Lyme Disease Combat IV

Deseret Biologicals



THE CHRONIC LYME DISEASE SERIES

Jenna S./Smith

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"There are only two ways to live your life. One is as though there are no miracles. The other is as though everything is a miracle." Albert Einstein

Introduction

To understand the Deseret Biologicals protocol, you must first understand the theory behind homeopathic medicine and how this unusual protocol has come into existence.

However, before I delve into the technology, I want to introduce you to the company that has developed the protocol, Deseret Biologicals.

I have written this ebook with the premise that you or a loved one is suffering with Lyme disease. However, Deseret Biologicals has many other treatment series that are also very powerful and could be a great help to you or others you may know.

I spoke to the management at Deseret Biologicals to get permission to share the information in this ebook with the caveat that I emphasize that you are required to get a doctor to prescribe the products and to monitor the progress of the treatment.

For those who have suffered for many years, several treatments will most likely be required. And for those who have just recently been diagnosed, one treatment may be sufficient. Your Lyme doctor must supervise this treatment under any and every circumstance.

The good news is that the series treatments are very affordable!

If you personally have Lyme disease, perhaps you have tried other alternative treatments that haven't worked.

I know how you feel.

I know how it feels to suffer for many months before even getting a diagnosis, and then having to face the horrible possibility of chronic infection along with a myriad of possible treatment protocols, diets, lists of various vitamin supplements (that insurance doesn't cover) and the ultimate bombshell of being told you may never be rid of the disease.

When I was faced with these realities I wondered, "Are all these doctors guessing?"

The answer is, "Yes!"

Doctors are guessing based on what has worked for their other patients, and depending upon their diligence, what has worked for other Lyme specialists.

Now depending on the experience you have with your first Lyme specialist, and the access and/or ability you have to read the most recent books and medical reports about Lyme, you may have learned the worst of your situation very quickly, or over a long period of time:

The terrible truth is that currently there is no commercially available test to absolutely determine the presence of Lyme disease in humans, and there is no definitive way to completely rid the body of Lyme disease once it has become chronic.

So what can we do?

According to most Lyme-literate doctors, the answer depends on a wide variety of health factors that vary from one individual to the next (so it is very important to find the best in your area to work with through your treatment and recovery.)

For some who catch it quickly and treat it aggressively recovery may take mere months. However, for some it may take many years to recover to a semblance of normalcy. Today, antibiotics remain the most effective treatment for Lyme disease.

Even the respected herbalist Stephen Buhner agrees that the best hope for a meaningful recovery is appropriately prescribed antibiotics (combined with his protocol of course.)

This is very difficult to face for those who are unable to tolerate antibiotics due to allergies and/or sensitivities, or for those who are philosophically opposed to all manmade chemicals for healing.

And for those who can tolerate antibiotics, it is shocking and not just a little bit frightening to face the great quantities and various types of antibiotics that are required for treatment, and this is all in addition to nutritional supplements!

But there is an even greater problem lurking.

After 40 years of pushing antibiotics for any ailment, physicians are now confronting bacteria that have built defenses against those same drugs. Some infectious bacteria that were once treatable have become even stronger and sometimes even deadly.

The reappearance of highly infectious bacteria is caused in part by the overuse and misuse of antibiotics, but the resilience of bacteria also stems from the ingenious biochemistry of the microorganisms themselves. To survive, microorganisms and fungi mutate into resistant strains.

And Lyme disease is the master of mutation!

According to scientists, Lyme bacteria can mutate into other forms at will in a matter of seconds making it very difficult to eradicate; thus requiring several types of antibiotics.

Scientists have also learned that the species of Lyme can mutate into a completely different species within its host – making the number of species impossible to project –

in fact, according to scientists at Tulane University, there are different species for every organ in each person's body!

Accordingly, there are now increasingly different antibiotic "cocktails" that are selected based on primary infection, co-infection, probable strain and personal chemistry.

However, even those who have taken the prescribed "cocktail" - the massive amounts of antibiotics and the great length of time indicated (several years or more is not uncommon), and still the symptoms return.

I have personally used the Bartonella Series and found it to be extremely effective.

This book is for those who are eager to cure their disease "naturally" using homeopathic tonics. There are numerous patients who have found a complete cure following the Series protocol. Hopefully you will be added to that list!

Chapter One – Deseret Biologicals

Deseret Biologicals is a world leader in the delivery of Homeopathic, Herbal, Mineral and Enzyme Therapies through medical professionals. Homeopathy, an effective healing art that has been practiced for centuries, is the foundation of the Deseret line of products.

An increase in degenerative and resistant diseases has inspired a renewed interest in homeopathy. Practitioners quickly learn that the effectiveness of other healing arts including herbal, nutritional and manipulation are enhanced when combined with homeopathy. Homeopathics "turn on the energy key" allowing these modalities to be more effective.

Increased Vitality

Homeopathy differs from other approaches to disease. Rather than focusing on suppression of symptoms, homeopathic remedies work to increase human vitality, or life force, and promote the body's natural defenses. Herbal remedies work synergistically with homeopathic treatments to provide nutritional building blocks that increase the effectiveness of other treatment methods, such as chiropractic.

Balanced Energy and Core Wellness

Homeopathy works by addressing the energetic realities of health and healing, helping to bring the body into balance and promoting wellness at the core. Deseret Biologicals is dedicated to providing superior formulations and products manufactured according to the highest standards. Our products have been praised by healthcare practitioners worldwide for their unsurpassed effectiveness.

Two Decades of Service

Deseret Biologicals began operations in 1987 with a commitment to provide the best solutions in energetic health. Today, we serve customers throughout North and South America, Europe, Asia, Australia and the Middle East. We regularly update our unique product line to ensure that our customers have access to the latest advances in energetic medicine. Our organization is large enough to satisfy a global need, yet small enough to deliver efficient and personalized service and results.

The majority of products from Deseret Biologicals are in liquid form to be taken sublinqually. These homeopathics and herbs are in a de-mineralized water base **with 25% Ethanol, which is distilled from sorghum**.

Unless the products is pill, powder, capsule or gel it is in this base liquid unless stated otherwise in the description. Sorghum is used in the same way as barley to produce a "malt" that can form the basis of a mash that will brew a beer without gliadin or hordein (together "gluten") and therefore can be suitable for celiacs or others sensitive to certain glycoproteins. However, Deseret Biologicals also provides most liquid products in a waterbase .

Series Therapy Method (not available in waterbase.)

The **Series Therapy Method** uses homeopathic nosodes or isodes that range from high potency to low in a kit of vials numbered 1 through 10. Each vial is administered singly every three days for one month. Series Therapy is touted by clinicians for its ability to resolve deep, chronic disease states.

