

Bioresonance treatment of solvent induced chronic encephalopathy.

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ABSTRACT

Background. In this study the therapeutic effectiveness of Mora bioresonance treatment in solvent induced chronic encephalopathy (CSE) was assessed. The treatment of 22 patients was evaluated afterwards. The selection period was from 2007 to 2011.

Patients. All 22 patients were looking for treatment of their fatigue. Only patients that were occupied in their work with solvents, chemicals and metals were admitted in this study. They all suffered sever from typical CSE complaints. Out of the 22 patients, 19 patients could be evaluated.

Methods. All patients filled out a list where they had to score symptoms on their severity using a scale ranking from 0-3 (no symptom – symptoms - severe symptoms- unable to work). Each patient was detoxified with inverse the Electro Magnetic Signals (EMS) of the toxins measured and additionally treated with orthomolecular supplements to support the detoxification process. The patients were detoxified for solvents and metals. After detoxification the patients scored the same severity symptom list.

Results. Nearly all symptoms reduced significantly. The most frequent symptoms are fatigue, concentration problems, memory loss and pain in limbs. The average severity dropped from: Fatigue (N= 17) 2,47 to 0,82 ($p < 0,001$), concentration problems (N=15) 1,80 to 0,73 ($p < 0,001$), memory loss (N=15) 1,80 to 0,93 ($p < 0,001$) and pain in limbs (N=15) 1,80 to 0,67 ($p < 0,001$).

Conclusion. For patients suffering from CSE, Mora Bioresonance treatment with orthomolecular support has a high practical therapeutic effectiveness.

Key words: CSE, Chronic Solvent induced Encephalopathy, Mora bioresonance,

Introduction

Many painters, car mechanics, printers, house constructors, hairdressers and glue workers are occupationally exposed to organic solvents. After inhalation or dermal uptake these solvents can penetrate in cells and disrupt their metabolism. This can lead to the symptoms listed in table 2. Solvents can damage the liver, nerves, brains or other organs depending on their lipophilic and hydrophilic properties.

Long-term exposure to solvents can lead to a chronic syndrome known under various names as: Chronic Solvent induced Encephalopathy (CSE), Organo Psycho Syndrome (OPS), Painters disease and Solvent intoxication. In this article the term CSE will be used.

Patients suffering from CSE often complain of fatigue, difficulty in concentration, memory loss, mood changes, headaches and pain in limbs and joints. [1, 7] CSE often has daily consequences for the patient and their family.

The attention in literature is mostly focused on the diagnostic process. Treatment of patients exists mainly in prevention of exposure to solvents and reducing the co morbidity of the pathology with Psycho treatment. There is at present no effective treatment of CSE complaints and symptoms. So far known there are no CSE data studies with detoxification of solvents or bioresonance studies for all the present chemicals. The main detoxification studies with bioresonance were directed to detoxification of metals.

The main objective of this study is:

To test and optimize a treatment protocol for CSE patients with bioresonance in an open in patient study.

Methods

Patient selection. All patients made an appointment because of fatigue and happened to work with solvents. Acceptance for this study was a combination of the symptom scores on the symptom list and an occupation with contact with chemicals. The patients must have at least 1 symptom with a functional restriction (symptom score 2 or 3). All patients were questioned for general health, diet, illness history and family history. The average age of the patients was 47 years with ages ranging from 18 to 63. All patients were officially asked for permission of publication of their anonymous data.

CSE specific. For participation in this study each patient had to fill out a symptom list which contained 21 CSE symptoms. These symptoms are adopted from the website of the OPS-society in the Netherlands [2]. Symptoms are scored for severity on a 0-3 scale. 0 = No complaint; 1 = Complaint without functional restrictions in daily activities; 2 = Severe complaint with functional restrictions in daily activities; 3 = Severe complaint and not able to fulfill one's daily occupation.

In this study 23 patients participated. The first patient entered June 2007 and the last patient entered August 2011. Of this group 18 patients were evaluated, 3 patients left the study before they were finished with their treatment and 2 seemed to be no CSE patient, because there was no relation between the toxic burdens and the complaints. Their complaints were stress related.

