

Specific environmental toxins in relation to the syndromes asthma, Parkinson's and diabetes

Alan E. Baklayan, Naturopath, Munich

Dear colleagues,

Once I succeeded in getting T-lymphocytes, both CD 8 and CD 14 T-lymphocytes, into ampoules as starting material, various opportunities presented themselves. The first was to test the activity of T-lymphocytes or the lack of activity of lymphocytes and the progress of this activity using BICOM's amplification technology. The second possibility was to test specifically which immune blockages impede T-lymphocytes, which also play a significant role in the cancerous process, and to treat them.

T-lymphocytes

1

1. test specific activity of T-lymphocytes
2. test and treat immune blockages

I actually managed to isolate a few environmental toxins which evidently play a crucial role. These are bleaching agents in particular. This means any bleach and also the agents used in drinking water and in sewage treatment plants to disinfect water. The second is benzene and benzopyrene, in other words benzene derivatives. The third contaminant is ball bearing grease, only slight traces of which admittedly come into households via mains water but which accumulates because the body has incredible difficulty in eliminating it. The next is PCB, polychlorinated biphenyl, a flame-proofing, insulating and coating material which was also used in old electrical equipment (see box 2, top right). And finally a long list of colorants such as tartrazine, fast violet, fast red, fast blue BB base etc. Please refer to the complete list at the end of this paper.

T-lymphocytes and reticulo-endothelial system impeded by

2

bleaching agents	benzopyrene
colorants	ball bearing grease
PCB	benzene

Careful elimination of these environmental toxins from the furthest depths of the body leads to a steady increase in T-lymphocyte activity to the point where they begin once more to consume viruses and tumorous tissue, a fact we can demonstrate through testing. I did this for a two-week period with a group of 8 cancer patients taking daily readings and eliminating toxins. I observed that, with intensive elimination, at the precise moment when the body became free of these environmental toxins (in some patients these even had to be eliminated from the bone marrow), the activity of both T-lymphocytes and also of the RES (reticulo-endothelial system) had returned to 100 %. Only after that did the cells really begin to resume their work on the immune system. The details of this procedure will be included in this year's cancer seminar which I am presenting through Regumed.

To accompany this treatment we always also gave patients large doses of energised Bitterstern, up to 20 drops 3 times daily, as well as a special detoxifying agent called *Burbur detox* and special MSM capsules. In some cases also vitamin B2 in large doses. Incidentally, this regime can also be used as a supportive measure with all those with deficient immune systems, even AIDS patients.

Detoxifying agents

3

- Energised Bitterstern
- Burbur detox 5 drops, 3 times
- MSM 1 capsule, 3 times
- Vit B2 1 x 300 mg capsule daily

The T-lymphocytes were also given three antioxidants as “food” each day. These three were Vitamin C (Dr. Lange’s *Super C*, a natural vitamin C) half a teaspoon 3 times daily, hydrangea powder, half a teaspoon 3 times daily. This contains organic germanium, an essential trace element for white blood cells and 2 to 5 selenium capsules. We have Dr. Clark to thank for this information. She discovered that, as soon as white blood cells are deficient in one of these three elements, they can no longer continue their work and, like in a goods station where the goods are stacked on wagons and are no longer being unloaded, they are simply shunted aside together with their load and the whole detoxification process comes to a halt. Naturally we were able to identify and apply these findings about the major immune blockages in the following therapies which I shall now present to you.

T-lymphocytes “nutrition”

4

- | | |
|------------------|-----------------------------|
| Super C | ½ teaspoon, 3 times daily |
| Hydrangea powder | ½ teaspoon, 3 times daily |
| Selenium | 1-2 capsules, 3 times daily |

BRONCHIAL ASTHMA

In the past, asthma has generally been treated as follows.

First parasitic infestation was considered, ostensibly *Ascaris lumbricoides* and especially *Ascaris* larvae and eggs. Quite often these are accompanied by other forms of parasitic infestation, above all *Paragonimus* (lung fluke), *Clonorchis sinensis* (sheep liver fluke), *Fasciola hepatica* (liver fluke) and *Pneumocystis carinii*. These are just the most important which occur repeatedly here.

