
Results of a pilot study into the link between blood parasites and cancer and their successful treatment

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Dear colleagues,

It is a special experience for me to report today on the continuation of the research work about which I presented a paper last year.

This research work, whose theme is the link between blood parasites and cancer, is largely based on the intensive research of two great scientists whom I must now respectfully mention and whom I should like to remember for they have made a very valuable contribution to mankind and have, so far, not been recognised by current expert opinion within orthodox medicine. They are Dr. Wilhelm von Bremer, who published the article "Krebs — eine Erregerkrankheit" [Cancer — a pathogenic disease] in the journal "Fortschritte der Medizin" back in 1932. There followed a series of discoveries and publications. Likewise Dr. Alfons Weber who published his findings in 1968 in a series of books, such as "Haben wir potentielle Krebserreger schon im Blut?" [Do we carry potential carcinogenic agents in our blood?]

After studying the work of these two outstanding scientists in detail, I have to tell you I am amazed. Both men worked meticulously in a highly scientific detailed manner, they met all the biological and orthodox medical criteria in the link between the discovery of a pathogen and the disease it causes although these criteria are, as we all know, very rigorous. I have seen very few more recent studies which are as precise, detailed and far-reaching. They also both devoted themselves to one issue for many years and did not consequently fall victim to the current growing trend of constantly taking up new issues.

After examining their work in detail, I can now say that they both described virtually the same process. They both reached surprisingly similar conclusions which differ only in minor aspects. Even the developmental form of the parasitic

infestation they described as well as of the larvae, their development and transformation, their sexual and asexual reproduction differ only in points which elude all microscopic investigation, e. g. in eggs or earliest stages of parasites which still occur in numbers which cannot be seen with a microscope, yet which both described equally.

In summary and somewhat simplified, they both come to the following conclusion, namely that parasites settle in the red blood cells (erythrocytes) and develop there into various forms according to the circumstances, the degree of infection and the internal milieu of the blood. They are both also agreed that tumour development is only stimulated by two influences:

1. by a shift in the milieu. Dr. von Bremer examined this in detail. He even developed a device for accurately measuring the pH of the blood "in the body" of the individual. He observed that parasites gradually become virulent and develop into their malignant form if the blood becomes more alkaline reaching a level above 7.4 and a pH of 7.5 to 7.6 is critical in causing malignant tumours. He observed that, in young people, the pH of the blood tends to lie in the acidic range and becomes increasingly more alkaline as the years go by. He determined the human death threshold at a pH of 8. Consequently, the risk of cancer increases with age.
2. Micro-injuries, whether traumatic, chemical (i. e. injuries we are familiar with from environmental toxins), biophysical (electrical smog, etc.) or, as I should like to add, emotional, enable parasites to escape from the blood stream. The parasites enter into a symbiosis with the parent cell tissue. The body attempts to limit this symbiosis locally. In order that the cells in which the blood parasites continue reproducing are not forced to release these parasites

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again, they divide and proliferate and, as a result, a tumour develops. As you can see, a combination of widely differing conditions is necessary to produce a tumorous process such as this.

It is not within the scope of this lecture to provide further details about these two excellent researchers. Those who are interested in finding out more should consult the relevant books.

COMPARING DARK FIELD AND EAV READINGS

Once we had managed (as I have already shown in my lecture and in film shots) to detect these parasites in the dark field (this is in fact not too difficult for dark field therapists), the next step was to isolate the parasites to test them in an ampoule. I managed this too and the various ampoules for blood parasites, or onco-parasites as I call them, are now available. It should also be mentioned here that these parasites may also play a part in other diseases. However, that would be the subject of a separate paper.

The next step was to see if the isolated parasites and tests with the parasite burden, which were visible in the vital blood both in the dark field and in Dr Weber's parasite test, correlated or not with EAV testing using Bicom technology (particularly the amplifications) and the extent to which the tests for the extracellular space and the intracellular space correlated. I can state at this point that we also managed to achieve this. This means, dear colleagues, that the reduction in the parasite burden under the microscope corresponds exactly to the reduction in amplification tested with Bicom! This in itself is amazing.

