Auto-haemotherapy
by Dr. Luiz Moura
What is auto-haemotherapy

It is a simple technique where blood is drawn from a vein and reinjected it into a muscle and this stimulates an increase of macrophages, that are, let's say, the body's cleaners.

The macrophages cleanse everything, they eliminate bacteria, viruses, cancerous cells, called neoplastic cells, they do a spring cleaning, and even eliminate fibrin, which is clotted blood. The bone marrow increases the production of macrophages because the blood in the muscle works as a foreign body that will be rejected by the reticulo-endothelial system. In the muscle and while there is blood in the muscle, the reticulo-endothelial system is being boosted and the maximum boosting only finishes after five days.

The normal rate of macrophages in the blood is 5%, with auto-haemotherapy this rate raises to 22% for 5 days from the 5th to the 7th day, the rate starts to drop, because the blood in the muscle is running out and when it finishes the rate returns to 5%. This is why auto-haemotherapy must be repeated every 7 days.

This is how auto-haemotherapy works. It is a very low-cost method, it only requires a syringe it can be done anywhere, it needs no fridge or anything because the blood is drawn and reinjected straight away nothing is required to be done to this blood it only needs a person who knows how to puncture a vein and give an injection into a muscle and a syringe to draw the blood and reinject it into the muscle, nothing else and it results in a very powerful immune stimulation.

So, it could be disseminated and used in regions with no resources, where people can't afford very expensive immune stimulants such as medicines made from bone marrow. There is a medicine, but I cannot name it, because I am not here to advertise, but it is an awfully expensive medicine which is used to produce the same effect as auto-haemotherapy. It is a lysate of veal thymus, that has been made, and I can say this, it is a lysate of veal thymus, it has a trade name, but in fact, the essence of the product is a lysate of veal thymus submitted to a digestive ferment that becomes a medicine, but it is very expensive, while auto-haemotherapy can produce the same effect at a very low cost. So it can be used by all levels of society without any problem. This is its great advantage!

Beginnings and expansion of the auto-haemotherapy practice

I started to apply auto-haemotherapy when I was still a medical student in 1943, when I joined the School of Medicine. I joined the National School of Medicine, at the Praia
Vermelha, Rio de Janeiro, and my father was a professor at this school and also the head of the infirmary at Santa Casa hospital and a general surgeon. Firstly, he taught me how to draw blood and reinject it into the muscle and he used to send me to the house of every patient he was going to operate on. I had to go the day before they were admitted to the Casa de Sao Jose hospital, where he used to operate on and inject 10 ml of blood into the patient, and 5 days later he didn't wait for the rate to drop to zero, and 5 days later I used to do the same procedure to the patient while still in hospital, because at that time hospitalisation used to last on average a week.

I don't know how he had the courage to operate on with me as his assistant, because I only knew how to hold the instruments and nothing else. I think he used to operate alone, because I could only hold the instruments and nothing else, I had learned only how to draw blood from a vein and reinjected it into the muscle, nothing else, and there has never been any problem and with this, he had one of the lowest rates of hospital infection I have ever seen.

He used to do this because of Prof. Jesse Teixeira's work, done specifically to avoid post-operative infections and resulted in the biggest prize for surgery, amongst the works published in 1940, translated into both French and English, and this work of Jesse Teixeira was a huge success.

My father used this technique, because he had read Jesse Teixeira's work who had carried out 150 operations of different types, compared to 150 identical operations. He had 0% of post-operative infections in the operations where he injected blood and in the other operations, to prove the contrary, he didn't inject blood, and for the same operations, he had 20% cases of infection. The big problem at that time was post-operative chest infection, because the anesthesia was done with ether which irritates the lungs very much and it was very easy to get an infection and because I learned this from him for many years I used auto-haemotherapy exclusively to treat infections, juvenile acne which is a staphylococcus infection, and also to prevent infections on patients because at that time I was also a surgeon, so I also used the same method. The purpose was basically to fight bacteria.

It was only from 1976 that I started to use it to treat a wider range of conditions, thanks to Dr. Floramante Garofalo, a gynecologist and an assistant to the Cardoso Fontes Hospital's director in the district of Jacarepagua. He was the most knowledgeable person on hospital equipment in Brazil.

He was already retired, he was 71. He was commissioned by Dr. Amaury de Carvalho, who was the hospital director, to equip the hospital because the hospital used to be a sanatorium for tuberculosis that had been turned into a general hospital, so all the clinics needed to equipped and he became a director's assistant, and I was also a director's assistant. One day, Prof. Garofalo or Dr. Garofalo, well, let us say professor, because he deserved to be called professor, he complained about a pain a numbness in his leg when walking for 100 to 200 yards, he had to sit down in the street on the curb, because he was not able to walk any further.
So then I said to him: Garofalo, you have to be examined by an angiologist. We have an excellent one here, Dr. Antonio Vieira de Melo, a cousin german of Sergio Vieira de Melo who died in Iraq. So he will have to examine your leg. He first examined it with an apparatus, and said: There is an obstruction in the middle of your thigh. Dr. Garofalo asked: Well, how big is it? He replied: Only with an arteriography to find out. We then went to the X-ray, he had an arteriography, and he had an obstructed artery 4 inches long.

The angiologist Antonio Vieira de Melo told Dr. Garofalo: The only solution is a prosthesis, removing 4 inches of this artery and replacing it with a prosthesis made from a plastic called Dralon. Dr. Garofalo then said laughing: No, you won't do this to me, because I don't want to become a bionic man. Today it is this artery in my thigh, tomorrow it will be the one in my arm or in my other leg. So the only way is to keep having prostheses? No, auto-haemotherapy is what is going to cure me. Then he asked me to apply auto-haemotherapy to him.

Every 7 days he brought a syringe, all prepared, and I applied auto haemotherapy to him. At the end of 4 months, he told me: I don't feel ill anymore, I am cured. I said: It is up to Dr. Antonio de Melo to discharge you and say whether you are ok or not. We went to Dr. Antonio Vieira de Melo who said: I don't believe this. It's impossible! this is suggestion. You convinced yourself so much about this auto-haemotherapy that you are thinking you are cured. Dr. Garofalo said: Now I can walk for miles and I don't have problems anymore. Dr. Melo said: Well, it may be suggestion. So I then replied: There is no point in us arguing whether it is suggestion or not. Garofalo, would you do another arteriography? He said: Right away! Let's do it!.

We went to the x-ray and when he did a second arteriography, there was no obstruction anymore. And so he lived until he was older than 90, walking along this General Roca street, close to my house and died when he was over 95 without ever being operated on. It was really amazing. This was the beginning, in 1976, between May and September 76, when I applied auto-haemotherapy to Dr. Garofalo and cured him. As a reward, he gave me a present. He gave two works: one from Prof. Jesse Teixeira and the other from Dr. Ricardo Veronesi.

There is a gap of 36 years between these two works, one is from 1940 and the other from 1976, but the impression is that one was made for the other, one to combine to the other. Why? Because while this one was limited to prevent post-operative infections, in this one, the work of Prof. Ricardo Veronesi, who is a professor at the University of Santos, immunology had advanced much further and it had been discovered that the reticulo-endothelial system has many other functions besides fighting bacteria, much more than that.

We can read in few minutes what is the essence of it.
*What do macrophages do? Their main functions are:*

according to Dr. Ricardo Veroseni's work
Clearance of foreign particles from the blood or tissues, including neoplastic cells, i.e. cancerous cells toxins and other toxic substances.

Clearance of steroids and their biotransformation.
Clearance of hormones, i.e., steroids.

Removal of fibrin micro aggregates and prevention of intravascular coagulation.

This is why I have auto-haemotherapy, to prevent infarcts and thromboses, cerebral thromboses, infarcts of the coronary arteries, because it prevents intravascular coagulation and removes a clotting that might have happened, as it removed the fibrin that clotted Dr. Garofalo's femoral artery. This is why I have auto-haemotherapy.

Ingestion of antigen, its processing and later on, delivery to the B and T-lymphocytes.
An antigen produces an allergic reaction, so it works very well when treating allergies.

Biotransformation and excretion of cholesterol.

Iron metabolism and formation of bilirubin

Metabolism of proteins and removal of denatured proteins
i.e., abnormal proteins

Detoxification and metabolism of drugs.

Imagine! metabolism of proteins and removal of denatured proteins! Today it is known that the encephalitis, the mad cow disease is caused by a prion protein that is denatured, so it could help treat this disease.

Being responsible for so many and such important functions, it is easy to understand the role played by the reticulo-endothelial system in both favourable and unfavourable determinism of so many different pathological processes such as, infectious, neoplastic, i.e. cancer, degenerative and autoimmune ones.

Later on I will tell you a case, when I started to treat autoimmune diseases. Very well, now the sad thing is that what Prof. Jesse Teixeira discovered in 1940, in 1976, 36 years later was still being studied in first world countries in rats, and it didn't have here the dissemination it should have had.

It is written here in this part.
Degenerative diseases.
The reticulo-endothelial system plays an important role in homeostasis, this means keeping the organism healthy including that of the lipids,

i.e. fats
In this way it has been demonstrated in animals that the reticulo-endothelial system is involved in the production and excretion of cholesterol, either endogenous or exogenous. From this, the conclusion is that the hypercholesterolemia and perhaps arteriosclerosis a degenerative process that hardens the arteries depends on the perfect functioning of the reticulo-endothelial system. The cholesterol rate in the blood can be reduced through the immuno stimulation of the system according to experiments carried out in rats at the University of Tennesee.

While in 1940 in Brazil Prof. Jesse Teixeira discovered in human beings how to stimulate the reticulo-endothelial system, in 1976, 36 years later, in Tennesee, USA, it was being studied in rats.

We are carrying out experiments for this purpose at the workplace of Prof. Luiz V. Decourt in Sao Paulo.

