

Introduction and Orientation for All Magnetic Health Quarterly Publications Published by: William H. Philpott, M.D. 17171 SE 29th St. Choctaw, OK 73020 (405) 390-3009/ Fax: (405) 390-2968 Email: polarp@flash.net



William H. Philpott, M.D.

# FIRST IMPORTANT NOTE

The first 17 pages are introductory in nature and to be found at the beginning of each of Dr. Philpott's works.

It's important that you read and understand these basic principles before you study beyond page 17.

If you are thoroughly familiar with these first 17 pages, and understand their contents, then by all means, start with page 18.

# SECOND IMPORTANT NOTE

All of Dr. Philpott's books, including this one, can be ordered directly from him at 17171 S.E. 29th Street, Choctaw, OK 73020; (405) 390-3009.

Appropriate magnets can also be ordered from the same source. See Magnetic Catalog entitled "Polar Power Magnets" Catalog #18, this site. We've added to this catalog several pages relevant to costs.

Dr. Philpott says that he will be pleased to answer questions by telephone. Information

# and the catalog are free upon request. WHAT MAGNETIC THERAPY IS

Magnetic therapy is magnetic-electron-enzyme catalysis therapy. Static magnetic fields move electrons which rotate resulting in a magnetic-electron energy field. Static negative magnetic field electrons spin in a 3-dimensional spiral counterclockwise rotation. In a static positive magnetic field, electrons spin in a 3-dimensional spiral clockwise rotation. A positive magnetic field energizes acid-dependent enzymes. A negative magnetic field energizes alkaline-dependent enzymes. Biological response to a positive magnetic field is acidhypoxia. Biological response to a negative magnetic field is alkalinehyperoxia. Alkalinity maintains calcium and amino acid solubility and reverses insoluble deposits of calcium and amino acids in such as arteriosclerosis, spinal stenosis, around joints, amyloidosis, Alzheimer's, etc.

The energy activation of biological enzymes is magnetic therapy <u>WHAT MAGNETIC THERAPY DOES</u>

The biological response to a static positive magnetic field is acidhypoxia. The biological response to the static negative magnetic field is alkaline-hyperoxia. Positive magnetic field therapy is limited to brief exposure to stimulate neuronal and catabolic glandular functions. Positive magnetic field therapy should be under medical supervision due to the danger of prolonged application, producing acidhypoxia.

Negative magnetic field therapy has a wide application in such as cell differentiation, healing, production of adenosine triphosphate by oxidative phosphorylation and processing of toxins by oxidoreductase enzymes and resolution of calcium and amino acid insoluble deposits. Negative magnetic field therapy is not harmful and can effectively be used both under medical supervision and self-help application.

Some of the values of magnetic therapy are:

• Enhanced sleep with its health-promoting value by production of melatonin.

• Enhanced healing by production of growth hormone.

• Energy production by virtue of oxidoreductase enzyme production of adenosine triphosphate and catalytic remnant magnetism.

• Detoxification by activation of oxidoreductase enzymes processing free radicals, acids, peroxides, alcohols and aldehydes.

• Pain resolution by replacing acid-hypoxia with alkaline-hyperoxia.

• Reversal of acid-hypoxia degenerative diseases by replacement of acid-hypoxia with alkaline-hyperoxia.

• Antibiotic effect for all types of human-invading microorganisms.

• Cancer remission by virtue of blocking the acid-dependent enzyme function producing ATP by fermentation.

• Resolution of calcium and amino acid insoluble deposits by maintaining alkalinization.

• Neuronal calming providing control over emotional, mental and seizure disorders.

"Magnetic therapy has been observed to have the highest predictable results of any therapy I have observed in 40 years of medical practice."

William H. Philpott, M.D.

ABOUT WILLIAM H. PHILPOTT, M.D.

William H. Philpott, M.D. has specialty training and practice in psychiatry, neurology, electroencephalography, nutrition, environmental medicine and toxicology.

He is a founding member of the Academy of Orthomolecular Psychiatry. He is a fellow of the Orthomolecular Psychiatric Society and the Society of Environmental Medicine and Toxicology, and life member of the American Psychiatric Association.

Between 1970 and 1975, he did a research project searching for the causes of major mental illnesses and degenerative diseases, which resulted in the publication of the books, *Brain Allergies* and *Victory Over Diabetes*.

Retiring in 1990 after 40 years of medical practice, he has engaged in research as a member of an Institutional Review Board, which follows FDA guidelines. In this capacity, he guides physicians and gathers data on the treatment and prevention of degenerative diseases using magnetic therapy.

The Linus Pauling Award was presented to William H. Philpott, M.D. in 1998 by the Orthomolecular Health Society, "for his scientific leadership and scholarship spanning the entire history of orthomolecular medicine."

Dr. Philpott says, "When I graduated from medical school, the guest speaker stated, "We have taught you what we know. It may well be that half of what we have taught you is not so. But we don't know which half is so and which half is not so". I learned so much in medical school that I was proud of my acclamation of knowledge. Was this speaker for real or simply a learned clinician acting out a false humility? As I marched down the aisle of graduation from medical school, I was proud of my increased amount of knowledge I had gained. I was especially proud of knowing about medications that were known to relieve headaches. Surely among these medications for headaches was an answer for my mother's headaches. I thought that now I have a solution to the lonely hours I spent as a preschooler while my mother was in bed in a dark room. I was all alone wondering how I could help my mother.

"I specialty trained in neurology and psychiatry and had a flourishing practice in these specialties. After fifteen years of practice, I began to wonder why we had so few answers that worked. There was shock treatment for severely ill patients. I gave over 70,000 of these. There were tranquilizers emerging in the late 50's and early 60's. I used these by the bushels on my mental patients. The efficiency was low and the side effects of tranquilizers were astoundingly frightening. One tranquilizer in an ad in a medical journal claimed less side effects than another tranquilizer and yet it took one-half page of fine print to list the side effects of this proposed better tranquhizer.

"I had six therapists (psychologists, social workers and sociologists) seeing my patients in individual and group therapy. The level of results in schizophrenia and manic-depressives was especially discouraging. In the early 60's, behaviorism came to the rescue in helping some neurotics in the ability to train out their symptoms. What about psychosis for which behaviorism had little help? Electric shock proved to have some temporary help. Tranquilizers were of minor help and the side effects were appalling. Obviously, our system was often even making our patients develop physician-induced illnesses. This was particularly troubling with a five-fold increase in maturity-onset diabetes mellitus when using tranquihizers. Were there answers not learned in residency training that we were ignoring?

"In my third year of medical school in 1949, while attending a small group session at Los Angeles County General Hospital, an allergist made the observation about a patient with anxiety whom he fasted for five days during which her anxiety symptoms left. When he exposed her to a test meal of one of her frequently eaten foods, her anxiety returned. He asked, what is the diagnosis? I was studying medicine with the expressed purpose of becoming a psychiatrist. I spoke up, giving the diagnosis of anxiety-neurosis. He said,"No. This is a food allergy". The rumor was that this allergist had ideas that most of my instructors did not agree with. I dismissed his diagnosis until twenty years later (1969).

"In my second year of psychiatric residency training, I read the book *Neurosis* by Walter Alvarez, M.D. In this book, he describes headaches and many symptoms of neurosis and psychosis occurring during deliberate food testing. I could not believe this. I thought Dr. Alvarez made a fool of himself. After all, he was an internist, not a psychiatrist and why was he dabbling into psychiatry. I dismissed his observations and didn't look at this book again for 16 years. I was wrong for ignoring him.

"I learned behaviorism from Joseph Wolpe, M.D. He and I shared the opinion that schizophrenia must be organic in origin. In 1965, he sent me an article by Theron G. Randolph, M.D.

"Amazingly, Dr. Randolph described many mental and physical symptoms as disappearing on a five day fast and reemerging during food tests on deliberate food tests of single foods. I set this article aside as impossible.

"In 1969, I was a consultant to a boarding school of some 100 socially and educationally disordered adolescents. I was responsible for a neurological and psychiatric examination on each student. One-third either were or had been psychotic. Saul Klotz, M.D. Internist-Allergist was responsible for their physical needs. He proposed to me that we do a double-blind study to determine the extent to which food allergies and non-allergic hypersensitive reactions related to their numerous symptoms. Together we did a double-blind study using food extracts. The results were overwhelmingly positive. I now had to consider how wrong I had been by ignoring the evidence that had come to me through the years concerning maladaptive reactions to foods and symptom-production.

"I was invited by a private psychiatric hospital to set up a study to determine the causes of schizophrenia. Based on the double-blind study of Saul Klotz, I initiated a study of the relation of foods to symptoms in my mental patients. To this, we added a nutritional survey and a survey for infectious agents. This research followed the advice of Theron G. Randolph, M.D. of a five day fast preceding food testing of single foods. This study resulted in the publication of two books, Brain Allergies and Victory Over Diabetes. From 1970 through 1990, I tested thousands of both psychiatric and non-psychiatric patients with a five day fast followed by deliberate food testing. The patients were monitored for pH changes and blood sugar changes. Viruses, especially Epstein-Barr, cytomegalovirus and human herpes virus #6 emerged as being consistently in our mental patients and those with more serious physical symptoms. All patients maladaptively reacting to foods had some degree of carbohydrate disorder. Maturity-onset diabetes emerged as the end result of prolonged reactions of food addiction. The brain/ gut relationship was obvious.

"Therefore, during my testing I observed many minor to major gut reactions to foods. In 1973, a schizophrenic young man entered my research program. His father, president of a bank in Houston, was so impressed by his son's recovery that he proposed a \$4,000,000 research program using my method of treatment. This money was to be provided to the medical school at Galveston over a four year period. I was invited to Galveston to do the project. However, I was satisfied with my current research program and decided not to move to Galveston for it. I went to Galveston and explained my system of diagno-

sis and treatment of psychotics. The medical school accepted the \$4,000,000.

"To my amazement, they didn't do anything I had outlined. Instead, they diverted the money to other projects but did do a Rossette test on a few schizophrenics. The results are published in the book, *The Biology of the Schizophrenic Process* edited by S. Wolfe. The conclusions from the Rossette test is that schizophrenia is either an immunologic reaction or a viral infection since both of these look the same on the Rossette test. This did confirm my findings but disappointingly, did not pro-vide a statistical value of my treatment.

"It is a strange phenomena that there is inherently a resistance for doctors to recognize the relationship between foods and the development of both acute symptoms and chronic degenerative diseases. Some say they are waiting for more evidence such as more double-blind studies or the resolution of conflicting data. It appears to me that this waiting for evidence which really is already here in abundance, is not really the central problem.

"The problem is that it is hard for doctors to change their behavior once they have learned a comfortable set of routines. Doctors, by and large, have obsessive-compulsive personalities. This serves them well in their massive amount of learning that they need to do during medical school and residency training, however, it also serves as a handicap in making changes. The physician becomes comfortable with a set of routines and uncomfortable with making any changes. Also, there are outside pressures such as, if a specialist changes his routines, he will lose some of his referral resources. Physicians, for many reasons, find it difficult and anxiety-producing, to make changes. In my opinion, this mediates against progress more than any other thing.

"The addition of magnetic therapy to my ecology and infection program became a natural. It had been demonstrated by Albert Roy Davis that a negative (south-seeking) magnetic field both alkalinizes and oxygenates the biological system. I had already determined by my monitoring that symptom-producing reactions to foods or chemicals was acidifying and oxygen-reducing. I used alkalinizing agents such as soda bicarbonate and oxygen to relieve symptoms. I found that a negative (south-seeking) magnetic field was more predictable in relieving symptoms than alkalinization with soda bicarbonate. I had demonstrated that degenerative diseases were simply the extensions in time of the acute reactions in which the disordered chemistry of the acute reaction and of the chronic disease having the same symptoms was identical. It became logical then to extend the time of the application of a negative (south-seeking) magnetic field to reverse and heal degenerative diseases along with avoiding the foods, being well-nourished and treating the viral infections. I was delighted to find that a negative (south-seeking) magnetic field will kill microorganisms whether they are viruses, fungi, bacteria, parasites or cancer cells. Gastrointestinal disorders encompass diseased conditions of the entire gastrointestinal tract (gastrointestinal) from mouth to anus and in organs associated with the gastrointestinal tract such as the gallbladder, liver, and pancreas, emptying excretory contents into the gastrointestinal. The diagnostic classification of these gastrointestinal disorders encompass such as 1) infections, 2) immunologic reactions, 3) the minor gastrointestinal reflux states and irritable bowel disorders as well as the major inflammatory bowel diseases (celiac disease, Crohn's disease and ulcerative colitis).

"Viral infections, especially noted as herpes simplex I

with lesions on the lips and mucous membrane of the mouth, chronic bacterial infections of the mucus membrane of the mouth and the gums around the teeth, and acute bacterial infections of the mouth and throat such as acute streptococcus infection. The esophagus can be acutely or chronically infected the same as the mouth. The stomach and duodenum can be infected with helicobacter pylori producing ulcers. The gall-bladder and pancreas can be acutely or chronically infected with microorganisms. The liver can be acutely or chronically infected with microorganisms, especially noted is viral hepatitis. Cirrhosis of the liver can develop secondary to these infections and or due to the processing of toxins. The anus and adjacent colon can be infected with microorganisms. The small and large colon can be infected with viruses, bacteria, fungi and parasites.

"There are several specific identifiable bacteria that can cause diarrhea and inflammation of the colon. There are specific antibiotics useful in killing these bacteria. My objective observation is that a negative (south-seeking) magnetic field can kill all types of microorganisms (viruses, bacteria, fungi and parasites). This fact is fundamental in understanding the value of magnetic therapy. It is logical to use antibiotics specific for each infection. Magnetic therapy using a negative (south-seeking) static magnetic field and colloidal silver providing a negative (south-seeking) static magnetic field can be used along with the specific antibiotics or used without the antibiotics."

# William H. Philpott, M.D.'s Response upon receiving the Linus Pauling Award

"I really thank you a lot for this. I just wanted to say that Linus Pauling was a friend of mine and he wrote the foreward to my book, *Brain Allergies* and I thought I would just read a little bit of this so that you would see his attitude towards my work."

"The concept that a change in behavior and in mental health can result from changing the concentrations of various substances that are normally present in the brain is an important one. This concept is the basis of orthomolecular psychiatry, a subject that is treated in considerable detail by Dr. William Philpott and Dwight Kalita in their book, *Brain Allergies*. The other general concept, also a closely related one, is that of human ecology. The idea is that substances in our environment can have a profound effect on mental health and behavior. These can be introduced into the environment as a result of our technical culture.'

"I just wanted you to realize that Linus Pauling did appreciate ecology and nutrition both, and said so in this forward to my book. We shared that as a common interest. I have been the one that was responsible for introducing ecology to orthomolecular medicine and the orthomolecular ideas to ecology medicine. I have been a catalyst in getting orthomolecular medicine and environmental toxicology medicine together. This organization needs to, and is, furthering the interest of Linus Pauling and this very important focus in medicine. It will make a difference and I want to congratulate all of you for this interest; keep it growing because it will become a more substantial part of medicine."

# Ethics of Magnetic Diagnosis and Therapy

Magnetic instruments that have been cleared by the FDA and can make claims of <u>value</u> within the limits of their clearance -these FDA cleared instruments include but are not exclusive to MRI, XOMED hearing aid, TENS class of instruments, diapulse, nerve testing instruments, Magneto encephalogram, Magneto cardiogram, etc. Industrial magnets have not been cleared as medical instruments and cannot claim cure for any condition or disease. Research is in process to enlarge the scope of claims of value of magnetic therapy. The person using magnets to treat a disease needs to become party to a medical supervised magnetic research project. The

# Depth of Penetration / Gauss Field Strength

Antibiotic and anti-cancer therapy require a minimum of 25 gauss. The higher the gauss strength, the more therapeutic.

All measurements are made at the center of the product

Product	Surface	1/2"	1"	11/2"	2"	3"	4"	6"	8"
14" x 25" Multi-	324	100	40	25	15	12	10	8	6
14" x 25" Multi- Purpose Pad w/ a 4" x 6" x 1/2"	450	190	112	80	60	40	25	15	10
Mega-Field	70	25	15	8	6	5	4	3	
4" x 6" x 1/2"	280	230	180	140	112	70	45	23	15
4" x 6" x 1"	525	450	355	275	210	125	75	35	25
Power Disc	840	375	135	65	30	16	10	4	-
Mini Block	730	260	98	44	23	7	3	-	-
Low-Profile	1250	325	86	29	15	5	-	-	-
<u>Two</u> stacked Low-Profile	2130	550	145	50	20	10	3	-	-
Soother Flex Mat	135	35	20	15	10	4		-	-
Deep Penetrating	200	70	40	30	23	15	10	5	-
Deep Penetrating Soother Flex Mat w/ 4" x 6" x 1/2"	400	245	180	135	105	65	37	15	7
2 - 4" x 4"	100	89	68	48	34	13	6	-	-
4 - 4" x 4"	210	180	140	94	65	32	13	4	~
Bed Grid**	25-Gau	ss at 2	3" abov	e the b	ed.	-	-	-	
Super Hat	-	-	-	-	-	-	65*	-	-

\*This is a measurement taken at the equidistant center inside of the hat. All other measurements are unnecessary.

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\*\* The 70-magnet Bed Grid supplies a therapeutic value magnetic field of 25 gauss up to 18" away from the surface of the bed.

†Measurements were made with a GM-1A Gauss Meter, Manufactured by Applied Magnetics Laboratory - Baltimore, MD

magnets used as described in *The Magnetic Health Quarterly* are industrial magnets for which no claim of cure of disease is made. The application of industrial magnets for sleep and pain is a popular self-help application. The magnetic treatment of diseases demands medical supervised diagnosis and treatment in link with a research institutional review board following FDA guidelines for research. William H Philpott, M.D. presents his observations, theories, research protocols and answers to questions for consideration in the hopes of making progress in the application of Magnetic Therapy. Those interested in becoming party to the magnetic research project should contact William H. Philpott, M.D. The goal of research is to firmly establish magnetic therapy as a part of traditional allopathic medicine, which will popularize the application of and provide for insurance coverage for magnetic therapy.