Occupational information.

All chemicals (solvents, oils, cleaning products, sprays etc) and metals (welding, soldering vapors) with which the patients were in contact in their occupation were listed.

The exposure time was noted in periods of 5 years. The range of exposure time is from 0-5 to more than 30 years. The longest time of exposure was 47 years.

Occupations. Mechanic (car and service) N= 7; Sprayer (paint) N = 6; Construction worker N = 1; Painter N = 3.

Years of exposure with paints and solvents:

0-5	: 1(number of patients)
5-10	: 2
10-20	: 5
20-30	: 3
>30	: 6

Statistics

Average symptom scores and standard deviations were calculated for each specific symptom. When a symptom was not present at the start but appeared at the end, this symptom was included in the average and calculated in the standard deviation at the start. Significance was calculated with the Student-t-test, because the standard deviation by start and end are of the same magnitude.

Health instructions

All patients were instructed to eat at least 50-100 gram of fresh raw vegetables per day in order to get enough anti-oxidants in their body to lessen the reaction of detoxification. Patients still occupied in a surrounding with solvents and chemicals were mostly not using proper safety procedures. All got instructions how to work safer.

ELH testing method of toxic substances

In ELH (electronic homeopathy) electromagnetic signals are used for diagnosis and treatment. Each substance emits Electro Magnetic Signals (EMS) these signals cover the Nuclear Magnetic Resonance frequencies (NMR-f). Bioresonance measurements use these NMR-f to test the response (resonance) of the body organs to these frequencies expressed as change in

skin resistance. When the response of body organs is measured with the frequencies of Mesenchym, there can be either no response (which means its well) or a response where the skin resistance raises, that tells that there is a burden.

Based on this knowledge you can measure whether organs are well and whether there are toxins and micro-organisms present.

Toxins bind to proteins or lipophilic substances. The strength of these bonds depends on the electromagnetic properties of both substances. To release these bonds the inverse amplitudes of the frequencies of the toxins are used. This is comparable two magnets attracting each other when they have opposite electromagnetic fields and pushing away each other in case of equal electromagnetic fields. This principle is used in the detoxification of all toxic substances with bioresonance.

Polar substances like sugar bullets, ethanol and water are capable of storing Electro Magnetic Signals of other substances. Thanks to this property sugar bullets can be loaded with signals by the Mora device in the detoxification treatment of solvents, metals and toxic chemicals.

Devices and materials

Measurements were made with the Mora Super bipolar from MedTronik (Germany) supported by a Mora software program "ELH for Windows" of MedTronik. The test sets in this software program used are: Test set from Dr Cornelissen and Allergy.

A Ritu-interface was used to measure burdens of toxins. In the Ritu-interface digital information of solvents and chemicals are stored. This information can be used as Electro Magnetic Signals (EMS) for diagnostic measurements.

The Mora device is also used for copying A-inverse signals to sugar bullets, which are used for treatment of toxins.

The sugar bullets are obtained from Hahnemann pharmacy, 20 bullets/gram.

EMS signals from 130 biological grown vegetables, fruits, herbs and mushrooms copied to sugar bullets were used for the treatment of mycose.

ELH testing

ELH testing is done with a Mora Super bipolar bioresonance system.

System use.

Use Mora Super in Med-test modus. Test Mesenchym sensitivity in test system of Cornelissen with MeBe ampoule. If the patients measure points (Acupuncture points Lu 10, Li 1, CV 9 and Lr 1) are not sensitive enough (measurements should reach a value of 50 and react to the MeBe ampoule) use Mora program 111.

Put with F8 Mesenchym in a carousel and activate carousel.

Now test acidum malicum and test what amplification (first Mora and than Ritu) gives the highest measurement and measure with this amplification in the next steps. Put acidum malicum in the same carousel with Mesenchym and activate acidum malicum. Test in which organs there is a toxic burden. Organs with a value above 54 should be considered to be contaminated and are placed in another carousel. Activate this carousel.

