

Auto-Hemotherapy

Contribution to Health

Talking to Dr. Luiz Moura

Transcript of the testimonial video done in 2004

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Presentation of Transcript

Auto-hemotherapy according to Dr. Luiz Moura:

“It is a simple and low cost therapeutic resource which is nothing more than drawing blood from a vein and applying it into a muscle. This stimulates the Reticulo-endothelial System and increases fourfold the macrophages in the whole organism.”

This method has been used for over 100 years and nearly disappeared when antibiotics appeared in the 1940's.

Today due to the use of auto-hemotherapy on a large scale by practically all levels of the Brazilian society, there is a **popular movement** in favour of its formal acceptance.

Testimonies from users with regard to healthy benefits obtained at low cost are a strong encouragement.

Other arguments are the studies and scientific texts available, particularly those on the internet - where it is circulated that an estimated 20,000,000 (twenty million) people have already watched the Auto-Hemotherapy DVD ' Talking to Dr Luiz Moura'.

It is an opportunity for a beneficial transformation for all of us.

Every person, if they so wish, do whatever is within their reach.

There are many people who - without making their names public and without enjoying recognition - have been contributing to the good of all, in the most different ways and places. Only a reckoning on a cosmic scale can catch a glimpse of this mystery.

Carla Michalik Morad, Eduardo Santana, Joaquim Marcal de Souza, Karla Kinhirin and Lina Costa took the time to **transcribe what Dr. Luiz Moura said** in the DVD prepared by Ana Martinez and myself.

Mrs Vera Moura and Dr. Luiz Moura himself revised the text that we make available below.

Because its contents are clear and profound, we believe it will be beneficial to many.

At the end, after the transcription of the text, we have included a **list of sites** with information on auto-hemotherapy: scientific texts and newspaper articles, virtual DVDs and general information.

And further down - with the purpose of **expanding the network** – we devised a small table where, if you wish, you can include your name and e-mail, briefly describe what you can offer and what you are seeking with regard to auto-hemotherapy.

... and, if possible, please send all this information to whomever you may consider it necessary.

We have time and history in our favour.

With pleasure,

Rio de Janeiro, 4th of March 2008

Luiz Fernando Sarmiento

Transcript of the Auto-hemotherapy DVD

What is auto-hemotherapy?

It is a simple technique where by drawing blood from a vein and injecting it into a muscle stimulates an increase of macrophages that are, let us say, the "municipal cleaning company" of the organism.

The macrophages carry out a cleansing of everything. They eliminate bacterias, viruses and cancerous cells which are called neoplastic cells. They do a spring-cleaning, and even eliminate the fibrin, which is clotted blood. The increase in the production of macrophages by the bone marrow occurs because the blood in the muscle works as a foreign body to be rejected by the Reticulo-endothelial System (RES). While there is blood in the muscle, the Reticulo-endothelial System is being activated. The maximum activation only finishes at the end of five days.

The normal rate of macrophages in the blood is 5% (five percent) and with the auto-hemotherapy, we raise this rate to 22% (twenty-two percent) during 5 (five) days. From the 5th (fifth) to the 7th (seventh) day, it starts to drop, because the blood in the muscle is coming to an end. And when it finishes the rate returns to 5% (five percent). This is the reason why the technique dictates the auto-hemotherapy should be repeated every 7 (seven) days.

This is the reason why auto-hemotherapy works. It is a very low cost method, needing only a syringe. It can be done anywhere because it doesn't depend even on a refrigerator - simply because the blood is drawn in the moment it is applied into the patient, nothing being required to be done to the blood. There is no technique applied to this blood, only a person who knows how to puncture a vein and apply an injection into a muscle with hygiene, and a syringe to draw the blood and apply it into the muscle, nothing else. This results in a very powerful immune stimulant.

Therefore, it is really a method that could be disseminated and used in regions without any resources, where people can't afford very expensive immune stimulants such as, for instance, those made from bone marrow. Medicines are made - I cannot say the name of this medicine, because I am not here to advertise. But it is a very expensive medicine used to produce the same effect as auto-hemotherapy. It is a fabricated lysate of veal *thymus*, and I can say this, it is a lysate of veal *thymus*. It has a commercial 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-hemotherapy can produce the same effect at a very low cost. Therefore, it can be used by all levels of society without any problem, and this is its great advantage!

Beginnings and application of the auto-hemotherapy practice

I started to apply auto-hemotherapy when I was still a medical student in 1943, when I joined

the faculty of medicine. I joined the National Faculty of Medicine, which was located at the Praia Vermelha in Rio de Janeiro. My father was a teacher at this same faculty, and he was also the head of the Santa Casa infirmary and a general surgeon. Firstly, he taught me how to draw blood and apply it into the muscle. He used to send me to the house of all the patients he was going to operate on. I had to go the day before the hospitalisation to apply 10 (ten) ml of blood into the patient, and again 5 (five) days later. He didn't wait for the rate to drop to zero, and five days later I used to do the same application into the patient, who was still in the hospital, because at that time hospitalisation used to last on average a week.

What I don't know is how he had the courage to operate having 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 only knew how to hold the instruments and nothing else. The only thing I had learned was how to draw blood from a vein and apply it into the muscle, nothing else. And there was never any problem. With this he had one of the lowest rates of hospital infection I have ever seen until today.

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

My father used this technique, because he had read Jesse Teixeira's work. Jesse Teixeira had carried out 150 (hundred and fifty) operations of the most different types, compared to another 150 (hundred and fifty) identical operations. When he applied the blood he had 0% (zero percent) of post-operative infections. And in other operations he didn't apply the blood – as a control group, he didn't apply blood, for the same operations he had 20% (twenty percent) of infections. Because at that time the big problem was post-operative lung infections, because the anesthesia was done with ether, and ether irritates the lungs very much. It was very easy to get lung infection.

I learnt this from him. And for many years I limited myself to use auto-hemotherapy exclusively to avoid, to treat infections, juvenile acne (that is a staphylococcus infection) and also to avoid post-operative infections. At that time I was a surgeon, so I also used the same method. The purpose is basically fighting bacterias.

It was only from 1976 I started to use it in a much bigger way, thanks to a doctor, Dr Floramante Garofalo, a gynaecologist who was an assistant to the director of the Cardoso Fontes Hospital in Jacarepagua and he was the most knowledgeable person on hospital equipment in Brazil.

He was already retired, he was 71. He was called by Dr Amaury de Carvalho, who was the director, to equip the hospital, because it had previously been a sanatorium for tuberculosis that had been turned into a General Hospital. So it was required that all the clinics were equipped and he became the Director's assistant. One day, Prof. Garofalo or Dr. Garofalo - well, let us say professor because he deserved to be called professor – came to me complaining about a

pain, a numbness he felt in his leg when walking for 100 to 200 meters. 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, "Look, Dr. Garofalo, you have to be examined by an angiologist." We have an excellent one here, his name is Dr. Antonio Vieira de Melo – first cousin of Sergio Vieira de Melo who died in Iraq. So he will have to exam your leg. He first examined it with an apparatus, and said: "There is an obstruction in your right thigh, in the middle of your thigh." Dr Garofalo then said: "Well, how big is it?" "Only by doing an arteriography." We then went to have the X-ray, which showed there was an obstructed artery 4 (four) inches long.

The angiologist Antonio Vieira of Melo told him: "Look, there is only one solution. To make a prosthesis. A part of this artery, these 4 inches, must be removed and replaced by a prosthesis of a plastic material called Dralon." Dr. Garofalo said smiling: "You are not going to 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, it is auto-hemotherapy that is going to cure me." He then asked me to apply it to him.

Every 7 (seven) days he brought a syringe, everything already prepared, and I applied auto-hemotherapy to him. At the end of 4 (four) months, he told me: "I don't feel anything anymore, I am well". I said: "Dr. Antonio Vieira de Melo is the one who has to discharge you." We went to see Dr. Antonio Vieira de Melo who said: "I don't believe this, it's impossible! This is suggestion. You have convinced yourself so much about this auto-hemotherapy that you are thinking you are cured". Garofalo said: " Now I can walk for miles and I don't have problems anymore. Well, it maybe suggestion." So then I replied: "Well, there is no point in us discussing whether it is suggestion or not. Garofalo, will you do another arteriography?" He said: "Right away! Let's do it!"

We went to the X-ray. And there was no obstruction anymore. And so he continued to live until he was more than ninety, walking along this street, the General Roca street. He was more than 95 when he died, without ever being operated on. As a reward, he decided to give me a present of two works: one from Dr. 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 it gives the impression that one was made for the other, to combine, one to the other. Why? Because while the work of Dr. Jesse Teixeira was limited to the action of auto-hemotherapy in avoiding post-operative infections, the work of Professor Ricardo Veronesi, who is a teacher at the University of Santos , immunology had already advanced much further and it had been discovered that the Reticulo-endothelial System (RES) has many other functions besides fighting bacteria, much more than that.