Those choosing to proceed with use of magnets for medical purposes without medical supervision do so on their own responsibility. There is no restriction of the purchase of magnets for whatever reason they are used. There is no restriction on the writing, releasing, acquiring or purchasing of information about magnets.

# Disclaimer

I do not claim a cure for any degenerative disease or even guarantee relief of pain or insomnia by means of magnets. My only claim is that there is evidence justifying a definitive controlled research project following Federal Food and Drug Administration (FDA) guidelines to determine the value and limitations of magnetic therapy. These <u>guidelines require a physician diagnosis and</u> <u>physician monitoring</u> under the supervision of a Scientific Institutional Review Board. The application of magnetic fields to humans has been approved by the FDA, which were based in part on toxicity studies, and has been classified as "not essentially harmful".

## How Dr. Philpott Changed His Medical Practice

This Magnetic Health Quarterly represents my personal focus on health maintenance and disease reversal that has developed from my four years of basic medical school education. specialty training in neurology, psychiatry, allergy-immunology, forty years of medical practice, and my post-retirement research that guides physicians in an examination of the values of static magnetic field application to prevent and reverse degenerative diseases. I am proud to be a medical physician and I am convinced that medical science has a central truth about health maintenance and disease. The improvement in medical practice during my period of practice and observation has been tremendous. Beyond the progress what can and what should we incorporate in established scientific knowledge to the practice of medicine? This Magnetic Health Quarterly is involved with what I have observed that has been largely ignored or left out in spite of the abundance of information on the respective subjects. I have systematically recorded my observations concerning these neglected areas.

The public, through their congressional representatives have mandated the National Institutes of Health to widen its scope of research to include promising alternative areas beyond the current traditional application of medical science. This is a wise move since there are valuable alternative areas that have been neglected or ignored. To fulfill its mandated obligation, the National Institutes of Health have appointed advisory committees in important scientific areas to provide guidelines for research. One of the advisory committees is the Electromagnetic Committee, which includes five Ph.D. physicists, and two M.D.'s knowledgeable in electromagnetics. The two M.D.'s are Robert 0. Becker, M.D. and myself. Based on the recommendations of this committee, research projects financed by NIH grants are in process.

Biochemistry has become more readily understood than biophysics. Biochemistry has developed many promising, symptom-relieving agents and synthetic replacements for the failing human system. Biochemistry has helped us come to understand the role of nutrition, the role of oxygen, and the roles of many, many more necessary biochemical functions of human metabolism. There are great economic rewards for those marketing these valuable biochemicals. Biophysics has more slowly progressed in its medical applications. The current medical horizon holds the promises of biophysics being equal to or even superior to the therapeutic values of biochemistry. This emerging promise of values especially relates to the biological responses to magnetic fields. The values of biological responses to heat and cold have been well incorporated into physical medicine while the biological responses to magnetic fields has been neglected.

The biological response to magnetic fields has been, to a considerable degree, a mystery until recently. Medical science has been using magnetism without knowing it was using magnetism. Examples are such as electro-convulsive therapy used in mental illness. We can now understand that electricity produces magnetic fields. For example when an electric current produces a high neuronal exciting positive (north-seeking) magnetic field it produces a seizure, following which the brain switches its magnetic polarity from a usual positive (north-seeking) to a negative (south-seeking) magnetic field for a few minutes. This electromagnetic-produced general anesthesia calms neuronal functions and relieves mental symptoms. The thousands of enzyme catalytic reactions occurring in human physiology are energy-driven by magnetic fields. By understanding magnetic field energy enzyme catalysis, we no longer assume some mysterious, spontaneous enzyme catalysis, but instead, with this new knowledge, magnetic fields can be harnessed to energy-drive specific desired enzyme catalysis. Thus, a static negative (south-seeking) magnetic field can be arranged to produce melatonin and growth hormone during sleep. A static negative (south-seeking) magnetic field can be harnessed to enzymatically produce adenosine triphosphate (ATP) and reverse the inflammatory consequences of oxidation reduction endproducts (free radicals, peroxides, acids, alcohols and aldehydes) in which oxygen is released from its bound state in these inflammatory products.

It is universally true that no one wants to admit that they have symptoms from the favorite foods they are eating. They ask, how could a food that makes me feel good when I eat it, make me sick 3 or 4 hours later? To most people, this is unbelievable. Physicians are, equally with their patients, resistant to accepting maladaptive reactions to foods as a cause of their symptoms. The physician is taught to look everywhere else than foods and also if it is foods there is likely little or nothing that can be done about it, thus, symptoms produced by maladaptive reactions to foods is a grossly neglected area in therapeutic medicine.

A significant aspect of this dilemma of dismissing food reactions as causes of acute symptoms and degenerative diseases is inherent in the change that occurred in the 1920's when antibodies and complement disorders were discovered. Up to that time, an allergic reaction was simply a symptom production by an exposure to a substance. After this discovery of isolatable immune mechanisms as an explanation for allergy, allergic reactions lost their mystery. They went from no known cause to known immunologic causes. In terms of symptoms from food reactions, those without discernable immunologic

factors were dismissed as imaginary or psychosomatic and so forth. Only in more recent years, has there emerged evidence of non-immunologic causes of symptoms from foods. These are now being referred to as non-immunologic sensitivities or addictions. The resistance to accept food reactions as the cause of symptoms remains only in the minds of patients and physicians alike.

In the 1940's, Albert Rowe, M.D., Allergist, of San Francisco, observed the relationship of non-immunologic food reactions producing symptoms. He used an initial avoidance followed by a rotation diet to handle these symptoms. In 1950, I attended, along with a dozen other senior medical students, a presentation by Alfred Rouse, M.D., an Allergist. He presented a case of a woman who became anxious when given a specific food. He asked our class, "What is the diagnosis?" I was studying medicine with the specific intention of becoming a psychiatrist. I answered his question with, "This is an anxiety neurosis." He rejected my diagnosis and to my surprise, maintained pleadingly, that an allergic reaction was involved. At the time, all I obtained from this was that he had ideas that were different than most of my instructors and therefore, I dismissed his hypothesis.

In 1952, while a resident in psychiatry, I read a book written by Walter Alvarez, M.D. entitled, *The Neuroses*. I was interested in what this honored internist at Mayo Clinic was saying about neuroses. Surprisingly, he devoted several pages to describing headaches, dulled brain function and emotional reactions to many different types to food reactions. At the same time in my residency training, all of my instructors were completely ignoring these possibilities. At the time, I thought Dr. Alvarez had made a fool of himself. He wasn't a psychiatrist. Why would he be drawing all of these conclusions that had a bearing on psychiatry?

In 1966, my friend Joseph Wolpe, who is referred to as the father of behaviorism, sent me a paper by Theron G. Randolph, M.D. In this paper, Dr. Randolph described fasting patients for five days and when feeding them meals of single foods, many symptoms emerged including the major symptoms of schizophrenia, manic-depression and neuroses. At the time, I thought this was impossible and I set the paper aside. It was four years before I read this paper again.

In 1970, I was a consultant to a school treating adolescents who were socially and educationally disadvantaged. Saul Klotz, M.D., Allergist, proposed that we do a double-blind study on these patients to see if any of their symptoms related to food reactions. This double-blind study was overwhelmingly positive, and from this I was encouraged to initiate a five-year study into the relationship between reactions to foods, chemicals and inhalants to mental symptoms. This resulted in my book, Brain Allergies. I was encouraged to do this project by Theron G. Randolph. I reviewed the writings of Herbert Rinkle, Frederick Spears, Walter Alvarez, Howard Rappaport and others. Marshall Mandell spent one day a week for five years supervising my examination of my patients. I followed Theron G. Randolph's method of fasting for five days followed by test exposures to single foods for the next month. The evidence was overwhelming. This study confirmed the allergists who had made observations of the emergence of emotionally and even mentally disordered symptoms due to food reactions, chemicals and inhalants.

Quite unexpectedly, I made another observation that resulted in my book, *Victory Over Diabetes*. The maturity-onset diabetic patients among my mental patients, not only had the clearance of their mental symptoms but also the reversal of their diabetes. It became clear that maturity-onset; non-insulin type diabetes mellitus is the product of food addiction. John Potts followed up on this with four excellent statistical studies all of which were published in the abstract issue of the Journal of Diabetes. There then followed what to me is a strange phenomenon. Even though this work was done the right way and published in the right place, it had no serious impact on the practice of medicine. Here I had demonstrated conclusively that maturity onset diabetes is due to food addiction and that a 4-Day Diversified Rotation Diet routinely reversed diabetes mellitus and that following such a diet prevented the development of diabetes mellitus. Yet, it was virtually ignored. This again, shows how difficult it is to establish a new system of therapy. You are met with all the resistance of the already established method, even though a new method is demonstrated to be superior.

It is a strange phenomenon that in spite of this knowledge about maladaptive reactions to foods and the role of addiction in these foods, we still have numerous diets to reduce weight or to treat diabetes, which ignore food addiction as the driving force of the compulsion to eat specific foods and overeat. Diets that do not honor and properly treat food addiction drives the person, first of all, into the early stage of the diabetes mellitus disease process such as hypoglycemia and the later stage of hyperglycemia given the diagnostic name of diabetes mellitus type II. Properly engineered, the 4-Day Diversified Rotation Diet with the help of magnets initially relieves the symptoms of addiction so the person is comfortable while overcoming their addiction, help in retraining the compulsion to overeat will not only manage obesity but also prevent or reverse type II diabetes mellitus. It is known that approximately 80% of patients, at the time they are diagnosed as having maturity onset-type diabetes mellitus Type II, are obese. It was interesting for me to observe that the reversal of the diabetes mellitus in my patients was not dependent on weight reduction. The diabetes mellitus disappeared within five days as soon as the subject had gone through the food addiction withdrawal phase. There was, at that time, no time for weight reduction to have occurred. Obesity is a stress and should be reversed but it is not obesity as such that makes the person diabetic. It is food addiction.

# THE THERAPEUTIC SIGNIFICANCE OF NEGATIVE MAGNETIC POLARITY AND NEGATIVE ION POLARITY HOW NEGATIVE IONS ARE FORMED IN NATURE

The atmosphere, and even within biological systems, is flooded with free static field electrons. There are electromagnetic conditions both in the atmosphere and within biological subjects which turn these static electrons to have either a positive or a negative polarity. In the positive polarity, the electrons are spinning clockwise. In the negative polarity, the electrons are spinning counter-clockwise. The activated electrons attach to particles that are available and produce ions, either positive or negative. Before and during a storm, the atmosphere is flooded with positive ions. The biological response of both animals and people to these positive ions is well-documented as producing tension, anxiety, depression and in cases of predisposed illnesses, physical or mental, the symptoms of the illness are worsened. After a storm is over, then the atmosphere is flooded with negative ions in which both animals and people respond with a sense of comfort and symptom-reduction.

In many parts of the earth, there are waters that have been known for their healing value. A volcanic mountain is a negative magnetic field and is in fact, a magnet. The volcanic mountain is a negative

magnetic field and the molten mass beneath the volcano is a positive magnetic field. Water that filters down through the volcanic ash of this negative magnet mountain carries a negative ion charge. Characteristically, there are 70+ minerals that are low atomic weight minerals which become negative ions in which negative counter-clockwise spinning electrons attaches to the minerals. This is a stable situation in which when the water with its minerals is removed from the mountain, it remains composed of negative ions. At this same time, the water is always alkaline and is micro water in which the water is in smaller units than water that does not have negative ions. It is important to observe that a volcano and its molten mass below is indeed a magnet, the same as the magnets that are made industrially with negative and a positive magnet field. It is important to note that this negative magnetic field itself of the negative pole of the volcanic mountain charges the low atomic weight minerals to be negative ions. In the same order the negative magnetic field of an industrially produced magnet makes negative ions.

# HOW NEGATIVE IONS ARE FORMED BY ION GENERATORS AND BY STATIC MAGNET- FIELDS

Electrolysis-type ion generators can be arranged to release into the air only negative ions. Thus a house can be flooded with negative ions with health values. The negative magnetic field of a static field magnet can be used to produce negative ions. The negative magnetic field of a static field magnet activates electrons to be spinning counterclockwise. Although the magnet field is static, the electrons in the field are activated and thus are not static. Thus, a static negative magnetic field is indeed an energy field with movement spinning of the electrons in that field. A negative magnetic field is a source of electro magnetic energy in terms of a biological response. Thus, sitting a glass of water on the negative magnetic field of a static field magnet will electromagnetically charge up the water to have negative ions of both the mineral content and other particles in the water. Placing nutrients on the negative magnetic field of a static field magnet will charge up the nutrients to be electromagnetic charged negative ions.

# THE SIGNIFICANCE OF NEGATIVE MAGNETIC POLARITY OF A STATIC FIELD MAGNET AND NEGATIVE IONS IN WATER, AIR AND NUTRIENTS NEGATIVE ION CHARGED

The biological response to a negative electromagnetic polarity, whether from a static field magnet or negative ions is that of alkaline-hyperoxia. The biological response to a positive static magnetic field and positive ions is acid-hypoxia. Much is known of the significance of alkaline-hyperoxia maintaining health and acid-hypoxia toxicity producing degenerative diseases. It is health-promoting for us to drink water from a natural source such as the volcanic source which has turned the water into alkaline micro negative ion water or the water treated by an electrolysis unit producing alkaline micro negative ion water or placing the water on the negative field of a static field magnet. It is wise to flood the air of our homes with negative ions from a negative ion generator. It is health-promoting and disease-reversing to use all sources of negative magnetic fields and negative ions to keep ourselves well and reverse our acid-hypoxic toxic diseases.

The negative magnetic field of a magnet provides the optimal therapeutic value for body treatment. Treatment of air, water and nutrients are a valuable adjunct to magnet therapy.

Negative electromagnetic polarity is the energizer of oxidoreductase enzymes which make adenosine triphosphate which is the body's central enzyme energizer and the central metabolic detoxifier.

STATIC MAGNETIC FIELD SOURCES FOR PRODUC-ING NEGATIVE IONS OF WATER AND NUTRIENTS (See Polar Power Magnets Catalog) • One 4" x 6" x 1/2" ceramic block magnet. This is a flat surface static field magnet with positive and negative magnetic polarity on opposite skies.

USES:

On the negative magnetic pole side, place water (municipal treated or ground water) and nutritional supplements for a minimum of five minutes. The longer, the better.

There are many other uses for this 4" x 6" x 1/2" magnet such as heart treatment for atherosclerosis, treating aches and pains, inflammation, spinal treatment, local infections, local cancers and much more. See my Magnet Therapy book and my quarterlies.

Cost:	\$ 49.95
Shipping:	<u>8.50</u>
	\$ 58.45

• Ceramic disc magnets of 1-1/2" x 1/2". These magnets are provided as Soother One which has two 1-12" x 1/2" disc magnets and a band, 2" x 26". These discs have positive and negative magnetic fields on opposite sides.

USES:

The negative magnetic pole of the disc can be used to produce negative ions of water and nutrients.

There are multiple uses for the two discs and wrap such as bitemporal placement for headaches and relief of emotional and mental symptoms, aches and pains, inflammation and small local infections and small local cancers.

See my writings for further details.

COST:	
Soother One	\$ 21.95
Shipping	<u>8.50</u>
Total	30.45

# William H. Philpott's MAGNETIC THERAPY MOTTO:

I do not claim that magnets cured you; you claim that magnets cured you.

Even without being promised a cure, magnetic therapy is worth a try!

# THE DEFINITION OF MAGNETIC POLARITY AS USED IN HUMAN PHYSIOLOGY

A magnetometer is used to identify positive (+) and negative (-) magnetic poles. A magnetometer is a scientific instrument, which identifies magnetic polarity in terms of electromagnetic polarity, which is positive (+) and negative (-) rather than the geographic compass needle identification of north and south. When using a compass to identify magnetic poles, a north seeking compass needle identifies a negative magnetic field of a static field permanent magnet. The north-seeking needle of a compass is magnetic positive and therefore points to (seeks) the magnetic negative north pole of the earth and also the magnetic negative magnetic field of a static field permanent magnet. The south-seeking needle of a compass is magnetic negative and therefore points to (seeks) the magnetic positive south pole of the earth and also the positive magnetic field of a static field permanent magnet.

Static field permanent magnets can properly be characterized as DC magnets because they are magnetized by a direct electric circuit current in which the positive electric pole produces a positive magnetic field and the negative magnetic pole produces a negative magnetic field. Those magnetically charging magnets from a DC electric current understand this relationship. Robert O. Becker, M.D., prefers to use the term DC magnets as applied to static field permanent magnets.

In 1600, William Gilbert (DE MAGNETE) was the first to point

out that the navigator oriented himself with the compass needle pointing toward north, which he called north, when in fact the compass needle pointed north is a south magnetic field.

Several scientists throughout the years have identified this error in naming the magnetic poles. This error in identifying poles still persists as tradition.

The physicist, B. Belaney (*New Encyclopedia Britannica* 1986. Vol. VIII, pages 274-275) again identified this geographic error in identifying magnetic poles and termed it "semantic confusion". To avoid this semantic confusion, he recommended using the electrical polarity definition of positive (+) and negative (-) as applicable to magnetic poles in which a positive electric pole (+) is also a positive magnetic pole (+qM) and a negative electric pole (-) is also a negative magnetic pole (-qM). "M" stands for magnetism.