For Lyme disease and co-infections, Series Therapy have proven to be very effective. The vials are numbered to avoid mistaken doses. The patient begins with the lowest numbered vial and continues to the highest (1-10) over the course of the treatment. The vial is emptied under the tongue, and then held there for one minute before swallowing.

If symptoms persist or recur, consult your health practitioner. Symptoms often become acute about the second or third dose or later. This aggravation is quite common and patients should be advised to expect this and use Drainage Remedies.

It is recommended to continue Series Therapy until completion for best results. If testing determines additional series are in order, reverse the administration of successive kits (10-1, 1-10...). Series Therapy products are also available in a 1 oz. solutions to use following a Series Therapy Kit.

For severe cases it may become necessary to repeat the series many times from 1 - 10, from 10 - 1 and then from 1 - 10 again. The Lyme literate doctor will be able to determine if this is necessary.

Chapter Two – Homeopathic Medicine

Homeopathy is a form of alternative medicine first expounded by Samuel Hahnemann in 1796 that treats a disease with heavily diluted preparations created from substances that would ordinarily cause effects similar to the disease's symptoms.

These substances are serially diluted, with shaking between each step, under the belief that this increases the effect of the treatment. This dilution is usually quite extensive, and often continues until no molecules of the original substance are likely to remain.

As well as the symptoms of the disease, homeopaths may use aspects of the patient's physical and psychological state to select between treatments. Homeopathic reference books known as repertories are then consulted, and a remedy selected based on the index of symptoms.

Homeopathic remedies are generally considered safe, with rare exceptions. However, homeopaths have been criticized for putting patients at risk with advice to avoid conventional medicine, such as vaccinations, anti-malarial drugs, and antibiotics. In many countries, the laws that govern the regulation and testing of conventional drugs do not apply to homeopathic remedies.

Claims of homeopathy's efficacy beyond the placebo effect are unsupported by the collective weight of scientific and clinical evidence. Specific pharmacological effect with no active molecules is scientifically implausible and violates fundamental principles of

science, including the law of mass action. Supporters claim a few high-quality studies support the efficacy of homeopathy; however, the studies they point to are not definitive and have not been replicated, several high-quality studies exist showing no evidence for any effect from homeopathy, and studies of homeopathic remedies have generally been shown to have problems that prevent them from being considered unambiguous evidence for homeopathy's efficacy. The lack of convincing scientific evidence supporting homeopathy's efficacy and its use of remedies lacking active ingredients have caused homeopathy to be described as pseudoscience and quackery.

Like vaccination, homeopathy involves inoculation by challenge with a like toxin, inducing a mild reaction in the body by simulating the larger reaction constituting the disease. Homeopathic remedies consist of minute doses of natural substances -mineral, plant or animal -- that if given to healthy people in larger doses would cause the symptoms the patient is experiencing. A nosode is a homeopathic remedy in which the "active" ingredient is diseased tissue or a disease-causing entity (virus, bacteria, parasite, etc.) that has been rendered sterile.

Where vaccination involves viral or bacterial macromolecules that can induce unwanted side effects, homeopathic remedies are without side effects because they are extremely dilute --- at some strengths so dilute that no molecule of the original substance is likely to be left in solution. The remedies are repeatedly diluted and "succussed", or shaken vigorously with each dilution, to increase their vibratory field. The remedies work by stimulating the body's own healing energy, rather like a tuning fork that sets disharmonious chords back on track. "Like cures like," the principle on which homeopathy is based, actually originated long before vaccines. It was formulated by Paracelsus in the sixteenth century. Samuel Christian Hahnemann, M.D. (1755-1843), the German physician who founded homeopathy, reformulated the principle in 1795, a year before Jenner made his cowpox vaccine discovery premised on the same theory.

Dr. Hahnemann was the first practitioner to use remedies prophylactically. He found that a girl whom he had treated with homeopathic *Belladonna* for an unrelated problem did not develop scarlet fever when the rest of her family got it. Then he found that "provings" of homeopathic *Belladonna* fit the disease picture of that particular epidemic of scarlet fever, and that by administering *Belladonna* he could both prevent and cure the disease. Other homeopaths later found that the remedy *Ailanthus* could prevent scarlet fever. *Lathyrus* was found to work against polio, *Mercurius Cyanthus* against diphtheria, *Baptisia* against typhoid fever. Other remedies were found to be effective against measles, mumps, chicken pox, hepatitis, and so forth.¹

Homeopathy became the rage in Europe after cholera swept the Continent early in the nineteenth century. Hahnemann advocated the use of homeopathic *Camphor* to prevent or treat that disease at a time when he had never seen it but had only heard descriptions of its symptoms. The treatment proved to be remarkably successful. According to Julian Winston, editor in chief of <u>Homeopathy Today</u>, the mortality rate for cholera under conventional treatment in the 1830s was reported at between 40 percent and 80 percent. The mortality rate in London's ten homeopathic hospitals during that decade was reported at 9 percent; in Bavaria, at 7 percent; in Russia, at 10 percent; and in Austria, at 33 percent (compared to 66 percent under conventional care).²

Cholera also swept the U.S. at that time, along with yellow fever, typhoid, and scarlet fever. When homeopathic treatment proved to be far more successful than conventional medicine in treating those epidemics, homeopathy spread like wildfire across the American continent. In 1844, the American Institute of Homeopathy was founded as the first national American medical society, preceding the American Medical Association (AMA) by several years.

Meanwhile, evidence for the effectiveness of homeopathic nosodes kept accumulating. In the United States during the 1850s, there were several epidemics of yellow fever in the southern states. Mortality from yellow fever using conventional medicine was reported at between 15 and 85 percent. Holcome and Davis, homeopaths in Natchez, reported a mortality of 6.43 percent and 5.73 percent, respectively, in yellow fever victims under homeopathic care during that period. In 1878 the mortality from the same epidemic in New Orleans was 50 percent under allopathic care versus 5.6 percent in 1,945 cases under homeopathic care. In the 1860s, a diphtheria epidemic struck. In the records of Broome County, New York, from 1862 to 1864, an 83.6 percent mortality rate was reported among victims treated conventionally, compared to a 16.4 percent mortality rate among those treated homeopathically.

It could be argued that the disparity in these figures was due more to the nature of nineteenth century conventional treatment, with its emphasis on bloodletting and mercury compounds, than to the virtues of homeopathy itself.

But homeopathy continued to score successes in the twentieth century. Its remarkable performance during the influenza epidemic of 1918 was reported in detail in

an article in the May 1921 <u>Journal of the American Institute for Homeopathy</u>. Dr. T. A. McCann, of Dayton, Ohio, reported that 24,000 cases of flu treated allopathically had a mortality rate of 28.2 percent, while 26,000 cases of flu treated homeopathically had a mortality rate of 1.05 percent.

