Possibilities in prevention and therapy of acute viral diseases

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General information about viruses

- Viruses are the smallest known "living beings" with a diameter of between 15 and 300 nm.
- Great **adaptability:** heat stable, cold stable and even survive drying processes.
- They have no metabolism of their own; their reproduction can only take place in living cells.
- They contain only DNA or RNA as genetic material; **no cell division** takes place, they reproduce only through their nucleic acid, or require the help of host cell ribosomes for replication.
- In the extracellular resting phase, no cell growth takes place; in this phase, the virus binds to the receptor of the host cell.
- Viruses can "**disguise**" themselves by taking a part of the cell wall with them and are therefore more difficult to detect.
- They can replicate in one of two ways:
    - **Incorporation into the genome of the host cell**. The genetic code of the cell is thus altered and no more of its own cells are produced. Virus replication is assumed to be regulated by the host cell.
    - **Elimination of the regulatory mechanisms of the host cell** and conversion of the entire metabolism to the service of virus replication.
- After viruses copy their genome, they package it, allowing it to travel to new cells or hosts. The newly produced viruses are released into the organism during cell death and the interstitial fluid becomes toxic. Viruses immediately infect more cells and the process then repeats.
- Some viruses do not even have a protein coat. Such viruses rarely, if ever, move from one cell or host to the next organism.
- There are two **modes of transmission: horizontal**, i.e. from one individual to the next, and vertical, i.e. from parents to offspring. Most viruses are transmitted horizontally or **vertically** and horizontally (e.g. HIV). Most viruses of free-living plants are transmitted vertically (seeds).
- Many viruses are transmitted by an intermediate host or vector (e.g.: mosquitoes, arachnids such as mites or ticks, and also through fungi).

- Due to the **mutagenic effect** of viruses, cells can be induced to change to become tumours. A certain tumour-inducing effect is said to be caused by measles, rubella, EBV, HPV, Ebola and others.

1.1 Systematics of viruses

- In 1975, **David Baltimore** received the Nobel Prize for his work on retroviruses and the discovery of **reverse transcriptase**, a remarkable enzyme that can transcribe DNA into RNA.
- He developed a systematics of viruses based on how viruses produce **messenger RNA (mRNA)**. The genetic information from the DNA is transcribed into this RNA form, which then carries the genetic information from the nucleus into the machinery, where it is translated into proteins.
- **Double-stranded DNA is the genetic material in all cellular life forms,** i.e. bacteria, archaea and eukaryotes. However, viruses do not follow any rules with their genetic material.
- No protein synthesis can occur directly from DNA; **mRNA is** produced as an **intermediate stage**, which can be single- or double-stranded and contains the same nucleotide sequence as the coding DNA strand. A further distinction is made between positive and negative strand orientation in single-stranded viruses. (10)

1.2 The following 7 classes of viruses are distinguished:

Class 1: They behave like cellular organisms and possess double-stranded DNA, the direct template for mRNA. E.g. **enterobacteriophages, human adenovirus 2, HHV 1, HPV 16, JC virus, varicella zoster virus, variola virus**.

Class 2: They consist of single-stranded DNA that is converted into double-stranded DNA, which then serves as a template for the mRNA: e.g. **Torque teno virus, golden mosaic virus of bean plants**.

Class 3: They have genomes made of double-stranded RNA, which forms a direct template for RNA. E.g.: **rotavirus A, saccharomyces cerevisiae virus L-A.**

Class 4: They have a genome of single-stranded positive RNA, can use this as mRNA, but must make a complementary RNA strand that serves as a template before it is replicated. E.g.: **poliovirus, zika virus, yellow fever virus, West Nile virus, SARS and related corona viruses, Norwalk viruses, human rhinovirus A, hepatitis C virus, dengue virus.**

Class 5: They have a single-stranded negative RNA genome that serves as a template for the mRNA. E.g.: **influenza virus A, Sin Nombre virus, mumps virus, measles virus, Ebola virus.**

Class 6: Retroviruses that have an RNA genome and use reverse transcriptase to copy RNA into an RNA/DNA hybrid and then into double-stranded DNA. This serves as a template for the mRNA. E.g.: **HI virus feline leukaemia virus.**