The body is an electromagnetic organism with a direct current (DC) central nervous system in which the brain with its neuronal bodies is a positive magnetic field and, also produces a positive electric field. The extensions from the neuronal bodies are a negative magnetic field and also produce a negative electric field. The human body does not have a storage battery from which electricity flows or an electric dynamo from which electricity flows. Rather, by a mechanism comparable to a magneto, the human body turns its magnetic fields into DC electric current. It is also true that each cell of the body has a positive and negative magnetic field in its DNA. Since the human body functions on a DC electromagnetic circuit, it is especially appropriate to use the positive (+) and negative (-) identification of magnetic polarity when relating magnetism to the human body. The human body does not have a north and south poled field, but rather has positive and negative magnetic fields from which electricity is produced. A geographic definition not applicable to human physiology whereas, an electromagnetic definition of magnetic polarity is essential. If and when the geographic definition of polarity is used, it still requires a translation into usable terminology for application to human physiology.

For the above reasons the definitions of positive (+) and negative (-) magnetic fields are used when applying magnetics to human physiology. The traditional compass needle oriented naming of magnet poles is included in brackets as negative (south-seeking) and positive (north-seeking).

There is a need to understand the navigational error in identifying the magnetic poles as well as the parallel identification in identifying DC electrical current poles and DC static field permanent magnet poles made from the DC current. To those who have examined for and identified the distinctly opposite biological responses to opposite magnetic fields, the separate identification of the magnetic poles is an important must. To those not experienced in the knowledge of separate biological responses to opposite magnetic poles, the magnetic poles and the gauss levels needed for these responses is what is making biophysics become a predictable science parallel to the predictable industrial application of magnetics.

#### STATUS OF THERAPEUTIC MAGNETISM

Since Ancient times, the beneficial biological response to magnetism has been praised by a few and doubted by a large number. The magnetic force at a distance that could not be seen leads to doubts of magnetism biological responses. The development of the compass produced a general acceptance of the actuality of the existence of magnetism. During the past two hundred years, the interest in the therapeutic value of magnetism has experienced considerable fluctuations.

The physicist, Albert Roy Davis' observations of the opposite biological response to opposite magnetic poles, set the stage for understanding there were two biological responses to magnetism. It is now known biological response to separate magnetic poles can be as predictable for biological responses as the use of electromagnetism used in our industrial world. It is now understood the magnetism functions at the atomic level with the movement of electrons which influence biological function. The positive magnetic field (traditional north-seeking pole) spins electrons clockwise while the negative magnetic (traditional south-seeking pole) spins electrons counterclockwise. These opposite electron spins from opposite magnetic poles provides predictable opposite biological response. The biological response to the positive magnetic field is acid-hypoxia. The biological response to the negative magnetic field is alkaline-hyperoxia.

Robert O. Becker <sup>2</sup> documented the separateness of the positive (north-seeking) and negative (south-seeking) magnetic fields. The positive (north-seeking) magnetic field is the signal of stress injury. The negative (south-seeking) magnetic field governs healing and normalization of biological functions. In terms of neuronal response, the positive (north-seeking) magnetic field is exciting and when sufficiently high such as during sun flares, can even precipitate psychosis in those so biologically predisposed. The negative (south-seeking) magnetic field is neuron calming and encourages rest, relaxation, sleep and when sufficiently high in gauss strength, can produce general anesthesia. Robert Becker anesthetized his small experimental animals with a negative (south-seeking) magnetic field.

My research has abundantly confirmed these observations of Albert Roy Davis and Robert O. Becker. As a neurologist, I documented by EEG that a positive (north-seeking) magnetic field is neuronally exciting. The higher the gauss strength, the higher the excitement. A sufficiently high positive (north-seeking) magnetic field can evoke seizures in those so predisposed. A negative (southseeking) magnetic field is neuronal calming. The higher the gauss of the negative (south-seeking) magnetic field, the slower the brain pulsing on the EEG. This information sets the stage in understanding how a negative (south-seeking) magnetic field controls neuronal excitement in neurosis, psychosis, seizure potential, addictive withdrawal and movement disorders. not applicable to human physiology whereas, an electromagnetic definition of magnetic polarity is essential. If and when the geographic definition of polarity is used, it still requires a translation into usable terminology for application to human physiology.

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# SINGULAR BIOLOGICAL RESPONSE TO SINGULAR MAGNETIC POLE FIELDS

There is a classic traditional mechanical magnetic model from which there is a predicted two magnetic pole effect from a single magnetic pole field. In this model, the magnetic field radiates out from the singular magnetic pole of a magnet and turns back to join the opposite pole. The traditional assumption is that when the mag-

netic field changes direction going backward towards the magnetic field on the other side (other pole) of the magnet that this changed direction is the opposite magnetic pole.

I have prepared magnetic fields honoring this assumption that there are of necessity both magnetic poles on the same side of the flat surfaced plate-type magnet with poles on opposite sides of the flat surface. I have compared this with the assumption that there is a single magnetic field on opposite sides of a magnet. I have not demonstrated by biological responses including brain wave (EEG) responses that there are two opposite magnetic fields on one side of the magnet. Consistently, I have observed a single magnetic pole biological and EEG response to single magnetic fields of flat surfaced magnets with poles on opposite sides of the flat surface.

There is another non-traditional magnetic mechanical model that states that the magnetic poles change at the equator by rotating 180 degrees (minor image). Obviously, in the case of the earth, the magnetic fields change at the equator producing a northern hemisphere of a negative (south-seeking) magnetic field and a southern hemisphere of a positive (north-seeking) magnetic field. This model indicates that the magnetic field radiating up from the negative (south-seeking) magnetic field of the magnet as well as the magnetic field that buckles back to the opposite side of the magnet are both a negative (south-seeking) magnetic field and only become the opposite magnetic pole field when it enters the half-way point of the magnet (equator).

Even though a static magnetic field does not move, it still is an energy field by virtue of the fact that electrons are moved by the static magnetic field. The negative (south-seeking) static magnetic field rotates (spins) electrons in that field counter-clockwise. A positive (north-seeking) static magnetic field rotates (spins) electrons in that field clockwise. The movement of electrons in a static magnetic field is called the Aharonov-Bohn electromagnetic potential. Akaira Tonomura has also confirmed this. This change in rotation between the positive (north-seeking) and negative (southseeking) magnetic fields occurs at the equator of the magnets and not at the point where the magnetic field turns back toward the opposite magnetic field. This magnetic mechanical model agrees with the clinical response evidence of the magnetic field being a full individual field on each side of the magnet.

The magnetic field remains the same pole whether directly above the magnet or the magnetic field that is turning back toward the opposite side. If it did become the opposite pole when it turned back, it would then not proceed to the opposite side. This is true since the same poles repels. Therefore, it has to remain the negative (south-seeking) pole that buckles back toward the positive (northseeking) magnetic field. This being true, the pole cannot change until it reaches the equator in the magnet between the two poles. An example is that in the case of the earth's magnetic field. The south pole (+) goes toward the north pole (-) and changes polarity at the earth's equator.

## (See Depth of Penetration/Gauss Field Strength, Page 4) MAGNETIC FIELDS BIOLOGICAL RESPONSES

## UNIVERSAL TRUTHS

Magnetic biological responses are universally the same under any and all sections of the body tested and both of earth's magnetic hemispheres.

## 1. Centrad and centrifugal atomic energy expressions.

At the atomic level, the counter-clockwise rotation pulls electrons toward the center proton (centrad) while the clockwise rotation of electrons pushes outward from the center proton (centrifugal).

Therefore, there are no free radicals in a negative magnetic field with a counter-clockwise spiral spin of electrons pulling to-

ward the center. Thus, a negative magnetic field is a biological antistress, anti-inflammatory response.

There are free radicals in a positive magnetic field with a clockwise spiral spin of electrons pushing away from the center. Thus, a positive magnetic field is a biological stress-inflammation response.

#### 2. Centrad and centrifugal weather energy expressions.

In the northern magnetic hemisphere of the earth the energy expression of counter-clockwise spiral spinning of electrons is with energy expression being toward the center.

In the southern magnetic hemisphere of the earth the energy expression of the clockwise spiral spinning of electrons is with the energy expression being away from the center.

Varied colliding wind streams with varied temperatures and varied pressures can override the earth's natural occurring hemispheric magnetic polarities and produce a local magnetic field opposite to the earth's hemispheric magnetic field. In any event, wherever it is in the earth's hemispheric magnetic field, a counter-clockwise rotation energy pulls toward the center (centrad) and clockwise rotation energy pushed away from the center (centrifugal).

**3.** The Neuronal pulsing frequency relationship to neuronal magnetic field strength.

The brain's response to a negative magnetic field is a decreasing of the pulsing frequency of the brain relating specifically to the gauss strength of the magnetic field. The higher the gauss strength is the slower the pulsing magnetic field. With a positive magnetic field, the higher the gauss strength, the faster the pulsing field. This reveals that a negative magnetic field is anti-stress and the positive magnetic field is biological stress.

It also holds that the pulsing frequency of the brain can be driven by an external pulsing field using sight, sound, tactile or brain stem with the pulsing field being placed on the upper back of the neck and low occipital. The pulsing field can drive the magnetic field of the brain. Pulsing fields of 12 cycles per second and less evoke a brain negative magnetic field. The intensity of the pulsing determines the gauss strength of the pulsing field. The pulsing field plus the intensity of the pulsing field determines the magnetic behavioral state of the brain. Eight to twelve cycles per second are relaxation. Six cycles per second is relaxation. Four cycles per second is dissociation. Three cycles per second is lapse states. Two cycles per second is sound sleep. One cycle per two seconds is harmless general anesthesia.

# 4. A 3-dimension spiral electron spin is provided by magnetic fields.

In electromagnetic physical nature, the 3-dimensional spiral is frequently expressed. This 3-dimensional spiral is present in the light refractory levo (left) substances and dextro (right) sub stances. These are 180-degree mirror image isotopes. Magnetism has the same levo (left) and dextro (right) 3-dimensional spiral spin of electrons, the same as the levo and dextro substances in relationship to light. The biological effects are opposite as to the separate energy manifestations. In the case of amino acids and fats, only the levos have nutritional value. in the case of magnetism, the levo (left spiral electron spin) is an anti-stress, healing and normalizing counter-stress correction from the biological stress dextro (right spiral electron spin).

5. A positive magnetic field is stressful and therefore, does not heal the human body.

6. A positive magnetic field is biologically stressful, raises endorphins and with frequent use, is addicting.

7. A negative magnetic field is biologically anti-stress, does not raise endorphins and is not addicting.

8. A negative magnetic field is anti-stressful and governs human cellular normalization and healing.

9. A negative magnetic field governs sleep by evoking melatonin production by the pineal gland.

10. A positive magnetic field blocks the production of melatonin by the pineal gland.

11. A positive magnetic field biological response is acid-hypoxia.

This is compatible with the metabolism of microorganisms and cancer and not compatible with human metabolism.

12. A negative magnetic field biological response is alkaline-hyperoxia.

This state is necessary for human metabolism and is not compatible with the metabolism of microorganisms and cancer.

13. A positive magnetic field biological response is vasodilatation and acid-hypoxia.

This makes it unsuited for the treatment of edematous and bleeding areas from acute injuries.

14. A negative magnetic field biological response is alkaline-hyperoxia, and due to the hyperoxia, makes it useful for stopping the bleeding of acute injury, is not vasodilating and resolves the edema of acute injuries.

15. The positive magnetic field acid-hypoxia, in shortterm exposure of minutes to a few hours, produces an inflammatory red, raised, edematous area due to the acid-evoked vasodilatation inflammatory reaction.

16. The positive magnetic field acid-hypoxia continuous long-term exposure of a week to two weeks reveals in fact, an acid-evoked inflammatory vasculitis (acid-burn), which is red, raised, edermatous and itching with bacterial growth pustules.

17. The acid-hypoxia biological response to a positive (north-seeking) magnetic field activates the acid-dependent transferase enzyme catalysis of fermentation production of adenosine triphosphate for microorganisms (viruses, bacteria, fungi, parasites) and cancer cell metabolism which also replaces the alkaline-hyperoxia necessary for oxidation-reduction enzyme catalysis production of ATP necessary for human cell metabolism.

18. The alkaline-hyperoxia biological response to a negative (south-seeking) magnetic field activates the alkaline-dependent oxidoreductase enzyme catalysis of oxidation-reduction production of ATP necessary for human cell metabolism which also replaces the acid-hypoxia necessary for microorganisms and cancer cell metabolism.

19. A negative magnetic field activation of alkaline-dependent oxidoreductase enzymes in an alkaline medium processes (detoxifies) the biological inflammatory free radicals, peroxides, acids, alcohols and aldehydes to non-inflammatory water and molecular oxygen.

20. A sustained positive (north-seeking) magnetic field acid-hypoxia sustains the necessary life energy of microorganisms and cancer cells and destroys the necessary life energy of human cells.

21. A sustained negative (south-seeking) magnetic field alkaline-hyperoxia sustains the necessary life energy of human cells and destroys the necessary life energy of microorganisms and cancer cells.

22. Cancer cells have a positive magnetic field charge.

23. Normal human cells have a negative magnetic field charge.

24. Microorganisms have a positive magnetic field charge by virtue of their high mineral content with a high conductance and thus stressful higher pulsing frequency whereas human cells with lower mineral content and lower conductance 25. The biological response to a magnetic field is determined by the 3-dimensional spiral rotation spin of the electrons in the magnetic field and not by the directional approach of the magnetic field to the biological specimen.

has a non-stressful low pulsing frequency.

a) Therefore, a flat-surfaced, static field magnet with magnetic poles on opposite sides, has a separate, distinct magnetic field over each side.

b) The directional change of the magnetic field turning back around the sides of **the** magnet to the opposite pole side, does not change the magnetic polarity electron spin until it reaches the halfway point (equator) between the magnetic fields for the magnet.

c) A unidirectional magnetic field is not necessary to maintain a separation of magnetic fields. The 3-dimensional spiral electron spin and not the direction approach to the biological specimen determines the separate biological response to opposite magnetic fields.

# 26. IMMUNOLOGIC RESPONSES TO OPPOSITE MAGNETIC FIELDS

A.

Substance +	
Positive magnetic field	>sensitization.

Dead or attenuated
microorganism+
Positive magnetic field>sensitization.
(vaccination)

B.

Substance to which subject is immunologically reactive + Negative magnetic field ......>desensitization.

# 27.ENZYMATIC RESPONSE TO OPPOSITE MAGNETIC FIELDS

A.	
Food substrate +	
Oxidoreductase enzymes	
+ Negative magnetic field	> ATP +oxidation
	remnant magnetism
	(Negative magnetic field)

Β.

Food substrate +	
Oxidoreductase enzymes +	
Positive magnetic field	>No ATP production
	and no oxygen
	or water production

C. Substrate	
(free radicals, peroxides	,
acids, alcohols and alde	hydes) +
oxidoreductase enzymes	+
negative magnetic field	>oxygen and water
D.	
Substrate	
(free radicals, peroxides	,
acids, alcohols and alde	hydes) +
oxidoreductase enzymes	+
No oxygen and no water	
positive magnetic field	>produced

E.

# Food Substrate +

Acid dependant transferase enzyme + ATP by fermentation + Positive magnetic field......>positive remnant magnetism

# 28. HEAVY METAL DETOXIFICATION

Heavy metals are all electro-positive. Heavy metals produce acidity and metabolically damaging free radicals and acids. Heavy metals biologically damage by attaching to (complexing) biological macromolecules.

A negative magnetic field replaces the electro-positivity of heavy metals with an electromagnetic negativity and thus blocks, reverses and detoxifies heavy metals, tissue complexing, free radicals, and acid production. In the presence of a maintained static negative magnetic field heavy metals are dispersed of in the urine in a non-toxic state.

## A.

Toxic electro-positive heavy metals (aluminum, mercury, lead and other heavy metals) + a sustained static negative magnetic field attached to the heavy metal......>Dispersed of in the urine as non-toxic

electro-negative metal

## 29. POSITIVE MAGNETIC FIELD NEUROPATHY

The acid-hypoxic response to a positive magnetic field placed over a nerve trunk produces a peripheral neuritis of tingling, numbness, pain, loss of motor function, loss of sense of pressure, etc. This can begin to occur within 3-4 hours of continuous exposure to a positive magnetic field.

# **30. NEGATIVE MAGNETIC FIELD HEALING OF NEUROPATHY.**

The alkaline-hyperoxia response to a negative magnetic field exposure reverses positive magnetic field neuropathy, toxic neuritis, dialectic neuropathy, etc.

### **31. OPTIMIZING THYMUS GLAND DEFENSE**

The biological stress of a positive magnetic field can be used to optimize thymus gland functions against infections and cancer. Due to the acid-hypoxia evoked by the positive magnetic field the external exposure to this magnetic field should not exceed 1/2 hour, periodically. This same principle of short duration exposure to the positive magnetic field applies to increased hormonal production to catabolic hormone glands such as the adrenals.

# **32. CAN APPLICATION OF THE POSITIVE MAG-NETIC FIELD BE HARMFUL?**

The FDA has classified magnetic field application to humans as "not essentially harmful." This `not harmful' classification of magnetic field application to humans is a half-truth. This `not harmful' classification occurred due to the pre-market testing for the MRI. The short duration of MRI scan exposure to both the positive and negative magnetic fields is not harmful. However, objective observations by several physicians has demonstrated the following:

A. A brief exposure to a positive magnetic field is not harmful and can be used to stimulate the thymus gland function, adrenal-cortical hormone increase, stimulate a return of neuronal function that have been inhibited by pressure, etc.

B. Prolonged exposure to a positive magnetic field can produce a toxic vasculitis, neuritis, and addiction due to evoked endorphins and serotonin, microorganisms and cancer cell replication.

C. A negative magnetic field is never harmful and helps healing, repairs, increases melatonin and growth hormone production and produces biological homeostasis.

## **33. MAGNETIC FREE ENERGY.**

A static magnetic field is the energy essence of magnetic therapy.