The latter figure was supported by Dean W.A. Pearson of Philadelphia, who recorded the results of 26,795 cases of flu treated homeopathically. In Connecticut, 30 physicians reported 6,602 cases treated homeopathically with 55 deaths, or less than 1 percent.

Nosodes also performed well in a number of twentieth century polio epidemics. In a 1956-58 study, a researcher named Heisfelder gave Lathyrus to over 6,000 children, in whom no cases of polio and no side effects were reported.

Grimmer, a homeopath in Chicago, gave it to 5,000 young children, none of whom developed polio. In a polio epidemic in Buenos Aires in 1975, Lathyrus was given to 40,000 people with the same 100 percent success rate.

Chapter Three – Lyme Series

To give you an idea of the complexity of Deseret Biological's Series Therapy, here is a list of the ingredients in the specific series treatment for the relief of the symptoms of Lyme Disease.

Ingredients:

- NOSODES:
- MENINGOCOCCUS 8, 12, 30, 200X
- MENINGOCOCCUS 6, 10, 15, 60, 100X
- ENCEPHALITIS VIRUS 8, 12, 30, 200X
- ENCEPHALITIS VIRUS 6, 10, 15, 60, 100X
- HEPATITIS VIRUS TYPE B 8, 12, 30, 200X
- HEPATITIS VIRUS TYPE B 6, 10, 15, 60, 100X
- BORRELIA BURGDORFERI 8, 12, 30, 200X
- BORRELIA BURGDORFERI 6, 10, 15, 60, 100X
- BABESIA MICROTI 12, 30, 200X
- EHRLICHIA 12, 30, 200X
- LEDUM PALUSTRE 30X
- IRIDIUM METALLICUM 12X Anemia, bronchitis, cramps, numbress and exhaustion.
- ADRENALINUM 8X Stimulates and supports the Adrenal glands.

- COCCULUS INDICUS 12X Vertigo, nausea, headache, painful eyes, vomiting, metallic taste, motion sickness, distended abdomen, dyspnea, feeling of choking, inducing cough, sore back, trembling limbs, spasmodic yawning, chilliness.
- LYCOPODIUM CLAVATUM 12X Poor digestion, poor circulation, bloated, liver problems, dysfunctional bile duct and gallbladder problems.
- PHOSPHORUS 12X Remedy for affections of the parenchyma, damage to the liver, bronchopneumonia, laryngitis with hoarseness.
- ARSENICUM ALBUM 12X Anxiety, asthma, fevers, restlessness.
- RHUS TOXICODENDRON 12X Restlessness, sensitive scalp, headache, orbital cellulitis, coryza, facial neuralgia, sore gums, tongue red and cracked, swollen glands, nausea, vertigo, colic, and diarrhea.
- THYMUS 8X Stimulation and support of the Thymus.
- THYROIDINUM 8X Muscle weakness, sweating, headache, tingling sensations, cravings for sweets, goiter, excessive obesity, nocturnal enuresis faintness, nausea, hypothyroidism, cold extremities, low blood pressure chilliness, cold sensitivity.
- ECHINACEA ANGUSTIFOLIA 3X Discharges, debility, emaciation, blood poisoning, ulcerated throat, sour belching, heartburn, nausea, aching limbs, recurring boils, enlarged lymph nodes.
- HYDRASTIS CANADENSIS 3X Soothes the mucous membranes that line the GI tract. Promotes circulation through the spleen where blood is filtered and

immune stimulating substances are added to blood. Has toning effect on liver, intestines & kidneys.

- PHYTOLACCA DECANDRA 3X Lymphatic drainage, vertigo, scaly scalp, coryza, breathing difficulties, skin problems, swollen glands, rheumatic pains, hot throat.
- PROPOLIS 3X A natural antibiotic, stimulates immune system.
- MYRRHA 3X Asthma, bronchitis, constipation, sore throat.
- TRIGONELLA 3X Expels toxic waste, reduces fever, anti bacterial.
- ARNICA MONTANA 3X Violent spasmodic cough, back pain, headache, bronchitis.
- ARNICA MONTANA 3X Drainage and support remedy for liver function.
- CALENDULA OFFICINALIS 3X Healing agent, fever, jaundice.
- TRIFOLIUM PRATENSE 3X Confusion, headache, memory loss, increased saliva, sore throat, hoarseness, coryza, hay fever, spasmodic cough, stiff neck, tingling in palms, cold extremities.
- URTICA DIOICA 3X Sore throat, rheumatism, spleen disorders.
- GUN POWDER 8X Blood cleanser.

Chapter Four - Bartonella Series

The Bartonella infection is often found as a co-infection with Lyme Disease. This Series Therapy may be used in conjunction with Borrelia Remedy.

The most common disease resulting from Bartonella infection is Cat Scratch Fever or Cat-scratch disease. Symptoms include sterile suppurative papules, slight fever, headache, chills, backache, abdominal pain, malaise, alteration of mental status, and convulsions.

It may take 7 days to two months for Bartonella symptoms appear. Most cases are benign and self-limiting, but lymphadenopathy may persist for several months after other symptoms disappear. The prognosis is generally favorable within one month. Most cases occur in fall and winter in temperate climates.

In immune-compromised patients more severe complications sometimes occur. Bartonella infection has also been linked to Bacillary angiomatosis, Bacillary peliosis, Endocarditis, Bacteremia with fever, Carrion's disease, Myocarditis, Neuroretinitis and Trench Fever. Homeless IV drug users are at increased infection risk.

Transmission and Host Sources: Transmitters are blood-sucking arthropods including ticks, fleas and body louse. Reservoir hosts are mammals such as domesticated cats, mice, squirrels, rats and dogs.

Bartonella Infection Cycle: Immediately after infection, the bacteria colonize a primary niche, the endothelial cells. Every 5 days a part of the Bartonella in the endothelial cells are released in the blood stream where they infect erythrocytes.

The bacteria then invade and replicate inside the erythrocytes where they multiply to a certain density, and where the erythrocyte is still functioning properly. At this point, the Bartonella simply wait to be taken with the erythrocytes by a blood-sucking arthropod.

Bartonella and Lyme Disease Co-infection; Physicians first reported in 2001 that patients were co-infected with Bartonella and Lyme Disease. Multiple reports of this finding indicate that Bartonella is a tick-transmitted pathogen. Therefore, Lyme patients should be tested for Bartonella co-infection and treated accordingly. It is important to remember, in treating these conditions homeopathically, to include Drainage Remedies and Smart Silver as part of a successful therapy.