THE PROBLEM

However, ladies and gentlemen, the following fact was alarming. When I investigated these parasites closely I observed that, without exception, all my cancer patients still had these parasites in their blood, regardless of whether I had been treating them for two months or 2-3 years and despite the fact that all those I had checked in the dark field were stable and they were all receiving between 15 and 25 different food supplements and herbal remedies and Bicom therapy. It was understandable that the Bicom device had not then had any effect on the parasites as we did not yet have any starting material for these parasites and consequently could not treat them with Bicom. However, it

was a very unfortunate that all the remedies we had used had had no effect!!! It proved clearly that such remedies had no influence whatsoever on the infestation with blood parasites. At the same time I should mention here that this was also fortunate for us in that, because none of these remedies had achieved anything, I could save myself the trouble of looking for an antidote amongst the remedies I had used, for I had living proof in the dark field and the tests with the ampoules that none of these had brought about any significant change.

This gave me two ideas. I could now conduct a study running along two parallel lines. The first question was to what extent this parasite burden could be influenced with Bicom therapy and ampoules and the second was whether a new preparation could be developed which was effective against these blood parasites.

ENERGISED NONI DROPS

By coincidence — or do such coincidences exist? — I got hold of a new preparation at precisely the time I was looking into this problem. It was a specially prepared and energised Noni preparation available not in the usual juice form (containing sugar) but in drop form as an energised concentrate. In my tests this preparation was the only one which actually tested against certain forms of these parasites. Noni is a traditional medicinal plant. The literature mentions a very strong anti-parasitic effect in addition to a whole range of therapeutic benefits. This plant is also credited with beneficial effects against *Ascarides* and other parasites. The most important thing for me though was that it is also credited with being effective against malaria. As you know, malaria is caused by *Plasmodia*, in other words, blood parasites. This was a crucial factor for me which demonstrated that my test had been correct and I was on the right track.

FIRST PILOT STUDY

As a result, it was necessary to find out how to proceed in the fastest and most effective manner with cancer patients and whether a beneficial effect could be achieved. We know from experience that, in Bicom therapy, if we treat a pathogen in the classic manner with the corresponding inverse oscillation, the immune system is always stimulated to attack this pathogen and the pathogen is suppressed. To ensure that the beneficial effect of

BiCom therapy and the action of the preparation were kept separate, I decided to conduct the study in three separate stages. It is known from the literature, particularly the work of Dr. Enderlein et al, that these blood parasites develop into ever higher forms if they consume too much protein. We also knew that parasites themselves produce protein decomposition products and, in addition, that foods leading to overacidification of the tissue, in other words foods containing sugar, also promote alkalisation of the blood independently of protein and thereby the continued development of parasites.

ENZYME-RICH FRUIT DIET

These important findings taken from my own experience and from the literature, combined with enzyme therapy which is sometimes used with cancer gave me the idea of giving cancer patients a simplified positive list so as not to ban dozens of foods. Consequently, they should stick solely to an enzyme-rich fruit diet for a short period. This diet is based exclusively on enzyme-rich fruit such as mangoes, papayas, pineapples, kiwifruit, mangosteen, lychees, etc, ensuring that only sun-ripened fruit, in other words fruit charged with all the sun's photon energy, is used, harvested ripe in the country of origin and flown in — obviously not a cheap operation.

This was the first step which consisted of placing patients on an exclusive fruit diet for several days or a few weeks to observe what would happen with the parasites just by changing the diet. The second step was to give these patients Noni drops. The third step was to treat the parasites with inverse oscillations using the Bicom device. With these three steps we were able to record the effect of each action and see how much progress we could make.