The main functions of the Reticulo-endothelial System are (in *italic*, text taken from the work of Dr. Ricardo Veronesi). Dr Luiz Moura's comments and explanations appear in brackets):

1) *Clearance of foreign particles from the blood or tissues, including neoplasics (cancerous)*

cells, toxins and other toxic substances.

2) Clearance of steroids and their biotransformation. (Elimination of hormones, i. e., the steroids).

3) Removal of micro aggregates of fibrin and prevention of intravascular coagulation. (This is why I have auto-hemotherapy, to prevent infarctions and thromboses, cerebral thromboses, infarctions of the coronary arteries, because it prevents intravascular coagulation, it removes a possible clotting that might have happened, as it removed the fibrin that clotted the femoral artery of Dr Garofalo. This is why I use auto-hemotherapy).

4) Ingestion of antigen, its processing and delivery later to the B and T-lymphocytes. (The antigen that produces an allergic reaction, and has a great action on treatment of allergies.).

5) Biotransformation and excretion of cholesterol.

6) Iron metabolism and the formation of bilirubin.

7) Metabolism of proteins and the removal of denatured proteins. (Abnormal proteins.).

8) Detoxification and metabolism of drugs. (Imagine, the metabolism of proteins and removal of denatured proteins! Now today when it is known that the encephalitis that causes mad cow disease is caused by a prion protein that is denatured. So then, auto-hemotherapy could help in the treatment of 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 a favourable or unfavourable determinism of so many different morbid processes, such as infectious, neoplasics (cancer), degenerative and auto-immune ones..

This was when I started using auto-hemotherapy on auto-immune diseases.

Very well, now the sad thing is that what Professor Jesse Teixeira discovered in 1940 – that in 1976 was still being studied in first world countries in rats – didn't have the dissemination it should have had here.

(Then Dr. Luiz Moura reads out another passage from Dr. Ricardo Veronesi's work. And he makes comments in brackets):

Degenerative diseases

The Reticulo-endothelial System plays an important role in the homeostasis, i.e., it maintains the organism healthy, including lipids (body fat) homeostasis. 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 hypercholesterinaemia and perhaps, arteriosclerosis (degenerative process of the hardening of the arteries) depends on the perfect functioning of the Reticulo-endothelial System. The cholesterol rate in the blood can be reduced through the imuno-estimulation of the system according to experiments carried out on rats at the University of Tennessee. (This is to say, that while in 1940 in Brazil Professor Jesse Teixeira discovered in human beings how to boost the Reticulo-endothelial System, in 1976, 36 years later in Tennessee, United States, it was being studied in rats.). We are carrying out experiments on this purpose at the workplace of Professor Luiz V Decourt in Sao Paulo. .

That is to say, that auto-hemotherapy is a resource of very great value, because with the increased scope that came about with the advancement of immunology – earlier on it was only known that it fought infections - for instance I only used it to reduce the time to cure pneumonia: I prescribed an antibiotic and at the same time used auto-hemotherapy. With this, firstly I was able to reduce the amount of antibiotic. And the time for cure was speeded up because the antibiotic was doing part of the work, i.e. paralysing the reproduction of micro-organisms and the auto-hemotherapy was stimulating the macrophages to devour the microbes. Therefore they complemented each other's action and with this I had very good results, in diseases such as pneumonia, even serious double ones. I solved the problems by associating these two resources, one that paralyses reproduction, because many people think that an antibiotic is bactericidal. No, antibiotic doesn't kill bacteria, it only paralyses the reproduction of bacteria. What actually kills bacteria is our Immune System, completing the work done by the antibiotic.

Scleroderma

On 10/09/1976, I was the head of the medical clinic of the Cardoso Fontes Hospital, and they had a consultant dermatologist there, Dr Ryssia Alvarez Floriao. A lady who had been unable to walk for 8 months was hospitalised. Dr Ryssia carried out three biopsies and send them to Dr Gloria Moraes head of Pathological Anatomy, who 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.

A very good lesson was given and I learned a lot because I didn't know anything about scleroderma, I knew it from books, but I had never seen a scleroderma patient. When the lesson finished, Dr. Ryssia asked the nurse to take the patient away. I understood, now was the time to say what could be done for the patient. "You asked to take the patient away, so she couldn't hear." She said: "It is true. There is nothing I can do for this patient."

I asked Ryssia: "Will you pass this patient to me, so I can apply a technique which is not usual

and is called auto-hemotherapy?" She laughed and said: "You know that I arrived from the USA in May. There I was a resident doctor in a clinic for all the cases of scleroderma from all over the USA. So the clinic was nothing other than a repository of scleroderma patients. There was nothing more that could be done. Then what do you think you can do?"

I said: "Look, I am going home right now to get the two works of Dr. Jesse Teixeira and Dr. Ricardo Veronesi, and you will see that the idea makes sense. I arrived there and I read the main parts of the two works and I asked : "What now Ryssia?". "Ah, it has logic, it may work, it is worth trying".

So I applied the auto-hemotherapy, but as it was something new, to be done in a hospital, I used a huge dose. I took 20 (twenty) cc of blood and applied 5 (five) cc in each arm (deltoid) and 5 (five) in each buttock, because I had to produce a result, whether it was going to work or not, I had to reach a conclusion.

The improvement was amazing. The patient, whose skin had the appearance of an alligator's and was very hard, was heading towards a terrible death, that of asphyxia, because she would not be able to breathe anymore. The lungs cannot expand, because the body becomes as if were a wooden block. It seems unbelievable that 30 days later, on 10th October 1976, this patient could walk out of the hospital on foot.

Which are other indications for auto-hemotherapy?

Many, many indications.

First: all infectious diseases in general.

Second: all allergic diseases, it has a wonderful effect on bronchial asthma, on skin allergies, on diseases where not much is yet known about what they are, for instance, it works really well on psoriasis.

On autoimmune diseases, which are many today. Chron's disease, an autoimmune disease that destroys the intestine, in Crohn's disease the antibodies attack the end of the small intestine.

I already used it on lupus, I have a patient - I will mention her only by her initials, R.S. - this lady teaches children how to dance in the town of Caxias (Rio de Janeiro). She has lupus, I am not saying she had lupus, no, she has lupus. But she has no symptoms. It is as if she has been cured. She takes these children every year, sponsored by Italy, to dance in Italy, street children that she teaches to dance. I treated the lupus she had, she was not able to work or do anything.

Rheumatoid arthritis, it gives an excellent result in rheumatoid arthritis. I have a patient at UFRJ, an employee who practically has not been walking for 8 years and with the auto-hemotherapy she is now normal. She comes upstairs to my surgery and takes a bus. She doesn't have anymore problems.

In serious miastenias, I have a patient who is my age, 78. This patient was diagnosed with serious miastenias in 1980, at the Institute of Neurology, in Pasteur Avenue and it was thought that nothing could be done, because really nothing was done. She has been treated with auto-hemotherapy since 1980. She is the only survivor with serious miastenias. Amongst all the patients with serious miastenias at that time, none are alive, only her. She goes to my surgery with her daughter by bus This is 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.

For example, I know I am wrong to not take the vaccine for the elderly. But as I have auto-hemotherapy, I think I don't need it because my Immune System is activated. I don't condemn it, no, I think it is very good that everybody takes the flu vaccine. I don't need it, neither does my wife, because we have auto-hemotherapy and so keep our Immune System activated.

So it is truly a therapeutic resource with an enormous reach. In 1980 I attended a lady, an employee of Petrobras, whose medical service had diagnosed her with scleroderma. As they could not do anything, they decide to give her early retirement This was when she came to me. I told her about the case that had happened 4 years previously - the case of scleroderma of the patient at the Cardoso Fontes Hospital. She decided to have the treatment, and until today she has no more symptoms. She is only going to retire in 2005 when her retirement is due. She was going to retire in 1980, but now she will be retiring 25 years later.

So, this is really something that could change the life of a lot of people, in the same way it changed her life. Imagine if she had retired at that time, what kind of pension would she have today? What would be her situation? Well, probably she would not even be alive, if she had not had this treatment.

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

All earlier European studies were based on empiricism; nobody had proven how it works. It was a Brazilian, Professor Jesse Teixeira, who proved how it works in 1940. This treatment was supposed to have been disseminated and to have been used, because medicine is becoming more and more expensive. The diseases that auto-hemotherapy prevents happen a lot as

people get older. Elderly people are becoming patients that represent a very heavy burden as far as health expenses are concerned. This is the reason why health plans charge elderly people an absurd price, because they really cost much more to be kept alive and in relative health.