That is to say, that auto-haemotherapy is a resource of very great value, because with the scope that came about with the advancement of immunology, earlier on it was only known that it fought infections I only used it to reduce the time to cure, for example, a pneumonia. I prescribed an antibiotic and at the same time used auto-haemotherapy and with this firstly, I was able to reduce the amount of antibiotics, and the cure was quicker because the antibiotics were doing its part that is, paralysing the reproduction of the microbes and the auto-haemotherapy was stimulating the macrophages to devour these microbes, therefore they complemented each other's action and with this I had very good results in serious diseases such as double pneumonia. I solved problems using this two resources one of them paralysing the reproduction of bacteria many people think that antibiotics are bactericidal. Antibiotics don't kill bacteria, only paralyse their reproduction, our own immune system kills bacteria completing the antibiotic's work. The antibiotic gives it a chance to activate itself and defeat the infection.

Scleroderma

On 10 September 1976, I was the head of the medical clinic at the Cardoso Fontes Hospital, and there was consultant dermatologist there, Dr. Ryssia Alvarez Floriao who works very close to here at Sans Pena Square. She did a diagnosis with 3 biopsies of a lady unable to walk for 8 months, was on a stretcher, paralysed and was admitted to hospital. She did a diagnosis with 3 biopsies and sent them to the Anatomo pathology of the hospital and Dr. Gloria Moraes, head of the Anatomo pathology gave her medical opinion: Terminal phase of scleroderma. Then Dr. Ryssia decided to give a lesson. Every Monday we had a lesson on cases that were not routine and this was a very rare case, scleroderma is an autoimmune disease that is not frequent.

She gave a very beautiful lesson and I learned a lot, I only knew it from books, but I had never seen a scleroderma patient and I was her boss. When she finished the lesson, at the prognostic, to say what could be done for the patient Dr. Ryssia asked the nurse to take the patient away. I understood why and said: Now is the time to hear what can be done for the
patient. You asked to take the patient away for her not to hear. She said: It is true. There is nothing I can do for this patient.

I said to Ryssia: Will you pass this patient to me, so I can apply a technique which is not usual and is called auto-haemotherapy? She laughed in front of me and my two assistants and said: Dr. Moura, I was a resident doctor you know that I arrived from the USA in May and I was a resident doctor in a clinic where all the cases of scleroderma in the USA converged to, this clinic was nothing more than a repository of scleroderma patients. What do you think you can do?

I said: I am going home now to get the two works of Dr. Jesse Teixeira and Dr. Ricardo Veronesi I will get these two works and you will see that the idea is well-founded. It took me 20 minutes to bring them and I read the main parts of the two works and I asked her: What now Ryssia?. She said: Ah, it has a logic, it may work, it is worth while.

As I was going to do something never done before in a hospital, I used a huge dose, I took 20 cc of blood and reinjected 5 cc in each arm and 5 cc in each buttock, I had to get a result, either it was going to work or not, I had to come to a conclusion.

The improvement was really amazing. A patient with scleroderma has the skin that resembles an alligator's hard skin, leading to a terrible death, from asphyxia, because they are not able to breath anymore. The lungs cannot expand, because the body becomes as if were a wooden block. As unbelievable as it may seem, 30 days later, on 10th October 1976, this patient left the hospital on foot.

**What are the other indications of auto-haemotherapy?**

Many, many indications.

Firstly: all infectious diseases in general. Secondly: all allergic diseases, it has a wonderful effect on bronchial asthma, skin allergies, on diseases of which not much is yet known, for instance, it works wonderfully well on psoriasis, on autoimmune diseases, which are many today Crohn's disease, an autoimmune disease that destroys the intestine the antibodies attack the end of the small intestine.

On Crohn's disease, on lupus, I already used it on lupus. I had a patient, I will mention her only by her initials, R. S., she teaches dance to children in the city of Caxias. She had lupus, I mean she has, but she has no more symptoms, as if she has been cured. she takes these children every year sponsored by Italy to dance in Italy. She teaches dance to street children. I treated the lupus she had, she couldn't work at all.

It works on scleroderma, as I mentioned earlier, it produces an excellent result on rheumatoid arthritis. I have a patient from the Federal University of Rio de Janeiro, she is an employee, she had not been able to walk for 8 years and with auto-haemotherapy today she is ok. She comes upstairs to my surgery, takes a bus, has no problems.
It works on serious miastenias, I have a patient who is my age, 78. She is a month older, she will be 79 earlier than me, I will be 79 in May. She was diagnosed with serious miastenias in 1980 at the Institute of Neurology, at Pasteur Avenue, and they considered that nothing could be done in her case. She has been having auto haemotherapy since 1980. She is the only survivor from all serious miastenias diagnostics of patients that had serious miastenias at that time when she started the treatment in 1980, she is the only one alive. She comes to my surgery with her daughter by bus. She is poor, comes to my surgery by bus, 24 years on.

So it is really incredible that a work that benefits and relieves the suffering of so many people, in so many areas, in so many pathologies, in so many different types of chronic and acute diseases is not disseminated.

I know I am wrong not to take the flu vaccine for the elderly, but as I do auto-haemotherapy I don't need a flu jab, because I keep my immune system boosted. I don't condemn it, it is very good that everybody takes the flu jab. I don't need it neither does my wife, because we have auto-haemotherapy, we keep our immune system activated.

So it is truly a therapeutic resource with an enormous reach, enormous indeed. And it has benefits, for instance, in 1980 at a surgery I had in the town centre in the De Paoli building, I attended a lady, I will call her Graca so she cannot be identified. This lady had been diagnosed with scleroderma by the Petrobras medical service and it was considered incurable, so they decided to give her early retirement. She came to me and I told her about the scleroderma patient, 4 years ago from the Cardoso Fontes Hospital. She decided to have the treatment and I treated her. She has no more symptoms until today. She will retire only in 2005 when her retirement age is due. She was going to retire in 1980, but now she will be retiring 25 years later.

This can change lives in the same way it changed her life. Imagine if she had retired at that time, what kind of pension would she have today? Probably she would not be alive, if she had not had this treatment.

So auto-haemotherapy is a resource that has a very wide range of applications and there is a scientific explanation for how it works. It is not something that can be said to be mysterious or magical or any sort of panacea, no! It is known how it works and has been proved.

In fact, all earlier European studies were based on empiricism, nobody had proven how this treatment works. A Brazilian, Prof. Jesse Teixiera, proved how it works in 1940. From this date on, it having been scientifically proved how it works, this treatment was supposed to have been disseminated and used, because medicine is becoming more and more expensive. The resources are more and more expensive. Many diseases that auto haemotherapy prevents happen in old age the elderly are becoming a very heavy burden in relation to expenses and this is why health plans charge elderly people an absurd price because they cost much more to be kept alive and in relative health. we do auto-haemotherapy and are an example We have a health plan and we are not causing any expense to the health plan. My wife is 77 and I am nearly 79. We always have an age difference of two years but
sometimes she grows older and then we have an age difference of only one year. This is the only difference.

So really, this treatment is something of great value. I hope that we will be able to disseminate it and in time be really successful and make some colleagues start to use it as they will be pressured by patients. The truth is that when they see the results, the patients tell the results and they can't explain, many go off at a tangent and claim it is spontaneous remission, not to admit that it was due to auto-haemotherapy.

**Ovarian cysts and myoma**

My daughter who lives in Spain was sterile, she had polycystic ovaries, she was my first case, she was not able to become pregnant. In Spain, Dr. Pedro, later became her obstetrician and delivered her two children. He applied auto-haemotherapy to her and about 6 months later she had no more cysts. The immune system had devoured the cysts and she became pregnant for the first time.

Dr. Pedro who applied auto-haemotherapy to her carried on the treatment, and then she became pregnant for the second time and then for over 20 years, he applied the IUD for her not to become pregnant again. Then the problem was the other way around. Before she had been sterile, but later on she had to use the IUD because she was already happy with a boy and a girl. I have two grandchildren, my grandson is 21 and my granddaughter 23, she is an agronomist and he works with sound and image. Later on, I used it on many patients here, and resolved many cases of ovarian cysts and myoma as well. The myoma is devoured by the immune system. So it is really something of a great value and I hope that now we can achieve a wider dissemination.

**Thrombocytopenic Purpura**

The Thrombocytopenic Purpura, it was incredible the results of this case of purpura and also Mrs. Maura's case, I will mention only her name, she was about to have her leg amputated but auto-haemotherapy saved her leg. She can hire out horses now simply because she had auto-haemotherapy, otherwise she could hire out horses at all, because she could not work with just one leg. She was going to have an amputation at thigh height. The auto-haemotherapy in this case of purpura was like this: There was a lady who had a son, about 1 year old her gums started to bleed, even bleeding through her ear, an otorrhagia. When the doctor in Visconde de Maua realised that she could die, he sent her to city of Resende. Then she was referred to a hematologist in the city of Volta Redonda, and he found out she only had 10,000 platelets, whilst the normal range is 200,000 to 400,000 platelets. Then the treatment began with high doses of cortisone, 100 milligrams of Meticorten a day, a huge dose!

The haemorrhages disappeared the platelets increased to 150,000 and thus she spent 6 months on cortisone, Meticorten. After 6 months the cortisone didn't work anymore, but the cortisone had made her swell up. She didn't put on weight, she swelled up by 6 stone, even so, it didn't work anymore, this is why the treatment stopped. He replaced the cortisone that
ceased to work and the platelets dropped down to a minimum again. He replaced the cortisone by two medicines used in chemotherapy for cancer, Endoxan and Metroxathe. Then the platelet count increased again and returned to normal, for two months and at the end of two months they also stopped working.

Then the doctor referred her to a surgeon who was going to remove her spleen, because the platelets are killed in the spleen. For some reason that medicine doesn't yet know, the platelets are not recognised as their own and the spleen kills these platelets when they are just a day old, when they should live for 5 days and as result the bone marrow is not able to replace these platelets, which are killed at a very young age. Then the only solution found was a splenectomy, removing the spleen, but as a young woman in her early 20's, with a one and half year old son, she wondered whether she was going to be cured for sure or not. The surgeon was honest and said: There will be a cure only if the liver replaces the function of the spleen, otherwise you won't have a life worth living and won't live for very long.