Often it is necessary to adjust the amplification: Measure acidum malicum again and measure it with an amplification that gives the highest measurement value. This provides you with a higher sensitivity for the next step.

Test the environmental burdens in the Cornelissen test system and also in Allergy test set and specifically test the substances used in their occupation. All toxic compounds that score higher than 54 should be considered as a toxic burden.

Testing substances that are not in the ELH databank of the PC.

A great number of chemicals are available in the ELH database. In case a chemical is not available use a copy of the A-inverse EMS signal of that substance and test if the acidum

malicum burden is lowered when measured in the input Carousel (MT1) of the Mora Super. If this is the case that substance is present in the body.

List all substances found and the amplification (Ritu plus Mora) used to measure their presence. You need this information to compare future measurements. Each consult the selection of substances found are tested again and amplifications are noted in order to see if the burden reduces.

Detoxification

Each patient was tested with bioresonance to search for the chemicals and metals with which they were contaminated. In case of unknown substances patients were asked to bring in the products of their occupation and an A-inverse copy of these substances was made.

From each contamination an A-inverse copy is tested in the MT1. This copy lowers the measurement value.

To find the right amplification for detoxification the Ritu was amplified unless the measurement value started to rise. Here the signal amplitude becomes too high for detoxification. The amplification found was used for making detoxifying sugar bullets.

On each visit the level of amplification needed for optimal detoxification was tested and the sugar bullets were adjusted to this level of amplification.

Detoxification bullets

All substances that need the same amplification were copied together in the double beaker to a bottle of sugar bullets. The patient was prescribed to take 3 sugar bullet 3 x a day.

The patient had to melt the prescribed bullets under the tongue. The 3x daily dose should be equally spread over the day and no concomitant use of food is permitted.

In order to avoid adverse events patients were instructed to start with 3x daily 1 bullet and raise this after one week to 3x daily 2 bullets and than after another week to 3xdaily 3 bullets.

Mycose

Mycose is tested versus Mesenchym, acidum malicum and the brain organs in a carousel.

When then measurement value of mycose is higher than 54, the mycose is treated with the EMS from fruit, vegetables, herbs and mushrooms. The first ten signals (ad random chosen) that lower the mycose value below 30 are used for treatment.

This ten EMS signals are first tested on their suitability together. Sometimes one or more signals conflict to the others. The selection that is suitable is copied on the sugar bullets with an amplitude of $V=1000$ and $V=1$.

Supplements used

Toxins (chemicals) that are released from tissue leave the body by the liver or kidneys.

Dependent on the kind of the chemicals, orthomolecular substances can be used in the support of the metabolism of these chemicals in order to get a better excretion. Substances that can support the metabolism are for instance: Curcuma, Silybum-Curcuma, glutathione, amino acid mixtures and acetyl-l-carnitine (ALC).

ALC is especially useful for the brains. See Understanding Liver Detoxification and amino acids [4]. By means of bioresonance is tested which supplement is most effective. As long as measurement confirmed their support, patients got ALC and glutathione. Amino acids were tested on all patients for their support in detoxification and were prescribed if that was the case.

Metals were detoxified by treatment with Carcinosinum cum cuprum D6 [3] or with the inverse EMS of the metals (except mecury) and glutathione 2x daily 100mg.

Results

Symptom scores

The patients scored the severity of symptoms on a 0-3 scale. 0 = No complaint; 1 = Complaint without functional restrictions; 2 = Severe complaint with functional restrictions; 3 = Severe complaint and not able to fulfill their daily occupation (Fig 1.).

The symptoms are listed (Table 2) starting with the most frequent symptoms. In the table severity is the average, with Standard Deviation (SD) of the severity scores of patients with that symptom at the start and at the end of the same group of patients. Significance for start and end is calculated per symptom.

