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A Proposed Experimental/Theoretical Non-Invasive, Non-Pharmaceutical, In Vivo Method for Possible Neutralisation of Pathogens in Human Subjects

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A Proposed Experimental/Theoretical Non-Invasive, Non-Pharmaceutical, In Vivo Method for Possible Neutralisation of Pathogens in Human Subjects

In a remarkable and startling discovery at Albert Einstein College of Medicine, NYC in 1990, it was shown that a minute current (50-100 microamperes) can alter outer protein layers of HIV virus in a petri dish so as to prevent its later attachment to receptor sites. (Science News. March 30, 1991 pg. 207.) It may also reverse Epstein-Barr (chronic fatigue syndrome), hepatitis, Lupus, cancer and many others. ***This is reminiscent of a well proven cure for snakebite by application of electric current that instantly neutralises the venom's toxicity.*** (Lancet, July 26, 1986 pg. 229.) And there may be several other diseases as yet undiscovered or untested viruses neutralisable with this discovery; perhaps more surprisingly, even the common cold.

This very simple and valid blood clearing treatment proved of great promise as a positive method for immobilising known strains of HIV still present and contaminating some European and US blood bank reserve supplies. It was further suggested that infected human HIV carriers *could be cured* by removing their blood, treating it electrically and returning it by methods similar to dialysis or by surgically implanting electrode arrays with miniature batteries sewn inside blood vessels as described in US patent #5,188,738. Dr. S. Kaali, MD, projected that "years of testing will be in order before such an *in vitro* (blood removed for treatment) device can be made ready for widespread use." (Longevity, Dec. 1992, pg. 14.) This paper reveals an alternate do-it- yourself approach for electrifying/purifying blood *with no dialysis, implants, or medical intervention.*

In the writer's opinion both blood and lymph can be cleared *in vivo* (which means blood isn't removed or skin ever penetrated) simply, rapidly and inexpensively with similar but *non-invasive do-it- yourself* techniques. Included are proven schematics, parts lists, electrode construction and complete instructions. Electronic and controlled electroporation approaches may easily make vaccines, antibiotics and pharmaceuticals obsolete.

In a public lecture (Oct. 19, 1991) the writer proposed this theoretical do-it-yourself method for eliminating HIV, parasites, fungi, viral and pathogens *in vivo*. Subsequently, his original modalities and protocols have been refined, simplified and made universally affordable. These three simple treatments used in tandem are offered for research purposes to determine the extent to which they nullify known electrosensitive pathogens residing in blood, lymph, and other body tissue and fluids. Following is a summary of several years of testing with this non- iatrogenic, do-it-yourself, simple and inexpensive experimental solution to the ever-escalating "incurables" dilemma. ***There are no known side effects since milliampere currents applied to skin are much lower than those in FDA approved TENS, CES and muscle stimulators which have been in safe daily use for many years.*** Battery replacement costs are about $10.00 per month per user or about 33 cents per day for a typical 30 day "spontaneous remission." No pharmaceuticals, shots, or medications appear necessary.

One compact battery-powered blood clearing instrument is basically a miniature relay driven by a timer

chip set to ~4 Hertz. Its 0 to 27V user adjustable biphasic output minimises electrode site irritation. The described system delivers stimulation through *normally circulating blood* via electrodes placed at selected sites where the subjects' blood vessels are accessibly close to the surface. Optimum electrode positions are reliably located by feeling for strongest pulse (pg. 18.) Micro- current treatment is of such low amplitude that it creates no discomfort when used as directed and is demonstrated to have no harmful side effects on healthy blood cells or tissue.

A major obstacle to this simple, proven and obvious solution is disbelief. Treating approximately 120 minutes per day for four or six weeks should in the writer's opinion effectively neutralise well over 95% of HIV plus any other electrosensitive viruses, parasites, bacteria, pathogens or fungi in blood. In heavy infections, shorter application times will prevent stressing patients with toxins. Simply treat for a greater number of days. In time, the restored immune system plus silver colloid may handle residual problems. In the special case of diabetically impaired circulation longer treatment times may be indicated. Immobilised viruses may be expelled naturally through kidneys and liver. More rapid neutralisation is possible but ***not*** recommended because of potential excessive toxin elimination (Herxheimer's syndrome.) T-cell counts usually drop initially because of lysing and scavenging by macrophages but should recover and increase after a few months. The PCR has not proven reliable as a measurement for HIV.