So really, this treatment is something of great value. I hope that people will be able to go on disseminating it. and that with time this will be achieved, this will make some colleagues start to use it, pressured by patients. The truth is that when they see the results and don't have an explanation, they go off at a tangent and claim it is spontaneous remission. It is a way out, in order not to admit that it was due to auto-hemotherapy.

Ovarian cysts and myoma

My daughter who lives in Spain was sterile; she had polycystic ovaries and was not able to become pregnant. Her obstetrician delivered her two children. He applied auto-hemotherapy to her and six months later she had no more cysts. The Immune System had devoured the cysts, had eliminated the cysts, and she became pregnant for the first time.

After she became pregnant for the second time, and for just over twenty years, she has used the IUD so as not to become pregnant anymore. Then the problem was reversed. Before she had been sterile, but later on she had to use IUD to avoid becoming pregnant again, because she was already happy with a boy and a girl. I have two grandchildren there, my grandson is 23 and my granddaughter 21, she is an agronomist and my grandson works with image and sound. Later on I used it on patients over here, in many cases of ovarian cysts and myoma as well. The myoma is devoured by the Immune System, so it is really something of enormous value and I hope that now it will have a wider dissemination.

Thrombocytopenic Purpura

The auto-hemotherapy in the case of thrombocytopenic purpura happened like this: this lady had a young son just over 1 year old and her gums started to bleed, even bleeding through her ear, an otorrhagia. Then when the doctor in Visconde de Maua realised that she could die there and then, he took her to Resende. And from there she was referred to a haematologist in the city of Volta Redonda, who found out she only had 10,000 (ten thousand) platelets, whilst the normal range is 200,000 to 400,000 (two hundred to four hundred thousand) platelets. Then the treatment began with a high dose of cortisone, 100 (one hundred) milligrams of Meticorten a day, a huge dose!

In fact, the haemorrhages disappeared, the platelets increased to 150,000 (one hundred and fifty thousand) and thus she spent 6 months on cortisone (Meticorten). At the end of 6 months the cortisone didn't work anymore. But the cortisone had made her swell up. I wouldn't say she put on weight, but she had swelled up by 40 kilos. Then the cortisone was replaced by two

medicines, medicines used in chemotherapy for cancer, Endoxan and Metroxathe. The platelets increased again and returned to normal, for two months, but at the end of two months they also ceased to work.

Then the doctor referred her to a surgeon that was going to remove her spleen, because the platelets are killed in the spleen. For some reason medicine doesn't yet know, they are not recognized as their own and the spleen kills these platelets when they are just a day old, when they should live 5 (five) days, so then the bone marrow has no capacity to replace these platelets. Then the solution found was the only solution, to do a splenectomy, a removal of the spleen, but she, as a young woman in her early 20's with a one and half year old son, wanted to know what hope there was for her, whether there was a certainty of a cure or not. The surgeon was very honest: "There will only be a cure if the liver replaces the function of the spleen, otherwise you won't have a life worth living and you will be short lived.

So then she decided not to do it and returned to Visconde de Maua. I told her to have auto-hemotherapy and at the end of six months she was cured. After that she had two more children, and with her spleen intact.

Gangrene from a spider's bite

Mrs Maura, a lady who hires out horses, was bitten by an armed spider, which is the worst spider of all, even though it is small. It is called armed because it strikes, it is brown and likes to live in the middle of old wood, and because it is cold over there in the winter, there is always wood around to be used in fireplaces. This spider bit Mrs Maura's leg and caused gangrene. As there is no antidote, the Butanta Institute recommends amputation. She went to the Santa Casa hospital to have an amputation, but at that moment, and now comes the curious case that I will tell you about, because jokes are interesting...

Mrs Maura is a really odd person, very funny, but it is worth it to tell you this... She did what was right, but she didn't understand fully the reason why. So she went there to have her leg amputated, and at that moment, she thought they were going to prepare a dressing. When they told her – she was already tied to the operation table - that it was to cut off her leg, she started 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 then she asked for a police officer to be called and he said: "If you sign a release form the doctors will release you, because they claim you will die from the gangrene." She decided to sign and returned to Maua thinking about dying.

There I applied auto-hemotherapy to her, but then I remembered another resource used by a French doctor, a surgeon during the 1914 to 1918 war. His name is Pierre Delbet and he saved many limbs from being amputated with a solution prepared with 20 (twenty) grams of magnesium chloride in 2 (two) litres of water to be isotonic. He washed the wounds with this chloride and he saved several people who had gangrene. I think two things worked together: the effect of this solution that worked as a very powerful disinfectant, and the auto-hemotherapy that worked as a powerful immune stimulant. In more or less two or three weeks Mrs Maura's

leg was healed.

But then comes the funny side, she booked an appointment with the doctor who was doing what the Butanta Institute told him to do. Then she booked an appointment at that doctor's private surgery. She waited until a lot of people were in the room and said to the doctor: "Look at the leg that you were going to chop off, it is this one here!" But, being a farmer, she also added: "If you had not cut off anyones leg for a long time and needed to practice, you only had to say, and I would have brought you a pig so you would have four legs to amputate." This is Mrs Maura, she speaks her mind, but it was not like that... The doctor thought he had to amputate, but she had understood that he had wanted to practice on her leg.

Has it any application for multiple sclerosis?

Yes, it has, but it is not the same thing because this is a degenerative disease – therefore it is not an auto-immune disease, it is not self-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 already born with this tendency. It is very often in families who suffer from multiple sclerosis that it will occur in more people. It is a disease that occurs much more often in women, much more frequent in women than in men. Like hemophilia, women don't suffer from it. In this case men do, but they don't pass it on; whereas women don't suffer from it, but they pass it on.

I used it in a case of multiple sclerosis and the patient improved, as in the case of lupus and rheumatoid arthritis. But she has been surviving for many years and in good health. She would not have been alive for such a long time. This means that at least it stops or at least delays the development, there is a benefit.

A girl with very serious asthma

This girl had what is called an asthmatic illness. It is an extremely serious asthma, she was often in hospital. In the early hours of the morning her mother had to take her daughter to have an inhalation with a bronchodilator. I attended to this child and prescribed auto-hemotherapy. The 10 year-old child accepted it very well and the treatment started. Normally I ask the patient to return two months later. As it was a very serious case, I asked her to return one month later, but she didn't turn up.

Nearly two months later, the mother arrives with her child, but she was very embarrassed. She was nearly hiding under the table because she was so embarrassed. And the mother said: "Look, I want to apologise, I didn't bring my daughter because the following happened: when I was looking for the prescription from the pediatrician who has been looking after her since she was nine months old - and she became a friend of the family, attends birthday's parties, she is our friend - your prescription came to hand. The doctor saw the prescription for auto-hemotherapy and said: "This doesn't exist! For God's sake, don't do this to your daughter, you

will kill her. She is just like a daughter to me, I like her. Which is true.”

But this happened three weeks after she had left my surgery and the girl had already got better, she spent that time without having to stay in hospital. Well, then the mother decided not to do it, because she trusted her doctor and it had been the first consultation she had taken her daughter and she had been associated with the other doctor for 9 and half years.

But just over a month later, she started to get worse again. Then the daughter herself demanded to be taken to the surgery: "I want to carry on the treatment, I felt well, I want to carry on." Her mother said: "Ah, but I have to speak to the doctor.”

On this day, my patients were left to vegetate in the waiting room because I spent two hours with the mother, to explain what auto-hemotherapy was all about, for her to leave believing 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 told her daughter: "Very well, I will do it, but you will kneel down here and swear that you won't tell the doctor." And she made her daughter kneel down and promise that she would not tell her!

And this secret was kept for a year. When I discharged her, one year later, cured, she had nothing anymore, and never again was she short of breath. But the mother came to me with a guilty conscience: "Now the doctor thinks that what cured her was her treatment that had taken nine years to have effect, but finally it did take effect, because she is convinced that I didn't carry on with that treatment.

This is a problem of conscience for me. She is an allergist and has so many patients with the same problem that could benefit from it, and my conscience is at me."

So I said to her: "Well that is your problem, not mine, you are the one who has to tell her!" " But I made my daughter swear she wouldn't tell, how am I going to deal with this now? Will she have to confess as well?" "No.

You are the one who made her swear, the problem is not hers, the problem is yours." I don't know the end of the story.. I don't know if she ended up telling her. Because I discharged her and the girl never had anything again. Her asthma finished.

Auto-hemotherapy Dosage

The initial techniques still empirical began in France with Professor Ravaut, in 1912. He used it in increasing doses of 1 (one) cc, 2 (two), 3 (three), 4 (four), 5 (five), up to 10 (ten). Later on Professor Jesse Teixeira no longer did it that way, he applied it straight away just one dose to avoid post-operative infections. So, he used 10 (ten) ml straight away and, 5 (five) days later another 10 (ten) ml, which was how I began applying it, according to my father's direction when he was operating on his patients.