Ingredients: BARTONELLA (7 STRAINS); one vial of each of the following dilutions (all in X): 200, 100, 60, 30, 15, 12, 10, 8, 6, 5.

Indications: Cat Scratch Fever or Cat-scratch disease. Symptoms include sterile suppurative papules, slight fever, headache, chills, backache, abdominal pain, malaise, alteration of mental status, and convulsions.

Chapter Five – Erlichia Series

In the last decades of the 20th century, several tick-borne diseases have been recognized in the United States, including babesiosis, Lyme disease, and **ehrlichiosis**.

Ehrlichiosis is caused by several bacterial species in the genus Ehrlichia (pronounced err-lick-ee-uh) which have been recognized since 1935. Over several decades, veterinary pathogens that caused disease in dogs, cattle, sheep, goats, and horses were identified. Currently, three species of Ehrlichia in the United States and one in Japan are known to cause disease in humans; others could be recognized in the future as methods of detection improve.

In recent years, Ehrlichia has emerged as a significant and sometimes lifethreatening pathogen. Two forms have been reported. One form is **human monocytic ehrlichosis (HME)** and the other human **granulocytic ehrlichiosis (HGE)**. Severity ranges from subclinical to fatal.

Clinical features are generally the same. The onset of symptoms generally occur approximately one week to one month following exposure which is generally tick related. Characteristically symptoms include an abrupt onset of fever, headache, myalgia and chills. On other occasions nausea, vomiting, diarrhea, abdominal pain, cough and confusion occur. A rash has been observed in about 30 percent of patients and may be more common in children. Such rashes might not develop until several days into the illness and are usually short lived. Ehrlichia ewingii is the most recently recognized human pathogen. Disease caused by E. ewingii has been limited to a few patients in Missouri, Oklahoma, and Tennessee, most of whom have had underlying immune-suppression.

Ingredients:

EHRLICIA 12x, 30x, 200x

Indications: Symptoms are often confused with generalized flu symptoms such as a fever, severe headache, muscle aches and chills and shaking.

Chapter Six – Combo Series

Conventional treatment has proven largely ineffective in treating the pain and fatigue associated with **Lyme Disease**. Most patients are misdiagnosed at least once before being diagnosed with Lyme disease, and to make matters worse they are often labeled as a hypochondriac or *"It's all in their head"*.

The cause, **Borrelia burgdorferi** is a spiral-shaped bacterium similar in shape and appearance to the spirochete which causes Syphilis, is transferred to the host from a tick bite or other means. It is often accompanied by the **Babesia** microti parasite, **Bartonella** and the **Ehrlichia** bacteria which play havoc with the immune systems. Lyme patients generally display a particular set of symptoms that have been defined into three progressive stages:

Stage I Symptoms: Early infection - one to four weeks

60 to 90% of Borrelia burgdorferi infections cause a "bulls-eye" rash around the area where the tick bite occurred. This rash can appear from one to four weeks following the bite. The rash is called an erythema chronicum migrans (ECM). Such a rash is usually a sure sign of Lyme Disease. Because the rash is not associated with pain, itching or other discomfort it is easily ignored. Other flu-like symptoms can be more pronounced, such as chills, fever, recurrent headaches, or fatigue, joint and muscle pains, loss of appetite

Stage II: Intermediate infection - one to four months

Several weeks or months following the tick bite 5 to 10 percent of those infected with Borrelia may experience transient heart dysfunction. Such symptoms can exist undetected by the patient, but are apparent to a physician under close observation. These heart irregularities usually persist for a week to ten days and then disappear. In addition, neurological abnormalities may begin to show. These include headaches, profound fatigue, Meningitis, cranial nerve problems (neuropathies) including facial palsies. Sensory and motor nerve problems have also been observed.

Stage III Symptoms: Late persistent infections

If Lyme Disease is not treated promptly following infection there is a strong danger that severe "arthritic" symptoms will develop. These manifestations will relate to the joints, nerves, skin and brain.

Ingredients: One vial of each of the following dilutions (all in X): 200, 100, 60, 30, 15, 12, 10, 8, 6, 5. Also available in 1M and 10M dilutions in boxes of ten. Includes the following:

BORRELIA: a genus of small flexible spirochetes of the family Spirochaetaceae that are parasites of humans and warm-blooded animals and is the causative agents of Lyme Disease. (B. burgdorferi).

BABESIA: any of the sporozoans of the genus Babesia or sometimes the family Babesiidae that are parasitic in mammalian red blood cells (as in Texas fever) and are transmited by the bite of a tick – called also piroplasm. **EHRLICHIA**: a genus of gram-negative nonmotile rickettsial bacteria that are intracellular parasites infecting the cytoplasm of reticuloendothelial cells and circulating leukocytes but not erythrocytes.

Indications: Lyme Disease, Chronic Fatigue Syndrome, arthritis. fibromyalgia, lymphatic problems, meningitis, retinal hemorrhage.

Chapter Seven – Mycoplasma Infections

For years those in the CFS/FMS/MCS community have been watching the reports of Gulf War Illness (GWI) knowing, instinctively, that we all had something in common. Not only do we all have common symptoms, but we may also be infected with common pathogenic organisms. That pathogen is a Mycoplasma.

Various pathogenic strains have been identified including the fermentans (incognitus), penetrans, genitalium, hominis, and pneumoniae. And, we may be infected with several of these strains at one time. Following is a simple overview of the information I have gathered about this Mycoplasma pathogen and how it affects us.

The information trail started with Garth and Nancy Nicolson. Their daughter returned from the Gulf War with an unexplained illness. She was unable to continue her studies at college, and moved back home. Soon after, her parents both became ill with the same symptoms.

Medical tests revealed nothing abnormal, but they all continued to worsen. Fortunately for them, however, the Nicolson's were molecular pathologists with an entire research laboratory at their disposal. The Nicolson's drew blood and tissue samples from themselves and their daughter, and set the research team, to work.

Garth Nicolson Ph.D. is a professor and former chairman of the Department of Tumor Biology at the University of Texas, M.D. Anderson Cancer Center, Houston, TX. He is also a professor of Internal Medicine, Pathology and Laboratory Medicine at the

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University of Texas Medical School. He has published over 500 scientific and medical papers, has edited 14 books, he is the current editor of two scientific and medical journals. Dr. Nicolson has been nominated for the Nobel Prize in cell microbiology, is among the 100 most cited researchers in the world, and sits on the board of the American Association of Cancer Research. Nancy Nicolson, Ph.D. is president of the Rhodon Foundation for Biomedical Research. She, also, has published numerous scientific papers and was a professor in the Department of Immunology and Microbiology at Baylor College of Medicine.

What they found was a living Mycoplasma pathogen.