Oxidoreductase enzyme + alkalin	e-hyperoxia
Food substrate	>ATP
	p l u s
plus electron free energy from static electr field with movement of electrons between and enzyme producing a negative (Ne magnetic field (magnetic free energy)	magnetism substrate

Negative magnetic field therapy provides magnetic free energy from a static negative magnetic field for alkaline-hyperoxia catalytic reactions.

34. Each side of a static field magnet with magnetic fields on opposite sides of a flat surface magnet produces only a single uniform, magnetic field.

From each single side of a flat surface static field magnet, there is a magnetic field of the same magnetic polarity field turning back to enter the opposite magnetic field. This entry into the opposite magnetic field occurs at the edge of the magnet at the equator which is a half-way point between the opposite magnetic fields. Thus, a subject being exposed to the uniform negative magnetic field of a flat surface magnet receives the negative magnetic field only and does not receive a positive magnetic field coming around the edge of the magnet. The entry of the positive magnetic field is at the equator half-way point between the opposite magnetic fields. This is on the edge of the magnet and not on the opposite flat surface side of the magnet.

Albert Roy Davis, Physicist, for several years used flat surface magnets with poles on opposite sides to determine the separateness of the opposite biological response to the positive and negative magnetic fields. This separate biological response to opposite magnetic fields could not have occurred if there was an opposite magnetic field coming around the edge of the magnet.

Robert O. Becker, M.D. understood that a flat surface magnet with opposite magnetic fields on opposite sides provided only a separate single magnetic field form each side of the flat surface magnet.

Skin tests prove that only a single magnetic field response occurs in response to the single magnetic field on each side of a flat surface magnet. A gauss meter reading documents evidence that only a single magnetic field occurs from a flat surface magnet with poles on opposite sides and that there is not an opposite magnetic field coming around the edge of the magnet. The usefulness of a magnetometer is limited to the reading over the uniform magnetic field over the flat surface of a flat surface magnet with magnetic field poles on opposite sides. The reason for this is that the magnetometer has its own magnetic field which will give an opposite reading when crossing over the edge of the magnet, due to the fact that the bar magnet in the magnetometer reaches beyond the equator at the edge of the magnet.

The erroneous concept model that an opposite magnetic field comes around the edge of a flat surface magnet comes from an incorrect use of a magnetometer, contrary to the manufacturers stated value and limitations of a magnetometer which is "limited to a uniform field".

There is no reason to place mini-block magnets under a 4"

mattress pad in order for the surface to receive only a negative magnetic field. When placing mini-block magnets in a bed pad on top of a mattress it is necessary to sufficiently pad between and over the mini-block magnets so the weight of the subject cannot press down between the magnets so as to not reach the equator half-way point between the separate magnetic fields on opposite sides of the mini-block magnets.

# The Physiology of Biomagnetics

Humans and all living organisms are electromagnetic. Human life exists as an electromagnetic organism. The central nervous system and the peripheral nervous system function as a direct current circuit with a positive (north-seeking) magnetic field at the positive electric pole and a negative (south-seeking) magnetic field at the negative electric pole. Each cell has its positive (north-seeking) and negative (south-seeking) magnetic fields. The DNA genetic code material of each cell has both positive (north-seeking) and negative (south-seeking) magnetic fields. Magnetic fields govern cell functions and is a necessary functional part of all physiological functions of the human body. Biomagnetics needs to be understood in order to understand the normal mental and physiological energy functions of the human body. Biomagnetics needs to be understood in order to understand how handicapping symptoms develop and also how to reverse these handicapping symptoms. Magnetic energy dynamics is the very foundation of normal and abnormal mental and physical human functions. Magnetic therapy employs the basic fundamental energy dynamics of being alive and responding to stimuli whether these are internal brain thoughts or feelings or an external play on sight, sound or tactile senses. Magnetic field energy, due to being the very energy foundation of response, can alter the biological responses to stimuli.

There are distinctly separate fundamental ways in which magnetic fields exert control over responses to stimuli.

## **Biological Responses to Separate Magnetic Fields:**

Positive Magnetic .Field	Negative Magnetic Field
Stress response	Anti-stress response
Neurone exciting	Neurone calming
pH acidifying	pH alkalinizing

Human physiology has a homeostatic function between the positive (north-seeking) magnetic field biological governed biological responses and a negative (south-seeking) magnetic field governed biological responses. The necessary biological homeostasis between a positive (north-seeking) and negative (south-seeking) magnetic field is not an equal amount of both of these fields. The negative (south-seeking) magnetic field has a higher gauss strength than the positive (north-seeking) magnetic field in the human body. The presence of a higher negative (south-seeking) magnetic field than a positive (north-seeking) magnetic field provides the human with the ability to exert a control over any possible excessive positive (north-seeking) magnetic field stimulus response. The neuron bodies of the central nervous system are a positive (north-seeking) magnetic field while the neuron axon extensions into the body are a negative (south-seeking) magnetic field.

Robert O. Becker demonstrated that an injury registers as an electromagnetic positive while the healing state of the injury registers electromagnetic negative. Healing-repair can only occur in the presence of a negative (south-seeking) magnetic field. A positive (north-seeking) magnetic field is the signal of injury sent to the brain following which the brain returns a negative (south-seeking) magnetic field necessary for healing-repair. Magnetic therapy provides an external source of a negative (south-seeking) magnetic field for healing-repair.

The human body can only maintain optimum life function in an alkaline medium. Human life is alkaline-hyperoxia-dependent. The physicist, Albert Roy Davis discovered that a negative (southseeking) magnetic field biological response is alkaline-hyperoxia while the positive (north-seeking) magnetic field biological response is acid-hypoxia. My observations confirm Davis' observation of an alkaline-hyperoxia response to a negative (south-seeking) magnetic field. The alkaline-hyperoxia biological response to a negative (south-seeking) magnetic field is why a negative (south-seeking) magnetic field relieves symptoms.

There is a parallel between acid-base balance and magnetic field levels. A biological acid state is always a positive (north-seeking) magnetic field. A biological alkaline state is always a negative (south-seeking) magnetic field. My research examined pH before and after test meals of foods and exposure to common environmental chemicals and also, immunologic reactions. When symptoms occurred during these tests of exposures an acidity always developed. These symptoms can be relieved by the negative (south-seeking) magnetic field of a static field magnet because the biological response to the negative (south-seeking) magnetic field is alkalinehyperoxia.

# pH Biological Response to Separate Magnetic Fields

	Positive Magnetic Field	Negative Magnetic		
		Field		
	Acid-hypoxia	Alkaline-hyperoxia		
Magnetic Response to Stress Injury				
	Positive Magnetic Field	Negative Magnetic		
	Field			
	A positive magnetic field	The brain receives the		
	is a signal of injury sent	signal of injury as a		
	to the brain.	positive magnetic field		
		and returns the signal of		
		a negative magnetic field		
	No healing-repair can occur	Healing-repair requires		
	due to the positive magnetic	alkaline-hyperoxia for		
	production of acid-hypoxia.	oxidative phosphoryla-		
		tion production of ATP.		
		A negative magnetic field		
		biological response to a		
		negative magnetic field is		

The production of ATP by oxidative phosphorylation is blocked by the acid-hypoxia of a positive magnetic field.

Chronic stress, from whatever source, produces acidity. Since acidity ties up molecular oxygen, producing acids, the result is acidhypoxia. Chronic stress resulting from physical injury or psychological stress have the same biological consequences of the production of acid-hypoxia. An injured muscle or over-stressed muscle becomes acidic and thus also hypoxic. This acid-hypoxic state is inflammatory and painful whether the tissue is a muscle, fascia, tendon or other tissues such as an internal organ.

alkaline-hyperoxia.

The problem of inflammation and pain production by acidity becomes compounded since the human life energy (ATP) cannot be made in an acid-hypoxic medium since oxidative phosphorylation is alkaline-hyperoxia-dependent. However, human cells have the ability to make ATP by fermentation using transferase enzyme catalysis. The production of ATP by fermentation occurs when acid-hypoxia is present. This is an emergency energy measure and cannot sustain human life for very long. Lactic acid is a by-product of fermentation, which adds further acid-induced inflammation. Cancer cell initiation and growth can only develop in an acid-hypoxic medium since cancer cells use fermentation for the production of ATP. Infectious micro-

no matter why they are present.

organisms are acid-hypoxic, fermentation-dependent for their production of ATP. A negative (south-seeking) magnetic field with its production of alkaline-hyperoxia canceling out acidhypoxia is antibiotic, anti-parasitic and anti-cancerous.

## **Biological Source of Magnetism**

Magnetic field energy is essential to biological life energy. Biological life cannot exist without magnetic field energy. The DNA genetic code contains magnetic fields and passes this magnetic field on to the next generation. Magnetic fields are always both positive (north-seeking) and negative (southseeking) magnetic fields. However, these positive (north-seeking) and negative (south-seeking) magnetic fields do not have to be of equal proportions. In fact, the human magnetism is higher in the negative (south-seeking) magnetic field than the positive (north-seeking) magnetic field. This is how the human organism maintains alkaline-hyperoxia. Microorganisms', parasites' and cancer cells' magnetic physiology is opposite to the human magnetic field is higher than the negative (south-seeking) magnetic field.

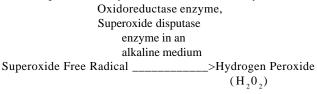
There are hundreds of enzyme catalytic reactions occurring in the human. A catalytic reaction requires movement of electrons between the substrate and the enzyme. When electrons move, they produce a magnetic field. Thus, alkaline-dependent enzymes are also negative (south-seeking) magnetic field dependent and acid-dependent enzymes are also positive (north-seeking) magnetic field dependent.

## **Examples of Biological Produced Magnetism** Four Oxidoreductase enzymes

Food Substrate	_>Adenosine triphosphate
+alkaline-hyperoxia	(ATP+ oxidative
	remnant magnetism; a
	negative magnetic
	field)
Food Substrate	>ATP + a positive
transferase	magnetic field
enzyme + acid-hypoxia	

## Secrets of Negative Magnetic Field Therapy

A negative (south-seeking) magnetic field is anti-stressful and thus, neuronal calming. A negative (south-seeking) magnetic field on the brain and spine calms neurones (anti-stress) and aids voluntary relaxation and sleep. It is also true that a negative (south-seeking) magnetic field can be made strong enough to produce involuntary magnetic general anesthesia. Robert O. Becker anesthetized his salamanders with a negative (south-seeking) magnetic field. I have demonstrated the control of seizures by a negative (south-seeking) magnetic field. I have demonstrated the control of movement disorders with a negative (south-seeking) magnetic field. I have observed the control of major mental disorders such as hallucinations, delusions and depression with a negative (south-seeking) magnetic field. The exceptional value of a negative (south-seeking) magnetic field control over neuronal excitation is that it works whether the neuronal excitation is due to an injured brain from trauma, viral infection, maladaptive food reaction, maladaptive environmental chemical reaction, immunologic reaction or repressed unconscious hostility, anger, anxiety and its associated somatic expression. The secret of a negative (south-seeking) magnetic field therapy is that a negative (south-seeking) magnetic field is neuronal calming, cellular metabolic normalizing, enzymatic processing of all types of inflammatory responses Symptom-producing responses occur due to repeated neuronal excitation paired with a stimulus evoked response. Sensitization is due to neuronal excitation paired with a stimulus. Desensitization results when neurones are held in a calm, anti-stress state while meeting the stimulus that had trained in a maladaptive sensitization response. It is repetition while exposed to a stimulus-producing response that trains in sensitivity and it is repetition while holding the neurones in an anti-stress inhibited state that trains out sensitization. Thus, a negative (southseeking) magnetic field brain treatment has an immediate cancellation of the maladaptive response and by repetition trains out the maladaptive response. Local inflammation is reversed enzymatically by oxidoreductase enzymes processing of free radicals, peroxides, oxyacids, alcohols and aldehydes.



Catalase enzyme in an alkaline medium H,0,\_\_\_\_\_>water + molecular oxygen

## Superoxide

~ ~ r · · · · · · · · · · · ·	
free	Oxidoreductase enzymes
radical,	Dehydrogenases, Hydroxylases,
peroxides,	Oxidases Oxygenases,
oxyacids,	Peroxidases, Reductases
alcohols	
and aldehy	des>water and oxygen molecules

Alkaline-medium electrostatic field or negative magnetic field

### The Role of Magnetics In Enzyme Function

All biological enzyme functions (catalysis) in a living biological system are magnetic energized. There is a measurable catalytic remnant magnetism to enzyme function in live biological systems. Four oxidoreductase enzymes are needed to produce adenosine triphosphate (ATP) from foods. During these enzyme processes, there are two energies being made. One is ATP and the other is oxidation remnant magnetism. Both of these energies are used for the energy activation of enzymes. There are thousands of the enzymes, each with its own selective function. These are named according to their functions. Oxidoreductase enzymes are a family of enzymes with specific necessary functions. These enzymes have the following functional values. They produce ATP and catalytic remnant magnetism and they process the end-products of the metabolic process which are initially the free radical called superoxide which is oxygen with an added electron. If not rapidly enzymatically processed, it will produce peroxides, acids, alcohols and aldehydes all of which are enzymatically toxic, that is inflammatoryproducing.

In order for us to understand biological life energy, we must understand the starting point of that energy. Thus, we must understand the functions of oxidoreductase enzymes. We have enzymes and the substrates which they are processing. In the case of producing ATP, the substrate is a food. In the case of processing the toxins or inflammatory producing substances, the substrate are the free radicals and the products they produce. There exists a natural ten-

dency for the enzyme and the substrate to join. These areas that have a biological attraction to join are called dipoles. However, this attraction all by itself does not produce enzyme action. These are simply the areas where the enzymes and the substrates do line up and join. Otherwise, there has to be an energy. This characteristically comes from static electrons that are in the body. They help move the enzyme and the substrate together. Once they move, now a magnetic field is created because this is what a magnetic field is all about. It is produced by the movement of electrons. Also, a magnetic field from an external source that is a static magnet field will also produce the movement of electrons. This is why an external source of a static magnetic field will cause the enzyme and the substrate to join because it is moving electrons.

The essence of static magnetic field therapy is the energy activation of enzymes to join substrates for catalysis. In the case of oxidoreductase enzymes, they are alkaline-hyperoxia dependent and do not require ATP for energy activation but do require a static negative magnetic field energy for catalytic activation.

ATP is an energy activator of many enzymes. In alkalinehyperoxia, ATP dependent enzyme catalysis, a negative magnetic field is a co-factor with ATP as an enzyme energy activator. This is all human enzymes other than those of the mouth and stomach.

In acid-hypoxia dependent enzymes as well as transferaces, ATP and a positive magnetic field are energy co-factors. Invading microorganisms and cancer cells are acid-hypoxic dependent for making their ATP.

Thus, a static negative magnetic field strengthens the human cell alkaline-hyperoxic dependent energy state and defeats the acidhypoxic dependent state of cancer cells and invading microorganisms (bacteria, viruses, fungi and parasites).

#### **Magnetic Dynamics of The Degenerative Process**

The central disorders of acute maladaptive reactions are: 1) acidity, and 2) oxygen deficit. Monitoring the biochemical disorders of chronic degenerative diseases reveals the same disorders as acute maladaptive reactions which is acid-hypoxia. Chronic degenerative diseases are observed to be acute maladaptive reactions extended in time to a chronic state with the resultant cellular damage. The contrast between the well cells of the healthy, functioning person and the sick cells of degenerative diseases provides valuable clues as to how magnetics can substantially aid in recovery of inflammatory degenerative diseases, infections from microorganisms and cancer.

In the process of oxidative phosphorylation producing adenosine triphosphate (ATP), molecular oxygen accepts an electron and becomes free radical oxygen (superoxide). If not immediately enzymatically reversed, superoxide proceeds to produce other free radicals, peroxides, oxyacids and aldehydes. These are all inflammatory. The oxidoreductase family of enzymes have the assignment of making ATP by oxidative phosphorylation and at the same time, processing the end-products of this oxidation phosphorylation process. This oxidoreductase family of enzymes are alkalinehyperoxic-negative magnetic field activation dependent. When these 3 physiologically normal factors are not present, then cellular ATP is made by fermentation. The 3 factors necessary for fermentation to produce ATP are: 1) acidity, 2) lack of oxygen, 3) a positive static magnetic field as an enzyme energy activator. Human cells have the capacity to make ATP by either oxidative phosphorylation or fermentation. Cellular fermentation producing ATP only functions in the abnormal state of acidity and hypoxia. The enzymes catalyzing fermentation production of ATP are transferases which are acidhypoxic-positive-static magnetic field activation dependent. Sugar is catalyzed by transferase producing ATP, alcohols, acids

and carbon dioxide. Hydrolase enzymes catalyzes starches to sugars. Hydrolase also is acid-hypoxic-positive static magnetic field energy activation dependent.

A static magnetic field is the energy activator of all biological catalytic processes. When oxidative phosphorylation catalyzes the production of ATP this catalytic reaction makes negative static field magnetism termed oxidation remnant magnetism. This negative static magnetic field is available to energize oxidoreductase enzyme catalysis and at the same time, block transferase and hydrolase catalysis. Besides the biological available negative static magnetic field from oxidation remnant magnetism, there is an always present electrostatic field (1). In an alkaline medium the electrostatic field produces a negative static magnetic field which energizes oxidoreductase catalysis. In an acid medium, an electrostatic field produces a positive static magnetic field which in turn energizes transferases and hydrolases. Both oxidation phosphorylation and fermentation catalysis are static magnetic field energized. However, they are energized by opposite magnetic poles. Oxidation phosphorylation is energized by a negative static magnetic field in an alkaline-hyperoxic medium. Fermentation is energized by a positive static magnetic field in an acid-hypoxic medium. A static magnetic field is required for the enzyme and the substrate to attach. A static magnetic field present during enzyme catalysis has been documented (2). ATP made by fermentation with its acid-hypoxic medium cannot maintain human biological life energy. ATP made by fermentation can maintain the life energy of microorganisms such as bacteria, fungi, viruses, parasites and cancer cells. The secret to reverse acute maladaptive symptom reactions, prevent and reverse microorganism infections, maintaining human biological health and providing for the reversal of degenerative diseases is to maintain a normal alkaline body pH, hyperoxia and an adequate negative static magnetic field. The biological response to a negative static magnetic field can maintain these necessary components of healthy human cells. Thus it can be understood that exposure to an external source of a negative static magnetic field supports human health and materially aids in reversal of inflammatory degenerative diseases, cancer and the defense against microorganism invasion. This external negative static magnetic field can be applied to local affected areas as well as applied systemically by such as a negative static magnetic field bed.