I reached the conclusion that the dosage varies with the seriousness of the problem. Let us say, 5 (five) ml for a not very serious disease. I use 10 (ten) ml for lupus, serious miastenias and

rheumatoid arthritis. For instance, in the case of an allergy, an allergic reaction, asthma, I normally use 5 (five) ml. In rhinitis, 5 (five) ml, there is no need for bigger doses.

In a desperate case, such as the case of scleroderma, the first case I treated in 1976, I used 20 (twenty) ml to start with. Because I needed a drastic reaction for the patient to be able to leave the situation, the terminal phase, there was nothing more that could be done, so anything was worth trying.

Auto-hemotherapy can be done over a period of 10, 15 or 20 years. I for instance have been taking it for many years, over 20 years. There are no contraindications. We do it, I do it, I keep doing it because my aim is to avoid diseases that could become incorporated into my daily life, because as I grew older, I have passed beyond the age of vascular accidents.

So I had it to avoid a vascular accident, both cerebral and cardiac. Now I have it because it also protects me against cancer, I keep my Immune System activated. I always have macrophages ready to devour cells, because as you grow old - or even when you are young - once in a while cancerous cells appear. It is just like a factory, without a quality control – there are always products that don't come up correctly and there must be a quality control - and it is our Immune System that performs a quality control on our cells. So this is really necessary.

There is no limit to its use or time. It can be used over the entire lifetime. I tell my patients to have a series of 10 applications, then a rest for a month. Let's say it is to be used on a permanent basis. The intervals will depend on the purpose for which the auto-hemotherapy is being applied. If it is only for prevention, it can be done with bigger intervals: another series after a gap of 2 (two) or 3 (three) months.

If the purpose is a problem or a disease that has already occurred and must be kept under control, then it is done with smaller intervals, 10 (ten) applications with a 30 (thirty) day interval. On many patients I begin with 10 (ten) ml in the acute phase of the disease, afterwards I reduce it to 5 (five) ml per week.

And there are patients - now I will give you an example of the case of my neighbour in Visconde de Maua - she had a disease that was going to make her blind, she had toxoplasmosis and already had only 20% (twenty percent) of her eyesight. A friend of hers told me the story and I prescribed auto-hemotherapy for her. When she realised that she was getting better, she herself decided to increase from 10 (ten) ml to 20 (twenty) ml, she took 10 (ten) ml in each buttock, she recovered 80% of her eyesight. This happened over 10 years ago, much more than 10 years ago, and until today she still does it.

The gap between applications is 7 (seven) days. In rare cases I do it every 5 (five) days, when I want to keep the level of macrophages at its maximum, above 20% (twenty percent). When this is not necessary, when the infection is under control, then I do it every 7 (seven) days, because

it is possible to reactivate on the 7th (seventh) day and return again to 20% (twenty percent).

I have not explained yet that from the moment the auto-hemotherapy is applied it takes 8 hours for the macrophage rate to reach 22% (twenty-two percent). The technique Professor Teixeira used to prove the action of the auto-hemotherapy was very simple. Why was it simple? Because the difficult part is the discovery. He discovered that by applying a caustic substance - cantharis – to the thigh, a blister was formed. Then, what did he do? He decided to draw liquid from the blister and count the macrophages. He found that there were 5% (five percent) of macrophages.

Then he carried out the auto-hemotherapy and began hourly to take a few drops from the blister. Every hour the level of macrophages kept increasing and, at the end of 8 hours, it reached the 22% (twenty-two percent). And he found that for 5 (five) days it remained at 22% (twenty-two percent). Every day he took some drops, but it remained at 20 (twenty) to 22% (twenty-two percent). Between the 5th (fifth) and the 7th (seventh) day it started to drop. He did auto-hemotherapy on rabbits and found that the action of the auto-hemotherapy finished when the blood finished, because he sacrificed the rabbits and found the count returned to 5% (five percent). At the location where the blood had been applied, there was no blood any more.

But auto-hemotherapy is also used in veterinary, it is used in cows that have a virus disease called papillomatosis. They are like warts and appear on the snout of cows, and really harms cows a lot. By applying auto-hemotherapy - which is done with 20 (twenty) ml in cows – all the warts fall off in 2 (two) to 3 (three) days.

When applied in the muscles of the arm, I sometimes have patients who want me to prescribe 10 (ten) ml in one arm to avoid being pricked twice. And I am against it! I think the muscle of the arm, the deltoid, can only take 5 (five) ml. But in the buttock yes, 10 (ten) ml can be applied. The buttock muscle has a capacity to receive 10 (ten) ml. Mrs M, the one I told you about with toxoplasmosis, applied 10 ml in each buttock, because she wanted to have the maximum effect to save her eyesight. But it was her own decision, I didn't prescribe 20 (twenty) ml, the patient herself decided to take 20 (twenty) ml, to have a more efficient result.

A study of the real need would have to be carried out. This is something 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. For small children, it may be unnecessary to use a adult dosage of 5 (five) ml. A dosage of 2 (two) ml to 3 (three) ml could be applied . My hope is to raise the interest of people who would like to carry out laboratory research and who have the means to do it. Because I don't, I do everything based on clinical studies, based on reasoning, without laboratory research, because I don't have a research laboratory, it is all clinical research of practical application.

As I am sure that this technique is absolutely harmless, that it does not cause any harm to people, I've never seen any problem. A penicillin injection can result in anaphylactic shock, but people's own blood doesn't cause an anaphylactic shock in anyone, there is not even the

smallest risk in this treatment. I've never seen any abscess nor any contamination. Because it stimulates the Immune System - and should be applied under the best hygienic conditions -, even if it were badly applied an infection would be rare, because the Immune system is boosted, it is increased fourfold. I have seen patients who cannot see the sight of blood and, when they go to have an injection, they pass out. But this is an emotional problem and has nothing to do with auto-hemotherapy.

Alexander Fleming and the discovery of antibiotic

He was a gardener's son who later became a Lord, thanks to the blessed almost drowning of Winston Churchill, who was 8 when he fell into a well. Alexander Fleming was 10 years old, and the son of Winston Churchill's father's gardener when he saved Winston Churchill, by pulling him out of the well.

Lord Churchill called his father and said: "My son's life is priceless. Ask for anything and I will give it to you, if you want a house I will give you a house." "I don't need a house, I was born here, my father was born here, my grandmother was the first one to work here. I need to be able to fulfil my son's wish. I have four children, three will be labourers, they have no interests, but ever since Alexander was very small says he wants to be a doctor and researcher. I don't have the means at all to fulfil his wish." Lord Churchill said: "Then he will be, if he has the ability. There will be no problem due to lack of money." Alexander graduated in medicine and thanks to his humbleness he discovered penicillin.

Lord Churchill offered him any room in his mansion and Alexander said no. (Alexander himself gave this account at the *Servidor do Estado* Hospital, at Sacadura Cabral Street, in 1951.). "A place under the staircase is all I need. There is enough space there to set up a laboratory." Luckily it was a very humid place. And while he was carrying out experiments with culture plates, a fungus that loves humidity, the *penicilium notatum*, destroyed one of those culture plates. As he was a researcher, instead of throwing the spoiled culture away, he wondered why that halo of destruction had appeared.. He found the fungus and discovered that this fungus discharged a substance, penicillin. So he started to use this antibiotic in horses at the Jockey Club in London, and in cows with some infectious disease at neighbouring farms.

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 General Montgomery moral support because he was being defeated by Marshal Rommel, Hitler's desert fox. There he caught double pneumonia, there were no resources, 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, at high altitudes, and arrived in time to apply penicillin to Churchill. But then he said quite simply to the Royal Air Force commander: "But Churchill of all people will have to be the first human being to have a penicillin injection! What? Churchill, our Prime Minister?!" And the answer came: "It is all or nothing. His case is a

hopeless one.” And in this was he saved Winston Churchill for the second time, the first was in the well, that resulted in him studying medicine.

He says that in his researches he had found out that over a period of 10 (ten) years microbes acquire resistance to antibiotics, but he had also found out that they lose their memory. Every antibiotic should be used over a period of 10 (ten) years at most, and afterwards discontinued, if possible, for a few years, since many other antibiotics would appear during this interval. This is why such an enormous variety of antibiotics have appeared, all derived from fungi. However, greed resulted in a permanent use of antibiotics, not discontinuing them, and with this the microbes created resistance and – the doctors who work in hospitals say as a joke - that there are resident microbes, that now even love the antibiotics. That is the story told by Alexander Fleming, the discoverer of penicillin.