Asthma and parasitic infestation

5

- *Ascaris lumbricoides* + *Ascaris* larvae + eggs
- *Paragonimus*
- *Clonorchis sinensis*
- *Fasciola hepatica*
- *Pneumocystis carinii*

The second step was to test and treat the food allergies, especially cow’s milk of course. With severe and with elderly asthmatics it is vital to also check the masked food allergies, i. e. wheat, hen’s eggs, lactic acid, yeast and *Saccharum album*, i. e. sugar, to name just the main ones.

Most common masked food allergies

6

- Cow’s milk
- wheat
- Hen’s eggs
- lactic acid
- yeast
- *Saccharum album* (sugar)

As you know, and as I explained in my paper *Which previously unheeded factor plays an outstanding part in cow’s milk allergy?*, published in RTI Volume 25, April 2001, cow’s milk allergy and *Ascaris* are connected with *Geotrichum candidum*, lacteal mould. In summary, *Geotrichum candidum* must be tested and carefully treated (testing all amplifications) both as an allergen and an infestation, as it can be both.

Testing and treating *Geotrichum candidum*

7

1. Allergy
Geotrichum candidum in input cup
 + basic food ampoule
 Allergy programs 998 / 997
2. Infestation
Geotrichum candidum
 Program 191 / 197

Moreover, it should be borne in mind that *Ascaris* is associated with mycobacterial infestation. *Mycobacterium smegmatis* and *Mycobacterium bovinum*, in particular, very often test here. (These frequently cause night sweats!)

Synergistic testing

8

- Ascaris lumbricoides* in input cup
 Program 191 / 197
- Test for
- *Mycobacteria*
 - *Mycobacterium smegmatis*
 - *M. bovinum*

The next thing to note is that moulds stimulate allergisation, especially the *Aspergillus* genera and also aflatoxins. These must not only be treated as before as an infestation but also as an allergen. As you know, we also make a distinction here between infection with mould and allergy to mould. A person can be allergic and display an allergic reaction every time they make contact with the spores without carrying a manifest infection and of course one can also have both.

<u>Asthma allergy</u>	9
1. <u>Allergy:</u>	
Aspergillus	Program 998 / 997
Aflatoxins	
+ basic food ampoule	
2. <u>Infestation:</u>	
Aspergillus	Program 191 / 197
Aflatoxins	

Furthermore, yeast fungal stress generally completes the picture. The fact is that asthmatics also often suffer from hay fever and here stress from yeast fungus and mould is of vital significance.

Test yeast fungal stress both for allergy and for infestation.	10
<u>Allergy:</u>	
Candida genera	Program 998 / 997
+ basic food ampoule	
<u>Infestation:</u>	
Candida genera	Program 191 / 197

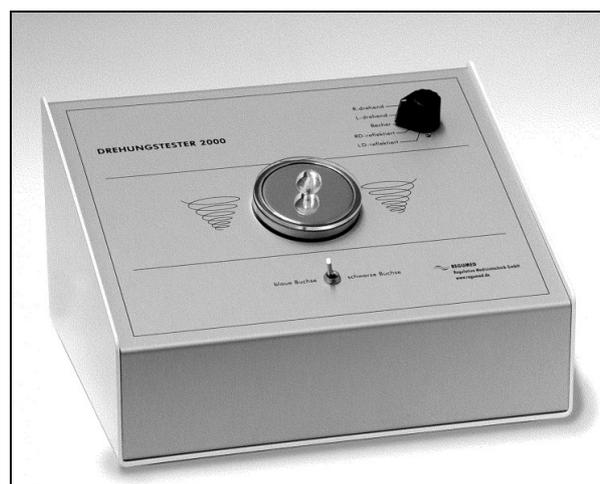
All these tests enable us to diagnose and treat bronchial asthma with considerable accuracy. If patients were prepared to undergo treatment of this condition, there would be very few who would not either be completely freed of their asthma complaints or at least would see the condition improved to the extent that they could abandon all their chemical remedies. For further details of this therapy, please refer to my book *Das Asthma Buch [The Asthma Book]*, 2002 Goldmann Verlag, Munich.