So she decided not to have a splenectomy and returned to Visconde de Maua. I told her to have auto-haemotherapy and at the end of six months, she was cured and is until today. After that she had two more children, and with her spleen. She didn't have to have a splenectomy So this was amazing.

Gangrene from a spider's bite

Mrs. Maura who hires out horses, was bitten by an armed spider, which is the worst spider, worse than the tarantula or the black widow, even though it is small. It is called armed spider because it strikes, it is brown and likes living in old wood and because it is cold there in the winter there is always wood for fireplaces. This spider bit her leg and caused gangrene. Her tibia and fibula were exposed, it was horrible. As there is no antidote, the Butanta Institute strongly recommends amputation, so she went to the hospital to have an amputation and now I will tell you a curious case because jokes are interesting.

Mrs. Maura is an odd person, very funny, but it is worth me telling you this. She did what was right, but she didn't fully understand why. She went there for a amputation of her leg, she thought they were going to put a dressing, tied to the operation table, she was told her leg was going to be cut off then she start to scream and asked to be untied. They said no, and that she was going to die if she did not have her leg amputated. So she asked for a chief of police to be called. He came and said to her: Well, if you sign a discharge agreement, the doctors will release you, but you will have to sign it, because they claim you will die from gangrene. She decided to sign and returned to Maua thinking about dying.

She was then referred to me and I did auto-haemotherapy to her, but then I remembered another resource used by a French doctor, a surgeon during the 1914 to 1918 war called Pierre Delbet who saved many limbs from being amputated with a magnesium chloride solution. He prepared it with 20 grams in 2 litres of water to be isotonic He washed the wounds with this chloride solution and he saved several people who had gangrene. I think the two things worked together: the action of this solution that worked as a very powerful
disinfectant and the auto-haemotherapy that worked as a powerful immune stimulant. The two things worked together. and in 2 to 3 weeks Mrs. Maura's leg had been cured.

But then comes the funny side, she booked an appointment with the doctor who was doing what the Butanta Institute told him to do. She booked an appointment at his private surgery, and waited until the waiting room was full and said to the doctor: Look at the leg that you were going to chop off!. But, being a farmer, she said: If you had not cut off anyone's leg for a long time and needed to practice on my leg, I would have brought you a pig so you would have four legs to amputate. This is Mrs. Maura, she speaks her mind. The doctor really thought he had to amputate, but she understood he wanted to practice on her leg as he had not amputated any leg for a long time.

Has auto-haemotherapy any application for multiple sclerosis?

Yes, it has, but it is not the same thing, because this is more a degenerative disease it is not an auto immune disease, not an auto-aggression by antibodies. It is a disease where the myelin sheath, the white part of nerves, is destroyed. It is assumed to be genetic, the person is born with a tendency to it. In families with multiple sclerosis very often it will occur in more people it is more often in women than in men. It is like haemophilia, women don't have it, but they pass it on. Men have it, but they don't pass it on.

I used auto-haemotherapy in multiple sclerosis, but it didn't revert the disease in the same way as with lupus and rheumatoid arthritis, but she has been surviving for many years and in good health at least it stops or delays the development of the disease, there is a benefit, but it is not the same result as in other autoimmune diseases where the results are very good indeed.

A girl with very serious asthma

This girl had an asthmatic illness, it is an extremely serious asthma, she was very often in hospital to receive oxygen, in the early hours of the morning her mother had to take her for treatment. Someone recommended me as I treat asthma and always use auto-haemotherapy. I then prescribed auto-haemotherapy to her. She was a 10 year old child and accepted it well, so the treatment started. normally I ask the patient to return two months later, but in this case I asked her to return one month later, but she didn't turn up.

Two months later, the mother arrived with her child. She was really very embarrassed, she almost wanted to hide under the table. She said: I want to apologise. I didn't bring my daughter because when I was looking for the prescription from the pediatrician who has been treating her since she was nine months she became a friend of the family goes to our birthday parties, it happened that your prescription came to hand. The doctor saw the prescription for auto-haemotherapy and said: This doesn't exist! For God's sake, don't do this to your daughter, you will kill her. She is like a daughter to me, I like her. And this was true. The child had been her patient for 9 and half years and the doctor frequented their house.
But this happened three weeks after she had left my surgery and the girl had got better. She
spent that time without staying in hospital, she was in hospital nearly every week. Then the
mother decided not to do, because she trusted her doctor, and with me it was her first
consultation she had been with the other doctor for 9 and half years. But a month later, she
started to get worse again. Then the daughter demanded to be taken to the surgery, saying: I
want to carry on this treatment, I felt well. Her mother said: Ah, but I have to speak to the
doctor.

On this day, my clients were left to vegetate in the waiting room, I spent two hours with
her, to explain and convince her that there was no risk whatsoever. I had to give umpteen
examples to make sure she was going to carry on. But at a certain moment, she said to her
daughter: Very well, I will do it, but you will kneel down here and swear that you won't tell
the doctor. She made her kneel down and promise that she would not tell the doctor! And
this secret was kept for a year. I discharged her one year later, she was cured and never
again had asthma attacks. But her mother came with a guilty conscience at the end of year
when I discharged her. She said: The doctor thinks that what cured her was the treatment
that had taken nine years to work, but eventually did, because she is sure I didn't carry on
with your treatment, but I did. My conscience is troubling me because she is an allergist and
has so many patients with the same problem that could benefit from it, and my conscience
is troubling me. So I said to her: It is your problem, not mine, you are the one who has to
tell her! She said: I made my daughter swear she wouldn't tell her. How am I going to deal
with this now? Will she have to confess as well? I said: You are the one who made her
swear, the problem is not hers, it is yours. I don't know if she ended up telling the doctor
because I discharged the girl and she never had asthma again.

Auto-haemotherapy Dosages

The initial techniques, still empirical, began in 1912 with a French Professor called Ravaut.
He used increasing doses of 1, 2, 3, 4, 5, up to 10cc. Later on Jesse Teixeira no longer did it
that way. He injected only one dose of 10 ml, to avoid post-operative infections, he
injected 10 ml and 5 days later another 10 ml, this is how I started to do according to my
father's direction.

I reached the conclusion that the dosage varies with the seriousness of the problem. 5 ml for
not a very serious disease. For lupus I only use 10 ml, for serious miastenias and
rheumatoid arthritis I use 10 ml. For allergy, asthma, normally, 5 ml is enough. For rhinitis
5 ml, there is no need for bigger doses.

In desperate cases, such as the first case of scleroderma I treated in 1976, I used 20 ml to
start with because I needed a violent reaction for the patient to be able to recover from a nearly
terminal phase of scleroderma, anything was worth trying.

Auto-haemotherapy can be done for 10, 15 or 20 years. I have been having it for over 20
years there are no contra-indications. I keep having it to avoid diseases that would come
into my daily life, because as I am getting older, I've gone through the age of vascular
accidents. I had it to avoid cerebral and cardiac vascular accidents now I have it to protect
me also against cancer, by keeping my immune system boosted I always have macrophages ready to devour cancerous cells, at old age or even young age cancerous cells appear like a factory with its quality control, there are always faulty products so there must be a quality control our immune system does the quality control on our cells.

There is no limit to its use, it can be used for a lifetime. I tell my patients to have a series of 10 injections, then a rest for a month. In some cases just for prevention only, a rest of 2 or 3 months and then another series, let's say it is to be used on a permanent basis, at intervals, and the intervals depend on the purpose for which the auto-haemotherapy is being applied, if it is only preventive, it can be done with long gaps. If the purpose is an existing condition to be kept under control, then it is done with shorter gaps, 10 injections with a 30 day gap. On many patients I begin with 10 ml in the acute phase of the disease, afterwards I reduce it to 5 ml a week because it is not necessary more.

For example, my neighbour from Visconde de Maua had a disease that was going to make her blind, she had toxoplasmosis and only had 20% of her eyesight left. One day, a friend of hers told me about her and then I prescribed auto haemotherapy for her. When she realised she got better, she increased from 10 ml to 20 ml 10 ml in each buttock and she recovered 80% of her eyesight she is still doing it today, this happened over 10 years ago.

The interval between injections is 7 days. In rare cases I do it every 5 days when I want to keep the macrophages rate at its top level above 20%. When there is no need, when the infection or the problem is under control, then I do it every 7 days, because it is possible to reactivate on the 7th day and return again to 20%.

I have not explained yet that from the moment the auto haemotherapy is applied it takes 8 hours for the rate of 5% to reach 22%, it increases by the hour. The technique Jesse Teixeira used to prove how auto-haemotherapy works was very simple. Why was simple? It is simple after we read it, because the difficulty thing is the discovery. He discovered that by applying a caustic substance called cantharis to the thigh, a blister was formed. And then what did he do? He drew liquid from the blister and count the macrophages and found it to be 5%, and for several days he produced a blister and found to be 5%. Then he carried out the auto-haemotherapy and took a few drops from the blister each hour.

Each hour the level of macrophages kept increasing and at the end of 8 hours, it reached 22% and he found that for 5 days it remained at 20 to 22%. Everyday he took few drops, but it remained at 20 to 22% and from the 5th to 7th day then the rate started to drop. He did auto-haemotherapy on rabbits and found that the action of the auto-haemotherapy finished when the blood finished, because he sacrificed the rabbits and found the rate returned to 5%. Where the blood had been injected, there was no blood anymore.