And the antibiotics led to a discontinuation of auto-hemotherapy, when the normal thing would be to add to it and not to replace it. Because each one works in a different way: the antibiotics works by preventing the reproduction of microbes and the Immune System - activated by auto-hemotherapy - completes the task with the macrophages phagocytizing the microbes. The function of the macrophages - the term ‘macro’ means big and ‘phagos’ means to eat - it means eating big particles. By using auto-hemotherapy together with antibiotics there would be much fewer cases of resistance to antibiotics, because there would not be any resistant strains left that later on would reproduce into other resistant strains of microbes.

Cancer prevention through auto-hemotherapy

Cancer is an anarchic reproduction of cells. If a person's organism doesn't recognise these cells as their own and starts to destroy them where they were created, the person can produce the so called pre-cancerous cells and it all stops there, 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 in the chest called *thymus* that commands the Immune System starts to atrophy. It is then that the frequency of cancer cases starts to increase.

The Immune System, being activated, acts as a prevention against possible cancer. Because cancer doesn't start straightaway with an enormous amount of anarchic cells, it starts with a small number. If the Immune System is vigilant, it can put an end to it straight away, but this also depends on the person's age. Because after the age of 55, the decline of the thymus begins, and it starts atrophying.

Women were victims of the contraceptive pill, which demands a lot from the Immune System. If women took the pill and had auto-hemotherapy there would be no problem, because they would keep the Immune System activated. The Immune System could control this, thus preventing the pill having the harmful effects every hormone has. Every artificial hormone has harmful effects, this is why today in menopause the natural hormone of fitoherapics - isoflavones – is more used, and the chemical replacement hormone is avoided. After the age of 50, when the decline of the thymus starts, it is time to start auto-hemotherapy treatment.

A case of Acne

A few years ago I often used to stop to have a snack whenever I travelled to Visconde de Maua, at a petrol station where there was also a snack bar. I stopped there and saw a girl with such acne like I had never seen before. I decided to give her a prescription, although nobody had asked me, because I knew I could cure her with auto-hemotherapy. I spoke to the young woman who was serving us and said: "Look, tell her that I can cure her problem and I will do it free of charge."

I could hardly have imagined that the girl was the daughter of the owner of the Ola, Embaixador and Presidente Service Stations. It was not for lack of money, no, because the mother said: "Every two months we take her to Rio de Janeiro, and we have been taking her for two years, but there has been no improvement whatsoever." "You didn't ask for anything, but I will give your daughter a prescription." And I gave her a prescription for auto-hemotherapy. The result was that it came to be the most expensive prescription I have ever written, because for a year I was not allowed to pay for anything at the service station. The owner of the service station had left orders to take absolutely no money from me. Till one year later when I decided not to go to that service station anymore, because I was already embarrassed at not being allowed to pay. She was cured from this terrible acne, she got completely cleared of it, it was a miraculous thing, the worst case of acne I have ever seen in my life.

Magnesium Chloride

Magnesium is vitally important and needs to be taken on a daily basis; everybody should take it, because food today is low in magnesium. The reason is very simple, being that plants greatly need magnesium in order to breathe. Their chlorophyllic mechanism, i.e. fixation of carbonic gas and elimination of oxygen, is the opposite of what we do. In plants, chlorophyll does this through magnesium.

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

The two most important functions of magnesium are the regulation of the metabolism of calcium in the organism, and the fixation of calcium where it should be and the elimination of calcium where it should not be. Spinal calcifications, joint calcifications, artery calcifications, happen due to this lack of magnesium. Kidney calcifications, calcium oxalate stones, happen due to a lack of magnesium. It is sufficient to give patients magnesium because it dissolves their kidney stones, provided they are not urate and phosphate type stones.

Professor Pierre Delbet, a medical doctor, applied magnesium to wash wounds in the 1914 to 1918 war, without knowing why. Later he discovered magnesium also activates the Immune System. The proof is that, in France, the cancer map and the magnesium map show that the southern half of France has a lot of magnesium and the death rate from cancer was less than 3.5% (three and half percent). And in the north of France, where the land is poor in magnesium, more than 8,5% (eight and half percent) of people died from cancer.

In Italy it is much worse, the experience is very interesting, due to a decree by one of the Caesares in force until today. Many people die from cancer without knowing why. In Professor 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, from an emperor, one of the Roman Caesares, it was forbidden to carry salt from one region to another in order to prevent salt becoming more expensive, this was the reason. Because of this - and as the north of Italy is very rich in rock salt mines, earth salt that only contains sodium chloride and zero magnesium - the incidence of cancer ranges from 7% (seven percent) to 10% (ten percent).

On the other hand, in central Italy, where the capital Rome is located, people use sea salt. But, as they can afford more, they use a salt that has a tiny little bit of magnesium, 0.08% (zero point zero eight per cent) of magnesium. The incidence of cancer drops to 4.5% (four and half percent). And in the south of Italy, because of the poverty, people use the salt that is given to cattle, which is a salt very rich in magnesium, but turns into water, it becomes brine. So they use wooden vats, where they put the salt to season the food. This is their tradition. And for this reason in the south of Italy the incidence of cancer doesn't even reach 2% (two percent), because of the amount of magnesium it contains.

Do you know where the magnesium chloride we use here in Rio de Janeiro comes from? It comes from the salt produced in Cabo Frio, where the magnesium chloride - which is highly hygroscopic - is removed so the salt can be traded and have a higher value.

Dosage of magnesium to be used

It is the simplest thing to prepare: 20g (twenty grams) or two level tablespoons in 1 (one) litre of water. If the person doesn't have any problems, as a food supplement, drink 1 (one) small cup per day, the size of an espresso cup. But if the person already has a spine with osteophytes (osteophytose), arthrosis, take 2 (two) small cups a day, the size of an espresso cup of magnesium chloride solution. For kidney stones, I prescribe 3 (three) a day, when they are calcium oxalate stones.

This strong solution of 20g (twenty grams) in 1 (one) litre of water is not used to wash wounds. An isotonic solution of 20g (twenty grams) in 2 (two) litres of water is used. This solution works better than disinfectants. Because, besides working as a disinfectant, it stimulates the Immune System in the area of the wound.

And in cases of warts?

Warts happen due to a lack of magnesium. And due to this deficiency viruses are able to multiply and warts are created.

What if the chloride becomes humid inside the bottle?

There is no problem, it is not important at all, the salt has no expiry date, magnesium has no expiry date, it is eternal.

Kidney Stones

The lack of magnesium is the cause of calcium oxalate kidney stones. The calcium precipitates and fixates to the oxalic acid contained in potatoes, tomatoes, spinach, etc., producing calcium oxalate kidney stones.

Are there other types of kidney stones?

There is the urate type produced by meats - mainly visceras - and the phosphate type that comes from vegetables that contain phosphates.

Does Magnesium Chloride stop cancer metastases?

No, I wouldn't say it stops it; but I would say, at least it slows it down, as Professor Pierre Delbet proved in his book "The Preventive Policy of Cancer." The individual – by using enough magnesium through his or her whole life - has incomparably less chance of having cancer than those who have a magnesium deficiency.

Is there any contraindication for the use of Magnesium Chloride?

The only case is when a person has kidney failure. Because any excess of magnesium is

eliminated through the urine. Now if the person is not passing urine, then it can go from a hypomagnesaemia – which is common - to a hypermagnesaemia, but only if the person is not passing urine normally.

Correct dosage of Magnesium

For instance, a wrong dosage is the magnesium chloride sold in pharmacies with a dose of 33g (thirty-three grams), if it is dissolved in 1 (one) litre of water it can be a laxative. In this case it really is excessively concentrated, it should be 20g (twenty grams) to 1 (one) litre. Or these 33g (thirty-three grams) should be dissolved in 1 ½ (one and half) litres of water.

Will you give us a demonstration of auto-hemotherapy?

Yes, I will. No problem, I have the materials, one thing that we are never short of here at home are the materials to do auto-hemotherapy, here at home it is an priority item... (so – on the DVD – he applies it to his wife)... It is a simple thing and can result in so much less suffering...

Ichthyosis

The patient didn't have a quick cure. It took more or less a year for the skin to change completely and not present anymore the lesions like fish scales. His skin was very dry, was terribly itchy, and he could not control himself and this was damaging his contact with patients. With this treatment, auto-hemotherapy, he was gradually getting better - it is true that I also gave him vitamin E, medicines that work in the skin, vitamin A - but what really worked was the auto-hemotherapy. I also prescribed minerals because his skin had no vitality at all, it was all wrinkled and with raised spots as if they were fish scales. This was the only case of ichthyosis I had.