Class 7: They have a DNA genome that serves as a template for the mRNA When the genome is copied, an RNA "imprinting genome" is also created, which is then recopied into DNA by reverse transcriptase. E.g.: **cauliflower mosaic virus.** (10)

The virome

- Our knowledge of the diversity of the virosphere was limited to a few species that could be grown under laboratory conditions for more than a hundred years after the first discovery of a virus in 1898.
- Gene-sequence-based detection methods such as the polymerase chain reaction (PCR) gradually took over from virus cultivation from the 1980s onwards, but detailed prior knowledge of the genetic make-up of a sought-after virus was still necessary.
- Advances in nucleic acid sequencing (next generation sequencing, NGS) in the early 2000s made it possible to detect microbes without knowing their exact gene sequences a priori.
- We now know that viruses are the **most common "biological entity**" globally – to call them living things would be incorrect. No matter what ecosystem you look at, **viruses are omnipresent and on average 10 times more abundant than bacteria**.
- One millilitre of seawater, for example, contains between 10 and 100 bacteria, but **more than 10 million viruses**.
- Viruses in the sea are of **great importance for the carbon cycle**. Most infect bacteria or other protozoa, at least a quarter of which are killed by viruses every day. In the process, they burst and their contents are utilised by other life forms. When such cells die without being destroyed in this way, they generally sink to the bottom of the sea, where their carbon is deposited and deprived of life. (10)
- Some authors even suggest that all living organisms, including all unicellular microorganisms, are infected by at least one virus at any given time. (1)
- **Most viruses are probably commensal**, i.e. they obtain what they need from their hosts without doing harm.
- Some viruses have a reciprocal relationship with their hosts that is so **beneficial** that the hosts cannot live without it, and the viruses benefit, too. In a stable host-virus relationship, the virus uses the host cells while causing as little damage as possible.
- **Causing disease is undesirable for both the virus and the host.** A virus cannot replicate as well in a sick host, and if the host dies before the virus can spread it is detrimental to both.

- **Severe illness or death are signs of an immature relationship between host and virus before they have "adapted" to each other.** For example, people get very sick from HIV-1 because the virus has only recently started infecting people. It jumped from non-human primates to humans. The related virus (SIV) does not cause disease in non-human primates.
- **Disease occurs when the virus "jumps" to a new host.**
- Some viruses jump very frequently. The influenza virus is an example of this. Its natural host is waterfowl, where it does not cause disease.
- **Polioviruses** have had only humans as hosts for centuries, which meant that until the 20th century most people were immune to them. In the past, most people became infected with the poliovirus as young children, but rarely showed symptoms of the disease and were immune to further infection. Poliovirus is spread through drinking water, and after drinking water was chlorinated, young children in their environment were no longer exposed to poliovirus. When they subsequently came into contact with the virus, they had no natural immunity and the disease broke out in full. (10)
- **Some viruses are true mutualists, meaning they are beneficial to their hosts.** For example, herpes viruses protect mice from various bacterial infections (e.g. the plague).
- **Bacteria and yeasts use viruses to kill off competitors so that they can move into a new area.** (10)

2.1 The human virome

- The **human virome** denotes viral diversity. Together with bacteria, fungi, archaea and protozoa that colonise us, it forms the human microbiome.
- It consists of viruses anchored in the human genome (**endogenous retroviruses** more or less as "fossils" = **HERVs**), **eukaryotic viruses** (which infect plants or fungi) and viruses that infect bacteria and archaea (**bacteriophages**).
- The **virome populates different niches** and differs according to localisation. An average of 5.5 virus families were detected in the nose, skin, mouth, vagina and stool of a total of 102 healthy volunteers. (2)
- While bacteria exceed a factor of 10 in humans, it is a factor of 100 for viruses.
- **The complete sequence of the human genome was published in 2001. It contains 11% retroviral sequences**. (10)
- Viruses are common, but their role in disease and health is unclear. This is mainly due to the technical challenges. Viruses are an extremely heterogeneous group in both morphological and genetic terms, which makes it difficult to extract viral gene sequences in a targeted manner.
- Moreover, the average length of the genome of a virus particle is only a fraction of that of a bacterial genome.
- The **intestinal virome** is the best studied community to date and probably the largest. There are approximately 108-1010 viral particles in one gramme of intestinal content (Mukhopadhya et al. 2019).