Allergies and right-spin

Obviously, faced with this certainly reliable yet laborious therapy, I was always interested in the

question of how we could achieve our goal more quickly, as allergisation through fungi and treatment of fungi is known to be very difficult and long-winded. My research work into direction of spin which I presented here last year and the previous year and which I conducted with the spin tester (see paper entitled *Entering a new dimension in BICOM bioresonance therapy – spin tester* – in RTI Volume 27, May 2003) opened up exciting new possibilities. As some of you will recall, I detected very strong left-spin in cancer patients, which is induced via left-spin geopathic stress, left-spin environmental toxins and leads finally to a generalised degeneration.

I sat up and took notice when various references from dowsers and physicists drew my attention to the fact that allergies – and let us use the term by all means – Yang conditions could quite well be connected with excessive right-spin. Amongst other things, I have heard from physicists that in general violent solar eruptions can cause strong right polarisation in the ionosphere and this produces fields of magnetic tension which cause allergy sufferers such trouble. I focused my attention upon this piece of information and very soon observed that the blood of allergy sufferers does indeed display excessive right-spin. I am speaking here about early reaction type allergy sufferers, in other words hay fever sufferers. This consequently also applies to most asthmatics.



Spin tester

We test this condition by placing an ampoule of the patient's own blood in the spin tester and switching the spin tester to "right-spin", so that only the right-spin constituents of the blood will be allowed through. We test with an inverse program, namely

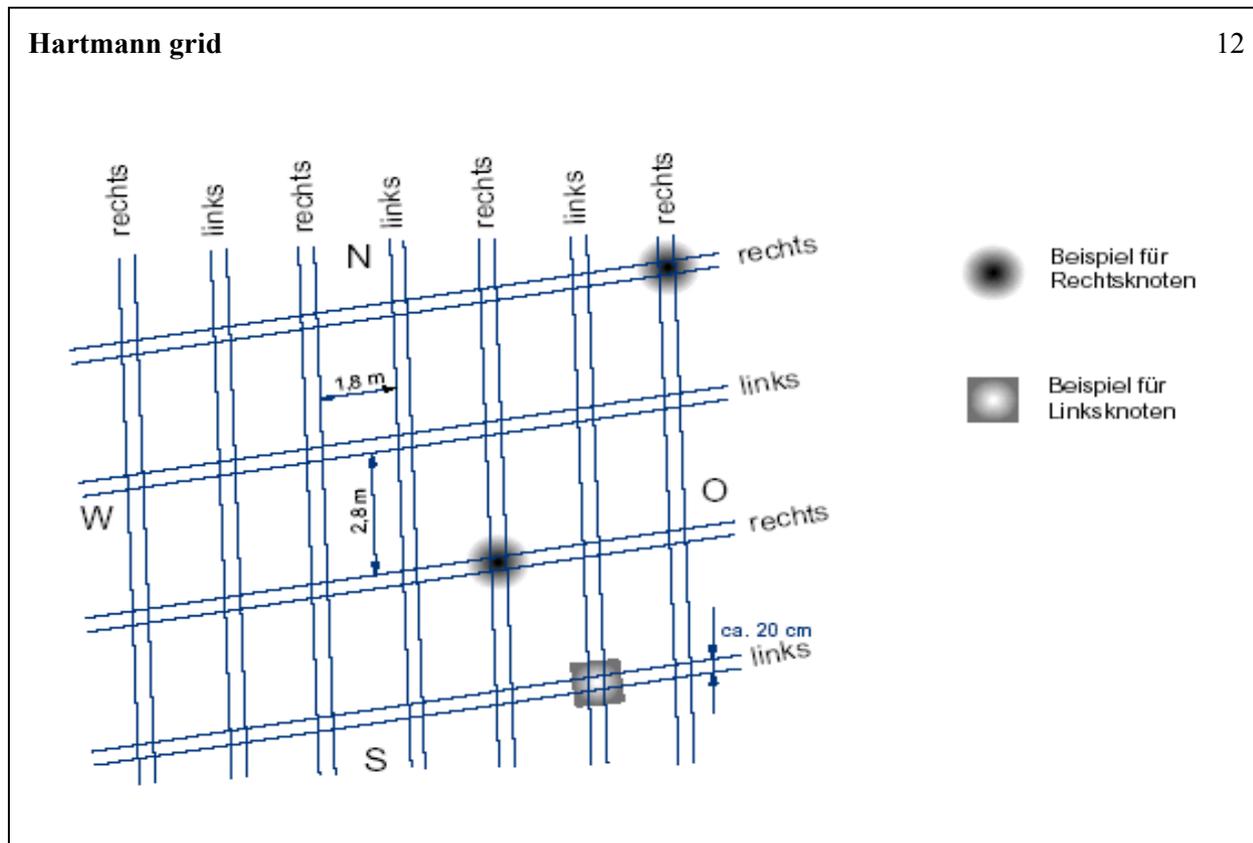
170 Ai (inverse), 8-fold amplification, whether an improvement in the values can now be recorded on the circulatory meridian (with the circulatory meridian on the left hand responding better) or on the lung meridian. As a rule we actually record an improvement in the values and this means that the blood has **too many** right-spin constituents and that these must be eliminated.