In order to find this organism, they had to break open the leukocytes (white blood cells), and perform a specific test called a Polymerase Chain Reaction (PCR) of the DNA of the organism. Nancy also perfected another test, called Gene Tracking, which confirms the PCR results.

To gather more information, they then started testing other Gulf War Illness (GWI) patients. *What they found was that approximately 50% were positive for the live organism!*

The Nicolson's then researched treatment options and found a number of antibiotics that were effective against the organism. After a lengthy course of antibiotics, they recovered. But, the word was out, and requests for testing of GWI patients kept coming in to the lab. They were inundated! As their evidence mounted, they published their data and testified before the President's Panel on Gulf War Illnesses.

Then the connection was made by the government of the similarities between GWI and CFIDS. By this time, the Nicolson's lab was already running tests of those with CFIDS---with the same results-- approximately 50% positive!

Garth and Nancy Nicolson even wrote an article for the CFIDS Chronicle outlining the diagnosis and treatment of GWI/CFIDS.

But, the politics of medicine and research slowed the gears of progress. Garth and Nancy had to relocate their non-profit lab (The Institute for Molecular Medicine), first to Irvine, CA, then to Huntington Beach, CA. They have had difficulty finding funding for the Mycoplasma research. For their research to continue with CFIDS testing, they need a new grant. In the meantime, they have formed a non-profit organization and take tax deductible donations. Presently, one can become a "Friend of the Institute" and have the various tests done at The Institute for Molecular Biology lab, as well as, participate in the research (see Mycoplasma Resource List for full instructions).

They only recently opened a private laboratory, International Molecular Diagnostics, that can run a variety of tests and does third-party billing of insurance for part of the cost of the tests.

Those of us who have tested positive and have begun treatment with the antibiotics recommended by the Nicolson's have had tremendous success. Some of these people

have been ill with CFS/FMS/MCS for 15-20 years. But, they are feeling better for the first time since becoming ill!

Some have even returned to work. Many have completed several months of antibiotics, and several have been taking them continuously for 4-5 years. Since most of us in the CFS/FMS/MCS community have been ill with this organism for a lot longer than the GWI patients do, it may take longer to successfully treat the infection.

Mycoplasmas are the smallest and simplest organism known.

They are not new. They were discovered over 100 years ago and evolved from bacteria. The "garden variety" mycoplasma is not usually associated with severe diseases.

However, sometime over the past 30 years, the organism has been altered to become more lethal. The Mycoplasmas found by the Nicolson's, in their lab, contain unusual gene sequences that were probably inserted into the Mycoplasma by a specific laboratory procedure. *This discovery has led them to conclude that the new forms of mycoplasma were specifically engineered for germ warfare!*

In it's laboratory evolution, the Mycoplasmas have became more invasive, more difficult to find, and capable of causing severe diseases in humans. Diseases, like Gulf War Illness, CFS, FMS, MCS, Rheumatoid Arthritis, Lyme Disease and AIDS, for instance.

The earlier form of Mycoplasma was studied by Dr. Shyh Lo, formerly of Tanox Biosystems, a spin-off biotechnology company from the Baylor College of Medicine, but now affiliated with the Armed Forces Institute of Pathology in Washington D.C. Dr. Lo has been credited with discovering the new pathogenic form of Mycoplasmas, and he currently holds several patents on methods for special handling of the organisms for study and development.

In one of his patents (in 1991), Dr. Lo lists the following diseases that are caused by Mycoplasma: HIV infection, AIDS, Aids Related Complex (ARC), Chronic Fatigue Syndrome, Wegener's Disease, Sarcoidosis, Respiratory Distress Syndrome, Kibuchi's Disease, Alzheimer's Disease, and Lupus.

In addition, Baseman and Tully have reviewed the literature on the role of Mycoplasmal infections in human disease and have concluded that they are important factors or co-factors in a variety of chronic illnesses.

Unlike bacteria, the Mycoplasma has no cell wall. This enables it to invade tissue cells, incorporating the cell's nutrients, and using the cell to replicate itself (much like a retrovirus). When the Mycoplasma breaks out of the cell, it takes a piece of the host cell membrane with it. When the immune system attacks the Mycoplasma, it also gets "turned on" to attacking the host cell.

In this way, an autoimmune condition can begin.

Autoimmune conditions associated with Mycoplasmas include arthritis, Fibromyalgia, myositis, thyroid dysfunction (Hashimoto's or Grave's Diseases), and adrenal dysfunction, signs and symptoms of Lupus, Multiple Sclerosis, Lyme, and Lou Gehrig's Disease.

The Mycoplasma organism has the capacity to invade cells, tissues and blood, producing systemic infections in numerous organ systems. According to Dr. Nicholson, it can penetrate the central and peripheral nervous system. Because it has the ability to damage the immune system by invading the natural killer cells (NK cells) of the lymphocytes, it weakens them, reduces their numbers, and renders them susceptible to viral infections, such as Human Herpes Virus 6 (HHV6), HHV7 or HHV8. It may also explain some of the environmentally sensitive responses that are seen with CFIDS and MCS.

Mycoplasma infection can trigger inflammatory cytokine over-production that is commonly seen in CFS/FMS. With the induction of CD-4+ helper cells of the immune system, an over production of cytokines such as Interleukin-1, Interleukin-6 and Tumor Necrosis Factor-alpha occurs. These elevated cytokines have been implicated in the development of many of the CFS/FMS symptoms, including neurological involvement. They can have specific or nonspecific stimulatory or suppressive effects on lymphocytes, as measured by B and T cell activation.

In addition, the Mycoplasma infection has immune-modulating effects, activating the hypothalamic-pituitary-adrenal axis. This can cause a cascade of limbic system symptoms characteristic of CFS/FMS. (19)

The Mycoplasma is a slow-growing, stealth-type organism that can cause the patient to be very ill. It activates the immune system, then can successfully hide from it within the host immune cells. It can then circulate throughout the body and go wherever a white blood cell can go. It can cause infection deep within any or all organs. It can even cross the blood/brain barrier and cause brain and spinal infection. It has also been known to cross the placental barrier to an unborn fetus.

Unless the white blood cell is split open and examined for the evidence of the live organism, it can go undetected for years. Because the organism resides deep within the cells, conventional antibody tests may be relatively useless. The splitting open (fraction) of leukocytes (white blood cells) from a fresh blood sample, with a forensic PCR test is the most accurate way to detect the presence of active infection with a live pathogen. Further gene-tracking techniques perfected by the Nicolson's are even more accurate.

Although the researchers have not clearly established how contagious the Mycoplasmas are, they have made some inferences from the data they have collected.

The Mycoplasma organism has been found in the blood and body fluids, spinal fluid, bone marrow, urine, and in the lungs, nose and mouth. The Mycoplasma is reported to be able to survive for two hours outside the body.