- Viruses and bacteria obviously **coexist peacefully**, and it is estimated that the number of viruses is ten times greater than the number of bacteria. The concentration of viruses is particularly elevated in the intestine because they form surface structures that can bind to glycoproteins of the intestinal mucosa, which increases their local concentration. (3)
- **Eukaryotic viruses** represent only a small proportion of the intestinal virome. Most of them do not show any evidence of **association with disease**. Eukaryotic viruses with low virulence can cause persistent, long-lasting infections. These are often highly adapted viruses that have developed along with their human hosts over thousands of years **(co-evolution)**. Highly virulent eukaryotic viruses are usually transient members of the human virome, as they are generally rapidly eliminated by the local immune system. (1)
- Kembauer et al (4) introduced murine norovirus (MNV) into mice bred in a germ-free environment and thus lacking a bacterial microbiome. They suffered from severe local immunodeficiencies with greatly increased vulnerability to chemically mediated tissue destruction and infections with bacterial pathogens. **Chronic viral infection of these animals with murine norovirus was able to replace the immunostimulatory effects of the bacterial microbiome and restore the normal state of the gut immune system**.
- Eukaryotic viruses are apparently capable of **supporting intestinal homeostasis** and maintaining the immune system of the intestinal mucosa (5).
- The majority of the intestinal virome (90%) is made up of **prokaryotic-viruses, i.e. bacteriophages**, but these are still largely unresearched. For example, a new group of bacteriophages has recently been identified (crAssphages) that are thought to be the most common representatives of the human virome (Dutilh et al, 2014; Edwards et al, 2019). However, we are still largely in the dark about the functional impact of these phages on physiology and pathophysiology (Koonin & Yutin, 2020).(1)
- One hypothesis is that they constantly transfer information into the bacterial cell through **horizontal gene transfer**. This enables the bacteria to **adapt to different habitats,** for example by making the inserted genetic material resistant to chemical stress or stabilising the community. They are also thought to **improve** the **energy uptake of their hosts**. **(3)**
- The virome can act as a **genetic library** that holds all kinds of useful information and can be consulted by bacteria when they experience external stress such as acute nutrient shortages or antimicrobial pharmacotherapies. (1)
- Bacteriophages can accumulate genes that confer **resistance** during antibiotic therapy, but also make **recolonisation possible**.
- The **virome also protects against the side effects of antibiotics**. If the bacterial intestinal microbiome is eradicated during broad-spectrum antibiotic therapy, bacteriophages can store essential metabolic functions and can transfer them to descendant commensal bacteria (Rascovan et al, 2016).
- **Phages cooperate with humans** by being able to use bactericides against pathogenic germs.

- The virome forms an essential part of **the intestinal barrier to defend against pathogenic germs** (Koonin EV & Yutin N, 2020). The basis of this intestinal barrier is formed by epithelial cells of the intestinal mucosa, which form the colon wall and define the intestinal lumen with their apical side. There is a layer of mucus several micrometres thick directly on the epithelial cells that which protects the intestinal epithelial cells from chemical, enzymatic and mechanical influences. In addition, this mucus layer fulfils another, almost more important function: it harbours a highly specific and highly abundant viral community, which is referred to by the acronym **BAM** – b**acteriophages adherent to mucus**. The function of these bacteriophages in the local defense against pathogenic intestinal bacteria is so essential that BAM is considered a separate, non-self immune barrier that protects the intestinal epithelium from invasive germs. (1)
- **Bacteriophages ensure that a healthy flora can form in the intestines of newborns.**
- Shortly after birth, it is mainly phages that form the virome. **Every human has an almost unique intestinal biome**, whereby the once acquired coexistence of bacteria and viruses remains relatively stable. (Mukhopadhya et al, 2019)
- Nevertheless, the virome of people living in the same household adapts to each other by exchanging a small amount of bacteriophage diversity (Ly et al, 2016).
- **Herpes viruses can prevent bacterial infections and benign viruses can activate the immune system in the intestine, making humans immune to attacks from pathogenic viruses.**
- The virome is seen as a possible aid against infectious diseases, obesity and even in cancer therapy (cancer drugs with genetically modified herpes viruses).
- **Phage therapy** has been in use in Russia for a number of years.