Table 2

Symptom	Frequency	Severity score start	Severity score end	Significance p value
1. Fatigue	17	2,47 (0,61)	0,82 (0,38)	<0,001
2. Concentration problems	15	1,80 (0,54)	0,73 (0,57)	<0,001
3. Memory loss	15	1,80 (0,54)	0,93 (0,57)	<0,001
4. Pain in limbs	15	1,80 (0,75)	0,67 (0,70)	<0,001
5. Stress	13	1,69 (0,72)	0,62 (0,49)	<0,001
6. Severe headache	12	2,25 (0,92)	0,58 (0,49)	<0,001
7. Irritation	12	1,92 (0,76)	0,58 (0,49)	<0,001
8. Depression	12	1,58 (0,86)	0,33 (0,47)	<0,001
9. Sleep disorders	11	1,91 (0,90)	0,55 (0,50)	<0,001
10. Personality disorders	11	1,45 (0,78)	0,36 (0,48)	<0,001
11. Joint complaints	10	2,00 (0,63)	0,90 (0,54)	<0,001
12. Short of breath	10	1,50 (0,50)	0,40 (0,49)	<0,001
13. Muscular pain/ stiffness	9	2,11 (0,74)	0,89 (0,57)	<0,01
14. Coming out of bed because of pain	8	2,13 (0,60)	0,38 (0,48)	<0,001
15. Chest pain	7	2,00 (0,53)	0,71 (0,70)	<0,01
16. Pain in stomach / belly	7	1,86 (0,64)	0,43 (0,49)	<0,01
17. Dizziness	7	1,57 (0,49)	0,57 (0,49)	<0,001
18. Early signs of old age	5	2,00 (0,63)	0,40 (0,49)	<0,001
19. Loss of muscle function	3	1,33 (0,47)	0,00 (0,00)	> 0,1
20. Impotence, infertility	2	1,50 (0,50)	1,50 (0,50)	
21. Lack of appetite	1	2,00 (0)	0,00 (0)	

All symptoms respond to treatment, only infertility (symptom no. 20) could not be tested.

Toxic substances

The main chemicals found were: Acetone, epoxy resin, nitrothinner, xylene, toluene, methyl-ethyl-ketone (MEK), benzyl alcohol, styrene, trichloroethylene, nitrocellulose, polyester, oils, several hydrocarbons, wood, cement, all kinds of sealants, poly-chlor-benzenes (PCB's), poly-aromatic-carbohydrogens (PAK's), methanol, tar, polystyrene, resin, latex, methyl chloride, turpentine, mercaptobenzene, rubber, rubber harder, solution, rubber glue, isocyanate, formaldehyde, dioxin, propylalcohol.

The metals found were: Aluminium, Amalgam, Arsenic, Berillium, Cadmium, Mercury, Lead, Paladium, Copper, Chrome, Nickle.

In 10 patients the contamination of brain parts was found with bioresonance (table 3).

Contaminations were found in all 14 brain parts available in the ELH databank (Cornelissen system).

Removal of epoxy resin, resin, vulcanisers and polyesters take more time than the other substances. Bioresonance measurements indicate that the toxins remove more rapidly from most organs and muscles than from the brain, bones and joints.

At the start of this open in patient study, the focus was on solvents and chemicals. Brain problems decreased relatively little, however after the first 7 patients it became clear that this could be caused by a mycose. All patients in the group with no. 8-18 were measured for mycose and tested positive. The treatment protocol was than extended with the removal of mycose.

Treatment time

The average treatment time is 10 month (3,5 – 15 month).

Treatment times:

3.5, 5, 7, 7.5, 8, 8.5, 2x 9, 2x 9.5, 3x 11, 11.5, 3x 13, 15 = total 175 : 18patients = 9,7 (SD 2,9) month.

Adverse events

Some patients complained of headache or worsening of symptoms. They were advised to stop taking their sugar bullets for detoxification until the headache or worsening of symptoms decreased. Then they could start again on a lower number of bullets, building up the number again to 3x 3 bullets.

Discussion

Most patients experienced relieve of one or more CSE symptoms within 2 months.

Most patients did not experience fatigue relieve until they were nearly completely released of solvents and toxins. It was hard for these patients to wait, sometimes up to a full year, before they experienced results on their main reason to be treated.