AIDS

There are many aids patients having auto-hemotherapy 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-hemotherapy. There is an improvement, the patient lives well. I have patients who have been living with AIDS for many years and lead a normal life. But they also take those cocktails together with auto-hemotherapy. Since auto-hemotherapy only acts on the immunological side and it is a disease that strikes the Immune System (acquired immunodeficiency), maybe auto-hemotherapy is contributing to this good quality prolonged life span.

A case of an AIDS cure

The case was a dentist who became contaminated with the HIV virus at his surgery. He was not a risk patient. He was a risk patient in the sense that he used not to protect himself from the wounds of people with AIDS that he treated at his surgery. He did a test and was found to be HIV positive. I asked him to repeat the test, because I knew that he was not promiscuous, he lived with the same woman, he had been my patient since he was 4 (four) years old, he was a master at flying kites, I have known him since he was very small. I cured his asthma when he was 5 (five). I decided to prescribe auto-hemotherapy to see what would happen. After the second test which gave positive, 2 (two) semesters had gone by. He did the first test in 2 (two) laboratories. And 6 (six) months later he had another positive test result. At the 3rd (third) test, 6 (six) 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 to him: "Don't start celebrating just yet. Repeat the test in another laboratory." He then repeated it and it was negative. About 6 (six) years have gone by. And it is still negative until today.

I don't know if this happened because he was in a very good health and the auto-hemotherapy was the 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. Most of the others are sick people that I treat when they already have HIV for 3 (three) years, 5 (five) years and 8 (eight) years... It is different. That was right in the beginning - I began the treatment with only 2 (two) months of HIV .

A patient with Hepatitis C

He did very well, I mean, he managed to control the disease. The disease didn't progress over the years and he has been getting on very well with the auto-hemotherapy. He didn't come to use these modern treatments, which is the Pegylated Interferon. He is not negative, however he has proof of a very good hepatic activity, always normal. But the virus, the virus markers, remain. But this will remain for the rest of his life, because in all cases of hepatitis the markers always remain. The person can be cured from the disease, but the marks remain.

Combined use of auto-hemotherapy with Ascaridil

Ascaridil is a medicine that was and is used for worms. The generic raw material is called Levamisole Hydrochloride. The immune-modulator action of Ascaridil was discovered by chance by American doctors, who were carrying out a campaign against verminosis in California. They found that patients with leukaemia had got better. They decided to study Levamisole Hydrochloride and discovered that it had enormous potential as an immunological boost and that it worked with a series of diseases. It worked very well with herpes, both herpes simplex and herpes zoster, and even with Hansen's disease it was used with great results, rheumatoid arthritis and in cancer as well, stimulating the Immune System. They used it as a coadjuvant to chemotherapy and radiotherapy.

Mysteriously, the product for this purpose called Stimamizol was removed from the market. As I have a copy of the Stimamizol directions, I put it together with the Ascaridil directions. I give these copies to my patients, so they can understand the reason for prescribing medicine against worms to cure rheumatoid arthritis, herpes, etc.

The dosage of Ascaridil

Levamisole Hydrochloride is an immune modulator, it is not just an immune stimulant. Adding Levamisole Hydrochloride to auto-hemotherapy - one modulating and the other stimulating - works very well in autoimmune diseases. Taking 2 (two) tablets a week for 8 (eight) weeks - later on stopping for a month to rest and release the body from the product - and repeating what was done, will help a lot with the auto-immune disease called rheumatoid arthritis. Furthermore it works with Hansen's disease and with brucellosis. It also produces excellent results both with herpes simplex and herpes zoster, both types, genital and labial. The 2 (two) tablets of Ascaridil, in a dose of 150mg (hundred and fifty milligrams), must be taken on (2) two consecutive days, 1 (one) a day, for 8 (eight) weeks.

Can pregnant or breastfeeding women use auto-hemotherapy?

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

Can people on chemotherapy use auto-hemotherapy?

People on chemotherapy should have auto-hemotherapy. In radiotherapy cases there is no need to have auto-hemotherapy, because it won't add anything nor will bring any benefit. As chemotherapy negatively affects the Immune System - because it works as an immune suppressant not only on neoplastic or cancerous cells, but also on good defence cells - then auto-hemotherapy given simultaneously prevents 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-hemotherapy will be a counterbalance, it will reduce its harmful effects.

Is auto-hemotherapy 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, actually going down as far as her ankle, it was already possible to see her

tendons. It was a case that had got to the point of amputation. The amputation of her foot was booked for 2 (two) or 3 (three) days later. This lady had been a diabetic for many years. I was called to see her and I felt that we should try auto-hemotherapy to prevent the amputation. She had the treatment for a few weeks, the ulcer closed and she didn't have to have an amputation. She died about 20 (twenty) years later, with her foot on. She died as a result of diabetes - of an acute vascular accident, myocardial infarction, because diabetes causes these vascular accidents. But she died with her foot that was going to be amputated some 20 (twenty) years ago. This is to say, she gained 20 (twenty) years of a better quality life, because she was still able to walk perfectly without using any aids.

In blindness it happens that diabetes produces an arteritis, an inflammation in the core of the arteries, and this is the reason why it leads to blindness, to a lack of oxygenation in the tissues due to a blockage. Auto-hemotherapy 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 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 adverse effects take 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 the bigger ones later. It is a disease that needs to be fought with many medicines that act against free radicals. Controlling the glucose is not enough, it is necessary to avoid the cells being attacked by free radicals, this is achieved with vitamins A, E and C, selenium and several substances that protect the cells.

Scope of auto-hemotherapy

The scope of the action of auto-hemotherapy is really very wide. As it acts on the Immune System in general, increasing by four times an area of the Immune System called the Reticulo-endothelial System, and increases the macrophages from 5% (five percent) to 22% (twenty-two percent) - and they are responsible for this whole cleansing.

By increasing the number of macrophages, auto-hemotherapy makes the whole system of action of the attackers that occurs in the body – be it a virus, bacteria, abnormal pre-cancerous cells – all this can be inhibited by the activation of the Immune System. Auto-hemotherapy really has a wide range of applications and I also have found that it works in an area of the nervous system, which is the autonomic nervous system. It organises the vago-sympathetic system and this makes people feel more tranquil.

Tense people tend to be sympathicotonic. This causes vascular contraction and favours hypertension. Auto-hemotherapy keeps blood pressure under control and maintains the right balance between the vagal system – which expands the blood vessels - and the sympathetic system, which contracts them. It is another aid, together with other resources. It is an aid in fighting hypertension, which is a disease that strikes billions of people in the world, due to the stress of modern life, of fear and insecurity. Today hypertension is becoming a very serious public health problem. And auto-hemotherapy, at least by balancing the neurovegetative system, is already helping to make the consequences of hypertension less serious.

Is auto-hemotherapy always beneficial?

Yes, always! Because the least that can be said is that there is a curve. The Immune System grows from birth; a child is born with a nearly non-functional Immune System. The child receives the last load from the placenta when it contracts and throws a huge amount of antibodies into the child. For 6 (six) months the child lives protected by these antibodies received from its mother. It would be the case that women, during pregnancy, should have auto-hemotherapy for the child to be born with a potentialized Immune System. At the end of this 6 (six)-month period is when children's diseases start, precisely because the child's immune reserves finish. The child then starts to build its own Immune System, fighting against any attackers around. In this period the vaccination program starts. The vaccine produces the same effect as the attacks produced by diseases: it is the 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 okay it doesn't cause disease, it produces immunity against the disease.

Then the child starts to grow, its immune system reaches its peak between the ages of 14 (fourteen) and 16 (sixteen) years when it becomes fully developed. It then stays at this level until around the age of 50 (fifty) to 55 (fifty-five) years. Then the Immune System starts to decline, when the *thymus* - the gland that controls the whole Immune System - starts to atrophy. From this stage on, auto-hemotherapy has a huge value because it will slow down this curve of decline. Then it will be indispensable.

There are people who have a less deficient Immune System, others more deficient, depending on their diet. There are people who feed themselves very poorly, with a lack of nutrients that stimulate the Immune System, such as vitamins, mineral salts or proteins, because antibodies are made up of protein. 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 the attacks from the environment - and others are always ill. But auto-hemotherapy would help in this case, to counterbalance this deficiency of diet.

Are intervals of less than seven-days harmful?

Not at all, because it is only from the 5th (fifth) to the 7th (seventh) day that all the blood has been practically reabsorbed. And the immune stimulation - that happens because the blood represents a foreign body in the organism and causes the self-activation of the Immune System to reject this blood - is declining. If it is done with smaller intervals, there is no such decline - it stays always in the range of 20% (twenty percent) to 22% (twenty-two percent) of macrophages, when the normal rate is 5% (five percent) -, there will be no harm. There is no need, as it will only cause unnecessary discomfort to the patient. Only when I need to keep the patient at top level do I do it every 5 (five) days.