- | | |
|--|----|
| <ul style="list-style-type: none"> • Ampoule of patient's own blood in spin tester cup • Switch to right-spin • Program 170 (Ai, 8x amplification, all frequencies) • Test on circulatory, lung and lymph meridian | 11 |
|--|----|

I sometimes obtain sensational results here, especially with hay fever and asthma in the very acute stage. Amplification and time must be adjusted and then continue treating until excessive right-spin can no longer be tested in the patient at any amplification, whether in the blood or in the lungs. The same procedure can be conducted on the lymph system. Excessive right-spin can also be observed in the saliva.

The surprising success is that hay fever is **immediately** alleviated and, in mild cases, even disappears completely. Asthma is also visibly alleviated. This is therefore also an acute measure, alongside clearing the cow's milk engram, for example.

This astonishing success naturally awakened in me the desire to pursue this further. If you remember my lecture on the spin tester, the claim was made that bacteria and mycoses, for example, if active, display excessive right-spin, so right-spin must be eliminated. It could well be here that lacteal mould, which I hold responsible for cow's milk allergy, with its right-spin causes excessive right-spin in blood and tissue. Immediately treating the patient carefully does indeed immediately alleviate their condition. These patients generally lie over an underground water-course or some other disturbing network, specifically a right-spin stress! As you know, in the Hartmann grid, for example, the right- and left-spin lines alternate, so it is possible to lie over a right- or left-spin line (see the diagram). And we can actually test this in most allergy sufferers.



This is the reason why you will very rarely find allergy AND cancer in the same patient! It is not out of the question that allergy sufferers will one day get cancer. However, in most cases you will notice that, in the course of moving house or changing where they sleep so that they then lie over a left-spin disturbance to their sleeping arrangements, after a few years the patient's allergies recede or are not as often apparent and left-spin becomes established and then degeneration takes over and only then does this lead to a cancerous process. Obviously other factors and changes play a part in degeneration.

Intracellular right-spin or left-spin

Naturally we conducted further experiments and asked ourselves whether left-spin and right-spin could also be measured in the intracellular space. We were successful here as well. As you know, I reported on the possibility of testing intracellular stresses in my paper *Results of a pilot study into the link between blood parasites and cancer and their successful treatment* in 2005 in RTI Volume 29. And consequently, after opening the intracellular space, I tested with this method with the electro-stimulation device whether it is possible to test



Initial Current Device

the intracellular space for its direction of spin. We took haemoglobin as the test ampoule. And this wrong spin direction does actually continue into the intracellular space. This means that, with degenerative diseases like cancer, the haemoglobin displays too strong a left-spin, with allergy sufferers a right-spin!