Auto-haemotherapy is also used in veterinary work, it is used in cows that have a virus disease called papilomatosis This disease are warts that appear on the snout of cows, and really harms cows a lot. By applying auto-haemotherapy, done with 20 ml in cows all the warts fall off in 2 to 3 days.
Some patients want 10 ml injected in just one arm, only to avoid being pricked twice, but I am against it! I think the muscle of the arm, the deltoid, can take well 5 ml. 10 ml can be injected into the buttock. The gluteal muscle has a capacity to receive 10 ml. Mrs. Malu, the one I told you about with toxoplasmosis, injected 10 ml in each buttock, because she wanted to have a maximum effect to save her eyesight, but this was her own decision, I didn't prescribe 20 ml, she herself decided to take 20 ml, for a more efficient result.

A study on the dosage needs to be carried out to see what is the dosage really needed. I have been thinking about what would be the ratio in relation to body weight. Dosages of medicines vary according to body weight, the dosage for a child of 5 stone is much less than for a person of 11 stone it may be unnecessary for small children to use an adult dosage of 5 ml, a dosage of 2 or 3 ml may do. I hope that this DVD and the dissemination that it will result from it will raise the interest of people who want to carry out a laboratory research and have the means for it because all I do is based on clinical studies, based on reasoning, without any laboratory research because I don't have a laboratory for that. It is all clinical research of practical application. All my studies come from practical application.

I am sure that this technique is totally harmless, it does not harm people, I've never seen any problem. A penicillin injection can result in an anaphylactic shock. but people's own blood doesn't cause an anaphylactic shock. There is no risk at all in this treatment, I've never seen any abscess nor contamination. Why there is no abscess? Because it stimulates the immune system, and it should be done under the best hygienic conditions, but even if it is badly applied, an infection would be rare, because the immune system is well armed and increased fourfold, this is why I've never seen any problem. I've seen patients who cannot stand the sight of blood and when they have an injection, they pass out but this is an emotional problem and has nothing to do with auto-haemotherapy, it has nothing to do with the person's balance. I really think this is an invaluable technique and I hope that now we can achieve a wide dissemination.

Alexander Fleming and the discovery of the antibiotic

He was a gardener's son, who became a Lord, a gardener's son had never became a Lord before, thanks to the almost drowning of Winston Churchill who was 8 when he fell into a well. Alexander Fleming was 10, he was the gardener's son of Winston Churchill's father called Lord Churchill. He saved Winston Churchill, by pulling him out of the well.

Lord Churchill called Alexander's father and said: My son's life is priceless. Winston Churchill's, fortunately, because Hitler didn't succeed thanks to Winston Churchill He said: Ask for anything and I will give it to you, if you want a house I will give you a house. He said: No, I don't need a house, I was born here, my father was born here, my grandfather was the first one to work here. I need to fulfill a wish of one of my sons. I have four children, three will be labourers like me they have no interests, but Alexander ever since he was very small says he wants to be a doctor and researcher and I don't have the means at all to fulfill his wish. Then Lord Churchill said: Then he will be, if he has the ability, money is not a problem. Alexander then graduated in medicine and thanks to his humbleness he discovered penicillin.
Lord Churchill offered him any room out of the 100 rooms in his mansion Alexander himself told us this in 1951 at the Servidor do Estado Hospital at the Sacadura Cabral street. So Lord Churchill said: You can choose one of the 100 rooms. Alexander replied: No, you sometimes have guests, taking all rooms, a place under the staircase is enough. There were two curved staircases leading up to the second floor. He said: There is enough space underneath them to set up my laboratory. Luckily, it was a very humid place and while he was carrying out experiments with culture plates due to the humidity, a fungus that loves humidity, namely, the penicilium notatum, destroyed one of those culture plates of a certain microbe and as he was a researcher, instead of angrily throwing the spoiled culture away, he wondered why that halo of destruction had appeared and he found this fungus and discovered that this fungus the penicilium notatum, discharged a substance called penicillin, so he started to use antibiotics in cows and horses at the Jockey Club in London, and in cows at nearby farms, with some infectious diseases and pneumonia.

One day the Royal Air Force Commander came to fetch him to apply penicillin to Winston Churchill who was dying in North Africa. Winston Churchill had gone there to give Marshal Montgomery moral support because he was being defeated by Marshal Rommel, Hitler's desert fox. He went there to give him support and caught double pneumonia, and there no resources anymore and practically no hope for him.

Both Alexander Fleming and the Royal Air Force commander crossed over Europe on their own, passing over areas occupied by Germans, but at high altitudes, they could have gone around Spain through not dangerous regions, but they flew and arrived in time to apply penicillin to Churchill. And he with his simplicity said to the Royal Air Force commander: But Churchill of all people, will be the first human being to have a penicillin injection! What? Churchill, our Prime Minister?! He said: It is all or nothing. In this way he saved Winston Churchill for the second time, the first time from the well that resulted in him studying medicine.

Now, it comes the important side. He had found out in his researches that microbes over a period of 10 years acquire resistance to antibiotics but also they would lose their memory if the antibiotics were not used for a certain time. So every antibiotic should be used for 10 years at most, and then discontinued, if possible, for a few years or even 10 years since many other antibiotics would appear, since the secret formula had been discovered, i.e. a fungus producing an antibiotic, other fungi also have a deadly effect on microbes. This is why such a wide range of antibiotics have appeared, all based on fungi. This was all that needed to be done, but greed resulted in a permanent use of antibiotics, not discontinuing them, and with this, microbes created resistance. Nowadays, doctors in hospitals say as a joke that there are resident microbes that love antibiotics, they are not resistant, but resident. This is the story told by Alexander Fleming, the discoverer of penicillin.

The antibiotics led the use of auto- haemotherapy to be discontinued when the right thing to do would be adding to it and not replacing it. Why? Because each one works in a different way. Antibiotics prevent the reproduction of microbes. The immune system devours the microbes, taking advantage of the small number of microbes, has enough time to work
because the antibiotic controls the reproduction of microbes. The term 'macro' means big and 'phagos' means eat, therefore, macrophage means 'eating big particles'. The macrophages devour the microbes helped by the antibiotic. This means that if auto-haemotherapy had been continued to be used together with antibiotics there would be much fewer cases of resistance to antibiotics, because there would be no resistant strains left that later on would reproduce into other resistant strains of microbes.

**Cancer prevention through auto-haemotherapy**

Cancer is an anarchical reproduction of cells. If a person's organism doesn't recognise these cells as their own and starts to destroy them at their birthplace the person can produce the so-called pre-cancerous cells and stop there and they don't become cancerous cells, if the immune system is working properly. Cancer occurs much more often when, as the person gets older, a gland that controls the immune system which is a gland in the chest called thymus starts to atrophy, then the frequency of cases of cancer starts to increase.

If the immune system is activated, it is a prevention to a likely cancer, because cancer doesn't start with a huge amount of anarchical cells it starts with a small number. If the immune system is vigilant, it may destroy the cancer right away, but this also depends on the person's age and if the thymus has not atrophied yet if the immune system is still fully active after the age of 55, the decline of the thymus begins.

This is why men has prostate cancer and women breast cancer. It happens earlier in women because they have been victims of the contraceptive pill that also demands a lot from the immune system. if women took the pill and had auto-haemotherapy there would be no problem, because they would keep the immune system activated. but the pill demands a lot from the immune system, because it is a chemical hormone, and it requires fighting against the excess of hormones, so the immune system could do this control, thus preventing the pill from having the harmful effects that every artificial hormone has, this is why today in menopause natural hormone of fitotherapics, isoflavones is more used and the chemical replacement hormone is avoided. For cancer if the immune system is kept activated, mainly after the age of 50, in my opinion at least after the age of 50 when the decline of the thymus starts, it is high time to start auto-haemotherapy.

**A case of Acne**

A few years ago I used to stop for a snack whenever I travelled to Visconde de Maua, at a service station, where there was also coffee shop, called Ola. We stopped there and saw a girl with a terrible acne, her skin was violet, I have never seen an acne like that, it was the worst case I have ever seen. I saw that girl and thought: poor thing, she must be poor, I will be charitable to her, I will give her a prescription, although nobody is asking me for it, because I can easily cure her with auto-haemotherapy. I spoke to a plumpish young woman who was serving us and said: Please, tell her I can cure the problem on her face for free.

I could hardly have imagined that this girl was the daughter of the owner of the Ola, Embaixador and Presidente service stations where there was even a Macdonald's. It was not
for lack of money, and her mother said: Every two months, we take her to a dermatologist in Rio, for the last two years, but there has been no improvement. I said: I will give you a prescription for your daughter, although you didn't asked me for anything. Then I gave her a prescription for auto-haemotherapy. Her name is Claudia, but this is not important. The result was that it came to be the most expensive prescription I have ever written, because for a year I couldn't pay for anything at the service station, at the checkout, the owner had left orders to accept no money from me at all. One year later I decided not to go there anymore, because I was embarrassed at not being allowed to pay when she was cured from this terrible acne, she got completely cleared of it, it was a miracle, the worst case of acne I have ever seen in my life.

**Magnesium Chloride**

Magnesium is hugely important day-to-day, everyone should take it because food today is poor in magnesium. The reason is very simple: plants need very much magnesium to breath. Their chlorophyllic mechanism, i.e. fixing of carbonic gas and elimination of oxygen, is the opposite of what we do. We do this through a mineral, iron is used for the breathing mechanism of red cells. Plants need chlorophyll, whose structure is basically magnesium.

The chemical fertiliser used today is the NPK nitrogen, phosphorus and potassium. Magnesium is not being replaced in the soil, and in the past, when cities were all made up of houses with septic tanks, the magnesium we eliminated through feces went back to the phreatic zone. But today everything goes into the rivers and sea, resulting in an increasingly low rate of magnesium in the soil because it is not being replaced.

The two most important functions of magnesium are: it regulates the metabolism of calcium in the body, it fixes the calcium where it should be and eliminates the calcium from where it should not be. Therefore, spinal calcifications, joint, artery calcifications are due to lack of magnesium. Kidney calcifications, calcium oxalate kidney stones are lack of magnesium. It is enough to give magnesium to a patient to dissolve kidney stones, if they are not urate or phosphate stones, if they are calcium oxalate stones then they are due to a lack of magnesium.

