Dairy:**
- Raw milk, yogurt, butter cottage cheese and white cheese
- Eggs *(Not cooked in Boiled Oil)* Poached or boiled eggs
- Eggs: can be eaten daily if rotated with several species or cheese. Eggs are rich in lecithin, which can help to control cholesterol.

**Fish:**
- Fresh white fleshed, Deep Sea Fish are Good

**Fruit:**
- All dried (unsulfured), Stewed, fresh, frozen (unsweetened) fruit, 60% fresh and raw, Fruit and Fruit Juices: use unsweetened and rotate daily.

**Grains:**
- Sprouted when possible. Grain cereals, bread, muffins ducts, hull less grains (e.g. rye, bran, buckwheat, and seeds (e.g. pasta, Oat, wheat, millet), cream of snack foods, white rice, Wheat, brown rice, whole seeds prepared or cold cereals, (e.g. sesame, pumpkin, sun__crackers, cooked seeds)
- Bread and Cereals: eat three small servings a day of whole grain foods. Avoid processed and chemical laden flour.

**Meats:**
- No more than three servings per week All red meat products if chronically ill none should be eaten sparingly. Meat, Seafood, Poultry: eat twice weekly, rotate freely, trim off excess fat,
restrict fried foods, and eat complex protein in the morning and early afternoon. Protein does not have to include animal protein.

**Nuts**

All fresh, raw nuts sprouted Roasted and/or salted nuts, when possible especially peanuts no more than 4 a day. Nuts and Seeds: these contain essential fatty acids are necessary in our diet. All seed products contain enzyme inhibitors and should be germinated before eating.

**Oils**

Cold processed oils Saturated or animal oils (e.g. Virgin Olive oil, Rotate with soybean, safflower, corn, sunflower, canola, sesame)

**Seasonings:**

Herbs, garlic, onion, pepper, Salt, hot spices chives, parsley, marjoram Paprika

**Soups (not with other food):**

All made from scratch

Salt free vegetable, millet, fat stock

Barley, chicken, brown rice) bouillon,

**Sprouts:**

All, especially wheat, pea, Lentil, alfalfa and mung bean

**Sweets:**

Raw honey, unsulfured molasses, carob, Fructose

**Vegetables:**

40% raw and not overcooked All canned vegetables, fresh or frozen, fried potatoes in any form, Vegetables: eat four or more servings a day and rotate freely. Eat two servings raw a day, and avoid canned. Canned vegetables also contain fewer vitamins. Tomato juice can help digest meals that contain meat.

**Water:** drink a quart and a half of water a day, use thoroughly filtered spring or well water, or reenergized distilled water. Chemicals in city water may lead to severe problems if used over long periods of time.
Foods To Be partially AVOIDED

Fat: animal fat should be kept to a minimum. Excess fat can increase cholesterol.

Salt: everyone can benefit from reduced salt intake. Excess salt can aggravate nerves, cardiovascular functions, the immune system, and kidney and blood conditions.

All processed and imitation Products milk in limited quantities butter, ice cream, top_(not with meals), nonfat pings, all orange and pasteurized cheeses

Whole White processed flour,

Coffee and Caffeinated: Caffeine Tea: may cause or aggravate nervous conditions. Never use with meals; use two hours after or one hour before meals.

Milk: try not to drink pasteurized. Natural milk can help bowel flora. Milk can produce mucous, and should be avoided if a respiratory condition is active. Only use small quantities; never with meals. Rotate all foods. Don’t eat any food every day. The body likes weekly variation.

More Foods To Avoid (Avoid all processed foods)

Excess alcohol, cocoa, cola, Canned, sweetened fruit

Refined Sugar _ most harmful, can cause overweight, diabetes, hypoglycemia, dental cavities, periodontal disease, kidney stones, urinary infections, cardiovascular disease, intestinal cancer, diverticulosis, indigestion, hormone disorder and mental illness.

White Flour even enriched flour is still robbed of needed amino acids, minerals and vitamins. This can cause malnutrition and cancer.

Hydrogenated Fat (saturated)_oleo, margarine and coffee whiteners should be avoided. Limit and rotate all cooking oils. These products can cause heart problems and may provoke allergies.

Sodium Nitrite and Sodium Bicarbonate frequently used in meats and meat products. These combine in the body to produce nitrosamines that can cause cancer. Never use together.

Artificial Colors and Flavors _avoid synthetic additives, and preservatives. Our bodies cannot handle them. May cause hyperactivity, nervousness and anxiety.

All carbonated beverages, No artificial fruit drinks, Canned and creamed (thick_ened) soups, commercial

Refined sugars (white , chocolate, pure maple syrup, candy, candied syrups ) baked or boiled corn or potato chips
Tips on Food and Eating

Eat slowly, in a relaxed atmosphere. This will aid digestion.

Eat small quantities of protein and vitamin rich food instead of large helpings of over refined food.

Eat a good breakfast. Include fruit juice or raw fruit, wheat germ, and whole meal bread.

Refrain from eating a large meal at the end of the day before retiring.

You will sleep soundly if you avoid stimulating foods such as tea and coffee.

Try to cook sufficient food for one meal only. Reheated food has little nutriment value.

The human body needs a certain amount of salt in order to function properly. Few of us are aware that most vegetables contain salt and that when cooked correctly they require little, if any. There are vanities of salt available which have been extracted from vegetables. These are beneficial to our health.

Store food correctly in sealed containers. Keep perishable food in the refrigerator and nonperishable food in a dark, dry cupboard.

Use stainless steel or Pyrex glass saucepans rather than aluminum ones, as the latter leaves traces of aluminum in the food.

Always rinse eating utensils with clear water after washing with detergents.

Eat raw, fresh fruits and vegetables whenever possible. Buy in small quantities, as they lose their vitamin content quickly.

When using frozen ingredients, follow instructions on the packet. This will ensure that food does not lose valuable nutriments.

Whenever possible, leave outer leaves and skin on vegetables and fruits, as these often discarded parts are a valuable source of vitamins. When vegetables are peeled, remove immediate skin only.

Use water in which vegetables have been cooked, for homemade soups and stock.

Homemade soups are nutritious. Simmer until ingredients are tender and eat immediately.

Do not boil for hours or reheat several times.

Eat raw sugar and honey instead of refined sugar. Avoid overdosing on any sweets.

Eat whole meal flour, whole meal spaghetti and brown rice instead of refined varieties.

Use polyunsaturated oils whenever possible.
Tips on Grocery Store Shopping

Read labels.

Buy sodas that contain fructose (Corr*s, Hansen, etc.) instead of sucrose. Buy unsweetened juices, and dilute.

Buy snack foods that contain no preservatives.

Buy foods low in sodium, or salt free.

Buy whole wheat bread products, instead of white bread, buns, etc.

Buy brown rice instead of white rice.

Buy herbal tea instead of tea containing caffeine.

Buy decaffeinated (water processed) coffee or coffee substitute, instead of coffee containing caffeine.

Buy frozen foods that are not stored in aluminum containers.

Buy deodorant instead of antiperspirants that contain aluminum.