Consequently I looked at the lab readings of cancer patients and of allergy sufferers and you will be astonished to hear, firstly that different labs indicate different normal values for haemoglobin concentration, which in itself is remarkable, and that in all cancer patients the haemoglobin reading is at the lower limit or even below the norm. So that we can say (a straightforward observation which should have been noticed sooner) that most cancer patients have latent anaemia. I would remind you that finally statistically 50 % of cancer patients die of anaemia in the end! The surprise was naturally that allergy sufferers often have very high haemoglobin levels, even at the upper limit. This means that the blood has increased plasticity.

I succeeded in finding out the cause of left-spin. This is just part of my work on cancer however. Right-spin has not been fully explained. But I have very often found Ergot sclerotium, the toxic mould of rye mould, present as intracellular infestation which is associated with right-spin. And if you eliminate and neutralise this Ergot, you obtain astonishing results.

A second incriminating factor is that I have very often found ammonia in the cells. Ammonia is stored in very large quantities as a degradation product of bacteria. There are other leads which we are following. For the moment we can very easily neutralise right-spin with the patient's own blood and, when it no longer tests, you can go as far as carry on with the right-spin of the haemoglobin and neutralise that so that you reduce allergic disposition significantly overall.

Intracellular right-spin

13

1. Ergot sclerotium
2. Ammonia

Spin direction of food allergies

In this connection I cannot hide the fact that I also tested food allergies for their direction of spin. And an astonishing discovery was that, after you have exhausted all the options for treating wheat allergy and want to check whether the patient really no longer responds, if you test this wheat (or other foodstuff) with the spin tester, it can happen that if you only let through the left-spin elements and go to your usual allergy program, the patient still displays an allergic reaction! Likewise, if you test various foods for their allergic reaction, you will notice that the left-spin element tests better and more distinctly. This is linked to the fact that the foods contain phenols, or as soon as the foods are preserved or no longer fresh, various foods produce specific phenols and the body basically reacts to these phenols.

We are not dealing with early reaction type allergies here but masked allergies. I presume that the body then gets hold of the fungi to break down these phenols again and the immunoglobulins react allergically to the phenols. There is evidence of this in allergiology.

Spin direction of food allergies

14

- Food ampoules (e. g. wheat, hen's eggs, etc.) in spin tester
- Basic food ampoule in BICOM input
- Switch spin tester to left-spin
- Program 998 / 997

Specific immune blockages

So if we have this clinical picture and have already stabilised the patient, we still see that asthma patients have a severely weakened immune system. Basically we frequently find PCB (polychlorinated biphenyl), benzopyrene, solvents such as xylene and toluene, chlorine, lindane, insecticides, formaldehyde, benzene and propan-2-ol. These are all by far the most common immune blockages. These are general immune blockages which I come across regularly. Though what perhaps is unusual but occurs specifically and very frequently with asthmatics is asbestos, which we may find on the lungs – in some cases this testing has brought us a long way forward – and also inhaled oil black, which can come from various sources, e. g. heaters,

car exhaust. (It is very easy to produce your own ampoule.) Car exhaust should really be taken into consideration as it is a very specific and frequent contaminant with asthmatics.

Immune blockages and asthma

15

PCB	Car exhaust
chlorine	formaldehyde
Benzine derivatives	Propan-2-ol
benzopyrene	xylene
PCP	toluene
Oil black	lindane
asbestos	insecticides

Intensive heavy metal elimination

Moreover I have now developed a new quicker method of treating fungi exhaustively. Our new approach means that fungi and bacteria cannot survive without certain heavy metals. With this idea I have developed a special method to enable heavy metal to be eliminated with bioresonance from a specific site such as the lungs very quickly, in other words within one session which takes one hour. Fungal infestation drops immediately with this kind of intensive treatment. This means if, at the start of the session, a fungal group tests with a 10-, 12-fold amplification, in other words, relatively strongly, and heavy metals are specifically eliminated for 45 to 60 minutes, this fungal infestation subsequently only tests with 0.65 to 0.35 amplification (without having treated the fungus!). This is obviously a sensational result. And then the fungi, which cannot survive without these metals, can be quickly eliminated.