Patient selection

The severity of CSE can vary from light to severe [1].

The most affected patients in this study were unable to work in their occupation, but they were sufficiently mobile to do their daily activities and they did not need nursing.

For most patients it was possible to detect with which solvents and chemicals they had worked. Some products were no longer on the market and some productnames had been forgotten, which made it difficult to detoxify those patients for their specific contaminations. Patients were accepted in this study if they had at least one symptom that caused a functional restriction (Symptom score 2).

Only two patients had just one symptom score 2.

Nearly all patients had metal burdens in addition to their solvent burdens. Their liver and gut were probably unable to handle all the metals where they were contaminated with in their occupation. Contamination happened mostly via skin and sometimes via inhalation for example by solders and welders.

All patients that used soldering and welding for their occupation had metal burdens.

Mora Super measurements.

Bioresonance is still in full development in all kinds of diseases.

It is based on the interaction of the body with EMS. There are many publications about the effectiveness of bioresonance treatment, a lot of them with good results (5, 8).

Michalak et al [9] investigated the use of the Mora Super in cancer diagnostics.

At present there are a lot of protocols on how to measure bioresonance. The outcomes of these different protocols are hard to compare, because of the great variety in measure methods.

The method of measurement chosen in this study is based on experience and directed to the question how to measure the burden of toxicity in a patient in such a way that it tells whether the toxic burden is high and whether the therapy actually decreases the toxins. Patients are always compared to themselves; the measurement never gives an absolute value because resonance differs from patient to patient.

The toxins are measured in the Med-test because this gives a better impression of the height of the burden. Toxins are measured with Mesenchym and acidum malicum in the carousel. By raising the amplitude of the Mora and the Ritu amplifier one finds a peak value, this peak is considered to be the peak of the burden. At each visit of the patient this peak is measured, the peak of the amplification drops steadily and gives an indication that the removal of the toxins is successful. The fact that a patient sometimes does not feel improvement does not mean that there is no improvement in the removal of toxic burdens. Patients should be informed about this.

Amplification

If patients are difficult to measure in the Med-test modus, patients will still react to inverse signals of specific toxins if present. This can be tested with a copy of the inverse EMS of the toxin. With this copy is tested with which amplification the burden can be removed. In these measurements the measurement value drops. The further the value drops the better the treatment works. When the amplification is too high the measurement value will rise again. This is the peak amplification needed for making sugar bullets with the proper strength of signals.

Release of toxins with inverse EMS

Toxic substances can bind to proteins because their Electro Magnetic Signals match with the EMS of the body proteins (mostly hydrogen binding sites). By inverting these EMS signals, toxic substances can no longer stick to the proteins, comparable to a magnet. A magnet attracts the opposite pole of another magnet and releases when one of the poles is inverted. Based on this concept toxins will be released by their inverse EMS.

Toxins that have covalent bindings to tissues, like resins, polyesters, epoxy and vulcanisers react slower to inverted EMS because their binding strength is much higher than Van der Waals bridges (H-bonds).

Solvents that are lipophilic solve easily in brains and nerves. It takes more time to clear those organs than other organs.

Bioresonance measurements make clear that vulcanisers bind especially to bones and joints. Pain in limbs and joints decreases when these products are detoxified. The free –S-H sides probably bind to the –S-H group of amino acids/proteins that are especially present in cartilage (6).

Mycose

Mycose becomes measurable when the burden of toxic substances decreases.

Mycose is treated with signals of fresh food (fruit, vegetables, herbs and mushrooms).

Treatment of mycose is based on the fact that healthy and fresh food is not invaded with fungi, therefore it must have strong signals against fungi or it would be full with fungi.

The results prove that this indeed works.

Conclusions

Further studies are needed to confirm that bioresonance treatment is a very effective way to treat the complaints of CSE patients. Bioresonance should therefore be considered for all CSE

patients. The treatment procedures in this study can be used as a protocol for further treatment studies.