1) Encyclopedia Britannica. Vol 15, page 1060. 1986 edition

# 2) Fersht, Alan. *Enzyme Structure and Mechanism* **The Significance of Alkalinity and Acidity in Biological Health and Disease**

The human body functions in an alkaline dependent state. Hyperoxia, which is necessary for the production of adenosine triphosphate (ATP), can only be present in an alkaline medium. An acid medium ties up oxygen, which is no longer free for the oxidation-reduction process of producing ATP. A healthy human maintains a blood pH minimum of 7.4. Below 7.4, the numerous necessary enzymes for life function in a human lose their function because they are alkaline-dependent. Alkaline minerals such as sodium, magnesium, potassium, and calcium as bicarbonates are a necessary part of the pH buffer system maintaining alkalinity. Therefore, it is necessary that these nutrients be in adequate supply. Insulin also helps maintain the alkalinity, the production of which rises and falls depending on the need to maintain the alkalinity. This is one of insulin's functions. Endorphins, insulin and nutrients producing bicarbonates are all alkaloids and therefore have a normal physiological level. This normal physiological alkalinity is anti-inflammatory, buffers against infections and cancers that are acid-

dependent. Degenerative diseases such as diabetes mellitus, rheuma-

toid arthritis, local and systemic infections are all acid states in which local areas of the body are acidic and also there are measurable episodes of systemic acidity in these degenerative diseases.

It is highly significant to understand that sensitivity, symptom-producing reactions to foods and or chemicals are acidproducing. I have measured thousands of these symptoms occurring during deliberate exposure to foods and chemicals and when symptoms occur there is a measurable acidity occurring in the blood. The local area where the symptom occurred is even more acidic than the blood. Degenerative diseases have been demonstrated to simply be an extension in time of these acute symptom-producing reactions to foods, chemicals and inhalants. It matters not whether these are immunologic with demonstrated antibodies or complement disorders or whether they are non-immunologic. Acidity occurring at the time of either acute symptom production or chronic disease symptoms is the central common denominator. It is true that immunologic reactions are also acidifying but it is also true that there are many times more non-immunologic type reactions that are acidifying and thus, symptom-producing.

Addiction, whether it is to narcotics or other drugs, or to foods has an acidic phase during the withdrawal of that substance. In addictions, the withdrawal begins to occur at 3-4 hours, post-exposure. Addiction to foods turns out to be the most common cause of symptom producing maladaptive sensitivity reactions to foods. The frequently eaten food becomes a stressor, which is beyond the body's biological capacity to optimally process. When first exposed to the food to which the subject is addicted, there is relief of symptoms because the stress evokes a rise in endorphins and serotonin. Some four hours later, when both endorphins and serotonin drop below the normal functional physiological levels, acidity emerges and symptoms occur. This is why it is so important that all addictions be stopped at the same time. Thus, this includes alcohol, tobacco, caffeine, and all foods to which the person is addicted.

# The Role of Oxidoreductase Enzymes in Addiction Including Food Addictions

Members of the Oxidoreductase enzyme family classified by their function are as follows:

- 1. Dehydrogenases
- 2. Hydroxylases
- 3. Oxidases
- 4. Oxygenases
- 5. Peroxidases
- 6. Reductases

Oxidoreductase enzymes are responsible for the production of adenosine triphosphate and oxidation remnant magnetism (negative magnetic field). This is an alkaline-hyperoxia negative (south-seeking) magnetic field dependent enzyme catalytic reaction. When the frequency of a substance exceeds the available functional capacity of oxidoreductase enzymes, then this becomes a stress. The body's response to stress is to raise endorphins and serotonin. This stress over-produces endorphins and serotonin beyond their normal physiological level, thus providing not just a comfortable feeling, but also a super comfortable, even euphoric feeling. Some 3-4 hours later, the production of endorphins and serotonin drop below physiological level, which is now an acidic, inflammatory, psychologically depressive and anxiety-producing state. When oxidoreductase enzymes can be maintained at a normal physiological level, this addictive state does not occur. We know this is true because when we expose the brain and the symptomatic areas to a negative (south-seeking) magnetic field, it will activate the oxidoreductase enzymes and thus relieve the symptoms. This fact also becomes the center focus for handling the symptoms of addiction in general and food addiction in particular. By the use of a negative (south-seeking) magnetic field applied to symptomatic areas and the brain, the withdrawal from addictive substances including foods can be made comfortable. Maintaining comfort while withdrawing from food addiction is an important part of magnetic therapy of reversing food addiction.

# THE ROLE OF ADDICTION IN OBSESSIVE-COMPULSIVENESS

Obsessive-compulsiveness can be a learned response from environmental experiences. However, much of obsessive-compulsiveness is learned from addiction. When contacting the addictive substance, food or otherwise, the subject is super comfortable without body pains and with a mental euphoria. When the addictive withdrawal phase sets in and the discomforts leave and pains, depression, anxiety and tension emerge, there develops first an obsessional wish to obtain relief by contact with the addictive substance again and a compulsion to act on that obsession. Addiction classically trains in obsessivecompulsiveness, which then pervades the entire behavior of the subject. The addict simply, obsessively, can't wait for relief. They can't accept any imperfection, including waiting for relief. Physical pain can be relieved by placing a negative (south-seeking) magnetic field over the area of pain. Brain symptoms can be relieved by placing the negative (south-seeking) magnetic field over the bitemporal areas of the brain. Bitemporal area placement of the discs relieves depression and tension. Placing a magnetic disc midforehead and left temporal relieves anxiety. Placing a magnetic disc over the left temporal and low occipital area is the most effective for relieving obsessive-compulsiveness.

It is understandable that overeating of calories becomes an obsessional compulsive component of food addiction. The system of magnetic weight reduction is to, first of all, stop all addictions. Secondly, handle all the withdrawal symptoms of stopping all addictions. The third is to decide the number of calories that needs to be consumed to maintain an appropriate weight. Eat this number of calories and stop any compulsion to overeat by placing the magnets appropriately on the head as well as a 4" x 6" x 1/2" magnet on the mid-sternum and over the epigastric area. Also, treat any areas of discomfort at the same time. By this method, the person learns with comfort to eat only the amount of calories that will maintain adequate weight. If there is an urge to eat between meals, then place the magnets on the head, the chest and on the epigastric area. Within 5-10 minutes, this urge will have disappeared. Thus, there is a method of self-help maintenance of comfort and magnetic cancellation of obsessive-compulsiveness.

# **Grandfather Status of Magnet Therapy**

Among early medical practitioners, there are references to the medical uses and self-help uses of static field magnets. This description of static magnetic fields for medical use and self-help application holds a record for being among the longest, if not the longest, held application of medical therapeutics. The application of magnetic therapeutics is world-wide. This worldwide grandfather status of application of static magnetic fields for therapeutic reasons is important in view of the more recent establishment of research practices to prove the value and safety of procedures and products. Among the earliest effort at establishing through scientific means, the value of magnetics

is that of the research establishing both the value and safety of the application of magnetic energy for magnetic resonance imagery.

Up to the 1970's, medical practices and sciences had been accepted because of their universal acceptance and application. There now are specific research techniques accepted by the Food and Drug Administration as valuable in establishing a scientific proof of both value and safety. Most medical practices have come to be accepted without this research proof. To this day, a substantial amount of medical practice is grandfathered and proceeds to be used without scientific proof. There is no official list of practices that have been grandfathered. They simply continued to exist without being challenged as to value and safety. Magnet therapy has existed since the early status of the practice of medicine and this has been worldwide. Although, not officially stated as grandfathered, its practice demonstrates that it is grandfathered in the United States and worldwide. In recent years, there has been an increase in the application of magnetics. Years ago, Sears Roebuck used to sell magnets for the relief of pain. In recent years there has been an increase of use of magnets for pain, sleep and other procedures. Magnetic therapy is also, at the same time, undergoing a scientific investigation as to values and limitations. National Institutes of Health is granting funds for this research. There are also privately funded researches in progress.

For many years, biochemistry has been fulfilling its promises of value and of financial rewards for marketing products. Biophysics has been largely ignored in terms of research for years. The times are changing and biophysics is now offering substantial rewards for harnessing magnetic applications.

## An Invitation To Do Research In Therapeutic Magnetics Dear Doctor:

This is an invitation for you to do research in the area of medical magnetics. The research physician works under the consultation and supervision of William H. Philpott, M.D., who is a member of an FDA qualified institutional review board. The researchmonitoring physician gives a statement as to the status of the patient and Dr. Philpott provides a magnetic research protocol to be followed in applying the magnets. The research physician agrees to send reports to Dr. Philpott, which then will be assessed by the magnetic research committee. When sufficient data is available on any one subject, then this is submitted for publication in a peer reviewed medical journal. The purpose of this research is to establish magnetics as a solid therapeutic modality in the practice of traditional medicine. This is a request to you to join us in this valuable research. It does not cost you anything to be a party to this research. The patient pays the physician for any service rendered. The patient also buys the magnets used in the research.

The application of magnets to humans and animals for both diagnosis and therapy is FDA approved. There are several approved magnetic instruments that can make claims of value in the specific limited areas that their research has established.

Our research is on the growing edge of therapeutic magnetics, expanding the value of magnetics to human and animal therapeutics. There are many promising values emerging that need definitive research. Would you please help us?

Sincerely,

William H. Philpott, M.D. Magnetic Therapy Medical Supervised Research VS. Self-Help Treatment Medical Supervised Research

The objective Observations of the value of magnetic therapy for numerous medical conditions demonstrates what is usually considered to be "too good to be true." Indeed, magnetic therapy deserves definitive, controlled research following all the guidelines of the FDA. This research is in process under the supervision of William H Philpott, M.D. and other independent research organizations as well as NIH grant-sponsored researches. This research under William H. Philpott, M.D. requires a local physician to be following the patient. A physician and patient provide Dr. Philpott with a definitive diagnosis and the physician and patient both agree to be reporting at least 3 times a year to Dr. Philpott. Dr. Philpott provides a magnetic research protocol giving the details of the magnets used. This is a home treatment. To defer the cost of this, a gift of \$200 is needed. This is a tax-deductible gift to medical research. This is beyond the cost of the individual magnets that are specified for the condition under consideration. This information is part of a statistical study in preparation for publication in peer reviewed medical journals.

## Self-Help Magnetic Therapy

William H. Philpott, M.D. has since 1995 prepared The Magnetic Health Quarterly that range widely on specific subjects. These quarterlies describe magnetic treatment that can be adapted to selfhelp. Also, there is a series of magnetic protocols describing in general terms treatment of specific conditions but not for a specific person. It is ethical to obtain this information that lends itself to self-help use. There is no restriction in the purchase of magnets. When a person does self-help is his responsibility. The application of magnets has been classified by the FDA as not being harmful. There is misuse of the magnets that can be made, such as using the positive magnetic pole for an extended period of time. Although this does not injure cells, it is acidifying and would not be healthy for long-term use. The cost of self-help is the purchase of a Magnetic Health Quarterly on the appropriate subject. Each Magnetic Health Quarterly costs \$12, and each magnetic protocol for selfhelp costs \$10. Otherwise, the cost of self-help is the cost of the magnets. In doing self-help, the person obtains the general information and decides without any coaching from anyone, what magnets they want to use and how they want to apply them based on the general information they have received. Many people are admirably helping themselves. It is always wise that major illnesses be under the supervision of the medical research program.

> William H. Philpott, M.D. 17171 S.E. 29th Choctaw, Ok 73020 405/ 390-1444 Fax 405/ 390-2968

# THE MAGNETIC RESONANCE THERAPEUTIC RESEARCH PROJECT: PHYSICIAN'S PARTICIPATION AGREEMENT

# I agree to consult with W.H. Philpott, M.D., in setting up a

research project in magnetic resonance therapeutic research. An agreed upon format of monitoring during treatment and after treatment will be followed. The agreed upon format will be provided in printed form so that the research format can be followed by multiple cases and multiple physicians.

I agree to provide a report three times a year. When sufficient data has been accumulated, and the Institutional Review Board agrees, then an author for publication in a peer review journal will be sought.

Address:

Date: William H. Philpott, M.D. 17171 S.E. 29th Choctaw, Ok 73020

405/ 390-1444 Fax 405/ 390-2968

# THE MAGNETIC RESONANCE THERAPEUTIC RESEARCH PROJECT: PATIENT'S AGREEMENT FOR RESEARCH

I understand this is a research project to determine the value of static magnetic field application to my type of condition. I understand that extensive toxicity studies preceding the Food and Drug Administration (FDA) approval of the marketing of magnetic resonance imagery resulted in the FDA's classifying magnetic exposure to humans as "not essentially harmful." I have not been promised symptom relief. I have not been promised a cure.

I agree to keep an accurate record of my extent of exposure to a magnetic field. I agree to the necessary monitoring of my condition before, during and after treatment as agreed to by my physician in consultation with W. H. Philpott, M.D.

I understand that private and government (Medicare and Medicaid) insurances do not apply for medical research. I understand my physician will not apply for insurance payments for the medical research that is being rendered me. I agree not to apply for insurance payments since they do not apply to medical research. I understand that laws relating to medical treatment for Medicare and Medicaid payments do not apply to medical research. I understand that the physician doing medical research monitoring for my case can charge for the service rendered for which no report to government insurance Medicare or Medicaid) is made and that the research service is beyond, apart from, and not related to any laws relating to medical services rendered to a Medicare or Medicaid patient.

Address: Date:

# SELF-HELP TREATMENT RESPONSIBILITY

You have a right to purchase magnets and do with them as you wish. You have a right to purchase information that is general in nature. The application of self-help does not constitute a medical order.

William H. Philpott, M. D. would appreciate periodic reports of your success. He can use this information in gathering research for publication.

I understand that I am taking responsibility for magnetic treatment if I engage in self-help, non-medical supervised therapy.

I understand that any of the general information that Dr. Philpott has prepared is not a medical order. I understand that any conversation that I have had or will have with Dr. Philpott is general in nature and is not to be construed as a medical order. Name Date

Mailing address\_\_\_\_\_

City, State, Zip

# INDEPENDENT, SELF-SUPPORTING RESEARCH DETERMINATION OF THE VALUES OF MAGNET THERAPY

There is a steady advancing application of magnetics for health maintenance as well as valuable therapeutic reversal of degenerative diseases. There is a great need to document the many values of the application of magnets for their therapeutic value. The FDA has classified magnetic application to humans as "not essentially harmful." William H. Philpott, M.D. is a chairman of an independent ethical Research Institutional Review Board which follows FDA guidelines for research in magnetics.

Therapeutic research format available:

1. A local physician provides William H. Philpott, M.D. with an initial statement of the research subject's condition prior to magnet therapy. After receiving this initial statement, Dr. Philpott prepares a magnet research protocol to be followed.

The local research monitoring physician makes the initial report and additional reports to Dr. Philpott at four month intervals.

For this consultation service of the research protocol, the initial and periodic communication with the monitoring physician and research subject there is a requested medical research gift of \$200.00. You will receive a receipt for a tax deductible medical research gift. Make your medical research gift payable to HOLOS INSTITUTES OF HEALTH, INC. Send the check or credit card number to William H. Philpott, M.D.

This \$200.00 medical research gift plus the research subject purchasing the magnets used in research makes it economically possible to proceed with self-supporting magnet research.

For research treatment guided by Dr. W. H. Philpott with you monitored by a local physician. Call, write or fax:

William H. Philpott, M.D. 17171 S.E. 29th Street Choctaw, OK 73020 405/ 390-1444 or fax 405/390-2968

# WILLIAM H. PHILPOTT, M. D.

17171 S.E. 29TH Street Choctaw, Ok 73020 405/390-3009 Fax: 405/390-2968

> William H. Philpott, M.D., Chairman Institutional Review Board W. H. Philpott Magnetic Research

Research gift to HOLOS INSTITUTES OF HEALTH made by:

Name	
Address	
Phone	
Date	
Received by W.H. Philpott, M.D.	
W.H. Philpott, M.D.	

Date \_\_\_\_\_

HOLOS INSTITUTES OF HEALTH is an IRS-Registered, Tax Deductible 501C-3 Organization

Pelvic Disorders from the Magnetic Health Quarterly "Pelvic Disorders" Vol. V, 2nd Qtr, 1999 (2002 Revision) by William H. Philpott, M.D. 17171 S.E. 29TH Street Choctaw, OK 73020 405/390-3009 Fax: 405/390-2968 polarp@flash.net

General Information, Not a Medical Order No Claim of cure is promised. For Medical Supervision under a research program project, contact William H. Philpott, M.D. <u>MEDICAL SUPERVISION IS RECOMMENDED</u>

## MAGNETIC PROTOCOL

Endometriosis, Pelvic Inflammatory Disease, Uterus Disorders, Ovarian Disorders, Vulvovaginal Disorders, Conditions of the Vagina, Cancer of the Female Pelvic, Genital Organs, Meopause

# PELVIC DISORDERS INTRODUCTION

Men and women have their own special pelvic disorders based on their own specialized tissues. Infections and cancer are common denominators of pelvic disorders for both men and women. Fortunately, this common denominator for infections (bacterial, viral, fungal and parasitic), cancer and inflammation is the replacement of acid-hypoxia with alkaline-hyperoxia. This is achieved by a local exposure to a negative (south-seeking) magnetic field. Therefore, the local application of a negative (south-seeking) magnetic field turns out to be the basic treatment for pelvic disorders. A negative (south-seeking) magnetic field is human cellular function normalizing and healing, whereas a positive (north-seeking) magnetic field interferes with human cell normal functions and on the other hand, stimulates microorganism and cancer cell replication. Fortunately, a positive (north-seeking) magnetic field can also stimulate sexual function. The rules of limitations of application of a positive (north-seeking) magnetic field needs to be followed. These limitations are spelled out in detail in this quarterly.