There is not time now in this lecture to explain this special local heavy metal elimination to you. I will do this in my workshop *System for patients who are difficult to treat with reference to viruses, bacteria and mycoses* and also in the cancer seminar. There's a lot of new material in there. I would advise beginners to proceed very carefully with heavy metal elimination. If you eliminate them arbitrarily from the body, initial exacerbation can very easily occur.

The surprise here was that not only the familiar heavy metals such as mercury, for example, tested in asthmatics, but also contamination with cobalt, gold, antimony, platinum, chromium and nickel as well as iron ferrite, in other words oxidised iron,

very often tested. If you eliminate this, as I said, you get results much faster.

<u>Asthma – common heavy metals</u>			16
Iron ferrite	chromium	cobalt	
Nickel	Gold	Platinum	
Antimony			

Immortality through oncogenic viruses

And I can also reveal that a large number of experiments are currently being conducted with oncogenic viruses. It has emerged that oncogenic viruses settle in bacteria such as Clostridia and also in fungi such as Candida and Sacharomyces and, by reprogramming their DNA, make the fungus immortal. This is one of the reasons why fungi sometimes resist treatment so persistently. A really exciting area of cancer research with interesting new results.

PARKINSON'S DISEASE

The second syndrome which I wanted to speak about was Parkinson's disease. As you already know from my paper on Borrelia infection, we assume that Parkinson's is frequently actually a specific Lyme disease. I would ask you to read about this in my 2004 paper *The significance of underlying intracellular stress in chronic, rheumatic and neurological disorders* in RTI Volume 28.

Parkinson's and right-spin in the brain

Parkinson's is also what is known as a Yang disease. The place where the Parkinson's sufferer sleeps generally lies over a right-spin underground watercourse or a right-spin geopathic stress. It was very interesting here that, when we placed cerebrum or cerebellum and hypothalamus or pituitary gland ampoules in the input of the spin tester and tested it specifically right and left, it generally emerged that there was excessive right-spin on the right or left side of the brain in a Parkinson's patient. Simply treating this sometimes led to immediate relief.

Moreover, very many Parkinson's patients suffer from the side-effects of their remedies. It is common practice with many doctors, instead of pre-

scribing a remedy with pronounced side-effects, to prescribe four or five remedies in small doses, which however also all have very pronounced side-effects, the logic being that the side-effects would not occur with the smaller doses. This is obviously a naive miscalculation. The patients still experience most of the side-effects, above all as the remedies are very similar and the pharmacokinetic effect is cumulated. Moreover, with most Parkinson's remedies, "Parkinson's" is a possible side-effect.

To illustrate, here are just a few examples of the most commonly prescribed remedies for Parkinson's. The list of side-effects is obviously much longer. I will just list some which are relevant to the topic.

From: Arzneimittel-Kursbuch 17
[Drug course book], 13th edition,
Berlin 2002/03:

DOPAFLEX

Active ingredient Levodopa

Undesirable effects:

Nervous system: Anxiety – ataxia – dyskinesia – state of agitation – hallucinations – depression – debility – tremors – confusion – aggressivity – dementia – disorientation – convulsive attacks – restlessness – dizziness – motor disturbance – muscular twitching

BROMOCREL

Active ingredient Bromocriptine

Undesirable effects:

Nervous system: Anxiety – ataxia – dazed state – depression – depressive mood (over 10 %) – dyskinesia – limited reactivity – hallucinations – headaches (up to 19 %) – tiredness (over 10 %) nervousness – paranoid psychosis – debility – excitation – confusion – CNS toxicity – par aesthesia – aggressivity – state of agitation – muscle spasms in legs and feet – backache – therapy frequently discontinued due to intolerance

New network findings (tentative reports):

Defective concentration – personality disorders – tremors

CABASERIL

Active ingredient Cabergoline

Undesirable effects: Frequent depression (3 %) – dyskinesia – hallucinations – headaches (26 %) –

tiredness (5 %) – paraesthesia (2 %) – CNS toxicity – anxiety – limited reactivity – hyperkinesis – confusion – therapy frequently discontinued due to intolerance

ALMIRID

Active ingredient Dihydroergocryptine mesilate
Undesirable effects: As above
Tremors – confusion – motor disturbance – muscle spasms