Magnesium is so important that Dr. Delbet, a medical doctor used magnesium to wash wounds without knowing why in the 1914 to 1918 war. He published a book in 1940 and later he discovered that magnesium also activates the immune system, and the proof of this is that, according to the maps of cancer and magnesium of Italy and France in his book, the southern half of France, where the soil has magnesium, the death rate from cancer is less than 3.5% and in the north of France, where the soil is poor in magnesium, more than 8.5% of people died from cancer.

In Italy it is much worse, it is very interesting how a decree by one of the Cesares in force until today, has consequences until today and so many people die from cancer without knowing why. In Prof. Pierre Delbet's book, 'The Preventive Policy of Cancer', he shows the incidence of cancer from the north to the south of Italy. Because of a decree still in force, by an emperor, one of the Roman Cesares, was forbidden to carry salt from one
region to another to prevent salt from becoming more expensive because of this and as the north of Italy is very rich in rock salt mines, earth salt that contains only sodium chloride and zero magnesium the incidence of cancer ranges from 7% to 10%.

In central Italy, where the capital Rome is located, as people use sea salt and they have more money, they use a salt with a tiny little bit of magnesium, 0.08%, the incidence of cancer drops to 4.5%. And in the south of Italy, because of the poverty, people use the salt that is given to cattle. The south is the rural area of Italy. This salt given to the cattle is very rich in magnesium, but becomes brine, and every Italian family has wooden vats to keep the salt, and as it becomes brine they use it to season the food. This is their millenary tradition, and for this reason in the south of Italy, the incidence of cancer doesn't reach 2%, just because of the magnesium. This is described in Prof. Pierre Delbet's book, this is why he considers it so important.

Do you know where this chloride comes from? From the salt produced at the Barrilha industry, in Sao Pedro de Aldeia. Magnesium is removed from the salt produced in Cabo Frio, to increase the salt trade value. The salt with magnesium cannot be packed, because it would burst the package. It is highly hygroscopic, it becomes humid, so the magnesium is removed from the salt so it can be displayed on market shelves, nicely dry and also it does not block the salt-cellar. The drier the salt, less magnesium it contains. When magnesium is removed, the salt becomes more expensive and has less magnesium and is drier.

**Pure Magnesium Chloride**

At the shop where I buy it, B. Herzog, at Miguel Couto Street, it is sold as packed at the Sao Pedro da Aldeia factory. Now there are many factories that remove the magnesium from the salt to sell it separately.

**Dosage and use of magnesium**

It couldn't be easier to make: 20g or 2 level tablespoons or a bit more in 1 litre of water makes a very good solution. Just as a preventive measure, it can be taken as a food supplement 1 small cup a day, But if the person already has a spine with osteophytose, arthrosis, should take 2 small cups a day, of this magnesium chloride solution and it will eliminate all these calcifications. For kidney stones, I prescribe up to 3 small cups a day, and it will eliminate these calcium oxalate kidney stones. So this already solves a lot of problems.

Now, in order to wash wounds this strong solution of 20g in 1 litre of water is not used, an isotonic solution is used, such as a saline infusion with 9g to 1 litre of water. For magnesium, it is 20g to 2 litres of water or 10g to 1 litre to be isotonic, and 9g is for sodium chloride. This is the solution suitable to wash wounds and infections. It works better than all these disinfectants, better than sodium hypochlorite and Merthiolate, all of them, besides working as a disinfectant it also stimulates the immune system in the area of the wound.

**And in the case of warts?**
Magnesium should be taken in case of warts. Warts occurs due to a lack of magnesium and due to this deficiency, viruses can multiply and create warts.

**What if the chloride becomes humid inside the bottle?**

No, this is not important. does it never get dry? The salt has no expiry date, magnesium is eternal.

**Kidney Stones**

The lack of magnesium causes calcium oxalate kidney stones, because the calcium precipitates and fixes to the oxalic acid contained in potatoes, tomatoes, spinach, producing calcium oxalate kidney stones.

**Are there other types of kidney stones?**

There is the urate type produced by meats which produce uric acid and the phosphate type that comes from other vegetables with phosphates and phosphorous. The calcium oxalate kidney stones is the opposite, the reason for these kidney stones is a lack of magnesium.

**Does magnesium chloride stop cancer metastases?**

No, I wouldn't say it stops it, but at least slows it down. Prof. Pierre Delbet did prove in his book that the individual by taking enough magnesium throughout their whole life has much less chance of having cancer than those who have a magnesium deficiency. He did prove this in his book, The Preventive Policy of Cancer.

**Is there any contra-indication to the use of magnesium chloride?**

The only case is when a person has kidney failure, for example, if the person is on a haemodialysis machine. In this case it will accumulate because its excess is eliminated through urine. So there is no possibility of an excess of magnesium because the excess goes out through the urine, but if the person is not passing urine, they may go from, a hypomagnesemia, which is usual, to a hypermagnesemia.

**Correct dosage**

For instance, a wrong dosage is the magnesium chloride sold in pharmacies with a dose of 33g, if it is dissolved in 1 litre of water, it can be a laxative. In this case it is really excessively concentrated, it should be 20g to 1 litre or if bought from a pharmacy 33g in 1 and half litres of water or a bit more to keep it at the same proportion.

**Dr. Moura, will you give us a demonstration of auto-haemotherapy?**
Yes, I will, no problem. I have the material. Here at home we are never short of material for auto-haemotherapy, here at home it is a most essential item. *Dr. Moura applying auto-haemotherapy to his wife.* Very well. It is done. It is a simple thing, isn't it? This can result in so much less suffering. My goodness!

**Ichthyosis**

This patient didn't have a quick cure, it took more or less a year for his skin to change completely and for the fish scales-like lesions to disappear. His skin was very dry, it was an agony and terribly itchy. He could not control himself and he was a nurse assistant and this was damaging his contact with patients. The patients were afraid of him. With the auto-haemotherapy he was gradually getting better and better it is true that I also gave him vitamin E, medicines that work in the skin, vitamin A but auto-haemotherapy was what really worked. Auto-haemotherapy was the most important part of the treatment. I also prescribed minerals because his skin had no vitality at all it was very dry, all wrinkled and with raised spots as if they were fish scales. This was the only case of ichthyosis I treated. I don't remember any other case of ichthyosis so clear as this one.

**AIDS**

There are many AIDS patients having auto-haemotherapy and they are getting on well. They keep the so called CD4 rates at reasonable levels. Because they also use other medicines, I cannot attribute it only to auto-haemotherapy. There is an improvement, I have patients who have been living with AIDS for many years and they lead a normal life. But they also take those cocktails together with auto-haemotherapy. Since auto-haemotherapy only acts on the immune side and AIDS is a disease that strikes the immune system, it is an acquired immuno deficiency, maybe auto-haemotherapy is contributing to this prolonged life span of good quality for some patients I treat. It is not my area, because I am not an infectologist, but I prescribe it as a complement along with other treatments they have and the results are good.

**A case of an AIDS cure**

This dentist became contaminated with the HIV virus at his surgery He was a risk patient in the sense that as a dentist he didn't protect himself from the wounds of people with AIDS he treated at his surgery. He did a test and was HIV positive. I asked him to repeat the test, because I knew he was not promiscuous, he only lived with his wife, he was my patient since he was 4 years old, he was a master at flying kites, I cured his asthma when he was 5 years old. I decided to apply auto haemotherapy to him to see what would happen. After the second test which was positive, 2 semesters had gone by. He did the first test in 2 laboratories and 6 months later the result was positive again. At the 3rd test, 6 months later, he called me on Christmas Eve to say he had great news for me and the news was that the test was negative. Then I said: Don't celebrate yet. Repeat the test in other laboratory. He did and was negative. About 6 years have gone by and was never positive again until today.
I don't know if this was because he was in a very good health and the auto-haemotherapy was a boost to his immune system that defeated the HIV virus and managed to finish it. He was a patient I treated in very good conditions right from the beginning. I treat most sick people when they already have HIV for 3, 5 and 8 years, it is different. I began to treat him two months after he was found to be HIV positive.

**A patient with hepatitis C**

He got on very well, I mean, he managed to control the disease. The disease didn't get worse over the years and he has been getting on very well with auto-haemotherapy. He didn't come to use this modern treatment, which is the Pegylated Interferon. He is not negative, but he has no symptoms of any kind he has evidence of a very good hepatic activity, always normal, but the virus markers remain and they will for the rest of his life, because in all cases of hepatitis the markers always remain. The person is cured but a mark remains.

**Combined use of auto-haemotherapy with Ascaridil.**

Ascaridil is a medicine that is used for worms, its generic raw material is called Levamisole Hydrochloride. The Ascaridil was discovered by chance by American doctors, who were carrying out a campaign against verminosis in California. They found that patients with leukemia had got better, but the medicine was prescribed for verminosis in a campaign against verminosis for the poorest people in California. They decided to study the Levamisole Hydrochloride and discovered its huge potential as an immune stimulant and that it worked with a series of diseases. It worked very well on herpes, herpes simplex and shingles, and even on Hansen's disease it was used with great results, on rheumatoid arthritis and on cancer as well, by stimulating the immune system. They used it as an aid to chemotherapy and radiotherapy.

But mysteriously, the product for this purpose called Stimamizol was removed from the market and never appeared again. I have a copy of the Stimamizol directions taken from a pharmaceutical dictionary, called DEF, I also made a copy of the Ascaridil directions, because when I give Ascaridil to my clients who have no verminosis, they may think that because of my age I have sclerosis. They may think: I have no verminosis and he gives Ascaridil, I have rheumatoid arthritis and he gives Ascaridil. I have labial herpes and he gives me Ascaridil. I have shingles and he gives me Ascaridil, he must have sclerosis. I always give both directions to show that they are the same substance, Ascaridil and Stimamizol, both are the same medicine with the same raw material, Levamisole Hydrochloride at the same dosage, all the same. I replace with Ascaridil, but the patients take away a copy of both medicine directions, one for verminosis and one for immune boosting, this is for the patient to know that they are not taking medicine only for verminosis. I always prescribe Ascaridil together with auto-haemotherapy for rheumatoid arthritis, and also for herpes simplex and shingles. I also give Ascaridil to people with frequent virus infection and flu, and it works very well.