Can auto-hemotherapy be done without any breaks?

Yes, absolutely. I only recommend a break exclusively to rest the muscles and veins.

Do dosage variations of 5 (five) ml, 10 (ten) ml and 20 (twenty) ml also make the rate of monocytes increase?

No. The only difference is that, in autoimmune diseases, I sometimes use up to 20 (twenty) ml in the most serious cases. And dividing it in 4 (four) places, applying 5 (five) ml in each arm and 5 (five) ml in each buttock. With this I cause the Immune System to divert from repeatedly attacking its own body instead of fulfilling its function - which is to defend us from attackers -, it is acting against its own body as if it were an enemy.

For rheumatoid arthritis, it affects the joints and even creates deformations. I believe it is thinking about complying with a unconscious request to divert mental suffering to a physical area. And with this - while the person is worried about their bones, their deformed fingers – the person forgets the problems which motivated the diversion. Suffering physically is terrible, only in order to alleviate mental stress, but this happens, and I have evidence of it.

From which age can children have auto-hemotherapy?

This depends a lot on the child, because not long ago I had a 5 year old seriously asthmatic child who accepted auto-hemotherapy perfectly well. The child had such a good emotional control that when I explained to the child that would be a benefit, the child was convinced. The one who suffers most when the child is having auto-hemotherapy is the mother.

And auto-hemotherapy in geriatrics?

For me, geriatrics is the area where auto-hemotherapy should be more used. Precisely because it corresponds to the time when the Immune System is in decline.

Does auto-hemotherapy work on bedsores cicatrization?

Yes, by helping the cicatrization of bedsores. Of course, weight cannot be put on top of the sore. Protectors should be used, because bedsores are produced 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-hemotherapy will help reconstruct them and the cicatrization will be quicker.

And on HPV?

Yes, this virus is often found in the cervix. I have no experience because I am not a gynaecologist, but I think it is worth trying, because as the auto-hemotherapy acts against viruses in general - and HPV is a virus -, I think it should also be used. It is the gynaecologists who would have to try it out and then introduce it as a common practice. If it works well - as I believe it should work, since it works on other viruses – this case should not be any different.

And on vitiligo?

Patients who are carriers of vitiligo get worse when they are tense. The neurovegetative system is balanced by auto-hemotherapy, and this prevents relapses, which are bad phases, where there is a large increase in the vitiligo patches. But it won't cure vitiligo, it won't have any curative effect.

And on recurrent tonsillitises?

It is extremely appropriate, very appropriate. There is a type of tonsillitis where I used auto-hemotherapy with excellent results. This is the tonsillitis caused by beta haemolytic streptococcus. This is a tonsillitis that results in rheumatic fever, causing damage to the heart, with atrophy to the mitral valve, which can only be corrected later by surgery.

This tonsillitis is extremely resistant to antibiotics. And the auto-hemotherapy together with the antibiotic of course, kills the bacteria. I have already cured many cases of rheumatic fever where the origin of the infection was in the throat. It is in the tonsils where the microbes live and protect themselves.

John, for instance, who now is an adult, had a very serious rheumatic fever when he was a child. And it was auto-hemotherapy that cured him. He was left without any lesions.

Another case, in the city of Petropolis, was considered a hopeless case, I had never seen antistreptolysins - ASO is its abbreviation - reaching a count just over a thousand, when the normal is up to 200 (two hundred). It was auto-hemotherapy that managed to save this girl.

How can auto-hemotherapy help a patient with cancer?

As a specific chemotherapy for cancerous cells has not yet been discovered, the chemotherapy also acts on normal cells, so it lowers the immunological level and makes the patient vulnerable to another types of cancer - or to the repetition of the same cancer in another organ, the metastasis. By keeping the Immune System activated, chemotherapy will have its positive side of destroying cancerous cells. And it will have minimised the negative side that destroys the good cells that protect against the recurrence of the same cancer.

In the case of radiotherapy - the radiotherapy also greatly harms the Immune System – auto-hemotherapy could repair the damage by reactivating the Immune System, thus avoiding another cancer.

Then it is valid in both cases. Now, it is not to say that it will cure cancer, It will help the means that cure cancer, both radiotherapy and chemotherapy. Or even in the case of an operation, where some cells remained outside the removed tumour and could reach other organs through the lymphatic system. The auto-hemotherapy can prevent the development of those cells, avoiding their multiplication. It is also worthwhile.

Are there any types of cancer incompatible with auto-hemotherapy?

No, none. It should be used in all of them. It can be used in any case. There is no case where auto-hemotherapy is not useful. It may not be enough, but in any case at least, it will prevent the tumour becoming more invasive. It will be helpful.

Epidemic outbreaks and auto-hemotherapy?

It would work in this case and it would be of a great value, and an enormous saving. Because people who have already fallen ill with one of these diseases, would have a faster recovery. It would mean less time of illness, because what really cures is the Immune System, it is not the antibiotic that cures. The antibiotic is just bacteriostatic, it only prevents the reproduction of microbes, but what completes the cure of the infection is our own Immune System. So, in this case this would be the action of the auto-hemotherapy.

If people still not infected were under the action of auto-hemotherapy and with their Immune System activated, they wouldn't catch the disease. This would prevent the disease from spreading to a greater number of people. An important detail: when a disease passes from one person to another, the microbe or virus becomes more and more active and more virulent. It is like doing an exercise, that makes it become more violent.

So, it would be of great value if auto-hemotherapy were to become normal practice for everyone. The Ministry of Health took an excellent measure by creating a vaccination programme against flu. As there are no resources available to offer the vaccination to the whole population, they chose a risk group, being the elderly. My wife and I are elderly, we didn't take the flu vaccine because we are protected by auto-hemotherapy. And also because these vaccines are limited to two or three types of virus, usually three, and there are hundreds of flu viruses, I prefer the auto-hemotherapy, because at least I have resistance to all viruses and this is the main reason.

And on cerebral vascular accident (CVA)?

It helps a great deal, provided it is done as soon as possible after the Cerebral Vascular Accident. Because if it is the case of a hemorrhagic accident, the auto-hemotherapy increases the macrophages that devour the fibrin, which is clogging the blood vessels, so re-establishing the circulation much faster.

Recently I had a patient who had a vascular accident, in Visconde de Maua, and I straight away prescribed auto-hemotherapy. The recovery was much faster than it would have been with physiotherapy alone, practically allowing nature to do the phagocytosis of that fibrin. Unclogging with 5% (five percent) of macrophages is much slower than with 22% (twenty-two percent). This is the reason why in these cases I prescribe it every 5 (five) days to prevent a drop.

An on arterial hypertension?

Hypertension is not a clogging; it is an arterial spasm. It is worth having auto-hemotherapy, 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 and it is the vast majority.

There is a small number where the hypertension is renal. The substance that produces hypertension is called renin. There are other people with hypertension due to bad blood circulation, because of an excess of VLDL cholesterol, LDL cholesterol and triglycerides. So, there is hypertension because the blood circulates at a slower speed, but in any case auto-hemotherapy works very well, because it will act even in the case of the essential hypertension, and this accounts for more than 90% of cases. It acts on the neurovegetative 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, auto-hemotherapy helps in the treatment of hypertension.

And on gout?

The same, because it removes the uric acid. In gout uric acid exceeds 7 (seven) mg per litre, reaching 8 (eight) mg, 10 (ten) mg per litre. Uric acid crystallises within the tissues as needle like crystals and this is the reason why it is tremendously painful. Auto-hemotherapy will cause these crystals to be seen by the Immune System as a foreign body. And it will eliminate them.

Sports and auto-hemotherapy?

When Beckenbauer hung up his boots, he said he attributed his physical performance to auto-hemotherapy. Before each match he had auto-hemotherapy with 10 (ten) ml and he attributed his health to it as well as his physical resistance in the matches. This was his statement when he stopped being a footballer and became the coach for the German national team.

On Polymyositis and Dermatomyositis?

Polymyositis, as well as dermatomyositis and rheumatoid arthritis are autoimmune diseases. In every disease with an autoimmune origin – i.e., its origin is a corruption of the Immune System that attacks its own body as if it were a foreign body - the use of auto-hemotherapy is valid. Because, firstly, if the application of blood is diffused in several places (better still) it diverts the immunological attack towards the blood, thus reducing the pressure of the attack on the tissues that are being attacked.

I had an experience with a dermatomyositis patient, but I have had no polymyositis cases yet, however it works in the same way. This reason is because it will first cause a diversion. The second reason why it works in autoimmune diseases is because the blood reaches practically each cubic millimetre of our body, except the hair on the head and body. Each square centimetre of the skin and each square centimetre of any organ always contain blood. The bones have less, but there is blood in the bone marrow.