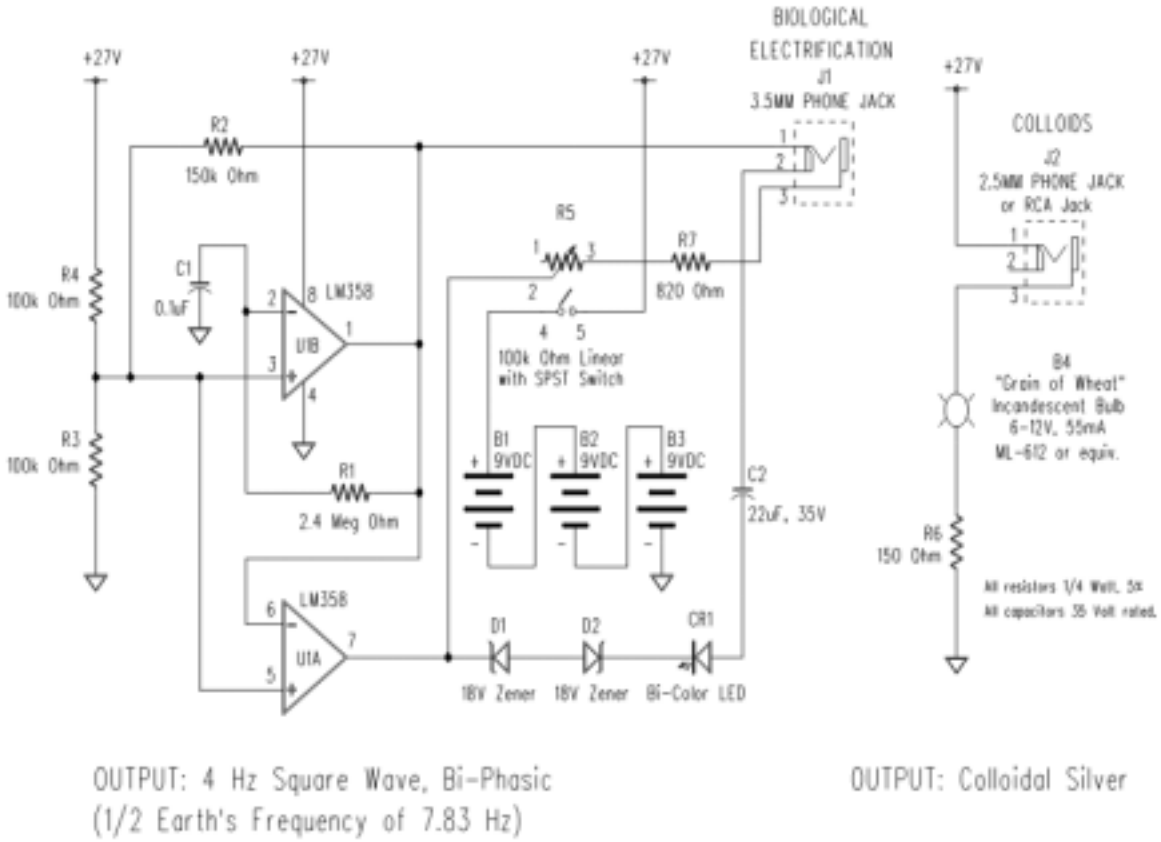
But subjects must assume responsibility for their own health-a "heresy" in today's society conditioned to look for answers only to a medical establishment that has no current knowledge remotely promising cures" for numerous other well known fatal diseases.

These "theoretical solutions" are being disclosed under constitutional freedom of speech guarantees in spite of extensively organised hostile opposition to non-pharmaceutical or *inexpensive* modalities. ***Data is offered only as theoretical and no medical claims are made or implied.*** "See your health professional!" Anyone at his discretion and assumed responsibility should be free to build, use (on himself) and network his "research" results. With these data an average intelligent high school student should confidently be able to assemble both theoretical blood and tissue clearing modalities in about three hours. Components are widely available. After assembling, the only additional cost is for batteries. If electronically unskilled, "busy" or technically illiterate, call an "Amateur Radio Supply" store (yellow pages) and find a ham radio operator, hobbyist or TV repairman or pay any kid on the block to do it for you. After "spontaneous remissions" some users may wish to interest their doctors. But be advised that electronic cures may be vigorously suppressed or ignored because there is presently no credibility nor drug cartel profit in this inexpensive solution. Also the 1910 Rockefeller- Flexner Report attempted to discredit electro-medicine with a conspiracy to inflate pharmaceutical profits.