**Dosage of Ascaridil**
Levamisole Hydrochloride is an immune modulator, it is not an immune stimulant. It can be added to auto-haemotherapy. The Levamisole Hydrochloride will work as a modulator, this is why the Levamisole Hydrochloride works very well in an autoimmune disease and probably other diseases, but the existing experience is only with rheumatoid arthritis. 2 tablets a week must be taken for 8 weeks, later on stop for a month to release the body from the product and then repeat the dose. As an immune modulator will help a lot in an autoimmune disease called rheumatoid arthritis, and also works on many other diseases, even on leprosy, the Hansen's disease, Levamisole Hydrochloride is used on brucellosis and infections, it produces excellent results on herpes, herpes simplex and shingles, both types, genital and labial. Ascaridil, that is, Levamisole Hydrochloride, works very well on these diseases.

**Does magnesium chloride work on osteoporosis, bursitis and arthrosis?**

Yes, because it regulates the whole calcium metabolism. It fixes the calcium where it should be, for example, on osteopenias, and osteoporosis and removes the calcium from where it should not be, from arteries, joints, it removes calcium oxalate stones from kidneys removes general calcifications in calcified bursitis. It removes the calcium when it is in the wrong place and fixes the calcium where there is a deficiency provided that at the same time the person has a diet rich in calcium, so for those who take magnesium chloride there is no risk at all of taking excess calcium. There is a risk of excess calcium, arteries and joints calcification for those who are not taking magnesium, which regulates the distribution of calcium, in this case really there is a risk. Many people think that those who have arteriosclerosis cannot take calcium because it will harden the arteries, it will, if is not taken with magnesium, but if taken along with magnesium, no, because the calcium is only going to fix where it should be. The magnesium is the regulator of calcium.

**Can pregnant or breastfeeding women use auto-haemotherapy?**

Pregnant women can have auto-haemotherapy, there is no danger whatsoever. When breastfeeding, the milk will contain more antibodies than if she were not having auto-haemotherapy. The child will receive an immune boost.

**Can people on chemotherapy have auto-haemotherapy?**

People on chemotherapy and radiotherapy should have auto-haemotherapy, specifically for chemotherapy, for radiotherapy there is no need to have auto-haemotherapy, because it is not going to bring any benefit. For those people on chemotherapy, as chemotherapy negatively affects the immune system, because it is an immune suppressant not only on neoplastic, cancerous cells, but also on good defence cells, then auto-haemotherapy done simultaneously with chemotherapy will prevent the immune system from becoming too low, because there is no chemotherapy yet aimed specifically at cancerous cells, it also weakens the defence cells, and this is where auto-haemotherapy will be a counterbalance, it will reduce the harmful effects of chemotherapy it is not going to stop them, but it will reduce them.
Is auto-haemotherapy valid in complications of diabetes?

It would be valid, because in cases of gangrene, for instance, I had a patient that had an ulcer on her leg and foot, going down as far as her ankle, and her tendons could be seen, it reached the point of amputation that was booked for 3 days later. This lady had been a diabetic for many years. I was called by a member of her family to see her and went to Lins de Vasconcelos hospital to attend her and I felt that we should try auto-haemotherapy to prevent the amputation of her foot and then I prescribed auto-haemotherapy. She had the treatment for a few weeks and the ulcer closed and she didn't need an amputation. She died about 20 years later, but with her foot. She died as a result of diabetes, from an acute vascular accident, a myocardial infarction, because diabetes causes these vascular accidents, it is a factor that triggers this, and she died from it, but she died with her foot that was going to be amputated 20 years before, this means that she gained 20 years of a better quality life, because she was still able to walk perfectly without using any aids.

and on blindness cases? In blindness what happens is that diabetes produces an arteritis, an inflammation in the intima of the arteries, and this is the reason why it leads to blindness, it is due to a lack of oxygenation in the tissues because of a clogging. Auto-haemotherapy can really have an influence in some way, because it provides a better protection to the cell, it increases the resistance of the cell to this glucose irritation. Not that it cures, it doesn't work as a cure for diabetes, not at all, but at least it protects the cell and the consequences, adverse effects take much longer to happen. It is a way to delay the destruction of cells that occurs as a result of diabetes, which affects the whole vascular system not only the small blood vessels, it affects even the bigger ones later. It is a disease that needs to be fought with many medicines that work against free radicals. Controlling the glucose is not enough, it is necessary to prevent attacks by free radicals. This is achieved with vitamins A, E and C, selenium and several substances that protect the cells. So everything to prevent damages from the excess of glucose is worth.

Scope of auto-haemotherapy

The scope of the auto-haemotherapy is really very wide, because it acts on the immune system in general, increasing by four times an area of the immune system called the Reticulo endothelial System, increasing the macrophages from 5% to 22% and it is responsible for this whole cleansing.

By increasing the number of macrophages, auto-haemotherapy makes the whole system of clearing the attackers that occurs in the body, be it a virus, a bacteria, abnormal pre-cancerous cells, be all inhibited by boosting the immune system and its consequences can be avoided. Auto-haemotherapy really has a wide range of applications and I also have found that it works on an area of the nervous system, which is the autonomic nervous system. It harmonises the vago-sympathetic system and as a result makes people feel more tranquil.
Tense people tend to be sympathicotonic. This causes vascular contraction and contributes to hypertension. Auto-haemotherapy will keep the blood pressure under control by keeping the right balance between the vagal system which expands the blood vessels and the sympathetic system, which contracts the blood vessels. It is another help, together with other resources, not auto-haemotherapy on its own. It helps fight hypertension, which is a disease that affects billions of people in the world due to the stress of modern life, fear and insecurity, all these. Today hypertension is becoming a very serious public health problem and auto-haemotherapy, at least by balancing the neurovegetative system helps make the consequences of hypertension less serious. It increases people's well being.

Is auto-haemotherapy always beneficial?

Yes, always, because the least that can be said is that it works on the immune system and its growth follows a curve, the immune system grows from the moment of birth, a child is born with a nearly non-functional immune system, because the child receives the last load from the placenta when it contracts and throws a huge amount of antibodies into the child. For 6 months the child lives protected by these antibodies received from the mother. Then it would be the case that women, during pregnancy, should have auto-haemotherapy for the child to be born with a boosted immune system. At the end of this period is when children's diseases start, precisely because the child's immune reserves have run out.

Then the child naturally starts to build its own immune system fighting against the environment and the attackers around. At this stage, also one very good thing happens today because medicine has advanced greatly and as a result child death rate has dropped very much, a program of vaccines starts, which are an exercise for the immune system. Vaccines are exercises, a vaccine has the same effect as the attacks produced by diseases, it is an attenuated disease, but in a way that the body doesn't run the risk of becoming ill, unless it is a defective vaccine, but if it is a perfect vaccine it doesn't cause disease, it causes immunity against the disease. The child's immune system keeps growing, and reaches its peak between the ages of 14 and 16 years, when it becomes fully developed, then it stays at this level until the age of 50 to 55 years. Then the immune system starts to decline, when the thymus which is a gland, that controls the whole immune system, located in the chest starts to atrophy. From then on, auto-haemotherapy has a huge value as it will slow down this curve of decline, then it would be then indispensable, Before that, the immune system is still very good.

There are people with a less deficient immune system, others more, this depends on their diet. Some eat very poorly, with a lack of nutrients that stimulate the immune system, such as vitamins, mineral salts or even proteins, because antibodies are made up of protein, therefore, if they have a deficient diet, they will have a deficient immune system. This is the reason why many people live their lives practically without any disease, resisting all attacks from the environment, from infectious diseases and don't get ill and others are ill all the time because they have a weak immune system, but auto-haemotherapy will help counterbalance this deficiency. This does not mean that they should not be taught how to feed themselves properly to stimulate the immune system, but it would always counterbalance this diet deficiency.
Are intervals of less than 7 days harmful?

Not at all, because it is only from the 5th to the 7th day that nearly all the blood has been practically reabsorbed and the immune stimulation is declining. The stimulation happens because this blood represents a foreign body in the organism and the immune system boosts itself to reject this blood. If it is done with shorter gaps, there is no decline, it is always in the range of 20% to 22% of macrophages, when the normal rate is 5%. There will be no harm, but there is no need as it will only cause a discomfort to the patient, because the vein will be punctured more often and there is no need for it. If it is done every 7 days, when it reaches a minimum level a reactivation occurs. When I need to keep the patient at top level, I do it every 5 days, so the decline from the 5th to 7th day does not occur.

Can auto-haemotherapy be done without any breaks?

Yes, absolutely. I only recommend to patients a break exclusively to rest the muscles and veins, nothing else. If the veins are used in turns, not always the same arm, but in turns, and if also the muscles are used in turns, the left gluteus and then the right gluteus in the buttock, the right deltoid and then the left deltoid in the arm, then there is no need to take a break, but if the veins get tired, there is a need to take a break.

Do dosage variations (5, 10 & 20 ml) also make the rate of monocytes increase?

No, it is always the same. The only difference is that, in autoimmune diseases, I sometimes use up to 20 ml in the most serious cases, and dividing it in 4 places, injecting 5 ml in each arm and 5 ml in each buttock. to divert the immune system which is repeatedly attacking its own body, I mean, an immune system which is corrupted, instead of fulfilling its function which is to defend us from attackers, from everything that harms us, it is working against its own body as if it were an enemy.