Before I present this pilot study and explain the results, you must bear in mind that, in order to understand the results, a clear distinction must be made between the extracellular and the intracellular space. We have always documented this very carefully using the dark field. In my DVD entitled "*Blutparasiten*" [Blood parasites] which is now available, each image clearly shows if it is the intracellular or extracellular space. Just to recap: the problem is that these parasites are located inside the red blood cells. Sometimes, particularly with cancer patients, some of them also swim outside the cells, sometimes in large numbers. As

I explained in detail last year in my paper "*Krebs —*

em neues Denkmodell" [Cancer — a new hypothesis], Dr. Weber developed a test in which he heated the blood quickly over a flame causing all the cells to burst, releasing the parasites, which survive this incredible procedure incidentally. So when Weber's parasite test was conducted, this always involved the intracellular space which was made visible through the destruction of the cells. Where we "only" examine vital blood using dark field illumination, with the cells remaining intact even after a number of hours, we are "only" able here to observe and analyse the extracellular space.

During this study, all patients were tested once a week with electroacupuncture to determine the precise amplification of the parasites. In addition, a-dark field examination and Weber's parasite test were conducted.

RESULTS AND DISCUSSION

Believe it or not, the first small group of 9 patients kept exclusively to this fruit diet for between 2 and 7 weeks. The first thing we noticed in the first week and which, I have to admit, rather frightened us was that the parasites initially appeared in greater numbers. This was soon explained, however, by the fact that these parasites emerged from the blood cells obviously looking for food given the exclusive fruit diet.

Here are the results (see box on top of next page):

Start of enzyme-rich fruit diet. Onco-parasite infestation dropped very rapidly in the extracellular space. Only isolated parasites were still visible in the blood. Infestation was still moderately strong in the intracellular space.

This group of patients then relaxed their diet slightly yet still kept off all animal protein. Further observation for 2 to 4 weeks revealed that the onco-parasites were no longer visible in the extracellular space yet could still be found in the intracellular space. So, ladies and gentlemen, these parasites survived within the cells even for between 4 and 11 weeks depending on the patient. For me this obviously also means that not a lot can be achieved, at least as far as this issue is concerned, with a couple of weeks' deacidification.

This group then began taking Noni drops and, after two to four weeks, no parasites were visible either in the extracellular or intracellular space.

1st group: 9 patients	
Dark field: Extra Cellular Space:	onco-parasite infestation: <i>high</i>
Para-Test: Intra Cellular Space:	onco-parasite infestation: <i>high</i>
Start of enzyme-rich fruit diet:	2 — 7 weeks
E C S:	onco-parasite infestation: <i>dropped rapidly, isolated parasites still visible</i>
I C S:	onco-parasite infestation: <i>moderate</i>
Animal protein-free diet maintained: 2 — 4 weeks	
E C S:	onco-parasite infestation: <i>none visible</i>
I C S:	onco-parasite infestation: <i>still visible</i>
Noni drops started: 2 — 4 weeks later	
E C S:	onco-parasite infestation: <i>none visible</i>
I C S:	onco-parasite infestation: <i>none visible</i>

In the third group of 10 patients (see box on top of next page), the initial situation was again the same. The patients did not adhere to a protein-free diet but began taking Noni drops straight away. After 4 months isolated parasites were still visible in the extracellular space and minor infestation was still visible in the intracellular space.

The four month period can be explained by the fact that the life span of red blood cells is precisely four months, i. e. 120 days. Consequently, after four months almost all the red blood cells have normally been renewed and all the parasites would therefore have been discharged into

the extracellular space at least once. Yet it should also be said that various factors affect this result.

The second group of patients was obviously in the same initial situation. All were cancer patients. The level of onco-parasitic infestation was high.

The group began with an animal protein-free diet and maintained this for 7 weeks.

The same phenomenon occurred in the extracellular space, isolated parasites were still visible. The situation in the intracellular space was almost the same as before starting the diet. Then these patients began taking Noni drops. After 2 to 4 weeks there were no more parasites to be seen in the extracellular space, while in the intracellular space isolated parasites were still visible. After a further two weeks we could hardly detect any.

1. There are white blood cells which live longer.
2. Dental foci keep discharging new parasites into the blood stream.
3. If the tumour opens or is treated, this results in a flood of parasites emerging which previously had seemingly disappeared.