Buy chicken or turkey instead of beef. This includes chicken and turkey hot dogs and turkey ground meat.

Buy natural cereal.

Avoid sugared cereals.

Avoid nitrates, bisulfides, salicylates, additives, and insecticides.

Avoid palm oil, coconut oil, coffee whiteners or other saturated fats.

Look for the ‘Health Mark’ signs in your grocery store.
Food Combination Rules

To reduce gas and improve digestion, remember that to digest protein the stomach needs to be acid (taking antacids is a definite don’t). to digest fruit, the stomach needs to be more alkaline. Remember that fats, carbohydrates and proteins require different intestinal preparation and should not be mixed inappropriately. Also excess liquids dilute stomach digestive fluids.

The three simple rules are:

Fruits alone  Melons alone  Fluids alone

Leave at least one hour or 1.5 hours between these; two hours for large protein meal.

Other Suggestions

Enemas and laxatives, even natural ones, can overstretch the bowel muscles and make them weak by robbing needed potassium.

Prolonged use can lead to dependency and even greater problems. Only use natural stimulants when absolutely necessary. If you have any questions, consult your doctor. While mixing in saliva and ptyalin, your teeth can masticate the food thoroughly and savor the natural flavors. Don’t rush through meals, celebrate them. JUICING The recent glut of juicer salesmen on TV is not without reason. Juicing works. It does improve the absorbability of the vitamins, minerals, and life factors of fruits and vegetables. I heartily recommend purchasing a juicer and experiencing its beneficial effects. Juicers are inexpensive, don’t wait. Your best juicers, however, are your teeth and gums.

The following is a list of fruits and vegetables good for juicing. Bon apetit!

Suggestions for Meals

High Volume, Low Fat, Sodium and Preservatives

(Avoid processed foods and synthetic preservatives)

When dining out, always look for a restaurant of similar philosophy and attitude to your own. Make sure the owner and cooks appreciate the value of natural, organic, and unprocessed foods. Ask if hidden lard, MSG, sulfides, animal fats or oils are used.
Express concern over irradiated and synthetic foods. Make sure the restaurant has passed civil cleanliness inspections. Make sure there is a protected nonsmoking section, not just a token one. Make sure the staff and eating environment are happy, friendly and harmonious.

Express concerns quickly, with respect and care. Many health food restaurants attract employees with low resistance to strange ideas.

These employees often resist order, timeliness, and altruism. Help the owner by expressing your concerns with compassion and care.

# Breakfast

## Eating Breakfast at Home
(Always rotate)

- Whole grain toast or muffins with Better Butter or apple butter
- Whole grain pancakes with a little pure maple syrup, unsweetened applesauce, or jam made with pure fruit (no honey or sugar)
- A poached or boiled egg with whole wheat toast or muffin
- Scrambled egg with sautéed onions and mushrooms
- Cold cereal with soy milk or low-fat milk
- Oatmeal with raisins and almonds
- Millet with raisins and almonds
- Rice cakes with almond butter
- A piece of fruit
- Baked yam
- Do-It-Yourself Protein Drink (Nature Knows Protein Powder)
- Unsweetened yogurt with fruit or cereal
Eating Breakfast Out

Oatmeal with low-fat milk or apple juice
Omelet (spinach and mushroom, sautéed vegetable, ratatouille, Spanish)
Grape nuts or other low sugar cereal with low-fat milk or apple cider
Fruit (always a winner for breakfast)
Bran muffin (usually too sweet, but an emergency breakfast with some beneficial ingredients)

Lunch

Eating Lunch at Home or Bringing It To Work
Salad with beans (pinto, red, garbanzo) and whole grain roll
Salad with a small amount of chicken, turkey, tuna, egg, or sardines
Salad with a little low-fat cheese (a nice occasional treat)
A hearty soup, like lentil or bean, with whole grain crackers and a salad
Vegetable slaw with chicken on corn tortilla
Chicken breast and marinated vegetables
Steamed or sautéed vegetables with brown rice or millet
Pasta Primavera (cold pasta salad)
Hummus (garbanzo bean dip) with whole grain crackers and salad
Tabbouli (cold cracked wheat salad) and Hummus with raw vegetables
Raw vegetables
Occasionally, cottage cheese
Lightly steamed vegetables

Eating Lunch Out
Salad with tuna, egg, or chicken
Salad bar with bean salad and/or garbanzo beans, and bread or crackers (a little cheese occasionally)
Chicken or fish with salad or cooked vegetables
Tuna, chicken, turkey, or egg salad sandwich with coleslaw (get the best bread available)
Soup, salad, and a roll or crackers
Chinese vegetables with chicken and a little rice (no MSG)
Vegetable omelet with roll or crackers
Avoid salicylate or sulfide using restaurants

**Dinner**

**Eating Dinner at Home**

Spicy Chinese Vegetables and Soba noodles
Sautéed vegetables with brown rice, kasha
Steamed vegetables with millet or brown rice
Lentil and barley soup with salad
Whole grain pasta with marinara sauce and salad
Chicken breasts in wine and tamari sauce
Broiled fish or chicken with salad or vegetables
Curried vegetables with tofu and brown rice
Vegetable soup with whole grain noodles or rye crackers
Corn tortillas with beans and hot sauce (salsa) and salad
Corn bread and baked beans with salad
Spanish rice with vegetables or salad
Whole grain pasta with steamed vegetables and tomato sauce
Salad and baked potato

**Eating Dinner Out**

Broiled fish or chicken with vegetables and salad
Chicken or fish dishes with sauces on the side (use sparingly), with vegetables and salad

Chinese food (no MSG) with chicken or bean curd (tofu) and a little rice (no pork or shrimp)

Italian food: veal, chicken, or fish, with salad and side of pasta

Chicken enchilada or chicken tostada (no cheese) with salsa

Soup and salad

Snacks

Homemade cookies using maple syrup or sorghum and whole grains
Whole grain bran or corn muffins with „better butter”

Nuts and seeds (8 to 12 nuts, small handful of seeds)

Small amounts of dried apples, apricots, figs, or pears

Whole grain crackers with nut butter (almond, cashew, and so on)

Corn chips made with sunflower or other acceptable oil (a few)

Whole wheat pretzels with sesame seeds instead of salt

Cold sliced yam

Raw vegetables

Fruit Lightly steamed vegetable

Beverages

Good water with a little fresh lemon juice

Bottled water with lemon juice or a little fruit juice

Herb teas, hot or iced (sweetened with licorice root)

Coffee substitutes (natural, not synthetic)

Fruit juice Vegetable juice

Natural sodas (or seltzers)

Don’t eat unless you are truly hungry. Eating for simulation, pain relief, stress relief, sociability, habit, or for any reason besides hunger is maladaptive. Listen to body communication (don’t
How to Make the Switch to Natural Cooking

Rotating Food

Rotation of food is very important, because it diminishes allergies and supplies a variety of nutrients to the system. Our bodies are designed for natural foods and rotated nutrients, not processed, synthetic boredom. No culture has ever existed that had one food as its dominant diet. The Mayan Indians ate corn as their primary food. After a while, their pituitaries atrophied and childbearing decreased. So within one or two generations, their number greatly decreased. You have to rotate foods.