In rheumatoid arthritis cases, it affects the joints and even creates deformities, these are created by the immune system which I believe it is thinking about complying with a unconscious request to divert psychological suffering to a physical area and with this while the person is worried about their bones, their deformed fingers, the person forgets the psychological problems which motivated the diversion, the immune system corruption. It is a misfortune to have physical suffering only to relieve mental stress, but this happens, and I have evidence of it, many cases.

From which age can children have auto-haemotherapy?

This depends a lot on the child, because recently I had a 5 year old child who accepted auto haemotherapy perfectly well. The child had such a good emotional control and when I explained that would be a benefit, it was a seriously asthmatic child tired of being short of breath, and a child with good reasoning power and very intelligent, the child was convinced that it would be worthwhile. The child accepted auto haemotherapy perfectly well. The one
who suffers most when the child is having auto-haemotherapy is the mother, much more than the child, the mother suffers for the child.

**And auto-haemotherapy in geriatrics?**

For me, geriatrics is the area where auto-haemotherapy should be most used, precisely because it corresponds to the time when the immune system is in decline.

**Does auto-haemotherapy work on bedsore cicatrization?**

Yes, it does, by helping the cicatrization of bedsores and of course, weight cannot be put on top of a sore, and protectors should be used, because bedsores come from a continuous friction of the skin on the bed, besides the friction, there is a lack of oxygenation due to the pressure on the sore, the blood vessels don't supply oxygen to the tissues, so they tend to destroy themselves, but the auto-haemotherapy will help rebuild them and the cicatrization will be quicker.

**And on HPV?**

Yes, this virus is now often found in the cervix. I have no experience yet, because I am not a gynecologist, but I think it is worth trying, because auto-haemotherapy works against viruses in general, and HPV is a virus, I think it should also be used. It is up to gynecologists to try it out and introduce it as a common practice if it works well. I believe it should work, since it works with other viruses, this case should not be any different.

**And on vitiligo?**

I also have not seen any effect of auto-haemotherapy on vitiligo. I used it in vitiligo, and the only benefit I noticed in vitiligo is that the vitiligo patches increase a lot when people are in a depressive phase, when they are very tense, they get worse, because in vitiligo until today the reason for this lack of pigmentation is unknown, but since the neurovegetative system is balanced and improved by auto-haemotherapy, this prevents relapses, those bad phases, where there is a large increase in the vitiligo patches, but it won't cure vitiligo.

**And on recurrent tonsillitis?**

It is very much valid indeed. There is a type of tonsillitis where I used auto-haemotherapy with excellent results, it is the tonsillitis caused by a beta haemolytic streptococcus and results in rheumatic fever causing damage to the heart, it causes atrophy to the mitral valve, that can only be corrected by surgery.

This tonsillitis is extremely resistant to antibiotics and auto-haemotherapy together with antibiotic can cure it. I have already cured many cases of rheumatic fever, where the origin of the infection was in the throat, the tonsils are the carriers, the beta haemolytic streptococcus microbes are well lodged and protected inside the tonsils, so auto-haemotherapy works very well for this.
John, for instance, a young man who now is an adult, was a child when he had a very serious rheumatic fever and auto-haemotherapy cured him and he had no lesions left. Another case, in the city of Petropolis, was considered incurable, I had never seen antistreptomycins, ASO is its abbreviation, reaching a count over 1,000, when the normal is up to 200. It was a very serious case, but auto-haemotherapy managed to save this girl.

**How can auto-haemotherapy help a patient with cancer?**

It works first for patients who normally are having either chemotherapy or radiotherapy. In either case, since a specific chemotherapy for cancerous cells has not yet been discovered, it also acts on normal cells, and with this it lowers the immune level and makes the patient vulnerable to other types of cancer or the repetition of the same cancer in another organ. By keeping the immune system activated, the chemotherapy will have a positive effect destroying cancerous cells and it will minimize the negative effect that destroys good cells that protect from a recurrence of this cancer, which is the metastasis, that is, the same cancer in other organ or a new cancer in other organ, or even a different type and in this case auto-haemotherapy would be very useful for cancer patients on chemotherapy.

In the case of radiotherapy, the radiotherapy also greatly harms a lot the immune system. Auto-haemotherapy would repair the damage by reactivating the immune system, thus avoiding another cancer, so then it is valid in both cases.

It is not to say that it will cure cancer, it will help the means that cure cancer, either radiotherapy or chemotherapy, or also in the case of an operation, where some cells were outside the removed lump and could reach other organs through the lymphatic system, auto-haemotherapy can prevent the progress of those cells, killing them at their birthplace, avoiding their multiplication, so it is also worthwhile.

**Are there any types of cancer incompatible with auto-haemotherapy?**

No, none. It should be used in all of them. It can be used in all cases. There is no case where auto haemotherapy is not useful. The action of auto-haemotherapy may not be enough and not solve the problem, but in any case at least it will prevent the cancer from becoming more quickly invasive, it will help.

**Epidemic outbreaks and auto-haemotherapy**

It would work and be a great value and enormous saving. Why? Because people with one of these illness, would recover their health faster and it would mean less time of illness, because what really cures is the immune system, not the antibiotic, an antibiotic is only bacteriostatic, it only prevents the reproduction of microbes, but it is own our immune system that completes the cure.

So this is one effect and the other is that, if people not infected yet were under the action of auto-haemotherapy and with their immune system boosted, they wouldn't catch the disease.
This would prevent the disease from spreading to a greater number of people. An important detail is that when a disease passes from one person to another, the microbe or virus becomes more and more active and virulent. It is like an exercise that makes the virus more violent, so it would be of great value, but then it would have to be a normal practice for everyone.

Vera and I don't take the flu vaccine. It was an excellent measure by the Ministry of Health, for the elderly. It would be better that people of all ages took the flu vaccine. Every year there is a program for the elderly, because the elderly is more vulnerable to pneumonia, and as the Ministry of Health probably has no resources to offer the vaccine to the whole population, they chose a risk group, being the elderly, but we don't take it. Why? Because with auto-haemotherapy our immune system is boosted, flus are less and less frequent and also these vaccines are limited to 2 or 3 types of virus, normally 3 virus, and there is a hundred of flu viruses, there is no guarantee. So I prefer the auto-haemotherapy, because at least I have resistance to all viruses. This is the main reason.

And on cerebral vascular accidents (CVA)?

It helps a great deal, provided it is done as soon as possible after the cerebral vascular accident, because if it is a haemorrhagic accident, auto-haemotherapy increases the macrophages, that devour the fibrin which is clogging the blood vessels, so re-establishing the circulation much faster. So it has an enormous value, but it depends how soon it is done, the sooner the better.

Recently I had a patient who had a vascular accident, in Visconde de Maua, and I prescribed auto-haemotherapy straight away and the recovery was much faster than it would have been with physiotherapy alone practically allowing nature to do the phagocytosis of the fibrin. Unclogging with 5% of macrophages is much slower than with 22%. In these cases I do it every 5 days to prevent a drop to 5% and keep it at 22% while the patient's artery is being unclogged.

And on arterial hypertension?

No, not in this case, because hypertension is not a clogging, it is an arterial spasm. It is worth having auto-haemotherapy, because the origins of hypertension are more psychosomatic, 95% of the cases of hypertension are called essential hypertension. This is the name medicine gives to it when there is no defined cause. It is known that it is very much related to the emotional side, the essential hypertension is the vast majority.

There is a small number where the hypertension is renal. The substance that produces hypertension is called rennin. There are other people with hypertension due to bad blood circulation, because of an excess of fats, VLDL cholesterol, LDL cholesterol, the bad one, and very high triglycerides. So, there is hypertension because the blood circulates at a slower speed, but auto-haemotherapy works very well anyway, because even in the case of the essential hypertension that accounts for more than 90% of cases, it will work on the neuro-vegetative system, rebalancing the vago sympathetic system. Hypertension is a
dominance of the sympathetic system, that contracts the vessels over the vagal system that expands the vessels, and by rebalancing them, it helps to treat hypertension.

And on gout?

The same, because it removes the uric acid. In gout the uric acid exceeds 7 mg per litre, reaching 8 mg, 10 mg per litre. The uric acid crystallizes inside the tissues like crystal needles and this is why it is tremendously painful. Auto-haemotherapy will cause these crystals to be seen by the immune system as a foreign body and it will try to remove these crystals which are inside the muscles and causing pain. So auto-haemotherapy in this case is also valid.

Sports and auto-haemotherapy

When Beckenbauer hung up his boots and became the coach for the German national team, he said he attributed his physical performance to auto-haemotherapy and before each match he had auto-haemotherapy with 10 ml, in all matches, always. He attributed his health to it as well as his physical resistance in the matches and this was his statement when he stopped being a football player and became the coach for the German national team.

Polymyositis and dermatomyositis

Polymyositis, dermatomyositis and rheumatoid arthritis are autoimmune diseases. In every disease with an autoimmune origin, that is, its cause is a corruption of the immune system that attacks its own body as if it were a foreign body, the use of auto-haemotherapy is valid. Why? Because, firstly, the reinjection of blood, and it is even better if it is spread over several places, diverts the immune attack towards the blood, reducing the pressure on the attacked tissues. In polymyositis cases, muscle tissues are attacked, in dermatomyositis cases, muscle and skin tissues are attacked, so it causes a diversion.

I had experience with dermatomyositis, a patient referred by my colleague dermatologist Dr. Ryssia Floriao. I have not used in any cases of polymyositis yet, but it will work in the same way. This is because firstly it will cause a diversion and the second reason why it works in autoimmune diseases is because the blood is universal in the human body, the blood reaches practically every cubic inch of our body except the hair on the head and body, and even reaches every square inch of the skin and every square inch of any organ always contain blood, even bones have blood, but less, at least there is blood in the bone marrow.

So as the blood is everywhere, and as these autoimmune diseases are an inversion of the immune function, that is, the function of protection becomes an aggression because of a corruption of the immune system. When it is diverted, firstly the pressure of the aggression is reduced. This is one aspect.