# ENDOMETRIOSIS

# **ORIENTATION:**

Approximately 15% of American women (5 million +) have endometriosis. Endometriosis consists of endometrial tissue normally lining the inside of the uterus, which is sloughed off during the menstrual period, being in places other than inside the uterus. Endometrial tissue may occur any place lining the abdominal cavity (peritoneal cavity). Endometrial tissue often is found on the outside of the uterus, on the ovaries, on the intestines and sometimes invading abdominal organs such as the liver, intestines and even the uterine musculature (adenomyosis). Much like cancer, endometriosis consists of metastatic spread of endometrial tissue beyond its normal place lining the uterus (endometrionia). Endometriosis has been dubbed as benign cancer, however, only about 1% actually becomes malignant cancer (adenoacanthoma).

The most serious symptom of endometriosis is pain at the site of the endometrioma or adenomyosis. At the time of menstruation, endometrial tissue in the uterus is bleeding and being sloughed off and the endometrioma also bleeds. This bleeding sets up inflammation due to local reduced oxygen, local acidity, free radical production, and the local rise in histamines and prostaglandins. Both histamines and prostaglandins evoke inflammation. The chain consequences to these inflammatory insults can be such as scar tissue producing adhesions and cysts which can produce painful symptoms even between menstrual periods.

There are several theories as to why endometriosis develops such as the concept of aberrantly placed endometrial tissue. The endometrial tissue is undifferentiated embryonic tissue. The most popular and seemingly most likely theory is retrograde transportation caused by some type of obstruction of the menstrual flow in which the menstrual flow is forced up the fallopian tubes and thus, into the abdominal peritoneal cavity where it implants.

The diagnosis of endometriosis is difficult since the common denominator of pain is shared by several other conditions such as adenomyosis, appendicitis, benign ovarian cysts, bowel obstruction, colon and ovarian cancers, diverticulitis, ectopic pregnancy, fibroid tumors of the uterus, gonorrhea, inflammatory bowel disease, irritable bowel syndrome, pelvic inflammatory disease and other inflammatory conditions.

## HOW MAGNETICS RELIEVES ENDOMETRIAL PAIN

The biological response to a negative (south-seeking) magnetic field is the production of alkaline-hyperoxia. Acid-hypoxia is a central aspect of any state of inflammation. Therefore, the negative (south-seeking) magnetic field can replace acid-hypoxia producing pain with alkaline-hyperoxia which will relieve pain. Furthermore, a negative (south-seeking) magnetic field is mildly vasoconstricting which reduces the bleeding of endometriosis. A negative (south-seeking) magnetic field blocks the production of histamine and prostaglandins which are inflammatory irritants. The negative (south-seeking) magnetic field stimulates oxidoreductase enzymes which will process both histamines and prostaglandins, thus canceling their inflammatory response. The negative (southseeking) magnetic field has been noted to soften and even reverse scar tissue. Adhesions are scar tissue. These can be initially softened and reversed by treatment with a negative (south-seeking) magnetic field.

The magnetic field needs to be large enough to cover the affected area and thick enough to penetrate into the affected area and strong enough to deliver a therapeutic effect. The most frequently used magnet achieving all these values is a 4" x 6" x 1/2" ceramic block magnet. This is a static field magnet with opposite magnetic poles on opposite sides of a flat surface. This 4" x 6" x 1/2" static field ceramic block magnet weighs two pounds. The semi-flexible plastiform magnets which are 1/8" thick and requires four of these to be stacked together to be equivalent to a 1/2" ceramic block magnet. The weight of these stacked magnets is approximately the same as the 1/2" thick ceramic magnet. Whatever amount of magnetic field energy is needed to produce this depth can be used. One plastiform magnet may do the job or they can be stacked together for a deeper penetration. The plastiform magnets can be cut into any desirable size. They come 2", 3" or 4" wide and can be made as long as is needed. A common size is 4" x 6" x 1/8" or a 4" x 12" x 18". Plastiform magnets are semi-flexible, but when bent a few times, they will crack. When cracking or breaking, they can be held together with duct tape.

Flexible magnet pads have been made from plastiform magnets by cutting them into strips 1-1/2" x 1/2" and placing these 1/4" apart throughout the pad. The magnets can also be doubled by stacking them on top of each other. These could serve the purpose of treating pain that is caused by an area that is within 2" of the surface of the skin. If the pain is much deeper than 2" then the ceramic magnets need to be used or stacking the plastiform magnets would work. The flexible, double magnet pads are convenient.

The duration of application of the negative (south-seeking)

magnetic field over the painful area can be as long as is necessary. It is convenient to wear magnets over these painful areas all night long. They can be placed during the day as needed. There is a 4" x 52" body wrap that can be used to hold these magnets in place. In order to hold them, there needs to be suspenders that would keep them in place. A better method is to make a garment of non-stretch-able material which supports the weight from the shoulders. Pockets could be placed in this garment, directly over the area where it is needed so the magnet can be in place for whatever duration is needed for relief.

# PELVIC INFLAMMATORY DISEASE

There is a dozen or more types of bacteria and mycoplasma which produce pelvic inflammatory disease of any or all areas of the female pelvis. Naming these is not significant in terms of magnetic therapy since all of these will die in the presence of a continuous negative (south-seeking) magnetic field. The secret is to have the field large enough and the strength of the field capable of penetrating into the infected area. This can usually be provided with a  $5" \times 12"$  double magnet, multi-magnet flexible mat and with one or more of the  $4" \times 6" \times 1/2"$  magnets. These are held in place with a  $4" \times 52"$  body wrap. The treatment is as near to 24 hours a day as possible for a minimum of two weeks and preferably, longer. After the two weeks treatment, then treat nightly for an extended period of time. Treating the pelvic area nightly is a good prophylaxis also against infection.

# CYSTITIS

There are around 8.9 million visits a year to medical practitioners due to cystitis. Cystitis is the most common cause of women seeking medical assistance. There is a common erroneous belief that a woman may never be cured of cystitis.

## INFECTIOUS CYSTITIS

Various types of bacterial infections of the urinary bladder is the most common cause of infectious cystitis. Lumbar pain may be a reflection of infectious cystitis or lumbar disorders such as lumbar strain or degenerative discs may produce urinary bladder symptoms and predispose to microorganism infections of the bladder. Due to the lumbar-urinary bladder connection, it is well to magnetically treat both the lumbar spine and urinary bladder. It is well at the same time to also treat the brain. The brain receives messages from the body and sends messages to the body. Treating the brain to a negative (south-seeking) magnetic field can aid in breaking this cycle of message connections between the body and the brain. Disc magnets (ceramic discs 1" x 1/2", or super neodymium disc magnets 1" x 1/4") placed bitemporally (in front of, and at the level of the top of the ears) for depression; forehead and left temporal for anxiety; and left temporal and low occipital for obsessive-compulsiveness. The longer the duration of treatment, the better.

Treat the lumbar disc spine with a 5" x 12" double magnet, multi-magnet flexible mat and some need to place on top of this a 4" x 6" x 1/2" ceramic magnet to penetrate a negative (south-seeking) magnetic field deeply into the spine. The urinary bladder is best treated with a 5" x 12" double magnet, multi-magnet flexible mat with a 4" x 6" x 1/2" magnet on top of this. These are placed directly over the urinary bladder. A 4" x 52" COOL MAX body wrap can be used to hold the magnets over the urinary bladder or over the lumbar spine. Another method is to have a garment of non-stretchable material that supports the weight from the shoulders. Make pockets in this garment so the magnets can be slipped in to these pockets over the lumbar spine and the urinary bladder.

It is important to understand that an infection needs to be treated continuously 24 hours a day for a minimum period of two weeks. After this, there needs to continue to be a treatment for another 2, 3 or 4 weeks in which the magnets are used nightly. This is for the purpose of healing. In case of a lumbar disc spine disorder, it will take a number of months, such as 10-12 months, to heal the lumbar disc. There are on record those who have healed a lumbar disc with a negative (south-seeking) magnetic field and thus, avoided surgery. This is particularly applicable for those who have a type of lumbar disc which is not operable. The more hours of exposure, the better. The minimum should be at night during sleep. To understand better how a negative (south-seeking) magnetic field is an antibiotic, refer to the area of this article that is specifically on the antibiotic effect of a negative (south-seeking) magnetic field.

# INTERSTITIAL CYSTITIS

Interstitial cystitis is a chronic, non-infectious inflammation of the space between the bladder lining and the bladder muscle. Any inflammatory cause affecting the urinary bladder can predispose to the development of this chronic, non-infected, inflammatory reaction of the interstitial tissues in the urinary bladder. Bacterial infections are acidifying and, even separate from the infection itself, can set the stage for the development of interstitial cystitis. A neuronal message from the low spine can so disorder interstitial tissues as to set the stage for the non-infected, interstitial cystitis. There are drugs, particularly the non-steroidal anti-inflammatory drugs, that can so irritate the interstitial tissues as to set a stage for this development.

From my experience, I judge that it is likely true that the most prominent and frequent cause of interstitial cystitis is the process of the diabetes mellitus disease process. This is acidifying. It can be noted that particular foods to which a person is symptom-producing, maladaptive reacting to will evoke a non-infectious, inflammatory interstitial reaction of the urinary bladder. In my extensive experience with food testing, the symptoms referable to the bladder frequently occur demonstrating that these maladaptive reactions to foods are very important. These maladaptive reactions to foods is what produces diabetes mellitus, both the compensated and decompensated stages. (For more information on this, see the section of the diabetes mellitus disease process). The interstitial tissues of the kidneys behave the same way as the interstitial tissues of the urinary bladder and have common causes such as infections precipitating these inflammatory reactions, the diabetes mellitus disease process with its acidifying reactions to foods and chemicals is also a major contributor. The magnetic treatment of interstitial inflammatory disorder of the urinary bladder or kidneys is to stop the input such as, the food or chemical reactions or the nonsteroid anti-inflammatory agents that are being frequently used. Certainly, infections should be promptly treated. Infections of any type; bacterial, viral, fungal or parasitic can be effectively treated with a negative (south-seeking) magnetic field. The healing of the interstitial tissues of either the bladder or the kidney can be healed with a negative (south-seeking) magnetic field. It requires several weeks of as near to 24 hour a day exposure as is possible. Especially, the exposure to the negative (south-seeking) magnetic field should be at night during sleep. The most important magnet to be used is one that will cover the entire field and will also have a depth of penetration which is the 4" x 6" x 1/2" ceramic block magnet. This can be placed over the urinary bladder or over the kidneys and held there either with a body wrap or with a garment that has pockets in it over these areas.

Of course, it is also important to be sure to reverse the diabetes mellitus disease process with initial avoidance of symptom-producing foods which turn out to be the foods that are used with a frequency of twice a week or more. After three months, these foods can be returned to the diet as long as they are kept rotated. There is a 95% chance there will not be any further reaction to these foods as long as they are kept rotated on a four day basis.

If a person wishes to prove which foods these are, the process is to fast for a period of five days or eat foods that are infrequently used such as a watermelon fast or a single food fast. On the sixth day, start eating meals of single foods as test meals. If the food is involved in symptom-production, the symptoms will emerge within an hour. Three test meals can proceed during a single day. The method of relieving the symptoms when they do occur is to put the negative field of a magnet directly over the area until the symptoms disappear which is usually within 10-30 minutes. The symptoms are relieved because the negative (south-seeking) magnetic field is alkalinizing and hyper-oxygenating which replaces the acid-hypoxia which causes the symptoms. To test in this way would require about a month of eating three test meals a day of single foods.

A practical answer for most people is to assume that they are symptom-maladaptively reacting to foods that they use with a frequency of twice a week or more or members of the family of those foods. By leaving these foods out and immediately starting the rotation of foods that are used less frequently than twice a week, in a practical way, solves this problem for many people. After three months, they can put these frequently used foods back into their rotation diet. The rotation diet should be a lifestyle diet. It is well also to have a lifestyle of sleeping on a magnetic mattress pad and also sleeping with magnets over the most vulnerable areas. In this case, it would be for chronic cystitis, that of the urinary bladder area. This exposure can occur during night when asleep.

# SIGNIFICANCE OF ACID-HYPOXIA

Prior to my examination of maladaptive reactions to foods and chemicals, I applied the principle of avoiding acid-forming foods. I found this to have a low level efficiency whereas, using the principle of initial avoidance and later spacing of test foods demonstrated symptom-producing, maladaptive reactions to foods and chemicals has a high level, predictable value. In a symptom-producing, maladaptive reaction, acidity develops, whether the food is an acid or alkaline-forming food. Acid-forming food did not produce systemic acidity unless eaten with a frequency producing addiction. I also found that testing urine pH is unreliable, whereas testing blood pH and saliva pH are reliable. Blood pH is the most reliable test. My research involved these reliable methods of examining for pH and abandoning any attempt at using urine pH in drawing a judgement as to the systemic state of pH.

# THE SIGNIFICANCE OF THE DIABETES DEGENERATIVE DISEASE PROCESS

## IN PELVIC DISORDERS AND KIDNEY DISORDERS

Diabetes Mellitus, non-insulin type II, has the characteristic of acidity. Type II diabetes mellitus is diagnosed as clinically significant diabetes when the blood sugar is abnormally high on an a.m. fasting specimen. However, the diabetes disease process exists for several years before the clinically significant phase is diagnosed. The diabetes mellitus compensated phase exists for several years before the hyperglycemic clinically significant phase. Hyperinsulin-hypoglycemia exists during the compensated stage of the diabetes mellitus disease process. Generalized acidity with resulting tissue hypoxia exists both in the compensated and decompensated stages. All the known complications of decompensated diabetes mellitus can occur in the compensated stage.

In the diabetes mellitus disease process, there is a chain of inflammatory substances starting with superoxide free radical proceeding to peroxides, oxyacids, alcohols and aldehydes. Of these inflammatory substances, the easiest to monitor is the development of acidity. My research used the acidity as the indicator of the existence of this chain of inflammatory substances. My research demonstrated that acidity emerges in response to maladaptive reactions mostly to foods and less frequently to chemicals, inhalants and toxins. A small number of these acid-producing maladaptive reactions to foods are immunologic. The most frequent cause of maladaptive reactions to foods is addiction. The stress of frequently eaten foods produces addiction by evoking self-made narcotics (endorphins).

The acidity of the diabetes mellitus disease process both during the compensated and decompensated stage sets the stage for infectious invasion and replication of opportunist microorganisms. A chronic acid-hypoxia results in organ deterioration like chronic interstitial cystitis, tubulointerstitial kidney disease and fibrosis of the uterus. This chronic acid-hypoxia sets the stage for the development of cancer. Cancer makes its energy bond (adenosine triphosphate) by fermentation which is acid-hypoxic dependent.

My research has demonstrated that the answer to both the compensated and decompensated stages of maturity onset type II diabetes mellitus is a 4-Day Diversified Rotation Diet. Insulin-dependent type I diabetes mellitus also has the acid-hypoxia disorder and also requires a 4-Day Diversified Rotation Diet. Using the 4-Day Diversified

Rotation Diet characteristically reduces the requirement of insulin by two-thirds as compared to not using this diet. Details of the 4-Day Diversified Rotation Diet are in The Magnetic Health Quarterly, *Diabetes Mellitus. The Secret of Prevention and Reversal*, Vol III, Second Quarter, 1997 (Revised 1998).

## NEGATIVE MAGNETIC FIELD ANTIBIOTIC EFFECT

Human cells make biological energy by oxidative phosphorylation which is alkaline-hyperoxic-dependent. Alkaline-hyperoxicdependent oxidative phosphorylation requires four oxidoreductase enzymes that drive enzyme catalysis in producing two energies which are; 1) adenosine triphosphate (ATP), and 2) oxidative remnant magnetism which is a negative (south-seeking) magnetic field. Human cells also have the capacity to produce ATP by fermentation which uses enzymes which are acid-hypoxic-dependent. The human cell activation of fermentation to produce ATP is an energy survival technique which can only briefly sustain human cell life. Fermentation is acid-hypoxic-dependent and also produces acids, especially lactic acid. An example is that of prolonged stressful exercise in which muscle cells resort to fermentation to produce ATP after the oxidative phosphorylation ATP has been depleted. The muscles are sore due to the lactic acid produced by fermentation. This same process of fermentation exists in the urinary bladder producing interstitial cystitis and in the kidneys producing interstitial kidney disease.

All microorganisms, parasites and cancer cells produce their ATP by fermentation and therefore, are acid-hypoxic-dependent. Cancer cells only use fermentation to produce ATP and are thus killed by a negative (south-seeking) magnetic field which produces a biological response of alkaline-hyperoxia. Some bacteria are capable of producing ATP by both fermentation and oxidative phosphorylation and thus, can survive in an alkaline-hyperoxic medium. It is understandable how a negative (south-seeking) magnetic field with its biological response of alkaline-hyperoxia can kill cancer cells and other microorganisms that are acid-hypoxic-dependent for the production of their ATP.

What about the microorganisms tolerant of alkaline-hyperoxia? How are they killed by a negative (south-seeking) magnetic field? All microorganisms and cancer cells have electromagnetic positive cellular membrane. Human cells have an electromagnetic negative membrane. A negative (south-seeking) magnetic field supports the physiological function of the human electromagnetic negative membrane whereas, a negative (south-seeking) magnetic field interferes with the physiological function of the electromagnetic positive membrane of bacteria, fungi, viruses, parasites and cancer cells.