Foods that help to build the body's defenses should be your mainstay. These foods contain vitamins, minerals, protein, carbohydrates and essential fats that not only build resistance, but more vibrant radiant health.

The rotation diet allows for maximum nutrition and minimum allergies. Our bodies are designed for natural foods and rotated nutrients, not processed, synthetic repetition. If there are any special additions or deletions your therapist or doctor will notify you, but anyone can improve their health by following the procedure below.

Rotation: Most allergies develop because of over use of a food source. Toxic buildup of phenyl aromatic compounds occur due to the constant use of certain foods of similar families. Allergies can result from other systemic intolerance which need special treatment, but toxic allergies respond well to this rotation diet. Many people eat limited numbers of food types. They always have the same salad and vary the vegetables just slightly. How many different vegetables and fruits have you consumed in the last month?

To get the full benefits from your diet, research tells us that 15 different vegetables and 10 different fruits are needed as a minimum.

Start by having a salad a day and rotating the salad parts on the four-day plan. For leafy parts, use leaf lettuce day 1, romaine day 2, spinach day 3, endive, chard, or escarole for day 4. Then back to day 1. Rotate garnishes and dressing likewise.

And once or twice a month bring in something special or rare like turnip greens or milkweed. Rotate cooking oils by using safflower day 1, sunflower day 2, corn oil day 3, olive oil day 4, and...
others occasionally. Rotate herbal teas on the four_day plan. This is very important. Over use of herbal products may provoke other symptoms. Rotate other beverages as well. Use of processed white sugar and white flour is discouraged, but rotation of grains and sugars encouraged. Use whole wheat day 1, rye day 2, millet day 3, oats, barley or buckwheat on day 4. Use beet or maple sugar day 1, date sugar or fructose day 2, carob_dextrose molasses day 3, honey or sorghum day 4. Take the time to bring in special extra foods and spices once a week and your health will show the benefit. If varying large numbers of foods aggravates symptoms, there is a good possibility that insecticide or bi_sulfide poisoning has occurred. See your doctor for guidance if there is any difficulty.

Food Combining

If you start combining foods improperly, the stomach might get confused. For example: The stomach might say there is fruit juice and protein in me. The stomach may treat the fruit juice as more important and release everything into the small intestine. This in turn will not allow the protein time enough to be prepared for further digestion.

To make food combining very easy, here is a simple rule. Fruits alone, melons alone and fluids alone. Two to four ounces of fluids with a meal, will actually help to facilitate digestion. Anymore than that and you decrease the hydrochloric acid effectiveness in your stomach.

Fruit and vegetable juices will stay in the stomach approximately 30 minutes. Fruit, itself, will stay in the stomach around 45 minutes to an hour. Vegetables stay in the stomach for approximately 1_1/2 to 2 hours, as a general rule. The more starchy the vegetable the longer it will stay in the stomach. Protein will stay in the stomach approximately 2 to 2_1/2 hours. The more dense the protein and the more you take in, the longer if will remain in the stomach. Heavy fatty products such as animal fat products will remain in the stomach 3 hours to as long as 5 hours.

Improper Food Combining

What happens when food is not combined correctly? Bad quality nutrition is being absorbed. Inappropriate nutrition is now coming into the body, which is not being broken up properly and contributes to weight gain. This is due to the making of bad tissues. When the body makes bad tissues, it makes more of them. If you have inferior cells, the body has to make five of them to do the same job as one good cell.

Another thing we have to realize about food is that it only takes seven mouthfuls of good food to give us all the nutrition we need; but today, the quality of our food is getting worse and worse.

We are literally cooking 75_80 percent of the nutrients out of our food. So now we need 28 mouthfuls of food to get all of our nutrients. The normal American person is eating
somewhere between 35 and 40 mouthfuls a day. We are overeating due to the nutritional depletion of our over processed foods.

The following article is taken from the International Journal of the Medical Science of Homeopathy, issue on AIDS

SPECIAL NOTE ON LECTINS IN AIDS TREATMENT

By: Desire' Dubounet, LPCC, M.D.

Lectins are naturally occurring substances that mostly are found in the plant kingdom. Lectins are proteins or glycoproteins that are not made by the immune system of a human but can influence the immune system of a human. Lectins influence agglutinization and precipitate complex carbohydrates. The agglutinations activity of these highly specific carbohydrate binding molecules is usually inhibited by a simple monosaccharide. For some lectins Di, Tri, or Poly saccharides are required. The plant source often carries the needed molecules for action.

Many Lectins produce stimulation effects on the manufacture of lymphocytes. In fact several of these compounds have mitogenic stimulation of T_cell Lymphocytes. In the last study on the treatment of children with AIDS the use of the soups reflect the use of some lectins.

But if we review the Lectin research we can see a more refined type of soup prescription. #The effects of T_cell stimulation can indeed be of the utmost importance to the AIDS patient.

Biological research has shown several substances to produce this Mitogenic effect. Many of these herbal compounds are in the New Vistas Product Known as Hemo_A. This product has been tested in cell culture and clinically and proven its ability. But there are many compounds that can provide some dietary effect. We recommend combining the diet of these foods with the Hemo_A. Many of the best naturally occurring sources of Lectins are herbal controlled substances that are put into the Hemo A. So combining this with the diet has maximum effects.

The foods richest in the Mitogenic Lectins areas follows:

1. Jequirity Bean ( rare)
2. Jack Bean
3. Soybean ( unprocessed)
4. Lentil ( rich in opsonins)
5. Sweet Pea
6. Red Kidney Bean
7. Pea
8. Wheat Germ
9. Sambucca Bean

Using these in soups, salads, or others can have positive effects on T_cell formation. Our research shows the positive effects of these when the immunosuppression is reduced. The primary immunosuppression being Antibiotics, Sugar, Street drugs, Stress, etc.

The references that follow can point to the research data. There was an appalling amount of literature regarding these lectins and their mitogenic effects. The reference list provided is but a small sample. I apologize for the form of the references but that is the way they were shown in the literature I reviewed. It is quite amazing that with all of this research that the dietary recommendations are not prescribed for this devastating condition.

Society has chosen to get its foods from the fields and its medicines from the synthetic chemical companies. The serious flaw in the Synthetic Chemical Philosophy robs the public from some simple solutions. Therapy can come from the fields. Medicine must learn to look for natural solutions not always the profit pictures of the Synthetic Chemicals Companies.

Rather than looking for ways to synthetically reproduce Nature we should use it in its natural ways. A review of the current literature on AIDS will reveal a dramatic revelation. The life style changes are profound in helping the AIDS patient.

The Synthetic Drug therapies are weak and often ineffective. Natural medicine has much to offer AIDS technology, perhaps a cure.

When the patients and our society express the choice towards natural medicine then the technology will grow.