Secondly, and this is very important, but this I cannot prove because only a laboratory research can prove it, as the blood contains the same elements the immune system is
attacking, whichever autoimmune disease, it will create in this immune system a kind of perplexity it will be in doubt, saying it as if it were a person: Why am I attacking myself if this blood contains the same elements of what I am attacking? Then the immune system will check to see what it is own and what it is not, this means that in autoimmune diseases the immune system was attacking the body as if it were a foreign body, and it will end up recognising these attacked areas as its own through the elements of the blood which are identical to those of the attacked areas.

But I cannot prove this. This is just an intelligence exercise to try to explain the reason for the cure of autoimmune diseases, permanent cures, it is not only an improvement, the improvement can be very well explained, simply the aggression is diverted towards the blood and naturally it reduces the aggression in those places where the immune system is attacking, this is part of it, but the other, that of the cure, the only explanation is the induction of what is called immune tolerance. This is what happens in allergies, where I have excellent results, which is an immune intolerance, an excessive immune reaction, against allergens, substances that attack and end up affecting its own organism for fighting so much against the allergens. It works very well in all allergies. Auto-haemotherapy is an excellent therapeutic resource.

**Two cases of dysrhythmia with convulsions**

In these two cases, the children had a proven dysrhythmia. They were dysrhythmic, their electroencephalogram was abnormal and they had convulsions called epileptic convulsions. The phenobarbital doses used to prevent convulsions were so high that the children were no longer having convulsions, but they were practically unable to study and even ride a bicycle. They were not able to do anything. I used auto-haemotherapy on these two children with a gap of 20 years between one and the other only to clear the excess of barbiturates that were impregnating their brains.

After the desimpregnation, the children started to lead a normal active life they could play at will and ride a bicycle and lead a normal life. They stopped having convulsive crises, and one of them certainly had no convulsions for over 20 years. and the other one, from here in Maua, for about 3 years more or less without any convulsions. However, I didn't do the auto haemotherapy with this purpose, the purpose was only to clear the excess of barbiturate drugs that were impregnated in these children's brains.

If later I had ordered an electroencephalogram and compared them to a previous one, before they started using barbiturates, this comparison could prove if it really works by correcting the brain waves, and restoring them to a level of normality, but I don't have this proof, but this can be very easily proven in future, As a doctor, I only thought about solving the problem. The other result was unexpected, it was not even the goal of the auto-haemotherapy.

**Medicine**
Medicine is the art of healing. So I have only one commitment to my patients: easing their suffering and, when possible, curing them. This is why I don't respect the so-called scientific standards, saying, I cannot do this because it has not been proved by science. For me what proves anything is the effect of the treatment. If it has benefits to the patient, it is a scientific treatment, even if we don't know what is the working mechanism of this treatment. I use resources, whatever they are, to benefit patients, at least to ease their suffering and, if possible, cure them.

Later on, because I have a strongly investigative mind, I am not satisfied with this and try to find a solution try to find something that will satisfy me, to enable me to understand why the treatment worked. After the patient has been cured, after getting the results I am then interested in investigating the reason, and when I cannot prove the reason, because I don't have a laboratory, I always seek for a logic reasoning that leads me to decide the reason. For instance, in the case of allergies, with auto-haemotherapy the patient improves very much. Actually, allergy is not even a disease, it is an over reaction of the immune system, due to the great number of attacks that human beings suffer day to day, that is, the polluted air they breathe, the food they eat with preservatives, but that cause damage to them, colouring agents used in food, all these are aggressions, and therefore the body of the most demanding people fight too much against this. There is already a well-founded suspicion that very allergic people are much less likely to have cancer, because they have a more diligent immune system but this has not been proved yet.

I tried to find a solution to explain what allergy is and what the cure through auto-haemotherapy represents and how the cure happens. And I have made up a theory that satisfied me: as the allergen is a foreign body, it is not accepted by the immune system, hence the fight against it, and the consequences to the patient.

In allergies to inhalants, what happens? the person starts to sneeze, trying to eliminate the allergen through catarrh. If this allergen goes to the lungs, the immune system attacks it and produces a secretion to try to eliminate the allergens by coughing. Actually, it is not a disease, but a defence against what is causing harm, what should not exist in the air they breathe, should not exist in the food they eat. What happens when auto-haemotherapy is done? These allergens end up going into the blood, from the lungs to the blood, from the nose to the blood, because all of these organs are full of blood. When the immune system starts to fight against this allergen, it will identify the allergen, capture it and will try to eliminate it as a foreign body and at the same time it will discover how to inactivate the allergen, how to fight against it, since it has been identified as a foreign body, and ends up inducing what is called immune tolerance and accepting as its own what was considered an enemy before.

Who discovered this was the greatest allergist known to the world 2000 years BC, a Greek King called Mithridates. He discovered, when he was 10, that by taking tiny and increasing doses of 2 poisons used to kill the kings, at that time, Cicutia and Arsenic, which were put into the wine to disguise it, he would become immune I don't know how he discovered this. His pleasure was always to have a wine taster to drink the wine and when he dropped dead, instantly killed, he would drink in one sip the rest of the wine in the glass and he was
considered by the people as having divine powers because everyone had watched the person drinking the wine and dying instantly and he drinking the rest of the poison and in a much greater quantity. He discovered that the poison itself creates the defence against the poison. The poison creates the antibodies against the poison. but for this he took increasing doses and this is the principle of the vaccine.

When an anti-venom medicine is made, which later on can save us from snakebites, increasing doses of poison are injected into a horse, until it can cope with a dose that would kill the horse instantly if it were the first time dose. Then blood is taken from this horse, the serum, the white part, is separated and the red part, the red cells, is discarded and the white part is the anti-venom medicine. But the person who discovered all this was King Mithridates, 2,000 years BC.

To doctors and future doctors

Always check, never accept things such as 'this is a thing of the past', 'this is old fashion', 'it is out of fashion'. Always add instead of replacing the old teachings with new ones and if possible, always add the old to the new. Always check and never accept things such as, 'this doesn't work', without checking it out, provided, of course, that no harm will result to anyone going to use this treatment, but always add to it.

For example: the cupping-glass, which now is in disuse, but nowadays is being used again in Japan, even with suction. It was a great technique used in the 19th century. Cupping-glass used to cure pneumonia, it was not known why, but it was applied to the lungs and the patients were saved. There were no antibiotics at that time and the pneumococcus was the same as today, and it cured pneumonia. Later on, Reich explained with bioenergetics why, The cupping-glass pulls the blood loaded with energy and the energy potential was raised above that of the microbes and the energy used by the microbes to reproduce was removed from them and so the cupping-glass cured the pneumonia. But without waiting for Reich to publish his books in the 1940's, in the 20th century doctors had common sense and used the cupping-glass without knowing why it worked, since it worked.

The great lesson is considering as the first objective of medicine the patient's relief and cure, and after that, our satisfaction as a scientist, whether we want it or not every doctor should want to be a scientist, should want to know why things happen, they should study later to be satisfied. This is for personal satisfaction, but this is not the doctor's commitment. The doctor's commitment is to the patient, improving their health and relieving their suffering, this is the doctor's only commitment.

To patients

Firstly, a positive frame of mind, because a negative mind worsens the suffering. When a person is negative in relation to their suffering, the immune system declines. If a person believes in their cure, has every chance to win over the disease. When a person thinks that their disease has no cure, the chances of a cure are already very reduced.
Therefore, thinking in a positive way is very important, the mind has an enormous power of both cure and destruction. The increasing cases of autoimmune diseases stem from a negative mind. The case of scleroderma I described earlier, the lady from the Cardoso Fontes Hospital, her unconscious mind generated the disease, she had a mentally handicapped son, her husband abandoned her, and her mind created the disease so that the whole family would come to help her, because she was completely destitute with a mentally handicapped son and unable to work so the disease was the solution to her problem and the auto-haemotherapy was the solution to the disease, and later on everything was sorted.

**Relationship amongst emotion, health and disease**

Pleasant and good emotions create health. Bad emotions such as fear, fear of violence, hatred, anger and sadness create disease. So everything that is gratifying to a person, peace of mind, safety, create health.

A simple example: a person suffers from psoriasis and is on holiday, has a swim in the sea, sits in the sun, is on the beach, so the psoriasis disappears altogether, when going back to work on the following day everything bursts out. Why? If the person really liked their work, the effect would not be that much. But if a person doesn't like their job, has contact with people, they don't get on well, the person is not happy at their workplace, so the psoriasis causes a diversion from the negative tension, from the feeling of being uncomfortable towards their work and the people around them they switch on the psoriasis and forget those things.

The unconscious makes us feel very small because I have the concept that the unconscious represents 90% of us. We are only 10% conscious, 10% rational and 90% irrational this 90% is the unconscious and it fulfils our wishes in the best possible way. It creates diseases to divert attention from the mind, to alleviate the person from a psychological point of view. In fact, many times disease is not the problem, it is the solution, but afterwards the person doesn't accept it because it brings suffering, then the person wants to cure the disease, but when it was created it was a solution.

**What makes a person change their behaviour?**

The most important thing is not to cry over spilled milk. What can't be cured must be endured. This philosophy completely changes life. Chinese people consider that disease is guilt, they consider disease as something a person creates, it is a guilt, so an optimistic view of things, always seeing something good in everything bad that happens changes things a lot, because our negative side, always waiting for the worst, is a factory of diseases and this is what most contributes to a weak immune system.

**The importance of optimism in diseases**

In order to change the course of things, one must have an optimistic view. If someone has a family member who is ill and instead of believing that they will react, get better and be cured, the person believes there is no salvation, and if the patient becomes aware of this, it
will be the end of their lives as they will no longer fight for a cure and, when a patient no longer believes in a cure, they will no longer react against the disease. That is to say, a patient should never be led to believe that their case has no solution. We must always make the patient hold an optimistic view of their situation.

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