The good new is that a negative (south-seeking) magnetic field

is an antibiotic for all types of microorganisms (bacteria, fungi, viruses, parasites) and cancer cells. The mechanisms by which a negative (south-seeking) magnetic field is an antibiotic to microorganisms and cancers is its interference with the microorganism and cancer cells in making their ATP and also interference with their electromagnetic positive cell membrane. Therefore, microorganism adaptation, tolerance and cancer cell adaptation tolerance to a negative (south-seeking) magnetic field does not exist. The frantic search for antibiotics to which microorganisms have not developed a resistance can stop. The frantic search for toxic substances capable of killing specific types of cancer cells can stop. What we need to concentrate our research energies on include the following variables of a static negative (south-seeking) magnetic field such as:

1) Gauss strength

2) Duration of exposure

3) Field of exposure

4) Duration of exposure for tissue repair after the death of microorganisms and cancer.

There is no human cellular damage to exposure to a static negative (south-seeking) magnetic field. A static negative (south-seeking) magnetic field controls all aspects of healing repair whether this is endogenously concentrated by the human body at the site of tissue repair or exogenously supplied from a static magnetic field.

# PELVIC DISORDERS

# ORIENTATION:

This magnetic protocol is for pelvic disorders. The principle of magnetic treatment is to use a magnetic field that is larger than the lesion being treated and is sufficiently strong in gauss strength to penetrate sufficiently deep into the tissues for the particular condition that is being treated. The most important magnet for the treatment of pelvic disorders is a 4" x 6" x 1/2" magnet. This will penetrate deeply into the pelvic organs. The second most important magnet is a 5" x 12" double magnet, multi-magnet flexible mat. This covers a wide space but does not penetrate as far as the 4" x 6" x 12" magnet. It has Velcro on the positive pole side. The 4" x 6" x 1/2" ceramic block is often placed on top of this mat. Another method which weighs less and approaches that of the 4" x 6" x 1/2" magnet is that of mini-block magnets that are 1-7/8" x 7/8" x 3/8" which can be placed on the flexible mat. These are placed crosswise the flexible mat on the two inner rows. This places them an inch and one-half apart. Six magnets can be placed on the 5" x 12" double magnet, multi-magnet flexible mat.

A magnetic chair pad is quite useful. It has mini-block magnets in the back as well as the seat. These are placed an inch and one-half apart throughout the chair pad. These can be magnetically strengthened by placing a  $4" \ge 6" \ge 1/2"$  magnet under the seat directly under the affected area.

Infections, bacteria, fungi, viruses and parasites will generally require a minimum of two weeks continuous treatment. It is well to extend this more than two weeks by wearing the magnets over the area for another four weeks for the purpose of healing the damage that has been done by the infection.

Cancer requires special treatment that is continuous, as near to 24 hour a day treatment as possible, for a minimum of three months. Treatment of cancer of the pelvic organs can also best be treated by using the magnetic chair pad with three of the 4" x 6" x 1" magnets placed 1" apart in a row in a wooden carrier and placed under the seat of the magnetic chair pad. Sit on this as many hours as is conveniently possible. magnetic field. The positive (northseeking) magnetic field would actually make these worse since it acidifies and all of these microorganisms and cancer flourish in an acid-hypoxic medium. The secret of why a negative (south-seeking) magnetic field will be so helpful in destroying microorganisms, cancer and parasites is that it is alkaline-hyperoxic producing which defeats these microorganisms and cancer cells in making their energy. At the same time, this magnetically negative produced alkaline-hyperoxia reinforces the human cells in producing their adenosine-triphosphate by oxidative phosphorylation which is alkaline-hyperoxic-dependent.

#### MAGNETIC TREATMENT:

The following is suitable for cervicitis, vulval vaginitis, urethritis or infectious cystitis. Place a 5" x 12" double magnet, multimagnet flexible mat on the low abdomen-pubic area. Extend this a couple of inches below the pelvic bone in the case of vulval vaginitis and urethritis. Place on top of this, centered and crosswise this mat, the 4" x 6" x 1/2" magnet. In the case of vulval vaginitis and urethritis, make sure it is extended a couple of inches below the pelvic bone. In the case of infectious cystitis, be sure that this is over the urinary bladder which is above the pelvic bone. Hold these magnets in place with a 4" x 52" body wrap.

When sitting down, sit on a chair pad that has magnets both in the back and the seat. Place under the seat of this chair pad, a 4" x 6" x 1/2" magnet placed back far enough to cover the affected area.

# INTERSTITIAL CYSTITIS:

Interstitial cystitis is an inflammation of the urinary bladder tissues that are below the mucous membrane. This is not usually caused by an infection even though an infection may start the process, but so can several other situations including a heavy use of non-steroid analgesics or food reactions or reactions to chemicals. Use the same system that has been described above for infectious cystitis. Treat 24 hours a day for the first couple of weeks and then treat nightly for the next month. It may even require longer for the healing of interstitial cystitis. Keep the treatment going as long as there is any symptoms. The person should hunt for factors that can be precipitating this, such as a heavy use of anti-steroid analgesics and particularly reactions to foods. A 4-Day Diversified Rotation Diet is often necessary. This diet is described in the booklet, *Health Strategies*.

CANCER OF THE CERVIX, VULVA VAGINAL AREA, URETHRA AND URINARY BLADDER:

Use the same system of the double magnet, multi-magnet flexible mat, the 4" x 6" x 1/2" magnets, the 4" x 52" body wrap and the chair pad. However, in this case, underneath the seat of the chair pad, the wooden carrier holding the three 4" x 6" x 1" magnets should be placed. The treatment for cancer is to be as near 24 hours a day treatment as is possible for a period of three months.

### URETER DISORDERS:

The ureters can be infected and they can be cancerous. For ureter disorders, place the 4" x 6" x 1/2" magnets over the ureters. This is halfway between the pelvic bone and the umbilicus. These should be placed at an angle because the ureters extend from the urinary bladder to the kidneys. Infections require the two weeks treatment and cancer requires a three month treatment. However, seldom will the ureters be treated when treating the urinary bladder or the kidneys.

# KIDNEY INFECTION AND INTERSTITIAL DISORDERS OF THE KIDNEY:

These can be treated with the 4" x 6" x 1/2" magnet. Again, treat an infection for a minimum of two weeks and preferably more, particularly for healing. Treat cancer for three months of continuous treatment. The kidney is treated from the back, about two inches from each side of the vertebrae of the lumbar spine. The upper third of the magnet should be over the rib cage and two-thirds below the rib cage. These can be held in place with a 4" x 52" body wrap. It would be necessary to have suspenders to hold this in place. An-

other method is to have a garment of non-stretchable material which supports the weight from the shoulders. Place pockets in these areas as needed.

When treating the kidney area on the right side, the magnet should be left off for about an hour to an hour and one-half after meals since this will slow down the movement of food through the intestinal tract. The left side does not matter. The right side is over the small intestine where peristalsis is most important.

## UTERUS DISORDERS:

The uterus can be infected and can develop fibrosis. The same pelvic treatment as has been described for other pelvic disorders would be used. In addition to this, the 4" x 6" x 1/2" magnet would be placed on top of the pad directly over the uterus which is behind the urinary bladder.

## TREATMENT OF LUMBAR SPINE:

Disorders in the pelvic area can cause a disorder in the lumbar spine. In turn, a disorder in the lumbar spine such as a state of chronic stress or even a disc can also disorder pelvic function. Therefore, when treating pelvic function it is often wise and even sometimes even necessary to treat the lumbar spine. This can be treated in two ways. One is with the 5" x 12" double magnet, multi-magnet flexible mat or with a 4" x 6" x 1/2" magnet. Often, this magnetic block is placed on top of the flexible mat. This can be held in place with a 4" x 52" body wrap or a garment that has a pocket in it that holds this in place.

# **OVARIAN DISORDERS:**

Place a 4" x 6" x 1/2" magnet directly over the affected ovary. Approach the ovaries from the front of the body. The ovaries are about two inches from the center of the body. Start the edge of the magnet two inches from the center of the body, halfway between the pelvic bone and the umbilicus. Single ovaries can be treated on either the right or the left, or both can be treated at the same time. Infections and cysts should be treated for two weeks continually followed by nightly treatment for the next month. Cancer would need to be treated 24 hours a day for three months followed then by nightly treatment as a lifestyle. It is well to follow any cancer treatment with nightly treatment as a lifestyle after the initial three month treatment is over.

## CANDIDIASIS:

The fungus, Candida, is a frequent invader of the female vagina. This can again be treated as an infection with as near as possible a 24 hour a day treatment for two weeks followed by a nightly treatment of the pelvic area. This would involve the standard treatment for the pelvic area of the 4" x 6" x 1/2" blocks, the 5" x 12" double magnet, multi-magnet flexible mats, the 4" x 52" body wraps and the magnetic chair pad.

# ENDOMETRIOSIS:

This condition has been described in more detail in a section of this quarterly. The principle of treating endometriosis is to use a  $4" \ge 6" \ge 1/2"$  magnet over the uterus and over the endometrial areas that are causing pain. The more hours of treatment, the better. A 5"  $\ge 12"$  double magnet, multi-magnet flexible mat may suffice, however, a 4"  $\ge 6" \ge 1/2"$  magnet will be more often the magnet that is needed. It would be well to have an undergarment made of non-stretchable material that is supported from the shoulders and place the 4"  $\ge 6" \ge 1/2"$  magnet in pockets directly over the areas that are painful or sore to pressure.

# PROSTATIC DISORDERS OF MEN

# PROSTATIC HYPERTROPHY AND PROSTATITIS:

These can be treated with a 4" x 6" x 1/2" magnet. It is best to use the 5" x 12" double magnet, multi-magnet flexible mat with this 4" x 6" x 1/2" magnet placed crosswise the mat. For the first

two weeks, wear this as near continuous as possible. It would even be best to extend this to four weeks. Hypertrophy of the prostate and prostatitis should be treated the same way. After the initial months' treatment is over, then use the same system nightly. It would also be well to be sitting on the chair pad when sitting down with a 4" x 6" x 1/2" magnet under the chair pad.

### CANCER OF THE PROSTATE:

Cancer of the prostate is treated with a 5" x 12" double magnet, multi-magnet flexible mat placed across the low abdomen-pubic area with a 4" x 6" x 1/2" magnet centered in the middle of this, crosswise the mat. Hold this in place with a 4" x 52" body wrap. Some men have preferred using two pair of tight-fitting jockey shorts and slip these magnets in the top of the jockey shorts.

When sitting down, sit on the chair pad with a 4" x 6" x 1/2" magnet under the seat of this chair pad, sufficiently far enough back to radiate into the rectal/genital area. Three months' treatment is required for the treatment of cancer of the prostate. Following this, it should be a lifestyle to sleep with these magnets on the pubic area.

URINARY BLADDER, URETHRAL INFECTIONS AND INTERSTITIAL CYSTITIS, AND KIDNEY DISORDERS:

These conditions in men should be treated the same as in women.

## GENITAL INFECTIONS:

Genital Infections are treated the same in men as in women. HEMORRHOIDS:

Sit on the magnetic chair pad with a 4" x 6" x 1/2" magnet under the chair pad as many hours as possible.

RECTAL AND LOW COLON CANCER:

Treat with a 5" x 12" double magnet, multi-magnet flexible mat across the low abdomen-pubic area. Place the 4" x 6" x 1/2" magnet centered on top and crosswise this mat. When sitting down, sit on the chair pad with the wooden carrier holding three of the 4" x 6" x 1" magnets. It is necessary to treat cancer for three months as near to 24 hours a day as possible.

#### POLYPS:

Polyps in the colon should be treated the same way as cancer and should be considered pre-cancerous. The rectal and low colon areas are treated the same in both men and women.

### GENITAL HERPES

Herpes Simplex II viral infection is the cause of genital herpes. This is a sexually transmitted disease.

Virus infections start in the peripheral area of a nerve and extends all the way through the nerve to the neuron. The neurones are in the low lumbar spine-sacral area. It is necessary to treat the entire length of the nerve from the periphery to the neurones in the low spine. Therefore, the treatment should be a 4" x 6" x 1/2" magnet on the local area and a 4" x 6" x 1/2" magnet on the low lumbar-sacral area. The duration should be as it is for any other infection, a minimum of two weeks and preferably longer. The infection in the genital area may be in an awkward area to place a magnet. Placing a magnet on the public bone and extending 1-2" below the public bone will radiate a magnetic field into the genital area. When it is convenient, it would be well to have the 4" x 6" x 12" magnet directly on the genital area.

# PEYRONIE'S DISEASE

Peyronie's disease results from a lack of blood filling the cavernous sinus of the penis which is necessary for the production of an erection. This results in a crooked penis because of a lack of filling of a cavernous sinus. The cause is secondary to some type of inflammatory reaction or the development of a vascular stricture due to atherosclerosis of arteries leading to the penis. A negative

course.

(south-seeking) magnetic field can resolve the inflammation, any scar tissue resulting from inflammation and can resolve atheromatous plaques.

The treatment is that of placing a 4" x 6" x 1/2" ceramic block magnet on the pubic bone, extending about 2-3" beyond the bone so as to cover the penis. If an infection is present, this would need to be worn 24 hours a day for two weeks. Most of these problems are solved simply by sleeping at night with this 4" x 6" x 1/2" magnet on the pubic bone and extending below the pubic bone. It would take several weeks or even months to solve this problem.

SEXUAL DISORDERS

Male impotency and female frigidity have many causes for which there is no single adequate treatment. The limited value of magnetic stimulation is based on the following:

A. Biological responses to a positive (north-seeking) magnetic field:

1) Increased blood supply to the genital area.

2) Increased testosterone for the male.

3) Increased estrogen for the female.

B. Biological responses to a negative (south-seeking) magnetic field:

Reduced emotional components; a) anxiety, b) depression, c) obsessive-compulsiveness.

The positive (north-seeking) magnetic field; 1) increases local genital blood supply with application to the local area, 2) increases testosterone with a positive (north-seeking) magnetic field application to the testicles, 3) increases estrogen with positive (northseeking) magnetic field application to the ovaries.

The negative (south-seeking) magnetic field 1) reduces anxiety and tension with a negative (south-seeking) magnetic field application to the frontal-temporal areas of the brain, 2) reduces depression with a negative (south-seeking) magnetic field application bitemporally, and 3) reduces obsessive-compulsiveness with a negative (south-seeking) magnetic field application to the left temporal and occipital areas of the brain. Increased biological energy by oxidoreductase enzyme catalytic response producing human life energy adenosine triphosphate.

The principle of magnetic treatment for sexual disorders consists of using the positive (north-seeking) magnetic field of a 4" x 6" x 1/2" placed over the necessary areas.

For the male, place the positive (north-seeking) magnetic pole side of a 4" x 6" x 1/2" magnet under the genital area to stimulate testosterone production by the testicles and at the same time increase the blood supply to the genital area. The duration should be 15-30 minutes prior to sexual intercourse.

Place the negative (south-seeking) magnetic field of a 1-1/2" x 1/2" ceramic disc magnet on the head, a) bitemporally, that is, in front of the ears near the top of the front of the ears, for depression, b) mid-forehead and left temporal for anxiety, c) left temporal and low occipital for obsessive-compulsiveness. These discs are held in place with a 2" x 26" band. The duration should be 15-30 minutes before and even during sexual intercourse.

For the female, place the positive (north-seeking) magnetic field of a 4" x 6" x 1/2" ceramic block magnet under the genital area to increase blood supply to the genital area. The duration should be 15-30 minutes. Estrogen production by the ovaries can be enhanced by treating the ovaries with a positive (north-seeking) magnetic field. Use the positive (north-seeking) magnetic field of a 4" x 6" x

1/2" magnet over each ovary. This is placed on the front of the body about two inches from the mid-line and with the 6" length-wise the body and halfway between the umbilicus and the inguinal area. The duration should be 15-30 minutes prior to sexual inter-

There are limitations to the use of the positive (north-seeking) magnetic pole that should be understood. The positive (north-seeking) magnetic field; 1) stimulates replication of microorganisms that may by chance be present, 2) stimulates replication of cancer cells that may by chance be present, 3) raises the serotonin-opiate complex and if used with a frequency exceeding a four day frequency, can produce magnetic addiction in which a person feels exceptionally good with this and has a compulsion to keep using this frequently.

Appropriate rules to follow when using the positive (northseeking) magnetic field is;

1) soon after sexual intercourse, use the negative (south-seeking) magnetic field over the area where the positive (north-seeking) magnetic field had been used for the same length of time or more than the positive (north-seeking) magnetic field had been applied.

2) do not use the positive (north-seeking) magnetic field more than every 4th day.

3) do not use the positive (north-seeking) magnetic field on the head. It will produce a sense of euphoria and if frequently used, can lead to magnetic positive (north-seeking) field addiction. Since this also excites the brain, it can lead to seizures in those that are so predisposed or can increase mental disorders in those that are so predisposed. In any event, the use of a positive (north-seeking) magnetic field on the head can lead to euphoria and disordered judgement due to the euphoria. Therefore, it is not advised to use a positive (north-seeking) magnetic field on the head.

## MENOPAUSE

During the ten year span from age 45-55, both men and women undergo physical changes. Work and social stress add to the physical complications. A lifestyle, including the use of magnets for energy-restoring sleep and relief of any discomfort is in order. The lifestyle should be a non-addicted, well-nourished state. Excessive uterine bleeding that some women experience can be managed with the application of a negative magnetic field over the uterus. Depression can be managed with magnetic discs placed bitemporally. Maladaptive symptom producing reactions to foods, chemicals and inhalants and mostly to foods, is observed to make the classic symptoms of menopause in a menopausal person. The endocrine changes set the stage for the symptom food reaction. An example is hot flashes evoked by a symptom reaction to milk in a menopausal woman. It is wiser to manage menopausal symptoms with a magnetic field than to resort to supplemental hormones.