These first two steps have shown us for the first time that Noni drops definitely have an effect on these parasites. In the meantime I have been carrying out an experiment on myself by taking Noni

2nd group: 12 patients	
Dark field: Extra Cellular Space:	onco-parasite infestation: <i>high</i>
Para-Test: Infra Cellular Space:	onco-parasite infestation: <i>high</i>
Animal protein-free diet begun:	after 7 weeks
E C S:	onco-parasite infestation: <i>dropped steadily, isolated parasites still visible</i>
I C S:	onco-parasite infestation: <i>still visible</i>
Noni drops started: results after 2-4 weeks	
E C S:	onco-parasite infestation: <i>none visible</i>
I C S:	onco-parasite infestation: <i>isolated parasites visible</i>
	after a further 2 weeks: <i>none visible</i>

drops regularly for over a year. Back in February 2004 a large number of these blood parasites were visible in my blood. Several checks of my blood count in March 2005 showed that they had as good as disappeared completely. Various others who were not cancer patients have also done this and obtained similar results. However, this is in no way sufficient in itself to obtain rapid results. It appears that combining this approach with a strict protein-free

3rd group: 10 patients

Dark field: Extra Cellular Space: onco-parasite infestation: *high*
 Para-Test: Intra Cellular Space: onco-parasite infestation: *high*

**Noni drops started, no special diet:
 Results after 4 months**

E CS: onco-parasite infestation: *isolated parasites visible*
ICS: onco-parasite infestation: *minor infestation still visible*

The study is being continued.

N.B. It should be mentioned at this point that, in all 4 patient groups, the parasites still tested at the tumour itself following provocation with the impulse generator.

How to carry out this provocation with Regumed's impulse generator is the subject of my workshop.

diet produces the best results with particular success being recorded if patients possibly keep to the fruit diet described earlier for one or two weeks at the start. I can also report at this point that all patients participating in this study were well throughout the entire period. All the readings continued to improve.

EFFECT OF BICOM THERAPY

So those questions had been answered. The most important question still remained, namely the effect of Bicom therapy. This was easily answered. As we now had the exact numbers, from then on I recorded in a new study every cancer patient who came under my care.

With the next 16 patients we applied a combination of protein-free diet, Noni drops and a weekly 3-minute Bicom therapy session for blood parasites (with 64-fold amplification). The results were excellent: after 11 weeks no parasites were visible at all either in the intracellular or extracellular space. So we saved, on average, 2 weeks through this initial very simple standard Bicom therapy.

4th group: 16 patients

Dark field: Extra Cellular Space: onco-parasite infestation: *high*
 Para-Test: Intra Cellular Space: onco-parasite infestation: *high*

**Began with Noni drops, animal protein-free diet and weekly Bicom therapy:
 Results after 6-11 weeks**

**program 191,
 64 fold amplification, 3 minutes**

E C S: onco-parasite infestation: *no parasites visible*
IC S: onco-parasite infestation: *no parasites visible*

NEW STUDY WITH BICOM

Naturally we are not yet satisfied with these encouraging results. For we are now seeing if we can reduce this time even further using Bicom technology. A small study is currently underway in which we no longer give the participating patients the standard three-minute 64 fold treatment but test out the amplifications and times and then treat the patient until we can no longer test the parasites, all in the one therapy session. I do not want to commit myself to the results yet. Nevertheless, I can already tell you that this procedure will in any event reduce therapy time.

BENEFITS OF THE IMPULSE GENERATOR

As I have already explained in several lectures,

- 1. the intracellular space can be opened using the impulse device which transmits a square wave current in the 3.6 Hz range. Only by this means can we test the content of cells.

- 1. As a result we are not deceived into believing that certain stresses such as Borrelia, heavy metals, viruses and also intracellular blood parasites have disappeared, but are able to expose them even in the tumour with this small device using this special frequency. This results in prolonged therapy for cancer patients within the one session in the hope that we can succeed in literally breaking down tumours

so that they can be removed from the body. I will explain in my workshop how this provocation is carried out and exactly how we proceed.

