

Viral stress in cancer: presenting a complementary therapy concept

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Viruses and cancer risk

A. Can viruses trigger cancer?

Scientists believe that one in six of all cancers worldwide can be attributed to infections caused by viruses. This was revealed in an analysis by the International Agency for Research on Cancer (IARC), the specialised cancer agency of the World Health Organization (WHO).

B. What are viruses?

Viruses are microscopic particles. They are primarily constructed of genetic material and a protective protein shell. Unlike practically all other living organisms, viruses have no metabolism of their own. This makes them different from other pathogens too including bacteria. Viruses depend therefore on the cells of a living organism for replication, i.e. they need a host.

Viruses can be roughly classified into two types based on the chemical properties of their genetic information: DNA viruses (short for deoxyribonucleic acid) and RNA viruses (short for ribonucleic acid). We then categorise these into different types of virus based on their individual characteristics.

C. How can viruses trigger cancer?

Viruses are usually just one of many contributory factors in the development of a tumour.

Viruses can live for decades in the body without displaying any symptoms.

When other triggers appear, this may lead to cell damage.

However, with some types of virus this can prove harmful: each cell has a complex control system, which specifies an exact time for cell division as well as cell necrosis. For the health of an organism it is important to maintain an equilibrium between dividing and dying cells. But viruses are dependent on dividing cells for their own replication. A viral infection can immobilise the cell's growth control mechanism and prevent programmed cell necrosis (apoptosis).

As a result, by storing their genetic information in host cells, viruses can interfere with specific genes including those with a central control function.

When these genetic 'custodians' fail, the cells are able to grow unchecked and cancer may develop as a result.

D. Viruses linked with cancer

Viruses that are closely linked to the development of cancer are known as 'oncogenic' viruses. Where viruses are found in tumour tissue this does not necessarily mean that these were or are the sole trigger for the emergence of the cancer.

Viruses which are currently associated with cancers in humans are listed in the table on the following page.

Whether other viruses give rise to different types of cancer is currently the focus of research.

DNA viruses	Human papillomaviruses (HPV)	Cervical cancer, breast cancer
	Epstein Barr virus (EBV)	Burkitt lymphoma B-cell lymphoma, Hodgkin lymphoma Nasopharyngeal cancer
	Human herpes virus 8 (HHV-8)	Kaposi's sarcoma
	Hepatitis B virus (HBV)	Hepatocellular carcinoma
RNA viruses	Hepatitis C virus (HCV)	Hepatocellular carcinoma
	Human T-cell leukaemia virus type I (HTLV-I)	Adult T-cell leukaemia

Complementary anti-viral therapy

"Only by knowing the cause can you find the cure." (anon.)

Thorough diagnosis is the most important component in a complementary therapy.

1. Systematic diagnosis by means of Bicom bioresonance and the biotensor

- Energetic blocks
- Functional disturbances in systems and related organs
- Stresses from viruses, bacteria and moulds, parasitic stress
- Environmental and heavy metal stresses
- Electrosmog and geopathic stresses, radioactive materials
- Allergies, intolerances
- Vitamins and minerals – check-up
- Scar interference fields
- Chakras 1 – 7
- Vaccination stress
- Testing teeth and fillings

2. Treatment with Bicom bioresonance, bioresonance drops and orthomolecular medicine

A. Restorative phase 2 – 4 sessions

- Treatment of blockages (programs based on test results)
- Energetic balance (meridians as required)
- Chakras 970.2, 962.0, 940.1
Yin-Yang balance 507.0
Geopathy balance 700.3

- Increase resistance 10005,
Thymus activation 10164
- Overacidification 3109.0
- In this phase I recommend that the patient takes an alkaline bath 1 – 2 x per week.
- Channel 2: tailored to the individual based on testing

B. Clean-up phase 2 – 6 sessions

- General detoxification 10046
- Regulation program for stress through pathogens for infection defence 10077
- Nosode therapy with bioresonance drops
- Specific detoxification: stressed nervous system (toxins, pathogens) 3077.0
- Parallel substitution of amino acid L-Lysine capsule 1 – 2 g daily, supported by zinc and vitamin C
- RNA viruses – gradual reduction 954.0
- Channel 2: substance complex: viral immune deficiency

C. Regenerative phase 5 – 7 sessions

- Cell regeneration 3125.0 and B12 intramuscular supplement (1x weekly 1000 µg)
- Vitamin B1 250 mg 1 x weekly
- Improve vital capacity 10178

Treatment is scheduled for 15 sessions (1 x weekly). The first five sessions are used primarily to treat blockages, restore energetic balance and improve the defences with oral doses of zinc and vitamin C. For patients with resorption

problems, I use zincum metallicum-Injeel forte ampoules subcutaneously and vitamin C intravenously (sodium chloride 500 ml with 7.5 g vitamin C).

For the detoxification phase I use the L-Lysine supplement (1 – 2 g daily) and bioresonance drops (3 x 5 drops daily).

Patients find viral conditions, in particular herpes zoster, very painful and strength-sapping, therefore pain and vitalisation programs also need to be considered.

A tried-and-tested method is to use B complex supplements orally or via intramuscular injection during the regenerative phase (last five sessions).

Case study no. 1

54-year-old woman, diagnosed with breast cancer one year earlier (conventional medical treatment completed), pain throughout the body, circulatory problems, herpes labialis, herpes zoster in left shoulder blade.

Findings

Pathological values for the pancreas and gastric mucosa, lymphostasis in the chest and left arm, underweight, stresses from different viruses, intestinal dysbiosis.

Therapy

I added programs 910.1 improve protein metabolism, 999.2 detoxification of the mucosa and 10096 lymph activation to the anti-viral treatments described above.

I recommended that the patient take medicinal clay every day for four weeks.

She also took plant-based protein for a period of three months.

Outcome

The patient noted a significant improvement after treatment. Digestion improved and she gained weight. The persistent herpes blisters on her lip and the herpes zoster disappeared. Oncology check-ups have been negative to date.

Case study no. 2

50-year-old woman with persistent herpes labialis on the lower lip came to me in a final attempt to clear up her symptoms. I treated her with the aforementioned anti-viral therapy. In the case history she cited circulatory problems, but had not taken any mainstream medicines for this.

The results were amazing. The herpes disappeared following treatment. Her circulation has stabilised and she was delighted to report that her longstanding shoulder pain had suddenly disappeared – remarkable considering that all treatment to date had been ineffective and diagnostic tools (MRT, CT) had failed to identify the cause of the pain. She had not mentioned the shoulder problem in her case history. After months of diagnostic and therapeutic procedures, the only remaining course of action according to the doctors was psychological therapy, but this too had failed to alleviate the pain. So she was all the more thrilled that bioresonance proved successful.

Literature

Further information and sources for specialists and other interested parties:

The **International Agency for Research on Cancer** (IARC, www.iarc.fr) has scientifically evaluated the influence of viruses and other pathogens on the risk of developing cancer. The publication entitled **“A Review of Human Carcinogens: Biological Agents”**, Volume 100 B (2012) can be accessed at <http://monographs.iarc.fr/ENG/Monographs/vol100B/index.php>.

Details of which cancers may have a higher incidence as a result of viruses and other pathogens can also be found in the guidelines on individual tumour diseases. These can be accessed on the website of the **Arbeitsgemeinschaft der Wissenschaftlichen Medizinischen Fachgesellschaften e.V.** (AWMF – Association of German Scientific Medical Societies) at www.leitlinien.net.