COMTESS

Active ingredient Entacapone
Undesirable effects: As above
Hyperkinesis – intensified Parkinson's disease symptoms (8 %) – disturbed sleep – debility (13 %) – tremors – confusion (up to 9 %)

It is a balancing act for us to decide whether we have a case of genuine Parkinson's disease whose cause we do not know, of Lyme disease or a Lyme disease patient who has developed Parkinson's disease through the side-effects of the Parkinson's remedy! I can however only suggest that, if the patient is so far advanced that he has been attuned to Parkinson's remedies for a long time, you take the time somehow or other always at the start of the session to eliminate these Parkinson's remedies from the nervous system, liver and metabolism (OD meridian) very carefully and slowly with all tested amplifications using BICOM technology. If, ladies and gentlemen, you notice during the session that the patient becomes calmer and more clear-headed and is no longer so confused, then you know that the patient is suffering badly from the side-effects and you can brighten up his mood immediately. I have experienced this repeatedly. However, you must allow yourself plenty of time, about 10 to 20 minutes to eliminate these remedies.

Then relief by treating the excessive right-spin of the brain, then of the blood.

The specific environmental toxins for Parkinson's disease are again the immune blockages, namely PCB, chlorine, benzene derivatives and PCP. I will not go into Borrelia again here. (You can read about this in my papers *The significance of underlying intracellular stress in chronic, rheumatic and neurological disorders* in RTI Volume 28 and *Results of treating intracellular infestation by Borrelia and other micro-organisms* in RTI Volume

29). The blood parasites 1 and 3 have also tested quite frequently. If you know my work with blood parasites, then you know that I managed to isolate these. I now have 7 different genera or stages available as ampoules and these blood parasites, which basically play a part in a number of diseases, are now included in the tumour kit which you can also obtain from Regumed.

Summary of therapy

18

for Parkinson's patients

1. Neutralise Parkinson's remedies
Program 191 / 197
2. Eliminate right-spin of brain hemispheres
Program 170
3. Break down and eliminate immune blockages
(PCB, chlorine, benzene derivatives, PCP)
4. Treat Borrelia infection
5. Blood parasites 1 and 3
Program 191 / 197

DIABETES MELLITUS

The third syndrome I should like to report on is diabetes. The essential procedure for dealing with diabetics is well-known. The pancreatic fluke (*Eurytrema pancreaticum*) can be found on the pancreas and/or small intestine and usually gold contamination which can be very specific. Gold contamination very often means Salmonella as Salmonella need gold to survive. So Salmonella should also be tested here and eliminated. Fungal therapy is essential. A massive breakthrough was achieved with diabetes, in other words a reduction in insulin dosage (incidentally we treat type 1 and 2 diabetes according to the same regime), by not only treating this mould and the fungi but also by testing these fungi synergistically with *Eurytrema pancreaticum*. This means that the pancreatic fluke brings some of these fungi with it which live on its surface. Only by putting it in the input cup and then testing the fungal test kit once more, will you find the fungi which did not test beforehand!

Eurytrema pancreaticum
in input cup
Program 191

19

Adjust amplification and
test all mycoses

Blood parasites 6 and 7 are interesting to consider here. They often indicate very specifically. What is probably produced by the fungi is methyl alcohol which has a disturbing effect here, but may well be propan-2-ol. The immune system is frequently disrupted by formaldehyde and benzene, PCB again, i. e. polychlorinated biphenyl, PCP, i. e. pentachlorophenol and benzanthracene. It is essential to test Coxsackie viruses and Epstein Barr viruses.

One specific tip with heavy metal contamination is chromium which must be eliminated as well. You will quite naturally say we need chromium. That is quite right. It is well-known that doses of chromium can improve diabetics' utilisation of insulin. But here I am obviously talking about inorganic chromium which is in turn used by bacteria and fungi. We suspect that normal metals are oxidised by bacteria and fungi for their own use, because they need them to survive, and are then deposited in the body as a store. You can basically assume that cobalt, for example, is needed as a trace element in connection with vitamin B12. But if cobalt tests as an inorganic metal, anaemia may even occur because its availability is no longer guaranteed as it is an oxidised or bonded inorganic cobalt which the cells cannot do anything with. The same naturally goes for chromium.