Of those with Gulf War Illness, 50% of their spouses have contracted the disease and 100% of their children. Several babies have also been known to be born with the disease. Some sort of chemical exposure or immune distress (i.e., auto accident, surgery, cancer) appears to pre-date the onset of illness.

Of those with CFS, FMS, and MCS, numerous friends and spouses have the illness, as well as close relatives. So, from the anecdotal reports, it would appear that Mycoplasma is contagious after both casual and intimate contact. This means that the organism may possibly be passed to another through sputum (coughing droplets that contain the organism), saliva, sexual secretions, blood, and urine. The disease is also developing in family pets.

If one tests positive for any of the Mycoplasmas, in order to safeguard those with whom you have close contact, it would be prudent to do the following: Wash your hands a lot, never share your food or drink with another, wash eating utensils with extremely hot water, keep your hands away from your face, avoid closed-air spaces where air is re-circulated (i.e., offices, airplanes), and use protective sexual practices.

Chapter Eight – Systemic Drainage

Systemic Drainage is for a whole body strengthening/drainage starting point. If in doubt, always start with this formula. Note - there are no flower essences or lithotherapy ingredients in this formula since this formula is not site (organ) specific. The ingredients Intestine, Kidney, Liver, Lymph and Lung are from bovine sources from the U.S. and are certified free of any disease.

Indications: Provides systemic stimulation and regulation of excretory pathways.

Dosage: Use one full dropper three times daily or as needed to assist acute and chronic cases requiring detoxification or desensitization.

Ingredients:

- CITRUS LIMONEN 1X Assists normalize pH and is deodorizing.
- AVENA SATIVUM 1X A nervous tonic for exhaustive states.
- ALFALFA 1X Rebuilds and regenerates vital energy, an excellent source of trace minerals and acts as a diuretic to eliminate excessive water retention.
- GLYCYRRHIZA GLABRA 1X Nourishes the adrenal glands by providing energy.
- UVA URSI 1X Excessive mucous elimination and acts upon the kidney and bladder.

- TARAXACUM OFFICINALE 2X Acts to detoxify the biliary and hepatic systems.
- GALLIUM APARINE 3X Lymphatic and skin cleanser, astringent.
- SCHISANDRA CHINENSIS 3X Assists in the regulation of the liver and invigorates the system by action on the adrenals.
- LOBELIA INFLATA 3X Diuretic, expectorant and lymphatic cleanser, assists to regulate pH.
- TYLOPHORA ASTHMATICA 3X Anti-inflammatory and anti-asthmatic, cleanses lymphatics
- SOLIDAGO VIRGAUREA 3X Weakness, congestive disorders, kidneys, lungs.
- MAGNESIUM GLUCONATE 3X Krebs cycle and other enzyme pathways, used in fluid retention, parasites, and assists WBC formation.
- KALI GLUCONICUM 3X Influences electrolyte balance, water retention, nerve function.
- ZINCUM GLUCONICUM 3X Promotes immune and skin health, adrenal insufficiency.
- CHELIDONIUM MAJUS 6X Used for proper biliary and liver health.
- NUX VOMICA 6X Constipation, liver stasis, hemorrhoids, skin health.
- BERBERIS VULGARIS 6X Nervous system, venous system, digestive system, kidneys, loss of appetite.
- INTESTINE 6X Rebuilds and promotes normal function of this excretory organ.

- KIDNEY 6X Rebuilds and promotes normal function of this excretory and cleansing organ.
- HEPAR SUIS 6X Rebuilds and promotes normal function of this excretory and cleansing organ.
- LUNG 6X Rebuilds and promotes normal function of this excretory organ.
- LYMPH 6X Rebuilds and promotes normal function of this excretory and cleansing organ.
- SARCOLACTICUM ACIDUM 8X Tiredness, restlessness, prostration, nausea.
- LACTICUM ACIDUM 12X Muscular ache, excessive acid in system.

Chapter Nine – Silver Solution

A great deal of misinformation exists on the use of silver products causing one's skin to turn blue or gray. Only the extreme misuse of very strong silver solutions has caused this condition which is known as Argyria.

The extreme misuse of any substance can cause harm or even death to a person. If a child were to eat a bottle of children's vitamins, the child would most likely suffer serious side effects. In contrast, if a child were to accidentally drink an entire eight ounce bottle of American Biotech Labs' 10 ppm silver product, he or she would suffer no ill effects at all.

As numerous problems with the use of prescription antibiotics have arisen, people searching for a safe solution, have resurrected the use of silver products as an antibiotic alternative. However, some people using and selling the silver products have made false claims with no data back-up.

Often times claims came only from anecdotal evidence. Because of the nonexistence of test data, these products were and are shunned by many health professionals. It is also unfortunate that most health professionals have no real knowledge of silver. This lack of knowledge may cause them to relay incorrect information to patients. As with any new technology, the medical community seems to be pitifully slow at grasping the new concepts. It is interesting to note that there are 83 silver products currently registered and in use by the medical industry. We, as consumers, are finally being warned that antibiotics are overused and now becoming ineffective.

All evidence from many independent laboratories indicates that silver is a viable, safe antibiotic alternative. However, many doctors dismiss this option by continuing the myth that the use of silver will cause the patient to turn blue or can cause toxic build-up.

Argyria is a non-toxic condition caused by the extreme misuse of very strong silver products. When huge amounts of silver are consumed over time and the body is unable to excrete the silver through both the urine and the fecal tracts the body may slough off the excess silver into the skin cells to get rid of it. This condition is known as argyria. Argyria has no known side effects except that it causes a graying of the skin color. The condition is only cosmetic in nature. In most cases the discoloration is permanent.

Argyria has never been reported with the use of low part-per-million, non-salt related silver products. In fact, because so many silver products are being used nationwide, the US EPA issued a RFD or (daily intake limit) level of silver that could be safely consumed every day for a person's entire life.

The US Federal Register listed the silver products that cause argyria as silver salts, including; silver nitrate, silver arsphenamine, silver chloride and possibly silver iodide. These products were sold until about 1975 under various labels consisting of silver solutions ranging from 5-30% silver [50,000-300,000 ppm (parts per million) of silver] (Federal Register, FDA-21CFR Part 310, pg. 53685). In comparison American Biotech Labs silver supplement products are only 10 ppm and 22 ppm. American Biotech Labs' EPA approved hospital/home surface disinfectant is only 32 ppm. Silver Salts have been mistakenly called colloidal silver products by some misguided individuals. By definition, the word colloidal means a system in which particles larger than molecules in size (in this case retaining their metallic identity) of one substance are suspended throughout the second substance. In the case of American Biotech Labs' silver product, finite particles of metallic silver are suspended within highly purified water. Silver salts readily dissolve in water, and therefore are not colloidal in nature.