This was independently developed by, Bob Beck, at his private expense and offered freely for "theoretical, informational, and educational purposes only" and with absolutely no profit motive.

The blood electrifier and ionic silver colloid maker are usually combined in one small plastic box typically 3 3/4 X 2 1/4 X 1 inch (cigarette pack size) containing one outlet for wrist electrodes and a second for colloid making. A single 9V transistor radio battery drives a voltage tripler, and a single-IC-chip switches the 27V

from negative to positive 3.92 times each second**. A biphasic square wave with sharp rise-time output is fed to a 3.5 mm jack connecting to two 3/32" stainless steel or gold-plated electrodes 1" long each covered with two layers of 100% cotton flannel saturated with diluted salt water. A potentiometer allows users to adjust output until comfortable. Red and green LED's show polarity reversal (essential for safe blood electrification) and overall system functioning. A grain-of-wheat lamp indicates current flow when making ionic colloid. Precise electrode locations are determined by carefully feeling arterial pulse points on opposite insides of same wrist and positioning saturated electrodes precisely along the paths where arteries come closest to surface. Locations are critical, since the objective is to supply maximal current into blood and not waste it in surrounding flesh. Typical impedance measured from electrode-to-electrode may be as low as 2000 Ω. Adjust output for strongest comfortable level. Schematics, parts lists and instructions for a three 9 V battery design are detailed in this paper. Anyone can build his own system; you need nothing except replacement batteries. However commercially available systems are inexpensive, reliable, and are useable immediately.



IMPROVED SCHEMATIC

This 11/24/1996 page describes a “Plant Growth Stimulator” improved since my 1991 design. User-tested for over two years, it is solid state (no relays), uses three (not seven) batteries, makes colloids, is much smaller, lighter, silent, with battery saving features, and is available as a mostly-assembled kit complete with electrodes and silver for about $100 from Action Electronics, 1300 E. Edinger Ave., Santa Ana, CA 92705.

The first section (UIB) of the LM358 dual op-amp is a 50 volt peak-to-peak square wave oscillator. The second section (U IA) reverses polarity and provides ±27V DC output of low impedance. This delivers a Bi-Phasic, sharp rise-time output of ~4 Hz (not critical) for the biological cotton-covered stainless-steel electrodes saturated with salt water before applying. Sharp rise-time is considered necessary to provide higher odd harmonics to the stimulus, although “rounded” waveforms will feel different.

The third section is a current-limited 27V DC output from a separate RCA (or 2.5mm) jack for rapid generation of excellent colloidal silver in water. A three minute cycle in 8 Oz. of room-temperature water makes a ~3 ppm concentration.

Op-amp section UlB's 4 Hz oscillator frequency is set by Cl (0.1 uF) and Rl (2.4 meg Ω). It is configured as a comparator with hysteresis determined by R2 (150 kΩ). Charging and discharging of Cl is done by the 1800 out-of-phase signal through R1. R3 and R4 provide a set-point 1/2 the V+ to the comparator. This insures a 50% duty cycle square wave with an amplitude of slightly less than the ~27V supply.

UIA, the second comparator, is used to invert the output of oscillator U1B. A ~50V peak-to-peak signal will be generated between the op-amps due to their outputs being 1800 out-of-phase. UlA `s current is limited by potentiometer RS (100 kΩ) and R7 (820 Ω) and is set to individual user's comfort.

The power indicator circuit consists of a bicolor (red-green) LED (CR1) and the series combination of two 18V Zener diodes, Dl & D2, with power limited . This section of the device is automatically disabled when the 3.5 mm plug is inserted into it's jack. Therefore the LEDs flash only when batteries sum is over ~21 V. If LEDs are dim or extinguished, replace with three fresh 9 Volt Alkaline batteries. C2 used as a limiter allows the LED to flicker on at 1/8 second intervals only as the square wave output reverses polarity.