Diabetes summary

20

- Eurytrema pancreaticum + mycoses
- Yeast and mould fungi on pancreas
- Gold, chromium and other heavy metals on pancreas
- Coxsackie viruses on pancreas
- Epstein Barr viruses
- Blood parasites 6 and 7
- Immune blockages: Formaldehyde – benzene – PCB – PCP – Benzanthracene
- Supporting:
 - Parasite treatment:
Juglandis, 1 dessertspoon 3 times daily
 - Fungal treatment
 - Antiviral: 5 drops Samento, 3 times

Diabetics are patients who, in most cases, know better than their therapist how to deal with their blood sugar and insulin requirements. They carry out checks and take readings daily anyway. You will very soon achieve a reduction in insulin doses

and the patient will be able to check very accurately by his daily readings and take the appropriate action.

One avenue we are currently researching is that “good” sugar must basically be right-spin in normal metabolism and that “bad” sugar is left-spin. Just like with so-called right-spin lactic acid, which we sometimes prescribe and about which I have often reported in connection with cancer patients whose tumours produce their own left-spin lactic acid. Here elimination of left-spin sugar can, under certain circumstances, also in turn improve diabetics' utilisation of sugar.

Dear colleagues, please forgive the flood of information which I have presented. But the topics are all so enmeshed in the therapy system that it was not possible to leave anything out. All the topics are discussed in detail little by little at my seminars and the correct procedure indicated. I invite you to attend if I have aroused your interest. I should be pleased to see you again soon.

Thank you for your attention.

Toxic elements, solvents, colouring matter - test kit 1

1 Aluminium	11 Caesium	21 Gold	31 Manganese	41 Rhenium	51 Tantalum
2 Antimony	12 Chromium	22 Hafnium	32 Mercury	42 Rhodium	52 Tellurium
3 Arsenic	13 Cobalt	23 Holmium	33 Molybdenum	43 Rubidium	53 Terbium
4 Barium	14 Copper	24 Indium	34 Neodymium	44 Ruthenium	54 Thallium
5 Beryllium	15 Dysprosium	25 Iridium	35 Nickel	45 Samarium	55 Thorium
6 Bismuth	16 Erbium	26 Lanthanum	36 Niobium	46 Scandium	56 Thulium
7 Boron	17 Europium	27 Lead	37 Palladium	47 Selenium	57 Tin
8 Cadmium	18 Gadolinium	28 Lithium	38 Phosphorus	48 Silicon	58 Titanium
9 Calcium	19 Gallium	29 Lutetium	39 Platinum	49 Silver	59 Tungsten
10 Cerium	20 Germanium	30 Magnesium	40 Praseodymium	50 Strontium	60 Vanadium

Toxic elements, solvents, colouring matter - test kit 2

61 Ytterbium	71 1,1,2-trichloro-1,2,2-trifluoroethane	81 Sudan III	91 (DAB) Yellow	101 Iron ferrite
62 Yttrium	72 Xylene	82 Sudan IV	92 Fast Garnet	102 Oil black
63 Zirconium	73 Dichloro-methane	83 Fast Green FCF	93 Malonic acid	103 Car exhaust
64 Water type 1	74 Urethane	84 Sudan Orange G	94 Maleic acid	104 Asbestos
65 Benzene	75 Tartrazine	85 Fast Red Violet LB Salt	95 D(+)Malic Acid L-malic acid	
66 Methyl alcohol	76 Fast Red GL	86 Fast Red TR Base	96 Methyl-malonic acid	
67 Propan-2-ol	77 Fast Blue RR Base	87 Fast Red RC Salt	97 Maleic anhydride	
68 Formaldehyde	78 Sudan Black B	88 Fast Violet B Base	98 Bleaching agents	
69 Toluene	79 Sudan I	89 Fast Blue BB Base	99 Ball bearing grease	
70 Chlorine	80 Sudan II	90 Fast Red ITR Salt	100 Benzopyrene	