2.2 Virions

- A **virion** is a single virus particle located **outside the cell**. They are **encapsulated viral particles that are dormant**, much like spores of bacteria or fungi. The viruses use them to propagate. The composition of the virion is a central determinant of viral transmissibility and immunogenicity.
- A virion consists of **one or more nucleic acid molecules**, often surrounded by a protein capsule. There are sometimes also **other proteins with enzymatic properties** in the viron, and in some viruses virions also have a viral envelope consisting of a lipid membrane.
- Viruses do not normally incorporate host genetic material into virions, with the exception of a number of viruses that integrate into the host genome during their life cycle.
- Virions, which consist of virus particles, allow viral nucleic acids to **move around and "infect" living organisms**.
- **Viruses can infect all life forms (even other viruses).**

- The non-viral components and host proteins that make up the pleomorphic virus particles of, for example, an influenza virus are responsible for the virus being able to cause damage.
- An influenza virus contains as much biological material from the "infected" host as viral material from the actual virus. (6)
- **Some virions are very stable**. Canine parvovirus, for example, can remain infectious in soil for over a year. Other viruses are very unstable and require direct contact between hosts. **Viruses with an outer membrane are generally not very stable** because the membrane is sensitive to desiccation.

2.3 Exosomes

- The latest findings on exosomes, small vesicles that are released by a cell into the environment, show that they not only act as transport vehicles, but also support **cell communication and immune modulation**.
- Exosomes are extremely important as RNA carriers in **regulating expression within the absolute majority of the human genome**.
- **Viruses use exosomes for transport and camouflage**. On the other hand, they are currently being discussed as possible treatment options for autoimmune diseases (rheumatoid arthritis) and cancer.
- Both exosomes and viruses could be important for interspecies or even "cross kingdom **communication**" (between species) and regulation within the biosphere, as they are able to facilitate and mediate the **horizontal transfer of information** between organisms. (6)
- In order to survive, viruses must **constantly adapt to changing environmental conditions**. Modulation via exosomal or viral RNA causes the expression of a protein-coding gene to change within seconds.
- **Viruses can be a means for cells to communicate extracellularly**.
- The human body and its environment are inextricably linked. Viruses can be an **indicator of environmental stress** in an organism. They expose toxic pollution in our environment.
- During our energetic tests in the context of BICOM bioresonance, we always find viral stress in combination with stress caused by environmental pollution (chemical pollution, radiation or geopathic pollution, heavy metals etc.)
- Numerous viruses, such as herpes viruses, remain dormant in our organism after the primary infection until they are reactivated by stress.

Prevention and therapy of acute viral diseases

- We should bear in mind that viruses are mainly involved in diseases with a severe course when it comes to a **pre-damaged organism**, particularly in view of the new challenges we are currently facing with viral diseases and increasing

environmental pollution. **Damage caused by environmental pollution** (chemical pollution, radiation pollution, heavy metals, fine dust etc.) plays a major role here.

- For example, most patients who became more severely ill with **beta-coronaviruses SARS-CoV-2, SARS-CoV and MERS-CoV** either had previous illnesses and thus a **weakened immune system**, or lived in areas with particularly **high environmental pollution**. Older, weakened patients are also being increasingly affected.
- The RKI (Robert-Koch-Institut, German feral government agency and research institute) writes: "Coronaviruses are widespread among mammals and birds. They primarily cause mild colds in humans, but can sometimes cause severe pneumonia. SARS-CoV-2 uses the **enzyme ACE-2 as a receptor** in order to enter host cells. High ACE-2 density exists in the respiratory tract, as well as in the intestine, vascular cells, kidney, heart muscle and other organs." (8)
- Some recent studies have suggested that statins, ACE inhibitors, or angiotensin receptor blockers upregulate the ACE2 receptor, and that patients taking these drugs are thus significantly more at risk for infection from SARS-CoV-2 with a more severe progression. (9)