The above information relates to specific pelvic areas. The following is information that is useful as a backup for increasing general health.

Sleep on a magnetic bed pad that is composed of mini-block magnets that are  $1-7/8" \ge 7/8" \ge 3/8"$ . Place on top of this bed pad an eggcrate-type foam pad or other suitable futon that would raise the subject approximately an inch above the mattress pad. Sleep with magnets in the carrier up against the headboard. This consists of four magnets that are  $4" \ge 6" \ge 1"$ . They are placed 3/4" apart in a wooden carrier. They can be raised or lowered depending on the height of the pillow. They come shipped at the top of the carrier and need to be lowered so that the wooden dowel they are resting on is level with the back of the head when the head is on the pillow. The closer the top of the head is to these magnets, the better. This should be used nightly as a lifestyle.

It is also well to treat the eyes with an Eye-Sinus Unit. This is composed of a light shield, two neo-dots that are 1/2" across and 1/16" thick and two super neodymium disc magnets that are 1" x 1/4". This can treat the eyes by placing these magnets directly over

the eyes. If there is a sinus infection, the magnets can be moved to the sinus areas. If necessary, two more super neodymium disc magnets can be added so that all four sinuses can be treated at the same time. Treating the eyes at night raises melatonin since the retina of the eyes produce melatonin. It also signals the pineal gland in the brain to make melatonin.

It is also wise to sleep with a 4" x 6" x 1/2" magnet up against the side of the head when laying on the back. When laying on the side, treat the back of the head and upper neck or the side of the head that is not on the pillow. Another useful method encouraging sleep is to use a 5" x 12" double magnet, multi-magnet flexible mat. Place on top of the pillow, between the pillow and the pillowcase. This will treat the back of the head when laying on the back or the side of the head when laying on the side. All of these methods of treating the head with a negative (south-seeking) magnetic field from the top of the head, the side of the head, the back of the head and the eyes will have the effect of raising melatonin. Melatonin governs the human energy system. It is anti-inflammatory, anticancerous and anti-infectious. The more we can raise melatonin, the deeper our sleep will be, the more energy we will recover during that night's sleep and the more defense we have against microorganisms and cancer.

# GENERAL INFORMATION ABOUT MAGNETS:

Double magnet, multi-magnet flexible mats are composed of two stacked plastiform magnet strips 1-1/2" x 7/8" x 1/8". These plastiform magnetic strips are placed in four rows with the 1-1/2 inches lengthwise the pad. In a 5" x 6" mat, there are 12 magnetic strips. In a 5" x 12" mat, there are 24 magnetic strips. The flexibility of these mats makes them very useful since they will fit around the curves of the body without producing any pressure. With the multi-magnet flexible mats, the magnetic field extends to seven inches. However, the therapeutic level extends about two inches. When the flexible mat is reinforced with one row of mini-block magnets placed crosswise on the two central rows of magnets in the mat, the magnetic field extends to ten inches with the therapeutic field extending to four inches. When there are two stacked rows of mini-block magnets on the mat, the therapeutic level extends to five inches. The flexible mat can be reinforced with mini-block magnets placed crosswise the inner two rows of plastiform magnets in the flexible mat. This places the mini-block magnets an inch and one half apart in which there are three placed on the 5" x 6" mat and six placed on the 5" x 12" mat. The flexible mat can also be reinforced by the 4" x 6" x 1/2" ceramic block magnet. This extends the therapeutic value to six inches.

Mini-block ceramic magnets are called Briggs blocks because they are used as the MAGNETO magnets in Briggs and Stratton gasoline motors. They are  $1-7/8" \ge 3/8"$ . These are cast miniblocks. They have many therapeutic uses. They can be used on the head such as the temporal areas, frontal or occipital areas for headaches or management of emotional symptoms or seizures. They can be used on fingers or toes. They can be placed on top of the flexible mats to reinforce the depth of magnetic field penetration. They can be used directly on the joints, under or incorporated into wraps around joints. They are used in the magnetic mattress pad, the multi-purpose pads and the magnetic chair pads.

Ceramic disc magnets are  $1-1/2" \ge 1/2"$ . These ceramic discs are cut from the larger 4"  $\ge 6" \ge 1/2"$  magnets. They serve numerous valuable purposes such as around the head to treat headaches or other central nervous system symptoms, around joints, over skin or subcutaneous lesions. The magnetic field of a ceramic disc extends to eight inches. The therapeutic value extends to about three inches.

Ceramic block magnets are 4" x 6" x 1/2". The magnetic field

extends to twelve inches. The therapeutic value extends for 6-7 inches. A ceramic block magnet that is 4" x 6" x 1" has a magnetic field extending to 19 inches with a therapeutic value extending to nine inches. The 4" x 6" x 1/2" ceramic block has many uses such as around joints or to penetrate deeply into the liver, internal organs, the heart or into the head such as for treatment of tumors. The 4" x 6" x 1" ceramic block magnets are used in the Vitality Sleeper to have a field that penetrates into the head during sleep. The Vitality Sleeper is composed of four ceramic blocks that are 4" x 6" x 1" placed in a row 3/4 inch apart. These ceramic blocks are placed upright in a wooden carrier that holds them firmly up against the headboard. They can be raised or lowered depending on the height of the pillow. They are shipped at the top of the carrier and need to be lowered so that the head is in the magnetic field. They are resting on a wooden dowel. The wooden dowel they are resting on should be slightly below the back of the head when the head is on the pillow. The closer the top of the head is to the magnets in the carrier at the head of the bed, the better. By doing so, it provides a full negative (south-seeking) magnetic field.

A magnetic mattress pad is composed of mini-block magnets that are placed an inch and one-half apart throughout the pad. An eggcrate type foam pad or other suitable futon should be placed over this mattress pad. By doing so, it provides a full negative (southseeking) magnetic field.

The magnetic chair pad is composed of mini-block magnets placed an inch and one-half apart throughout the seat and the back of the pad.

The multi-purpose pad is 14" x 25" and composed of miniblock magnets that are placed an inch and one-half apart throughout the pad. This multi-purpose pad has many uses such as being used on the back, the abdomen and up over the heart and the chest.

SYMPTOMATIC FOOD REACTIONS GENERAL INFOR-MATION:

A local and systemic biological response of acidity is routinely evoked when symptoms develop in response to exposure to foods, chemicals and inhalants. Acidity also produces low oxygen (acidhypoxia). This is true whether the maladaptive symptom reactions are immunologic or non-immunologic in origin. Most food symptom reactions are not immunologic. Immunologic and non-immunologic food symptom reactions have a classic addictive see-saw biological response of symptom relief on exposure with the emergence of symptoms 3-4 hours after the exposure (addictive withdrawal phase). The optimum method of reversing addiction is avoidance. In food addiction, the optimum method of avoidance of the addiction is for there to be a 3-month avoidance followed by an exposure no more often than every fourth day. This is the reason for the 4-Day Diversified Rotation Diet. The optimum long term management of food addiction is the food avoidance period produced by the 4-Day Diversified Rotation Diet. The short term management of symptoms can be managed by alkalinization which can be produced by bicarbonate alkalinization and more optimally, exposure to a negative (south-seeking) magnetic field which alkalinizes and oxygenates (alkaline-hyperoxia). These alkalinization methods can relieve symptoms after they have occurred from the exposure and can also prevent symptoms from developing when the alkalinization methods are used prior to an exposure to symptom producing foods, chemicals and inhalants.

Following is the optimum method of preventing symptoms from occurring from foods:

1.A 4-Day Diversified Rotation Diet. This four day spacing of exposure to specific foods prevents food addiction. The 4-Day Diversified Rotation Diet is described in the following writings by William H. Philpott, M.D.;

The Magnetic Health Quarterly on *Diabetes Mellitus*. Vol III, 2nd Quarter The Magnetic Health Quarterly on *Mental Disorders*. Vol III, 3rd Quarter

The Magnetic Health Quarterly on *Magnetic Management of Addiction*. Vol IV, 1st Quarter

The book, Brain Allergies

The book, Victory Over Diabetes

The book, Magnet Therapy

2.Pre-meal.

Negative magnetic field (south-seeking) exposure. One-half hour before the meal place the magnets on the body. Magnetic discs, either ceramic, magnetic discs that are  $1-1/2" \ge 3/8"$  or super neodymium discs that are  $1" \ge 1/4"$  placed bitemporally. These can be held in place with a  $2" \ge 26"$  band. Place on the sternum, a  $4" \ge 6"$  $\ge 1/2"$  ceramic magnet. An added value can result from placing a  $4" \ge 6" \ge 36"$ 

1/2" ceramic magnet on the epigastric area. Hold in place with a 4" x 52" body wrap. Place on the thoracic spine, a 5" x 12" double magnet, multi-magnet flexible mat. Hold the magnet on the sternum and the magnetic mat on the thoracic spine in place with a 4" x 52" body wrap. These can be removed at the beginning of the meal or they can be continued through the meal until it is completed. If symptoms emerge after the meal has been eaten, then replace the magnets until the symptoms leave and especially place a suitable sized magnet directly over the symptom area. Also prior to the meal, if there are any symptom areas, treat these with appropriate sized magnets, pre-meal. Always use the negative magnetic field (south-seeking).

The above pre-meal and post-meal alkalinization method is recommended for;

a) those with a serious state of symptom reactions to multiple foods in which food rotation is not entirely satisfactory

b) when of necessity, symptom-evoking foods have to be eaten, such as when eating out at a restaurant, or those that have to use this method instead of waiting three months for the introduction of their foods.

3. Post-meal. If any symptoms develop, post-meal, then use suitable magnets placed locally for relieving these symptoms. It could be helpful again, to place the disc magnets bitemporally.

In my experience, the above method of basic food rotation diet with the addition when necessary of the magnetic pre-meal exposure and the magnetic post-meal exposure is superior to any neutralization method. Neutralization methods do not honor the fact that the basic problem is that of addiction. A food rotation diet is necessary to honor the fact that addiction is the major driving force of food maladaptive reactions. There is no optimally effective method for the management of maladaptive reactions to foods that is equivalent to food rotation.

COLLOIDAL SILVER THERAPY:

Colloidal silver is made by an electrolysis method that produces a particle size of 0.0001 micron. These small silver particles are charged to a negative (south-seeking) magnetic field by the electrolysis method. This solution of colloidal silver is placed in the mouth, especially under the tongue for absorption. This provides quick absorption into the blood stream. These fine silver particles go throughout the entire body. The negative (south-seeking) magnetic field magnetically attaches to microorganisms, parasites and cancer cells which are positive (north-seeking) magnetic poled. Silver, in its own right beyond that of the negative (south-seeking) magnetic field, inhibits the replication of these cells. The small silver particles do not interfere in any way with human cell function. It is recommended to use 40 parts per million starting for the first week with 1/2 teaspoon four times a day and followed for the next three months with 1 teaspoon four times a day. In the case of acute infections, two weeks of treatment of 1 teaspoon four times a day usually suffices. There is also an aloe vera silver salve which can treat local skin infections.

## ALKALINE MICRO WATER:

Alkaline micro water helps materially to maintain the body's normal alkaline state. Also, being micro water, it enters into the cells of the body more readily than the usual water. This also carries a negative (south-seeking) magnetic field as well as being alkaline. At least five glasses of this water should be used each day.

Nariwa water is the optimum alkaline negative magnetic field micro water. This comes from a Japanese volcanic magnetic mountain.

INFRARED SAUNA: promoting values including alkalization, oxygenation and detoxification. One half hour (or more) daily infrared sauna is recommended.

1. ALKALINIZATION

The human body functions in an alkaline medium. Enzymes in the human body are dependent on alkalinization and on temperature range. Increasing the temperature increases the enzyme function.

# 2. OXYGENATION

The human body makes it's energy by the oxidation process requiring the presence of molecular oxygen. As the temperature rises, the oxidation process increases. Thus, this will aid in producing more energy.

## 3. DETOXIFICATION

The human body processes toxins, some by being exhaled from the lungs, others passed out through the urine or the stool. Sweating from the skin is another process of detoxification. The far-infrared sauna is ideal in that it penetrates through the layers of the skin and into the subcutaneous fat throughout the skin and then detoxifies all types of toxicity including heavy metal toxicity. Therefore, this is ideal for heavy metal toxicity such as mercury, lead or other heavy metals. It also processes the enzyme inhibiting acids such as in degenerating diseases. Especially noted is the value in processing the toxins from cancer. Therefore, this is also a valuable treatment for degenerative diseases, including cancer.

Far-infrared sauna is markedly complementary to negative (south-seeking) magnetic field therapy which is also alkalinizing, oxygenating and detoxifying.

#### POLARITY:

Always use a negative (south-seeking) magnetic field.

# BEYOND MAGNETISM:

Acute maladaptive reactions to foods, chemicals or inhalants has been documented as producing a brief state of acid-hypoxia. In this state, there is a production of acid and a failure to process properly the end-products of oxidation phosphorylation metabolism. In this state of acidosis, oxygen content is reduced. Maladaptive reactions to foods are the most frequent cause of bouts of acidosis. Degenerative diseases are noted for their acid-hypoxic state. Therefore, every effort should be made to maintain a normal alkaline and normal oxygen state. producing bouts of acidosis and reduced oxygen. It is the better part of wisdom to follow a 4-Day Diversified Rotation Diet. This program leaves out foods that are used as frequently as twice a week or more for a period of three months. This is based on the assumption that these foods are being reacted to in some maladaptive way. It is the frequency of the use that produces the maladaptive reactions. A 4-Day Diversified Rotation Diet is set up to leave out these frequently used foods. After three months, these frequently used foods can be returned to the diet, usually without any symptoms being produced. The details of this rotation diet are in the quarterly, The Ultimate Diet.

strong the field is.

All addictive substances should be abandoned such as addictive drugs, alcohol, tobacco and caffeine ( coffee, tea with caffeine, chocolate, and soft drinks containing caffeine). Addiction is acidifying.

Carbonated soft drinks are acid and should be rarely used. Soft drinks are sweetened with corn sugar and if and when used should be limited to the corn rotation day.

In order to maintain an adequate alkaline state, it is necessary that the minerals that are used in the bicarbonate buffer system be in adequate supply. These are the minerals calcium, magnesium, potassium and zinc. There are several proprietary preparations that contain these minerals associated with vitamin C as ascorbates. Use 1/2 teaspoon to 1 teaspoon of one of these powders plus one-half teaspoon of soda bicarbonate in one-half glass of water three times a day. Some have loose stools with 1 teaspoon, 3 times a day and should therefore, take 1/2 teaspoon, 3 times a day. The preferred time to take the alkaline minerals is thirty minutes after meals. If using alkaline micro water, the soda bicarbonate need not be used. Before using this mineral alkaline water, place it on the negative (south-seeking) magnetic field of a 4" x 6" x 1/2" magnet for a minimum of five minutes or more. This will charge up the water and the oxygen in the water with a negative (south-seeking) magnetic field which again will help the body maintain its normal alkaline state. When using micro alkaline water, soda bicarbonate need not be used when mixing the mineral water.

There is a valuable method of electrolysis which provides an alkaline micro water that has an alkaline pH. There is a home electrolysis unit that provides this alkaline micro water. It is recommended that five glasses of this alkaline micro water be used a day.

# FINAL WORD

*The good news* is that a negative magnetic field will kill invading microorganisms and cancer cells. This fact effectively treats a high percentage of pelvic disorders.

The good news is that a negative magnetic field energy source makes available the human response of alkaline-hyperoxia, magnetic energy for human cellular oxidation phosphorylation producing adenosine triphosphate human life energy, necessary pH and magnetic energy for growth-healing-repair of human cells and tissue and detoxification of endogenous inflammatory substances (free radicals, peroxides, acids, alcohols and aldehydes) and exogenous toxins.

The positive magnetic field has a limited value in sexual drive responses. The limitations of applying a positive magnetic field needs to be followed to prevent 1) microorganism and cancer cell replication, and 2) magnetic positive field addiction.

## Donts

Don't use chemical analgesics to relieve kidney pain. Chronic use of non-steroidal, analgesics can cause urinary bladder interstitial disease.

Don't allow an infection (bacterial, fungal, viral, parasitic) in any area of the pelvis or kidneys to be chronic.

Don't be addicted to foods or chemicals. The withdrawal phase of addiction is acidifying.

Don't use caffeine any more frequently than once in four days. Do not use caffeine twice a week as it can be addictive when used with that frequency. Many should never use caffeine.

Don't use carbonated beverages as often as twice a week. Carbonated beverages are acidic and can further acidify you

Don't postpone treatment of cancer.

#### Dos

Do use a negative magnetic field to relieve pelvic and kidney pain. There is no damage to the pelvic area or the kidneys to the negative magnetic field no matter how long the application or how Do kill infections (bacterial, fungal, viral, parasitic) in the pelvic area and kidneys with a negative magnetic field.

Do rotate foods on a four day diversified basis as addiction cannot exit unless the food is used twice a week or more.

Do drink pure water. Five to ten glasses a day depending upon body weight.

Do use pure water. The preferred water has undergone electrolysis and is an alkaline micro-negative magnetically charged water. Drink a minimum of five glasses a day and preferably, eight glasses a day.

Do use a negative magnetic field to treat cancer. A negative magnetic field is compatible with any other treatment of cancer.

THE GOOD NEWS IS THAT THE ALKALINE-HYPEROXIA NEGATIVE MAGNETIC FIELD HUMAN CELLULAR RE-SPONSE THAT IS THE BREATH OF LIFE FOR HUMAN CELLS IS THE KISS OF DEATH FOR ACID-HYPOXIC-DEPENDENT MICROORGANISMS, CANCER CELLS AND INFLAMMA-TION.

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