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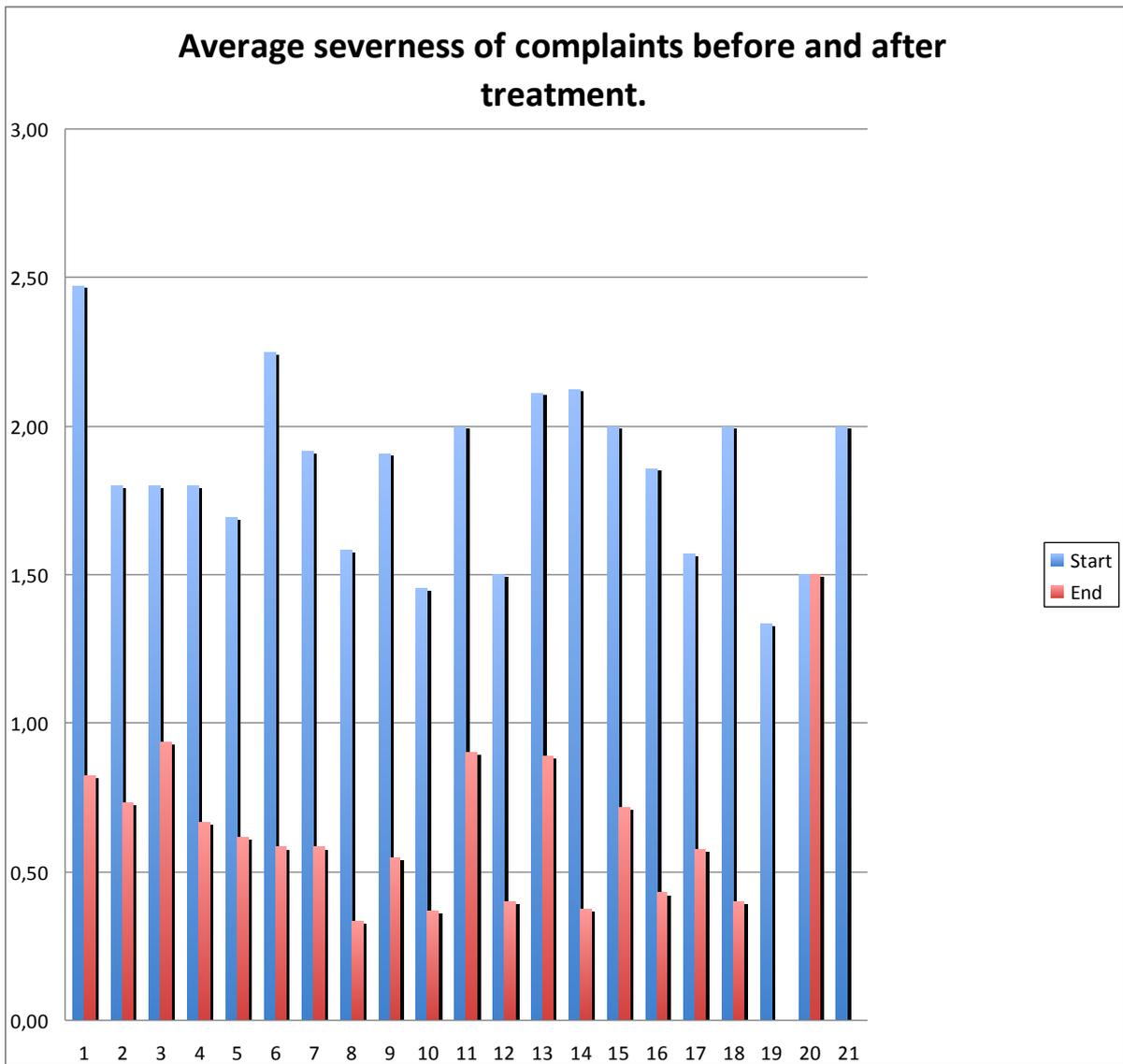


Fig 1. Horizontal: 1-21 are the numbers of the different complaints, Starting with the most frequent complaint towards less.

Vertical: Average severness, scale from 0 -3