3.1 Prevention from a holistic perspective

- Knowing that viruses are a **part of our human ecosystem** that can expose and indicate environmental **stresses** and support our **cell communication**, we should focus on **stabilising the immune system and reducing environmental stress** in the prevention of acute viral diseases.
- In the seminar Prevention through BICOM Therapy and Lifestyle Changes, we talk about ways to guide patients to cooperation and personal responsibility.
- The concept combines the findings of new biology, epigenetics and quantum physics with ancient knowledge from traditional Chinese medicine (TCM, Ayurveda medicine)
- **5 points for a healthy life**:
    - Healthy nutrition (e.g. based on the 5 elements cuisine from TCM),
    - Exercise,
    - Sleep and relaxation,
    - Toxins / poisonous substances,
    - Drugs and addictive substances
- Healthy nutrition (e.g. based on the 5 elements cuisine from TCM): consideration of food from an energetic point of view; importance of water; acid-base balance; intestinal flora; awareness
- Exercise: yoga exercises, physical exercise
- Sleep and relaxation times: stress management, sleep hygiene, breathing exercises (pranayama), meditation, mindfulness
- Toxins / poisonous substances: detoxification through BICOM therapy and holistic methods
- Drugs and addictive substances: avoidance of substances used to escape the problems of daily life.

- The prevention of viral disease, like the prevention of chronic disease, has the goal of creating an environment within our human organism in which there are as few toxic and energetic burdens as possible, so that viruses and other pathogens are less able to multiply, reactivate or become symptomatic.
- For this purpose, you can use the programme sequences from the **BICOM prevent update**, or also specifically search for stresses with the help of the CTT ampoules and eliminate them.

- Procedure:
    - Anamnesis
    - Physical examination
    - Test of excretory organs, blockages
    - Testing of the CTT-5 element test kit
- The test sets are particularly important here:
    - Vaccinations, metals, miscellaneous
    - Parasites and environmental loads
    - Bacteria
    - Allergic strains
    - Viruses and fungi
    - If necessary, test kit for herpes viruses, chlamydia, borrelia bacteria
- These test kits provide valuable information about the inner milieu and the human ecosystem.
- In addition, depending on the anamnesis, other test kits such as "Teeth", "Hormones" or "Orthopaedics" can also provide valuable information.

- The therapy plan is drawn up in accordance with the usual procedure in the CTT:
    - Basic therapy
    - Remove blockages
    - Open the elimination organs
    - Treat extracellular and intracellular stresses in succession
- To do this, test the appropriate couplings

- The objectives of the preventive approach are:
    - Modulate / stabilise the immune system
    - Milieu change
    - Stress reduction
    - Stabilisation

3.2 Treatment of acute viral diseases

- **Objective: to reduce viral load and replication and thus reduce virus-induced symptoms.**
- While the focus with chronic viral loads is on reducing extracellular loads and improving the individual's milieu and optimising the immune system, the situation is different with acute viral diseases. However, due to the latest findings, one should not only use Ai or Di, but also definitely H+Di programmes.

- Procedure:
  - Anamnesis
  - Physical examination
  - Test of elimination organs, blockages
  - Testing of the CTT-5 element test kit
  - Testing of viruses, fungi, bacteria, parasites and environmental pollutants, vaccinations / metals

- Viruses are often found together with other intracellular pathogens. A combination of viruses of the **herpes group** (CTT virus test kit: **"Alphaherpes viruses"**, but also "Betaherpes viruses" (cytomegaly) and "Gammaherpes viruses" (Epstein-Barr viruses) or varizella zoster viruses can usually be found. Combinations with other virus ampoules such as "**HPV strains**" are also common.
- Other intracellular pathogens such as bacteria **(chlamydia, mycoplasma, borrelia, bartonella, rickettsia / anaplasma** etc.) are also frequently encountered in combination with viruses. Please test with CTT test kits "Bacteria", "Parasite and environmental loads" and "Vaccinations, heavy metals and miscellaneous" **together** with the already tested virus combination.
- The problem with intracellular pathogens such as viruses is that these pathogens can more or less **hide** from the immune system by entering the host cell and even attack cells of the immune system itself (T- and B-cells).
- In addition, as already described, some of them remain in **dormant form in** various parts of the organism, sometimes for years. This makes our diagnostic work more difficult, so we have to resort to a number of tricks:

1.) **Unmasking** (ampoule and/or programme):

- Use the "Intracellular stress" programme (3136.0) as an unmasking programme (see attachment) before actually testing the viruses, or
- Use the ***"Unmask"*** ampoule from the "5 elements" test kit by treating the patient for about 3 minutes with programme 192 and this ampoule in the input cup (output hand applicators or mat). Then test the viruses in the usual way.

2.) **Heavy metals (amalgam, mercury)**: use these vials for unmasking, so to speak, by using them when testing with programme 191 or 197 in the input cup while testing the virus ampoules. **("Feel-good environment")**

3.) **Histamine: histamine** can also be used for unmasking. Very often, however, it should also be treated together with the viral stress if we find common resonance. Use programme 191 or 197 to test the virus ampoules while the histamine ampoule from the **"Hormone test kit"**, the **"Allergic strains"** or **"Psychosomatic, neurological"** test kit is in the input cup.

4.) **<u>Stress:</u>** The stress ampoule from the **"Allergic strains"** or **"Psychosomatics, neurology"** test set can also be used for unmasking. It is an ampoule that we usually test and treat with an A-programme (192 or 198). However, if we use it as a provocation, so to speak, when testing, i.e. also with programme 191 or 197, we can "unmask" the virus.

When it comes to treatment, however, the stress ampoule is then, used with an A-programme in a second step as a kind of stabilisation after the virus therapy, or, if necessary, in the second channel.

- What is important is to find the **combination** coupling that is currently stressing the patient.
  <u>This combination is often made up of:</u>
  - Viruses
  - Bacteria
  - Parasites / worms
  - Environmental / radiation and geopathic stresses
  - Heavy metals
  - Chemical loads

Acute or chronic infection?

- We then create a therapy plan according to priorities with the help of the findings. The decisive factor here is whether it is an **acute** exposure to intracellular pathogens or a **chronic infection**.
- As a general rule in the case of **chronic infection**, after appropriate blockage therapy and opening of the elimination organs, the **intestine-associated immune system** is treated first (e.g. candida and other fungal loads, bacteria, parasites, allergies, possibly in combination). This is intended to create the prerequisite for the immune system to be sufficiently strengthened to deal with the intracellular stress. It is only then that the pathogens are treated in the combinations described below (for acute infections).
- In the treatment of an **acute infection** (e.g. acute chickenpox, acute herpes zoster, acute mononucleosis etc.), on the other hand, the pathogen (or pathogen combination) is treated **immediately** until the acute symptoms disappear. Of course, blockages should also be removed and the elimination organs should be opened. For this purpose, the pathogens are tested together with other loads (bacteria, fungi, viruses, parasites, heavy metals, chemical loads, radiation exposure, environmental pollution) to ascertain the **individual combination for the patient concerned**. These combinations therefore usually consist of viruses, bacteria, (parasites), heavy metals, radiation loads, chemical loads and possibly vaccination loads.
- You can use the usual programmes **10325** or **197, 191** (please test time and amplification here) for the treatment. However, it has been shown in our practice that you should always switch between therapy programmes. This is how the **recommendations below** came about.