REFERENCES

**Food Combination Rules**

To reduce gas and improve digestion, remember that to digest protein the stomach needs to be acid (taking antacids is a definite no-no). To digest fruit, the stomach needs to be more alkaline. Remember, fats, carbohydrates and proteins require different intestinal preparation and should not be mix inappropriately. Also, excess liquids dilute stomach digestive fluids. So the three simple rules are:

1. Fruits alone  
2. Melons alone  
3. Fluids alone

Space at least one hour between fruits, melons and fluids; two hours for a large protein meal.

**SCIO TREATMENT SUGGESTED**

**Color** - set patient's favorite if desired, or choose color by chackra that is deficient, red and green stim immunity

**Cosmic**: set 1 for physical body, 2 for astral, 3 for etheric, 4 for mental, 5 for cosmic, 6 for other

**Magnetic Method** - 1+10 is universal, 7 for detox, 8 for regrowth of new tissue, 3 for injury, 2 for metabolic correction, 5 for inflammation, 6 for infection, 9 for psych stress, 2 for energy stimulation, 4 for immunity

**Frequency** 653hz, 965hz, 5321, 5787hz

**Zap for 10 min once a day in early stages once a week in later stage**
Cancer therapy for 30 min once a month in early stages once a week in later stage.

Scalar for 30 min once a month in early stages once a week in later stage

Trivector for 10 min once a month in early stages once a week in later stage

Discussion:

The results show significant improvement in symptoms and feeling better. The Collective results show a dramatic benefit to the SCIO therapist visit.

--- BIBLIOGRAPHY ---

BOOKS


ARTICLES AND STUDIES

A case of Leukemia treated with homeopathy medicines

Posted February 16, 2005 by Dr. SK Mamgain

Hereunder I am presenting a case of Leukemia. I cannot claim this case to be of any academic value or an instructive case, yet this case shows that Homoeopathic medicines act while allopathic treatment was being given simultaneously. And above all, the Homoeopathic medicines were prescribed on meager symptoms without seeing the patient even once. The result of such mixed treatment is evident that after the use of Homoeopathic medicines the pathology became normal and the patient improved to a great extent.

Patient a 65 years old lady.

First consultation on 2 – 6 – 2003.

Clinical diagnosis – Leukemia, detected in December 2002.

History/symptoms as told by the son of the patient.

First of all let us have a look what this disease Leukemia is?

According to the Penguin Medical Encyclopedia:

Leukemia is a cancer-like disease of white blood cells. Whereas most cancer grows and spreads from a single focus, leukemia is a widespread affection of the bone marrow and other blood-forming tissue. The essential disorder seems to be failure of developing white cells to mature. Fully developed, effective white cells cannot reproduce themselves; after a life span of a few days or weeks they are replaced by new cells. But leukemia cells retain the ability to multiply, and they do not develop to a
stage at which they can function as a defense against infection. As the disease progresses, these useless immature cells displace normal white cells and the patient is as much at the mercy of infectious diseases as some one with no white cells at all. The abnormal activity in bone marrow also encroaches on the formation of red blood cells and platelets, so that the patient becomes anemic and his blood does not clot properly. Although in some very acute cases the patient may live only a few months, it may be many years before serious symptoms appear — in the most chronic cases, 20 years or more.

Complete recovery used to be reported from time to time, but it now seems likely that these were cases of glandular fever, which has many of the symptoms of leukemia at the height of the attack, but clears up completely. Present forms of treatment do not cure the disease. They may prolong life,........ .

First time on 2 – 6 – 2003 her son came with earnest request to give some medicine for the lady. He also explained his inability to bring the patient to Dehradun from Haldwani, a far off place, as the lady was not in a position to travel to Dehradun. And it was neither possible for the physician to go to see the patient at Haldwani. So her son told her story as follows:

The patient was suffering from ulceration in her mouth since October 2002 and was not responding to the treatment given to her by her physician so her blood examination was resorted to. At that time (on December 5th, 2002) her T. L. C. was found to be 1,27,600/cmm. Now she was diagnosed as a case of Leukemia and the proper treatment for the same was started at Haldwani. At that time her Hb. was 10.2 gm%. Though, she responded to the treatment, but only partially. Even after six months of treatment her T. L. C. on May 11th, 2003 was 61,000/cmm and the Hb. 11.8gm%. There was no appreciable improvement in the ulcers of her mouth they were persistently recurring.

Her son told that -

. The ulcers are persistent, the old one heal and new ones appear.
. The ulcers bleed easily – while she is eating and also from touch.
. Throbbing pain in the ulcers.
. Swelling on lower lip with ulcers on its inner side.
. Especially when swallowing food feels burning pain in her whole oesophagus.
. H. O. fall whence incurred fractures in the ribs and injuries to spine, wrists and toes. After the accident she used to feel -
. Severe pain in both sides of the chest, scapulae and spine.
. The pain by hard pressure and jerking the limbs.

The T. L. C. at the commencement of Homoeopathic treatment was 67,100/cmm. It started gradually coming down except once whence it shot up (on 19 – 10 – 2003) to 1,08,000/cmm. Otherwise gradual decrease in T. L. C. continued till it came down within normal range. On 19 – 10 – 2003 the Hb. was 14.5gm%.

In the beginning I prescribed one dose of Medorrhinum 10M followed by Crotalus horridus 30 b.d. She felt some cheerful but the trouble was as usual.
Now, Natrum sulph. 1M was prescribed one dose after every three days. In Kent’s Repertory (Generalities) Natrum sulph is one of the first grade remedy for leukemia. But it did not give any relief.

After 24 – 7 – 2003 Natrum mur. 1M one dose every fourth day was prescribed. Natrum mur. is one of the remedyed for ulceration of mouth. Later one dose every sixth day.

According to Allen’s Encyclopedia :-
- * Ulcerated spots in the mouth, on the gum and tongue, in which food and drink cause biting,
- – Ulcerated spot on the inner surface of the lower lip, with sore burning when touched.
- * Dryness of the mouth.
- * Mouth and lips dry. – Dryness of the palate. – Dryness of the hard palate.
- * Persistent dryness of the mouth, especially of the . – A sore spot on the inner surface of the right cheek, with burning pain when touched by warm food.

According to Hering’s Guiding Symptoms:-
- Mouth, lips and tongue dry.
- Sore places in mouth very sensitive, even to liquids.
- Vesicles and ulcers in mouth and on tongue, smarting and burning when touched by food, stomacace.
- Aphthae on tongue, gums and cheeks, with great burning and impeded speech.

Kali chlor. 200 was also given inter-currently at long interval.

She felt lot of improvement in all her complaints including the ulceration of mouth.
The T. L. C. on 15 – 2 – 2004 came down to 8,500/cmm. The normal range is 4,000 – 11,000/cmm.
She improved so much that she became able to travel to Dehradun and she personally visited my clinic on 25 – 2 – 2004.