EXAMINING BIOPSIES

We were able to make other important discoveries from tumorous material. A doctor friend gave us two specimens of a bone marrow biopsy from a plasmacytoma patient. It was very exciting for us to see whether we could also detect blood parasites here under the microscope. One specimen had not been treated, the other had been prepared for pathological examination. It may be of great interest for us that the specimen prepared for pathological examination no longer contained parasites, whereas we did detect parasites in the untreated specimen. This partly explains the question we all ask ourselves, namely why generations of pathologists do not see, indeed cannot see these parasites! Secondly this means that these parasites have already penetrated the cells even in the bone marrow. We also obtained a pleural biopsy specimen from another patient also suffering from cancer. Here too we detected parasites.

SPECIAL IMMUNE MODULATION WITH CANCER PATIENTS

Another important additional step which I now carry out in my practice with cancer patients is that, instead of just testing environmental toxins as general blocks, I had the idea of checking all stresses acting as immune blocks directly on the reticulo-endothelial system. The procedure is as follows: you place a specially produced RES (reticulo-endothelial system) ampoule in the input and test the various substances in question with program 191 to see if any of them react. The substances regarded as immune blocks for cancer patients (but not only with cancer patients) are formaldehyde, chlorine, benzene, asbestos, xylene, PCB, PCP, toluene, malonic acid and its derivatives, all heavy metals and also all lanthanoids! (lanthanoids are rare earth elements such as lan-

115 elements in the periodic table starting with lanthanum: lanthanum, neodymium, praseodymium, samarium, gadolinium, cerium, terbium, europium, dysprosium, holmium, erbium, thulium, ytterbium, lutetium, promethium. (They are chemically very similar and hard to separate and (perhaps as a result of this?) they are all contained in contrast medium.

thanum, neodymium, etc.) and colourings. Traces

of these rare earth elements are found in dental fillings, in contrast medium, sometimes also in foods. It is now known in science that both heavy metals and lanthanoids can cause chromosome breaks and chromosome breaks are characteristic of virtually all cancers. (Source: Komiyama Makoto, *Sequence-specific and hydrolytic of DNA and RNA by lanthanid complex oligo DNA hybrids*, J. Biochemie 118, no. 4, 1995, p. 665-670.)

Colourings are also very important blocks. In this case we tested a series of 10 different colourings. By way of example "fast green", also known as "food green 3". This colouring, ladies and gentlemen, is legally approved for colouring fruit, yet then permeates the whole fruit. The most well known of all carcinogenic substances, 4-dimethylaminoazobenzene (DAB) can be found in foods as different as jelly and seedless jams, Cool-Aid powdered fruit juice, confectionery and milk. "Sudan black B" and "scarlet", to name just two, are contained in a number of hair dyes. They penetrate the body via the scalp and mainly affect the spleen and body fat. These colourings are also often contaminated with lanthanoids and, as has been proved, are mutagenic and tumorigenic. Discussing the effect of every single lanthanoid and colouring would be beyond the scope of this lecture. Their role in the development of cancer is well documented. To sum up, I can state that it is vital to test and eliminate them in all patients with cancer or damaged immune systems.

Once we have meticulously tested all these immune blockers, particularly on the reticulo-endothelial system around the tumour, and have tried to identify everything which is preventing the white blood cells performing properly, we begin an extremely intensive therapy phase in which we devote all our efforts to freeing the patient from all these stresses within 6 weeks. We use Bicolvt technology to eliminate them in the classic manner with program 191 and test out amplification. We also administer very high doses of coenzyme Q10, which can detoxify colourings, as well as high doses of vitamin B complexes against some of the immune blocks (benzene, formaldehyde, xylene, toluene, all solvents) and amino acid complexes, especially glutathione and L-cysteine. Heavy metals are eliminated with the remedies you all know, such as Chlorella, MSM and coriander oil. In some cases we also use Humet here, a humic acid from the soil, available in capsule form, which can detoxify a wide range of these substances.