



LIBRARY RESOURCES

Expanded Instructions For Experimental/Theoretical Blood Electrification Hypothetical Protocols For Experimental Sessions

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Expanded Instructions For Experimental/Theoretical Blood Electrification Hypothetical Protocols For Experimental Sessions

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PRECAUTIONS: Do NOT use wrist-to-wrist with subjects using cardiac pacemakers. Any electrical signals may interfere with “demand” type heart pacers and cause malfunction. Single wrist/forearm locations should be acceptable. Do NOT use on pregnant women, while driving or using hazardous machinery.

Users **MUST** avoid ingesting anything containing potentially toxic medications, nicotine, alcohol, recreational drugs, laxatives, garlic, etc., and potentially toxic vitamins or herbs for several days before starting because blood electrification can cause electroporation which makes cell membranes pervious to small quantities of normally harmless chemicals in plasma. The effect is the same as extreme overdosing which might be lethal. See *Electroporation: a General Phenomenon for Manipulating Cells and Tissues* J.C. Weaver, *Journal of Cellular Biochemistry* 51: 426-435 (1993.) Both the magnetic pulser and blood purifier can cause electroporation. Avoid ingesting alcohol 24 hours before using.

Do NOT place electrodes over skin lesions, abrasions, new scars, cuts, eruptions, or sunburn. Do NOT advance output amplitude to uncomfortable levels. All subjects will vary. Never put bare metal on skin. The magnetic pulser should be safe to use anywhere on body or head.

Drink an 8 oz. glass of filtered or preferably ozonated water 15 minutes before and immediately following each session and drink at least four additional glasses daily for flushing during “neutralisation” and for one week thereafter. This is imperative. Ignoring this can cause systemic damage from unflushed toxic wastes. When absolutely essential drugs must be ingested, do so a few minutes after electrification then wait 24 hours before next session.

If subject feels sluggish, faint, dizzy, itchy, headachy, light-headed or giddy, nauseous, bloated or has flu-like symptoms or rashes after exposures, reduce pulsing per session and/or shorten applications of electrification. Drink more water- preferably ozonised-to speed waste oxidation and disposal. Use extreme caution when treating patients with impaired kidney or liver function. Start slowly at first like about 20 minutes per day to reduce detoxification problems. To avoid shock liability, use only batteries with blood cleaner. Do NOT use any line-connected power supply, etc. with blood electrification device. However a.c. supplies are OK with well-insulated magnetic pulse generators (strobe lights.) Health professionals: Avoid nicotine addicts, and other unconsciously motivated death-wishers and their covert agendas of “defeat the healer.” Tobacco, the most damaging (4 1/2 times more addictive than heroin) and deadly substance of abuse known, disrupts normal cardiovascular function. True vegetarian diets are missing several essential amino acids absolutely necessary for the successful rebuilding of AIDS-ravaged tissues. Secondary gains and hidden agendas (sympathy/martyrdom, work avoidance, free benefits, financial assistance, etc.) can play large roles with many AIDS patients. “Recovery guilt” as friends are dying has precipitated suicide attempts masked as “accidents.” Avoid such entanglements, since many have unconscious death wishes.

SUPERIOR ELECTRODES: Excellent, convenient and vastly superior electrodes, reusable indefinitely, can be user- made by butt-soldering connecting wires to ends of 1-1/8” long by 3/32” dia. blanks cut from type 316 stainless steel rods available from welding supply stores (Cameron Welding Supply, 11061 Dale Ave., Stanton, CA 90680.) Use “Stay Clean” flux before soldering (zinc chloride/hydrochloric acid.) Shrink-insulate TWO tight telescoping layers of 3/8” long shrink tubing over soldered joints to prevent

flexing/breaking and lead/copper ions from migrating.

PREPARATION FOR USE: Wrap three or four turns of 100% cotton flannel around rods. Spiral-wrap with strong thread starting from wire side to end. Tightly pinch cloth over rod's end so as to leave no metal exposed by wrapping 6 or 7 turns of thread TIGHTLY just off end of rod, then spiral wrap back to start and tie with four knots then cut off excess cloth at end close to pinch-wraps. Treat end and knots with Fray Check® (fabric & sewing supply stores) to prevent ravelling. Saturate before each use in a solution of sea salt (not table salt). Add a few drops of Colloidal Silver for disinfectant. Store for reuse. Tape soaking wet electrodes tightly over arterial pulse sites with paper masking, Transpore™ or Micropore® tape or make 1" wide stretch elastic bands with tabs of Velcro® at ends to fasten. Electrodes should closely conform precisely along Blood vessels, not skewing ever so slightly over to adjacent flesh. This insures better electrical conductivity paths to circulating blood and insures very low skin impedance. (~2000 Rinse and blot-dry electrodes and skin after each use. NEVER allow bare metal to touch skin as this will cause burns manifested as small red craters that heal slowly. The objective is to get maximum current into blood vessels, not leak it over to adjacent tissue. Therefore never use any electrode with cotton cover wider than about 1/8 inch.