In conclusion I once again admit that during whole this period the patient was taking the allopathic treatment too. But still can claim that after Homoeopathic medicines her T. L. C. started coming down and became normal. A glance on the following table is evidence to the fact I have stated above.
Study: Smoking Fathers Linked To Childhood Leukemia Risk

By Grace Liao | Health & Medicine
December 23, 2011

New research by Australian scientists suggests that children whose fathers smoked around the time of conception may have a 35 percent higher risk of developing childhood leukemia. AsianScientist (Dec. 23, 2011) – New research by Australian scientists suggests that children whose fathers smoked around the time of conception may have a 35 percent higher risk of developing childhood leukemia.

The study, conducted by Perth’s Telethon Institute for Child Health Research (ICHR), has been published in the latest online edition of the American Journal of Epidemiology. The ICHR is affiliated with the University of Western Australia.

First author Dr. Elizabeth Milne said the study looked at the potential association between parental smoking and the most common form of childhood cancer, acute lymphoblastic leukemia (ALL), which affects one in 2000 children in their lifetime.

Dr. Milne said that, when fathers smoked more than 15 cigarettes a day around the time of conception, the risk of ALL in children could be increased by 35 percent. According to Dr. Milne, the correlation fits what it is believed about tobacco smoke – that it can damage the DNA in sperm, even though the sperm can still fertilize an ovum.

The study found no increased risk of ALL in children with fathers who had previously smoked, suggesting that sperm with normal DNA may be produced after cessation.

“While women are often informed of the dangers to their unborn baby of smoking during pregnancy, this study shows that we also need to direct that message to potential fathers,” Dr. Milne said. Dr. Milne urged caution in drawing a link in individual cases or laying blame.
“The causes of childhood leukemia are likely to involve many interacting factors of which only one is cigarette smoke. However, we do think it’s important that future fathers know the potential damage that could be caused to their sperms and have the opportunity to reduce that risk by stopping smoking,” she said.

The article can be found at: Milne E et al. (2011) Parental Prenatal Smoking and Risk of Childhood Acute Lymphoblastic Leukemia.

Aspartame is linked to Leukemia and Lymphoma in new Landmark Study on Humans

As few as one diet soda daily may increase the risk for leukemia in men and women, and for multiple myeloma and non-Hodgkin lymphoma in men, according to new results from the longest-ever running study on aspartame as a carcinogen in humans. Importantly, this is the most comprehensive, long-term study ever completed on this topic, so it holds more weight than other past studies which appeared to show no risk. And disturbingly, it may also open the door for further similar findings on other cancers in future studies.

The most thorough study yet on aspartame - Over two million person-years

For this study, researchers prospectively analyzed data from the Nurses’ Health Study and the Health Professionals Follow-Up Study for a 22-year period. A total of 77,218 women and 47,810 men were included in the analysis, for a total of 2,278,396 person-years of data. Apart from sheer
size, what makes this study superior to other past studies is the thoroughness with which aspartame intake was assessed. Every two years, participants were given a detailed dietary questionnaire, and their diets were reassessed every four years. Previous studies which found no link to cancer only ever assessed participants' aspartame intake at one point in time, which could be a major weakness affecting their accuracy.

One diet soda a day increases leukemia, multiple myeloma and non-Hodgkin lymphomas

The combined results of this new study showed that just one 12-fl oz. can (355 ml) of diet soda daily leads to:

- **42 percent higher leukemia risk** in men and women (pooled analysis)
  - **102 percent higher multiple myeloma risk** (in men only)
  - **31 percent higher non-Hodgkin lymphoma risk** (in men only)

These results were based on multi-variable relative risk models, all in comparison to participants who drank no diet soda. It is unknown why only men drinking higher amounts of diet soda showed increased risk for multiple myeloma and non-Hodgkin lymphoma. Note that diet soda is the largest dietary source of aspartame (by far) in the U.S. Every year, Americans consume
about 5,250 tons of aspartame in total, of which about 86 percent (4,500 tons) is found in diet sodas.

Confirmation of previous high quality research on animals

This new study shows the importance of the quality of research. Most of the past studies showing no link between aspartame and cancer have been criticized for being too short in duration and too inaccurate in assessing long-term aspartame intake. This new study solves both of those issues. The fact that it also shows a positive link to cancer should come as no surprise, because a previous best-in-class research study done on animals (900 rats over their entire natural lifetimes) showed strikingly similar results back in 2006: aspartame significantly increased the risk for lymphomas and leukemia in both males and females. More worrying is the follow on mega-study, which started aspartame exposure of the rats at the fetal stage. Increased lymphoma and leukemia risks were confirmed, and this time the female rats also showed significantly increased breast (mammary) cancer rates. This raises a critical question: will future, high-quality studies uncover links to the other cancers in which aspartame has been implicated (brain, breast, prostate, etc.)?

There is now more reason than ever to completely avoid aspartame in our daily diet. For those who are tempted to go back to sugary sodas as a "healthy" alternative, this study had a surprise
finding: men consuming one or more sugar-sweetened sodas daily saw a 66 percent increase in non-Hodgkin lymphoma (even worse than for diet soda). Perhaps the healthiest soda is NO SODA AT ALL.

 Sources for this article include:
http://www.naturalnews.com
A new study published by the *Journal of Hematology & Thromboembolic Diseases* links pesticides used in GM crops known as Bacillus Thuringensis (Bt) to blood abnormalities like anemia and a type of blood cancer known as leukemia. Scientists from the Department of Genetics and Morphology, Institute of Biological Sciences, University of Brasilia, Brasilia/DF, Brazil performed extensive tests to determine the health and environmental effects of GMO crops, in particular Bt toxin that's commonly used in many GM crops.

Children eating **12 HOTDOGS** or more per month have **9 TIMES** the risk of developing **LEUKEMIA**.

*University of California Medical School*
According to Greenmedinfo, the new study shows that Bt toxin can target mammalian cells in particular red blood cells lineage resulting in significant damage and abnormality in red blood cells known as anemia. Additionally, Bt toxin can suppress bone marrow proliferation creating abnormal lymphocyte pattern similar to what’s known as leukemia.

**Did you know that Bt toxin is everywhere even in the blood of pregnant women and their fetuses?** Bacillus Thuringensis also known as BT has been used in US agriculture as an insecticide for more than five decades. However, the use of Monsanto’s Bt toxin didn’t end as a pesticide and Monsanto genetically modified many crops by inserting the gene of Bt inside the DNA of crops like soy, corn and cotton. So now farmers don’t need to spray Bt on their crops since every cell of that corn or soy is creating toxic protein. As a matter of fact, Bt can break the stomach of pests or bugs with just one bite. Now, 53 years later after the introduction of Bt, billions of people have been exposed to it and a study performed by Canadian researchers shows that 95% of pregnant women have BT toxin in their blood. The researchers also found Bt toxin in the blood of 83% of unborn fetuses.

Also, a study back in February 2012 showed how BT toxin kills human cells. Beside the side effects of Bt toxin, other studies including the famous Seralini study have linked the active ingredient in Monsanto’s Roundup called glyphosate with cancer.

**Monsanto funded researchers deny any link between GMOs and other health problems including cancer or leukemia**

As much as the giant biotech Monsanto tries to suppress the independent studies performed by the concerned scientific community members, the American public is waking up and acknowledging that the biotech doesn’t even respect the right of public to label GMOs.