American Biotech Labs' silver products have been proven to kill bacteria at levels of between 2.5-5 ppm. Some silver products range between 50,000-300,000 ppm. Thus, American Biotech Labs' products are effective with concentrations of 20,000 - 60,000 times less silver in the solution. Better technology which produces a more useful (bacteria lethal) product would seem to be the difference. One can easily conclude that because American Biotech Labs' silver solution effectively kills bacteria using thousands of times less silver, the risk of any possible side effects has been eliminated.

Hill and Pillsbury (1939) stated, "the ordinary clinical use of colloidal silver compounds practically never gives rise to any gross untoward effect other than argyria." The minimum amount of silver known to cause argyria in adults, from the use of any silver compound (including salts) is 900 mg of silver taken orally in one year. In order to reach this level of silver intake, an individual would have to consume 380-8 oz. bottles of American Biotech Labs'10 PPM silver product within one year. Suggested adult dosage is about ½ to 1 teaspoon taken one to three times daily. This means that an individual would have to consume over 50 times the normal adult dosage, every day for a year to reach the lowest level ever known to cause argyria. It should be noted that EPA standards for the amount of silver that can be safely consumed in drinking water is

.005 milligrams per kilogram of weight per day (EPA RED document page 2, 4th paragraph). This means that a normal sized adult could safely consume one ounce (6 tsp) of the 10 PPM American Biotech Labs silver product every day for a 72 year life span and still be within the safe limits as defined by the EPA. In the EPA RED document for silver, the EPA goes on to state (3rd page, 4th paragraph), "The EPA does not anticipate that dietary exposure to these low levels of silver will be associated with any significant degree of risk."

American Biotech Labs has had five independent toxicity tests completed on its 10 and 22 PPM silver products. The American Biotech Labs product was tested in animals at as much as 200 times the normal adult dosage, or the equivalent of an adult consuming 32 full ounces of the 10 ppm product at one sitting. In conclusion to the animal tests, the independent medical testing laboratory stated that the ASAP Solution® [Smart Silver] was found to be completely non-toxic to the test animals. The product was also tested for cytotoxicity in both human epithelial cells and also African green monkey or Vero cells, at both the regular 10 ppm level and also at the extra-strength 22 ppm level. In all four cytotoxicity tests the Amreican Biotech Labs' products were found completely non-toxic to both the human and Vero cells.

According to the EPA IRIS Report on silver (Integrated Risk Information Systems) (5th page, 1st paragraph) it states that a number of tests were completed to test the absorption and retention of ingested silver in a number of animals (including primates). In conclusion, the test work indicated that between 90-99% of ingested silver was excreted on the second day after ingestion and greater than 99% was excreted in less than a week. In other words, almost all the ingested silver was out of the body in only two days, which indicates that silver does not build up in the system when consumed in small amounts.

Many different silver products have been and are still being used throughout the medical industry. Up until the advent of chemical antibiotics which came about in the 1940's, some very strong silver products were being used as antibiotics. Of the millions of people who used these concentrated silver products, there were no reported deaths and only 239 reported cases of generalized Argyria (EPA Report ECAO-CIN-026 Jan "91" Pg. VI-3). In that same EPA report on page VI-4 it states that Gaul and Staud (1935) suggested 8 grams of silver arsphenamine (used by injection at 145,000 ppm strength) as a safe total dose. They also noted that other authors suggest safe total doses of 12-15 grams, based on clinical experience.

The work of Furchner et al (1968) as stated above showed that small amounts of silver did not build up in the system of primates. But, for arguments sake, if we assumed that every bit of ingested silver was retained by the body, and that a person was using the American Biotech Labs 10 ppm silver solution at a level of two teaspoons daily, we can state that it would take an individual 235.66 years of daily usage at two teaspoons to achieve the total consumption of 8 grams (a level they deemed safe).

Chapter Ten – Antibiotics and Smart Silver

Prescription antibiotic usage, unlike silver, can be very dangerous and in numerous cases can cause death. In an article in JAMA (Journal of the American Medical Association) in December of the year 2000, Barbra Starfield estimated that there were *106,000 deaths yearly*, that were caused by the use of antibiotics used correctly. This number does not include deaths from antibiotic which were used or prescribed incorrectly. There were no reported deaths or injuries in the year 2000 from the medicinal use of silver products.

There is no comparison on the issue of safety between silver products and prescription antibiotics. Silver is obviously much safer to use. According to the EPA, who is in charge of defining safe levels of any mineral in water used for ingestion or drinking, the oral consumption of small amounts of silver in water on a daily basis poses no significant degree of risk. Unless an individual were constantly consuming (every day for over a year) over 50 times the recommended daily dosage of the American Biotech Labs' product at 10 ppm, there is no possibility of that individual contracting the nontoxic condition known as argyria.

The recent increase in the incidence of infections due to bacterial resistance to antibiotics has been recognized as an alarming problem, especially in the hospital environment with probability of cross-infection. Smart Silver, hereinafter called "Silver–Water Dispersion[™]", as an antibacterial is claimed to have no bacterial resistance.

Nineteen antibiotics were checked in combination with Silver–Water Dispersion solution[™] against seven microbial organisms for synergism.

First, minimal inhibitory concentrations were determined for the individual antibiotics and Silver–Water–Dispersion[™] solution individually. Those combinations of individual antibiotics with Silver–Water–Dispersion[™] that displayed synergism were further evaluated through the checkerboard method. Synergistic activity of Silver–Water– Dispersion[™] solution in combination with nineteen antibiotics was tested against seven bacterial strains, except where an organism was known to be resistant to the antibiotic. Out of 96 tests, five were synergistic, 89 additive, and two antagonistic.

Serious infections, particularly antibiotic resistant, often result in therapeutic failure when treated with seemingly appropriate single drug antibiotic regimens, despite readily achievable minimum inhibitory concentrations (MICs). The mutations responsible for antibiotic resistance in bacteria do not arise as a result of the 'need' of the organism. Futuyma 1 has noted that: '... The adaptive needs of the species do not increase the likelihood that an adaptive mutation will occur; mutations are not directed towards the adaptive need of the moment. . . .' Mutations have causes, but the species need to adapt isn't one of them'. Alternatives must therefore be sought to overcome infections carrying highly resistant strains.

Silver–Water–Dispersion[™] solution has been shown as an effective antibiotic against many Methicillin-resistant *Staphylococcus aureus* (MRSA) and multiple drug-resistant (MDR) strains (*Escherichia coli*, *Pseudomonas aeruginosa*). As high level acquired resistance to conventional antibiotics is frequent, it seems reasonable to use combination therapy in order to achieve bactericidal synergism.