ELECTRODE PLACEMENTS: Locate blood vessel paths (NOT to be confused with acupuncture, Chapman or pressure points) on either wrist (Ulnar to Radial) or else wrist to forearm by feeling for maximum pulses. Scrub skin over chosen sites with mild soap and water. Position each electrode lengthwise precisely along same branch of Radial artery. A 7" long, 1" wide elastic stretch-band with two 1-1/4" lengths of 3/4" wide Velcro® sewn to ends of opposite sides makes an excellent wrist band for holding electrode snugly in place. Place wet electrodes between ulnar and radial pulse points on opposite sides on inside of same wrist. Then with electrode cable unplugged, turn switch ON and advance amplitude control to maximum. On original blood electrifier design, push momentary SW 2 "test" switch and see that the red and green light emitting diodes flash alternately. This verifies that polarity is reversing ~4 times per second (frequency in NOT critical) and that batteries are still good. When LED's don't light, replace all three 9V alkaline batteries. When the white incandescent bulb dims or appears yellowish, or relay isn't clicking, replace all four AA cells. Zener diodes will extinguish LED's when the three 9V battery's initial 27V drops below ~20V after extended use. Never use any electrode larger than 1-1/8" long by 1/8" wide to avoid dissipating current through surrounding tissue. Confine exactly over blood vessels. Apply drops of salt water to each electrode's cotton cover as needed to keep cotton covers damp and insure optimum current flow. Later devices are solid-state, use only one battery and no relays, and are much smaller. Electrify blood 2 hours daily for 4 weeks or longer as indicated. (See diagram on next page.)

SETTING VOLTAGE: Now rotate amplitude control to minimum (counter-clockwise) and plug in electrode cable. Advance dial slowly until feeling a "thumping" and tingling. Turn as high as tolerable but don't advance amplitude to where it is uncomfortable. Adjust voltage periodically when acclimating to comfort level after several minutes. It is normal to feel different sensations with time. You may notice little or no sensation at full amplitude immediately, but feeling will begin building up to maximum after several minutes at which time amplitude must be decreased. Typical adapted electrode-to-electrode tissue impedance is on the order of 2000 Typical comfortable input (to skin) is ~3 mA, and maximum tolerable input (full amplitude) is ~7mA. However, this "reserve" margin although harmless is unnecessary and can be uncomfortable. Current flowing through blood is much lower than this external input because of series resistances through skin, tissue and blood vessel walls, but 50 to 100 through blood is essential.

FREQUENCY OF USE: Apply blood electrifier for about two hours daily for at least 1 month. Use judgment

here. The limiting factor is detoxification. Carefully monitor subject's reactions (discomfort, catarrh, skin eruptions, weeping exudites, rashes, boils, carbuncles, coated tongue, etc.) With very heavy infections, go slower so as not to overload body's toxic disposal capability. Drinking ozone-bubbled water oxidises wastes and speeds detoxification. With circulation- impaired diabetics, etc., you may wish to extend session times. Again, have subjects drink lots of water. Recent changes in theoretical protocol being currently tested suggest continuing the protocol for several weeks. One health practitioner with extensive use of both the blood electrification and magnetic pulsing devices reported to Sharing Health From the Heart Inc. to suggest prolonged use to ensure the stronger pathogens have been neutralised. He points out the danger of stopping too soon if only the weaker pathogens have been dealt with. He has suggested building up to using the blood electrification device for 6 days continuously to neutralise the longest lived pathogens. Remember to re-moisten electrodes regularly. If you absolutely must ingest prescription drugs, do so immediately after turning off instrument and allow 24 hours before next treatment to let chemical concentrations in blood plasma decay to lower levels.

Remember, if subjects ever feel sleepy, sluggish, listless, nauseous, faint, bloated or headachy, or have flu-like reactions, they may be neglecting sufficient water intake for adequately flushing toxins. We interpret this as detoxification plus endorphin release due to electrification. Let them rest and stabilise for ~45 minutes before driving if indicated. If this detoxing becomes oppressive, treat every second day. Treatments are shown to safely neutralise viruses, fungi, bacteria, parasites and microbes in blood.

See US patents #5,188,738, 5,091,152, 5,139,684, 5,328,451, 3,753,886, 4,524,079, 4,665,898 and others as well as numerous valid medical studies which are presently little known or suppressed. SILVER COLLOID: Also, ingesting a few oz. of ~5 parts per million silver colloid/silver ion solution daily can give subjects a "second intact immune system" and minimise or eliminate opportunistic infections during recovery phase. This miracle substance is pre-1938 technology, and unlike ozone is considered immune from FDA harassment. Silver colloid can easily be made at home electrolytically in minutes and in any desired quantities and parts per million strength for under 1 cent per gallon plus cost of water. It is ridiculous to purchase it for high prices. Unlike silver proteins, metallic colloid has no side effects, and is known to rapidly eliminate or prevent hundreds of diseases. Silver colloids won't produce drug resistant strains as will all other known antibiotics. No reasonable amount can overdose or injure users either topically, by ingestion, or professional medical injection. Refer to page 25 for complete instructions on successfully making your own.