As the blood is everywhere, and as these autoimmune diseases are an inversion of the immune function, when the Immune System is diverted, firstly it reduces the pressure of the aggression.

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

But I cannot prove this. That is just an intelligence exercise to try to explain the reason for the cure of autoimmune diseases, permanent cures. The improvement can be very well explained: the aggression is diverted towards the blood applied into the muscle and naturally it reduces the aggression in those places where the Immune System is attacking. That is one part, 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 had excellent results. Allergies are an immune intolerance against substances that attack and end up affecting its own organism. Auto-hemotherapy is an excellent therapeutic resource for such cases.

Two cases of dysrhythmia and convulsions

In these cases, two children had a proven dysrhythmia. They were dysrhythmic, their electroencephalogram was abnormal and they had convulsions called epileptic convulsions. The phenobarbital doses being given were so high that the children were no longer having convulsions, but they were practically unable to study or ride a bicycle. They were in no condition to do anything else. I used auto-hemotherapy on these two children to eliminate the excess of barbiturates that were impregnating their brains.

It happens that - following the desimpregnation - the children started to have a normal active life, they could play as much as they wanted and ride a bicycle. They stopped having convulsive crisis, and one of them certainly had no convulsions for over 20 (twenty) years. And the other one, from here in Maua, for about 3 (three) years, more or less.

If later I had ordered an electroencephalogram for these children and compared it to the previous one - before they started using barbiturates – this comparison could prove if it really works by correcting the brain waves, restoring them to a level of normality. This is something that in future could be very easily proven. I only thought, as a clinical doctor, about solving the problem that existed. Besides, the other result was unexpected; it was not even the objective of the auto-hemotherapy.

Medicine

Medicine is the art of curing. 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. For me what proves something is the effect of the treatment. If it brings benefits to the patient it is a scientific treatment, even if we don't know what is the mechanism of action of this treatment. I use resources – whatever they are - to benefit patients, so they are relieved of their suffering and, if possible, cured.

As I have an investigative mind, I am not satisfied with this and try to find a solution, something

that will satisfy me, that I can understand how the treatment worked. For instance, in the case of allergies: having auto-hemotherapy the patient has a great improvement. Actually, allergy is not even a disease, it is an exacerbated reaction of the Immune System, due to the great number of attacks that human beings suffer day to day. The polluted air they breathe, the food that contains preservatives, but that cause damage, colouring agents used in food. All these are aggressions and therefore the organism of the most demanding people fight too much against it. There is already a well founded suspicion that very allergic people are less likely to have cancer, because they have a more diligent Immune System, more activated. This is already a suspicion. It has not been proved.

I tried to find a solution to explain what allergy is and what the cure through auto-hemotherapy represents. 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, resulting in consequences to the patient. If someone has an allergy 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 produces a secretion to try eliminating these allergens through a cough. In reality it is a means of defence, it is not even a disease, it is a defence against what is causing harm, what should not exist in the air the person is breathing should not also exist in the food the person is eating.

What happens when auto-hemotherapy is used? These allergens end up going into the blood, they end up fixating themselves, passing to the lungs, passing to the nose and to the blood. Because all of these organs are full of blood. When the Immune System goes to fight this allergen, it will identify the allergen, capture it and will try to eliminate it as a foreign body. 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, inducing what is called immune tolerance. It ends up accepting as its own what was considered an enemy before.

The greatest allergist known to the world lived 2,000 years before Christ. He was called Mithridates, a Greek king. When he was 10 years old, he discovered that taking tiny and increased doses of 2 poisons used to kill the kings, cicuta and arsenic which were put into the wine - he would become immune. I don't know how he discovered this. I know that his pleasure was always to have a wine taster that had to drink the wine. When the wine taster dropped dead, instantly killed by a sip, he would take the rest of the wine in the glass and he was considered by the people as having divine powers. He discovered that the poison itself created the defence against the poison. He took it in increasing doses and this is the principle of the vaccine.

When the antiophidic serum 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 if it were the first time dose. Blood is taken from this horse, the serum (the white part) is separated and the red part (from the globules) is discarded. The white part is the antiophidic serum. But the one who discovered all this was King Mithridates, 2000 years BC.

To doctors and future doctors

Always check, never accept anything like 'this is a thing of the past', this is "something backward", 'it is out of fashion'. If possible, always add the old to the new. And always check that no harm will come to anyone going to use the treatment.

For example: the cupping-glass, which was in disuse, is now being used again in Japan. It was a great technique used in the 19th century. Pneumonia used to be cured with cupping-glasses. It was not even known why, but they were applied to the lungs and the patients were saved. There were no antibiotics at that time. The pneumococcus was the same as exists today, and it cured the pneumonia. Only later on, Reich, with bioenergetics, explained the reason for the cure. The cupping-glass pulled the blood loaded with energy, the energy potential was raised above that of the microbes. And the energy that was being used by the microbes to reproduce was removed from them. With this the cupping-glass cured the pneumonia. But before Reich published his books in the 1940's, as it worked the doctors were using the cupping-glass without knowing this, without knowing why.

The great lesson is to consider 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 physician should want to know the reason why things happen, to satisfy themselves. This is for personal satisfaction. But this is not the physician's commitment. It is the relieving of suffering, this is the only commitment of the physician.

To patients

First: a positive mind. Because a negative mind worsens the suffering. The Immune System declines when a person is negative in relation to their suffering. If a person believes in the cure, the person has every chance of winning over the disease. When a person thinks that the disease has no cure, the person's chances of cure are already very reduced.

Therefore, thinking in a positive way is very important. The mind has enormous power of both cure and destruction. The increasing cases of autoimmune diseases stem from a negative mind. In that case of scleroderma I described at the Cardoso Fontes Hospital, her unconscious mind generated the disease. She had a mentally disabled son, her husband had abandoned her, and left her unable to work. Her mind created the disease so that the whole family would help her, because she was completely destitute, without anything, with a mentally handicapped son and without being able to work and having to care for him. The disease was the solution to her problem. And the auto-hemotherapy was the solution for the disease.

Relationship between emotion, health and disease

Pleasant and good emotions generate health. Bad emotions: fears, fear of violence, hatred, anger and sadness generate disease. Everything that is gratifying to a person, tranquillity, safety and love generate health.

A simple example: a person suffers from psoriasis and is on holiday... goes to have a swim in the sea, stays in the sun, is on the beach, the psoriasis disappears altogether; then the person goes 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 goes to work in a job they don't like – having contact with people they don't get on with, the person is not happy there – so the psoriasis diverts the person's attention to their body.

The unconscious represents 90% of us . We are only 10% conscious - 10% rational and 90% irrational. And this 90% answers to our wishes in the way it can. It somaticizes diseases to divert attention from the mind.

In reality, 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.

What makes a person change their behaviour?

The most important is not to cry over spilled milk. What has no remedy is already remedied. This philosophy completely changes life. Chinese people consider that disease is guilt. They consider disease as something the person creates. Our negative side, always waiting for the worst, is a factory of diseases, favouring a low level of the immune system. An optimistic view of things - always seeing something good in everything bad that happens, – this changes our health very much.

Credits for the Testimonial Video

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For further information, research on the internet



Campaign + various updated information + video available

<http://www.campanhaauto-hemoterapia.blogspot.com/>

Page with several recommended sites

videos, concept, scientific articles:

<http://paginas.terra.com.br/saude/Autohemoterapia/>

Go directly to users' testimonies

users of auto-hemotherapy exchange information (10,000+ e-mails until March 2008):

<http://inforum.insite.com.br/39550/>

Testimonies, reports and information:

<http://www.orientacoesmedicas.com.br>

Reports - by age, country, state, municipal district, gender, occupation, illness, average time of application, advantages gained, side effects, descriptions of experience or evaluation notes, click on Virtual Research on Auto-Hemotherapy

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To those with access to Orkut, lots of different information:

testimonies, exchanges, chats, chat rooms, opinions,

groups, scientific articles, pathologies, frequent queries:

<http://autohemo.blogspot.com/>

<http://www.medicinacomplementar.com.br/tema130206.asp>

To find out about testimonies, research the words: community, auto-hemotherapy, testimonies at

www.google.com

Some testimonial groups, for instance:

<http://groups.msn.com/Auto-Hemoterapia/relatos.msnw>

<http://autohemo.blogspot.com/2007/05/comunidade.html>

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Luiz Fernando Sarmiento Rio de Janeiro - RJ	luizfelipepedro@yahoo.com.br	I wish to receive testimonies on results from the use of auto-hemotherapy.	Forward these results to the people who care about the defence of the freedom of the use of auto-hemotherapy.

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