Active silver solutions have shown marked activity against proven bacterial-resistant strains. Hence, a range of antibiotics were tested with Silver–Water–Dispersion[™] solution to determine antagonism, additive and synergistic effects against a panel of microbial strains.

Many a times, antibiotics may cause symptoms in patients to temporarily disappear and yet the antibiotics may leave behind a host of resistant organisms in the system. These resistant organisms reappear at a later date straining the immune system.

Appendix A - The Jarisch-Herxheimer Reaction

A Jarisch-Herxheimer reaction or "herx" as it is commonly called is a predictable and temporary "flare-up" or worsening of symptoms caused by the die-off of certain bacteria.

This condition was discovered and named after the German dermatologist, Karl Herxheimer (1844-1947), and originally observed in syphilis patients.

Although both Lyme disease and Syphilis come from Spirochete bacteria, their structure is quite different.

Dorlands Medical Dictionary refers to the Herxheimer reaction as a transient, short-term, immunological reaction commonly seen following antibiotic treatment of early and later stage [infectious] diseases which [may be] manifested by fever, chills, headache, myalgias (muscle pain), and exacerbations of cutaneous lesions. The reaction has been attributed to liberation of endotoxins-like substances or of antigens (a substance which causes an immune reaction) from the killed or dying micro-organisms.

Unlike Syphilis, Lyme causes multiple Herxheimer reactions, and can be physically and emotionally devastating.

Some have a reaction within days of effective treatment; while for others, it may take longer. Generally, the longer it takes for a reaction to occur after beginning treatment, the more disseminated the disease is.

These brutal flare-ups can last between two days and two weeks, but there are some who report much longer reactions when treating their disease aggressively (some will try several therapies at the same time with the hope of attacking the disease more effectively).

"You have to get worse, before you can get better!" is a grim consolatory phrase passed back and forth in chat rooms and community forums amongst sufferers on the internet.

But the roller-coaster of pain often threatens recovering patients to greater relapse, as we grasp for the energy to deal with both physical and emotional symptoms.

"It's just so hard to deal with worsening symptoms after months or years of illness." complains one long-time Lyme patient.

The good news is that science clearly shows "herxing" means that treatment is working. The dying spirochetes emit a neurotoxin that floods the body from every active location, and over-stimulate the already weakened immune system. So in general, the greater the bacteriaload, the greater the reaction will be.

Many Lyme-literate doctors recommend <u>"Smilax"</u>, an herb that effectively binds the neurotoxins, and passes them out of the body. Epsom salt baths are also soothing; although very hot baths will also aggravate symptoms, as the spirochetes are threatened by heat.

Appendix B – **Detoxification**

Lyme-literate doctors agree that killing infectious bacteria is but one part of the process of healing from Lyme disease (and co-infections). Detoxification is equally important to rid the body of parasites and other elements in our bodies that harbor the disease.

Detoxification can also be tricky depending on each person's disease, immune system, allergies and many other contributing factors.

Mercury poisoning is a growing health problem that interferes with the evaluation and treatment of Lyme. The best way to rid the body of heavy metals is regular use of the FAR Infared sauna, but there are some other products that greatly help.

Here is a list of the very best products I have found to help your body detoxify:

- Heavy metal detox
- Far infared sauna
- <u>Liver detox</u>
- <u>Smilax</u>
- Detox foot patches
- Dental detox
- Parasite detox
- <u>Chemical detox</u>
- Psyllium cleanse blend

- <u>Intestinal nano detox</u>
- Xeno detox

Remember, our bodies have a wonderful detoxification system built in, so drink lots of spring water, distilled water or ionized water to help move waste out of your body.

Investing in a water purifier and ionizer would ensure the crucial purity needed in the vast amounts of water that are required to properly hydrate your body. Ionizing and oxygenating the water adds a combat component very simply – Lyme and many other diseases, viruses and parasites cannot tolerate oxygen.

Water for Life has the highest quality machines available at extremely reasonable prices. <u>Visit Water for Life here.</u>

Appendix C -Coffee Enema

Why coffee?

The purpose of this enema is to cleanse your liver and assist your body to rid itself of toxins. The caffeine is absorbed through your portal vein and dilates your bile ducts which effectively "flush" the bile out of the ducts. All of the blood in your body circulates through the liver every 3 minutes, so this enema will help cleanse your whole body. It is especially good for people suffering with Lyme disease as the spirochetes like to "hide" in the bile.

Full Strength:

8 oz (1 cup) of organic coffee, and 8 oz of distilled water.

Gentler Enema:

4 oz of organic coffee, 4 oz of chamomile tea, and 8 oz of distilled water.

Instructions:

Mix ingredients together making sure that the liquid is warm, but not too hot (test a drop on the inside of your wrist.) Fill the enema bag and hang it nearby. Place a large towel near the bag and set a timer and a jar of Vaseline next to the towel. It helps to have soothing music playing during the enema to help you relax. Lay down on the towel – you must be on your RIGHT side for the entire enema. Coat the insertion tube with plenty of Vaseline and slowly release the fluid. (I find it easier to use a very small amount, wait 2 minutes and then release it into the toilet to clear out the colon, and then proceed to the full treatment) Use the clamp to monitor the pressure and flow, slowly fill your colon with about 10 oz of fluid. Don't fill beyond your capacity to hold it in. It is better to use less for longer, than more for shorter. Set the timer for 15 minutes and try to relax. If you feel comfortable, you can add slightly more, likewise if you feel the pressure is unbearable, just stay on your side as long as you can (even 10 minutes is good.) You may find that it becomes easier as you practice.

This enema can be taken up to 4 times per day, five days per week depending upon pain and symptoms. I find it helpful even once a week.

Make sure to drink 8 oz of distilled water afterwards.

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DISCLAIMER

Don't proceed with any treatment protocol without the full support of your Lyme disease specialist and/or your primary care physician. If you don't have one, please find one as soon as possible.

It is vitally important that you find and work with a Lyme disease specialist who can:

- Try different treatment protocols, and monitor which works best;
- Support you through potentially severe Herxheimer reactions (that means your treatment is working);
- Manage various symptoms that persist during treatment;
- Evaluate whether parasites or co-infections are complicating your disease;
- *Help you keep your sanity with emotional comfort and support;*
- Present the most promising of emerging treatment protocols;
- Monitor and protect the healthy function of your primary organs through recovery;

*

• Provide appropriate diet, exercise and supplements for total recovery.

The author of this book is not a medical specialist or a doctor, and is writing this information from research and personal experience.

NOTE: I apologize from the bottom of my heart for any spelling or grammatical errors – they are all mine.