The researchers who have linked Bt toxin with leukemia also said that "Taking into account the increased risk of human and animal exposures to significant levels of these toxins, especially through diet, our results suggest that further studies are required to clarify the mechanism involved in the hematotoxicity found in mice, and to establish the toxicological risks to non-target organisms, especially mammals, before concluding that these microbiological control agents are safe for mammals."

But the truth is that we no longer can afford to wait about the additional research on how GMOs are harmful because the time is running against us. Also, the giant biotech Monsanto funds most of the research in our schools and universities and is blocking the new research on how GMOs can harm
humans and the environment. They have even created thousands of fake documents, claiming that GMOs are safe and ironically are great for the environment.

But who can really trust Monsanto funded research since conflict of interest has become a defining problem of modern science. Recently, a Monsanto’s former scientist was chosen in position of the associate editor of the journal for biotechnology after the famous Séralini study showed huge tumors in rats as a result of Monsanto’s GM maize and Roundup.

Dirty Electricity and the Link to Cancer in Children

04/03/2011

“Today it is quite widely accepted that these electromagnetic fields (EMF) can cause childhood leukemia. There is some evidence that other childhood cancers may be related to EMF exposure...” That is why clean energy technology is so important today. It can save a child's life.

History has shown that the western world with its vested interests is slow to inform citizens about toxic agents and help protect them. The “dirty electricity” pandemic is no stranger to inaction, as were the asbestos, lead, acid rain, DDT, PCB and tobacco-smoking public health issues before it. The contention that artificially created electromagnetic fields (EMFs) which emanate from electricity generation can cause cancer has medical and legal experts commenting that EMFs will dwarf the tobacco-smoking issue and the asbestos crisis combined.

This health issue has a history replete with destroyed careers and tarnished reputations involving scientists who have sought to help the people, and with so-called experts who have colluded with the
forces going against the precautionary principle of public health: first being, ‘do no harm’. So we ask... Is electricity harming us or our children? The results are astonishing...

In his assessment for the journal of the Royal Institute of Public Health in the UK, Dr Stephen J. Genuis reported that vested interests have been effective in delaying restrictive EMF legislation. He also noted that claims of environmental harm have been challenged by researchers who fail to disclose covert ties to industry, that economic interests exert undue influence on medical journals, and that some editors and journal staff have suppressed publication of scientific results that are adverse to the interests of industry.

Professor Mark Ellwood, who was installed by the Australian federal government in the most elevated position in the nation as Director of the National Cancer Control Initiative to provide advice and make recommendations to the government and other key groups regarding cancer control, submitted expert witness reports for the power companies (and telecommunications companies) for court cases. Professor Andrew Wood, installed by the federal government in another position that serves to protect [Australians] — ARPANSA, the Australian Radiation Protection and Nuclear Safety Administration — also submits expert witness reports for the power industry for court cases. Professor Wood is currently chair of the ELF (extremely low frequency) Standard Working Group for the ARPANSA Radiation Health Committee.

It was not until 1979 that the western world took notice that these silent, invisible EMFs may be hazardous. Epidemiologist Dr Nancy Wertheimer and electrical engineer Ed Leeper conducted a study in Denver, Colorado, USA, and reported that children who were twice or three times as likely to have leukemia tended to live in homes close to power lines and transformers.

Their results, published in a scientific paper, showed an increased incidence of leukaemia, lymphomas and nervous system tumours in children. Their hotly debated research had an immediate effect: in response to public opposition to the construction of new high-voltage power lines, the electricity industry convened an expert panel of eminent and conservative medical scientists. Included in this panel was Professor David Carpenter, from the Department of Public Health at New York University, and Dr David Savitz, one of America’s most respected epidemiologists. Professor Carpenter’s original scepticism was overturned when the Wertheimer and Leeper study, originally heavily criticised as flawed, was extended and improved. It confirmed a significantly increased risk of leukemia.

The reason why childhood leukemia is studied is because the strongest evidence for a cancer is that the same cancer is significantly elevated in children.

In 2001, leading occupational medical epidemiologist Dr Sam Milham, MPH, and E. M. Ossiander, of the Washington State Department of Health, Olympia, researched the rise of electrification in the UK and USA and concluded that the childhood leukaemia peak of common acute lymphoblastic leukaemia was attributable to residential electrification: 75 per cent of all childhood acute lymphoplastic leukaemia and 60 per cent of all childhood leukaemia could be preventable. In 2007, Professor Michael Kundi reported that up to 80 per cent of all cases of childhood leukaemia may be caused by exposure to these fields.

It was reported as early as the 1960s (Court-Brown and Doll) that a new leukaemia-causing agent entered the UK and USA in the 1920s–1930s. Today it is quite widely accepted that these EMFs can cause childhood leukemia. There is some evidence that other childhood cancers may be related to EMF exposure, but not enough studies have been done.
Wertheimer and Leeper were the first to see a magnetic field–breast cancer connection in their 1982 study of residential magnetic field exposures of adults. Even though this study looked at overall cancer risk in adults and found an increase in excess cancers of the nervous system, uterus and lymphoid tumors, “they discovered a nearly threefold increase among women younger than 55 who lived near power lines, indicating that magnetic field exposure had accelerated development and growth of breast cancer”.

Breast tissue (along with foetal tissue) is the most sensitive tissue in the body and also the most sensitive to artificial (man-made) radiation, which is why any study into breast cancer has significant ramifications for all of us. Breast cancer is a very-high-risk disease for women today. The contention that EMFs are a risk factor, let alone a causative factor, in female breast cancer has been heavily resisted. When individual cases of breast cancer or breast cancer clusters in women occur, various reproductive factors are also taken into account which can mask the role that EMFs play.

When, in 2001, three men in one small office developed breast cancer, Dr Sam Milham testified for the men in their 2003 court case, arguing that their cancers were caused, in part at least, by EMFs emanating from an electrical vault next to a basement office where the men worked. In 1997, Dr Thomas Erren, MPH, had noted that an association between ELF EMFs and breast cancer is supported in men.

In 2002, even the Washington, DC, legal counsel for electricity utilities worldwide conceded in a privileged attorney–client communication that the stance of the power industry had to change. Studies are normally conducted on exposed and unexposed subjects, but with these EMFs we are all exposed, making a definitive cause hard to prove. Also, it would be unethical to expose people to high measurements of these EMFs to prove the case. People don’t welcome having to change convenient lifestyles, and, when doubt and confusion are introduced, the public is often quick to disregard the importance of data that makes changing ingrained habits a requirement.

There have been thousands of studies of EMFs, more so than with any other health issue. In 1997, Dr. Erren commented that there are more epidemiological studies that link cancer to these fields than to environmental tobacco smoke. We are all concerned about the infiltration of chemicals into our wider and more personal environments, yet an analysis of 65 studies reported that the combined effects of toxic agents together with EMFs enhance the damage as compared to the toxic exposure alone.