Treatment programmes:

"Intracellular stress" programme (3136.0):

- H+Di, lowest frequency, bandpass 3.6 Hz, wobble = yes, interval = no, amplification sweep = sym., amplification H 3.2 Di 15.0, amplification sweep speed = 50 sec. therapy time = 8 min.
  Input cup: saliva, blood if necessary
  Input: solar plexus
  Output: mat
  In channel 2: "Stress" ampoule from the "Allergic strains" test kit, alternatively: "Neurology / stress" substance complex.
- However, you can also use this programme for **"unmasking"** by running it before you test it.
- H+Di, lowest frequency, bandpass 3.6 Hz, wobble = yes, amplification sweep = sym., amplification H 3.2, Di 15.0, amplification sweep speed = 50 sec. therapy time = 3 min.
  Input cup: saliva, blood if necessary
  Input: solar plexus
  Output: mat
  In channel 2: "Unmasking" ampoule from the "Degenerated cells" or "5 elements" test kit

Programme: "Stress reduction" (3137.0)

- H+Di, lowest frequency, bandpass, 4.3 Hz, wobble = yes, amplification sweep = sym., amplification Di = 1.10, amplification sweep speed = 10 sec. therapy time = 7 min,
  Input cup: saliva, possibly blood
  Input: solar plexus
  Output: mat
  In channel 2: "Stress" ampoule from the "Allergic strains" test kit, (alternatively: "Neurology / stress" substance complex)

Programme: "Intracellular pathogens 1":

- Ai, lowest frequency, bandpass 14.5 Hz, wobble = yes, amplification sweep = sym., Ai 12.0, sweep speed 25 sec., therapy time = 12 min.

Programme: "Intracellular pathogens 2":

- H + Di, normal range, without bandpass, amplification sweep increasing, H 3.7 Di 8.0, sweep speed 13 sec, therapy time = 8 min.

Programme: "Intracellular pathogens 3":

- Ai, lowest frequency, bandpass 12.1 Hz, wobble= yes, amplification sweep sym., Ai 64.0, sweep speed 40 sec., therapy time = 12 min.

Programme: "Intracellular pathogens 4":

- Ai, lowest frequency, band pass 2.4 Hz, wobble = yes, amplification sweep increase, Ai 6.0, sweep speed 60 sec, interval = no, therapy time =8 min

Programme: "Intracellular pathogens 5":

- Di, normal range, bandpass 74.0 Hz, wobble = yes, amplification sweep decreasing, Di 4.0, sweep speed 300 sec., therapy time = 5 min.

Programme: "Intracellular pathogens 6":

- Ai, normal range, band pass 112 Hz, wobble = yes, amplification sweep decreasing, Ai 40.0, sweep speed 300 sec, therapy time = 12 min

Programme: "Herpes viruses / intracellular pathogens 1":

- H+Di, normal range, bandpass 160 kHz, wobble = yes, amplification sweep sym., Di 12.0, sweep speed 124 sec. interval = yes, therapy time = 16 min.

Programme: "Herpes viruses / intracellular pathogens 2":

- H+Di, lowest frequency, band pass, BP sweep speed 185 sec, amplification sweep = sym., Dl tempo 28 sec, Di 5.0, interval = yes, therapy time = 13 min.
  Input cup: Virus ampoule or the tested combination, plus patient's blood if necessary **with all.**
  An input applicator is used only if testing positive, then depending on the position tested (usually the location of the symptoms).
  Output: mat
  The second channel can run in parallel with either a tested substance complex, a tested orthomolecular substance from the orthomolecular test kit or substances of your choice that have an antiviral effect or support the immune system, such as L-lysine, Engystol, samento, Wobenzym, boswelia, curcumin etc.
- Please test 1 (-2) of these programmes per session for the patient. Always test whether therapy time and amplification are suitable.

Additional programe "Virus elimination":

- **A**, lowest frequency, band pass, 120 sec, amplification sweep = sym., A 10.0, sweep speed 50 sec, therapy time = 12 min
  Input cup: "Anti-virus" ampoule, and/or "Interferon" (both CTT viruses test kit), and/or „Intracellular elimination" (CTT vaccinations, heavy metals and miscellaneous), and/or "ATP" (hormone test kit), and/or "Stress" (CTT "Allergic strains"), and/or "Prevent virus reactivation"
  No input applicator
  Output: mat
- I also continue to use the proven programmes **192 or 198** from the CTT with the aforementioned ampoules in the input cup. Test which of these 3 programmes suits the patient best and test amplification and therapy time individually. The stabilising programs 10327 or 3452 can also be used.
- It is recommended that the treatment information be transferred to a chip or trace elements / globule.

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