In 2007, the World Health Organization (WHO) stated that it is “reasonable and warranted” to lessen exposure to these ELF EMFs, “provided that the health, social and economic benefits of electric power are not compromised”—information that will take decades to be acted upon around the globe.
EMFs and Cancer Clusters

Fifty-three people in a small post office in Capalaba, Brisbane, Australia, with an old electricity substation next door, were diagnosed with serious and fatal diseases by 2000, although staff had started to take notice of the disease patterns in the early 1990s. Investigation of the electrical environment was incomplete, and there is still no resolution to this situation today.

When research is conducted into these disease clusters, often it's the case that measurements are taken after hours when the electrical environment has changed or that investigations are conducted after extensive remedial electrical work has been completed. Often the cancers are put down to "random chance" or "coincidence".

However, in the case of the breast cancer cluster involving 17 women working in a small area within the Australian Broadcasting Corporation (ABC) TV studios in Toowong, Brisbane, the cancers, which were diagnosed between 1995 and 2006, were thought to be workplace-related but no cause could be found. In early 2005, the women pinpointed the area which they thought was in question. A private firm, EMC Technologies, took radio-frequency electromagnetic radiation measurements in April 2005 and concluded that all the work areas surveyed complied with the ARPANSA RPS3 standard, but it wasn't until 18 December 2006 that ARPANSA investigated the premises for ELF EMFs. Within three days, the ABC staff were no longer working on the premises.

The specific measurements of ELF EMFs in the area pinpointed by the staff were not mentioned in the ARPANSA report. Complete and precise measurements of ELF EMFs as well as transient EMFs should have been taken in the area. Professor Bruce Armstrong led the ABC's own investigation into the cancer cluster in 2006, looking at other breast cancer risk factors such as reproductive, lifestyle and age factors. When questioned on national television in August 2007 on this breast cancer cluster and the frustration of some of the women who felt that the proper investigations were not carried out before all the equipment was taken out, he stated: "It is very important to do the investigations properly, and indeed we did have a problem with the ABC with the fairly quick decision to remove people from the site. It did mean that some of the measurements we wanted to do were not complete, and I do understand how the women feel in that respect; they don't feel that it's been done satisfactorily."

This breast cancer cluster came close to showing the world that EMFs can cause breast cancer. Even though further analysis was not conducted on male staff in this workplace, the possibility does exist that prostate and/or testicular cancers may have been present or may develop in the future. If complete measurements of all aspects of the electrical environment had been taken, this could have been a win-win situation for all citizens of the world: the women could have known what caused their breast cancer and (along with every other woman and man) would have been able to ensure that their next working environment was safe; ABC TV would have been the perfect medium to spread the much-awaited information across the globe; and the ABC itself would have been commended on its groundbreaking achievement in helping millions of people (and scientists) throughout the world understand EMFs more fully. It also could have enabled the process of workplace reform to be instigated.

These cancer clusters serve to show us what is happening silently on a daily basis in everyone's lives. The adults and children of today have already been affected by these EMFs. Miscarriage, stillbirth, pre-term delivery, altered gender ratio and congenital abnormalities have been linked to maternal exposure. Testicular abnormalities, atypical sperm, chromosomal aberrations and offspring congenital defects have all been linked to paternal exposure.
Fathers employed in industries with higher than average EMF exposure have also been noted to have offspring with higher rates of brain and spinal cord tumors.

The Perils of Dirty Electricity

Any harmful EMFs can be classed as “dirty” — to put into common idiom the scientific and technical language that accompanies this public health issue—yet there is another facet of electricity, termed “dirty electricity”, that is now seen as even more of a threat to our health than the electromagnetic fields mentioned above. It is not only the fields from power lines and substations that can be a concern; dirty electricity is running through virtually every building on the planet.

An even more prevalent and insidious agent, this secretive and subtle underlying menace is in all probability one cause of the dramatic increase in many illnesses and cancers. Dr Sam Milham stated in 2008: “Very recently, new research is suggesting that nearly all the human plagues which emerged in the twentieth century, like common acute lymphoblastic leukemia in children, female breast cancer, malignant melanoma and asthma, can be tied to some facet of our use of electricity. There is an urgent need for governments and individuals to take steps to minimize community and personal EMF exposures.”

In 1994, the B Armstrong et al. study relating to dirty electricity was published. However, it was not until 2005, when Dr Sam Milham and electrical engineer Lloyd Morgan came out of retirement due to their concern over a cancer cluster, that information worthy of creating a paradigm shift finally began to emerge, with the results having serious implications for all of us. (These brave researchers had honorable intentions and impressive credentials. Dr Sam Milham in 1982 was the first to link workers exposed to EMFs with higher rates of leukemia. Lloyd Morgan, a brain tumor survivor and a director of the Central Brain Tumor Registry of the United States (CBTRUS), introduced the Benign Brain Tumor Registries Amendment Act into US Congress that became law in 2002. Along with breast cancer, leukemia and diseases of the central nervous system, brain tumors are among the diseases that are more prominent in this health issue.)

The researchers were responding to alarm over a cluster of 18 cancers reported in 2003 among the 137 teachers at a middle school in California. Even though the school district administration had refused a number of requests for these men to assist in the evaluation of this cluster, one teacher invited these
researchers to visit the school after hours to take measurements of the electrical environment, which they did at their own expense. When the researchers reported their findings to the Superintendent of Schools, Dr Milham was threatened with prosecution for "unlawful...trespass" and the teacher who had invited them into the school received a letter of reprimand.

The teachers then filed a California OSHA (Occupational Safety Health Administration) complaint, which ultimately led to the progressive California Department of Health Services (CDHS) becoming involved. The CDHS measured the different facets of the electrical environment and provided Milham and Morgan with the data, which showed that dirty electricity—"transients", which are radio-frequencies riding along electrical wiring—was involved. Finally, this was a study that was conducted with the highest integrity, able to break through the red tape and politics that usually accompany the problem of harmful electrical environments. Of immense importance, Milham and Morgan commented that transients may be a universal carcinogen similar to ionizing radiation, an already established cause of cancer.

The only two published studies relating to dirty electricity—Armstrong et al. 1994 study and the Milham–Morgan study—both show very positive increases in cancer risk with increasing cumulative exposure to transients. What is of critical importance is that the cancer risks at the school in California were comparable to the smoking–lung cancer risk. Of no surprise, breast cancer cases were reported in this cluster along with several other cancers including colon cancers, uterine cancers and malignant melanomas. Artificially created EM radiation (EMR) is a determinant in the development of malignant melanoma, an increasingly prevalent cancer that was uncommon until around 50 years ago.

In fact, research on EMFs has been conducted for over 50 years in Russia, and the newer research on dirty electricity has been carried out by Russian experts in conjunction with scientists and electrical engineers from the United States, Canada, Kazakhstan and the Ukraine.28 Kazakhstan has already swiftly mandated protection against dirty electricity in industrial situations, a model which should be implemented in all countries across the globe.
Ongoing Risk Assessment

We are in the midst of an invisible and silent plague of pandemic proportions that has been woven into our everyday lives. Dirty electricity is in virtually every building, whether it be our homes, schools, workplaces or hospitals. Energy-efficient appliances and equipment are amongst the culprits that create dirty electricity. Dr Magda Havas, Associate Professor of Environmental and Resource Studies at Trent University, Canada, reports that many houses with solar panels have very high levels of dirty electricity. Wind turbines can also generate dirty electricity, which is then transferred along the grid.

If these EMFs released a visible substance on us, we would comprehend very quickly the attack on our body and that dirty electricity is creating havoc with our immune systems. Even though we cannot see it and most of us cannot feel it, dirty electricity is affecting all of us. Removing dirty electricity has seen cases of multiple sclerosis improve dramatically and even go into remission, and has also resulted in asthmatics using inhalers less often.

Some diabetics are discovering that their insulin levels are being artificially raised in dirty electrical environments. In 2004, Dave Stetzer, president of Stetzer Electric, and Dr Havas presented to the WHO their research showing the difference between the blood sugar level in a dirty electrical environment (a measurement of 36) and one that was filtered (a measurement of nine). Autism is now seen as the fastest-growing developmental disability.

Dr Havas reported that a recent pilot research study has shown higher rates of babies born with autism where the mothers’ sleeping locations had high levels of radio-frequency EMR. Children who have leukaemia or are in recovery have poorer survival rates if exposure to extremely low frequency EMF
levels is high. It follows that all ill and recovering patients should be aware of their exposure to these fields. Lichtenstein et al. concluded from their study of identical twins that environmental factors are the initiating event in the majority of cancers.

On studying cancer trends in the 20th century, Hallberg and Johansson reported that there is a common environmental stress that accelerates several forms of cancer — colon cancer, lung cancer, breast cancer, bladder cancer and melanoma. From when electricity was first generated to the introduction of AM radio (1920s), radar (1940s), FM radio and TV (1950s), computers (1970s), mobile phones (1980s), and wireless technologies and compact fluorescent lighting (2000s), artificially created EMR is the most likely environmental stress.

Artificially created EMR may also be the underlying menace in the tobacco smoking and asbestos crises. Hallberg and Johansson reported that exposure to radio waves (artificially created EMR) appears to be as big a factor in causing lung cancer as cigarette smoking, and that deaths due to asbestosis were not known until after the 1960s despite the fact that asbestos had been used as a building material since the end of the 19th century.

We cannot afford to be unsuspecting recipients of this artificial electromagnetic radiation which has been newly introduced in such a short period of our history. Associate Professor Olle Johansson, of the Department of Neuroscience at the Karolinska Institute in Sweden, commented that today no one would consider having a radioactive wrist watch with glowing digits (as you could in the 1950s), having your children's shoes fitted in a strong X-ray machine (as you could in the 1940s), keeping radium in open trays on your desk (as scientists did in the 1930s) or X-raying each other at garden parties (as physicians did in the 1920s). These examples relate to ionising radiation; apart from nuclear fallout, we have a choice whether to expose ourselves to it or not.

Many different types of artificially created radiation have been woven into our daily lives. It is awareness that will bring understanding of the different types of radiation so we can make our own informed choices on what we are willing to be exposed to and what we must avoid. School teachers and principals alike must be educated on this most important health issue so that measures can be put into place to ensure that they and our children are not at risk in a dirty electrical environment, for dirty electricity has been found to be especially prevalent in environments with concentrated fluorescent lights and computers. Employers and employees alike must understand that their workplace must also be protected. People in their own homes must also protect themselves from modern equipment that also generates dirty electricity.

Finally, Dr Cedric Garland, the epidemiologist currently investigating the breast cancer cluster on the campus of the University of California, San Diego, is focusing on the possible role of EMFs, especially transients. Dr Garland advised that the female employees should be informed about tamoxifen research — that ELF EMFs have been found to partially block this drug's action in preventing breast cancer spreading or a recurrence of cancer—and recommended that those taking the drug should be transferred to a lower-current area if they so desired.

Transients cause cancer. Just as we filter our water to remove contaminants so we have cleaner water, now we must filter our electricity to remove this contaminant so we have cleaner electricity.

Posted by Zach Royer | April 5th, 2011 11:45 AM PST

Note: This article comprises edited extracts from Donna Fisher's two books, Silent Fields: The Growing
Cancer Cluster Story (chapters 3, 5, 6 and 9) and More Silent Fields: Cancer and the Dirty Electricity Plague (chapters 2, 4 and 8)

About the Author: Donna Fisher

Based in Brisbane, Queensland, Australia, Donna is the chair of Donna Fisher Silent Fields Inc., a non-profit organisation that is working towards the implementation of legislation against “dirty electricity” with the aim of protecting people in the workplace. Her model is now being incorporated across the globe, especially in the European Union. She is also CEO of the Donna Fisher Breast Health Initiative, which is committed to noninvasive technologies for prevention, detection and cure of breast cancer and supports eliminating the environmental causes of breast cancer with particular focus on chemicals and radiation.

Electromagnetic Fields and Chronic Lymphocytic Leukemia

Is there a real connection? There are studies and experts that will claim opposite truths.

I know that I come from a healthy background. My parents are alive and well and are currently 81 and 76. They are both the youngest siblings in their families, and they both have most of their older siblings. (One aunt died in her 50s of a stroke, another aunt died in her early 90s.) I had no (zero) bad health habits. I’ve always been more than a little health conscious, and I’ve always disliked risky behavior. I did, however, sleep and work in an environment well over any established “safe” levels of EMFs for over 20 years. My husband (knock on wood) is fine. He slept in the same room, but fortunately he left for work each morning while I, a writer, worked in an adjacent room (directly over the major circuit breaker box in the basement) with pretty much the same high levels of EMFs that existed in our bedroom.

Two Swedish studies cited in “Electromagnetic Fields” by B. Blake Levitt, found that (1) children exposed to 3mG or more had a four times higher than expected rate of leukemia; and (2) that men exposed to 3mG or more at work suffered three times the expected rate of chronic lymphocytic leukemia – the same exact leukemia I have! (“Electromagnetic Fields,” by Levitt, page 208)

I say this: the EMF levels in our home were high enough, at 3 to 6mG, to be a potent carcinogen and there are many studies to support that belief. (See Links) And as to why my husband is fine, there is a simple analogy. The EMFs are a carcinogen, as are cigarettes. Of the millions who smoke, not all are going to get lung cancer, thank goodness. However, we NEVER question the cause of lung cancer when a 20-year smoker is diagnosed, even if her mate (who also smoked) did not become ill. It’s a carcinogen. It CAN raise cancer. Unfortunately, in my case, it did.

About Lawyers: Just so you know, my son is a lawyer, so I’m not trying to malign everyone in this field. My son explained to me the difficulty with this issue is that it would be next to impossible to prove, in a court of law, that my CLL was caused exclusively by the high fields emanating from the power line behind our bedroom. It could be argued that I had exposure to other carcinogen. They (the power company) would point out that my husband is fine. It is because the utility companies are relatively safe from losing a bazillion in lawsuits from people like me that they are uninterested to do anything about this.