DAMAANSA HOLDINGS

FAITH™ Drops

PROTOCOLS

Head Office: PoBox 46816 • Glosderry • 7702
Tel: +27-21-6575786
Fax: +27-21-6575756
Cell: +27-(0)827746274

Regional Office: PoBox 95 • Witelsbos • 6304
Cell: +27. (0) 823399799
Fax +27. (0) 821313399799

(Associated Company: Anno-Organix Pty Ltd.).

***WARNING*: Any and all information and/or statements made within this document or on our website are for educational use only and are not intended to diagnose, treat or cure, prevent disease or replace the advice of a licensed Healthcare Practitioner.**

***Note* also that our website may provide certain links to other websites operated by other parties. These links are provided for your convenience and reference only and we accept no liability or responsibility for their content.**

Damaansa Holdings and its associated companies do not dispense medical advice, prescribe or diagnose illness. Any ideas or views expressed by Damaansa Holdings is not intended to be a substitute for conventional medical advice or service. By making use of our manual or product you agree that no responsibility or liability will be incurred to any person with respect to loss damage or injury caused or alleged to be caused directly or indirectly by the information contained in this document or on our website. Consult a licensed Healthcare Practitioner before beginning any alternative protocols.

Section

1

An Introduction to a revolutionary new Supplement

History

Extensive testing of FAITH™ Drops has been carried out for several years in Africa which has provided the most amazing results. Patients with various diseases from Malaria, AIDS, Cancer, TB, Hepatitis A, B and C, to name but a few, have been successfully treated whilst supplementing their allopathic medicines with FAITH™ Drops. In most cases, patients recovered completely, the time factor depending on the various diseases varied between 3 hours to four weeks. Other patients with less life threatening illnesses have all shown remarkable recovery whilst supplementing with FAITH™. It is not our intention to allow the reader to draw assumptions that FAITH™ Drops heals or cures – we state only that Sutherlandia and other herbal extracts used in our formulation have well documented immune boosting properties and it is these properties that provide the body with the necessary tools to help itself.

FAITH™ Drops aids the immune system to overcome various ailments that are caused by germs, bacteria, viruses, fungi, parasites and poisons, by targeting any pathogens that have an acidic pH level that are harmful to the body.

FAITH kills pathogens by oxidation, AND as a result of the 12 herbal extracts (18 compounds) renders the residue harmless and aids in the complete removal of all of the resulting toxins and chemicals in the body.

A short simple explanation of how it works in the human body.

Any medicine or food taken orally goes to the stomach where digestive acids extract Chlorine Dioxide. Red blood cells which are responsible for carrying oxygen around the body are fooled into transporting the Chlorine Dioxide Ion to the body's cells. When the Chlorine Dioxide ion comes into contact with a harmful pathogen, it instantly accepts 5 electrons and an extremely fast chemical reaction takes place in the form of a small explosion at microscopic levels and the pathogen is oxidized. The extracts in FAITH™ Drops ensure that the SCD residue is turned into harmless Chloride (table salt) and subsequently expelled from the cells and tissues through urine and stools.

Chlorine Dioxide is needed by the body to destroy illnesses and the immune system utilizes by sending the white blood cells through a process called myeloperoxidase, making it into a deadly instrument or carrier. On impact with a pathogen it would in a milli-second produces Hypochlorous Acid which upon contact destroys the potentially dangerous cells in the human body. Hypochlorous Acid is the weapon that the white blood cell uses to kill parasites, bacteria, fungi, viruses, tumour cells, natural killer cells and waste products.

In most cases of illness the immune system has been depleted because of our lifestyle and eating habits as well as chemical intervention into our natural products (preservatives) and GM foods. The body does not receive the correct nutrients to enable the manufacturing of Cl 0^2 ions, resulting in the white blood cells not having the ability to produce Hypochlorous Acid. However, with the ingestion of FAITH™ Drops, this is easily remedied

FAITH™ Drops has the ability to add 8 electrons instead of the usual 5 electrons to the white blood cell, turning what comparatively speaking could be a hand grenade into an atomic bomb, ensuring that the white blood cell has enough energy to return to the red blood cell to collect another atomic bomb. All this happens within a 3-minute period to and boosts the immune system enabling it to assist in eradicating diseases.

Section

2

COMPOSITION OF FAITH™ DROPS

Philosophy

Herbalists worldwide have for centuries made use of various extracts of indigenous plants and herbs to produce a wide variety of alternative medicines.

Having been trained for more than 20 years as an herbalist and being registered with the Allied Health as well as the Tradional Healers Council, I embarked upon a journey that would over a long period of time lead me to this innovative immune fortifier. Using an herbalist's philosophy behind healing, I incorporated a diluted and distilled form of herbal tinctures (1:1000) to blend into the SCD (stabilized chlorine dioxide) that would work in conjunction with each other and boost the immune system.

I invested my time in studying Africa's wealth of plants and herbs, and studied all forms of Herbalism from Tradional Chinese to the Modern Day herbalist. During these years I studied plants in their natural environment and made use of these plants and herbs to remedly a variety of illnesses. This journey led me to the combination of these extremely important herbal tinctures which I have included in our FAITH™ Drops today. Needing a carrier for these tinctures which had an ideal environment which would ensure NO transference of bacteria etc, I continued my research into SDC.

Discovering SCD (Stabilized Chlorine Dioxide)

My personal discovery of **Stabilised Chlorine Dioxide** occurred during the early 1990's whilst on a journey around the world on a yacht.

My family accompanying me at the time became seriously ill with malaria. In order to keep them hydrated I purchased lemons and made fresh lemonade using the water from the ballasts. To my amazement, without medical care, they recovered very quickly.

Later on analyzing the situation, I determined that Stabilised Chlorine Dioxide had been added to my drinking water.

Thus began my journey of discovery…

I discovered that although SCD is an almost PERFECT preservative and an ideal means of transferring additional ions to the cells within the body, I also discovered that the after-effects of SCD if not removed from the cells and tissues effectively can do more harm than good to the organs. So, refining my research and knowledge on the blending of herbal extracts, I formulated the tinctures in FAITH™ Drops to ensure that the body is empowered with all the tools necessary to fight infection and disease but at the same time it is also provided with an effective means of ridding itself of the resulting toxins from the oxidation of the pathogens as well as any residue of SCD.

IMPORTANT COMPOUNDS IN THE FAITH FORMULATION

The question that is posed to me frequently is why does FAITH™ Drops comprise of 12 herbal extracts from which 18 important compounds resulted that are suspended in a chlorite solution. My explanation is a simple but important one. I have summarized it below and I explain the function of the herbal extracts and the various compounds and the subsequent transference ions and the importance of removing any toxic residue.

1. ***Compound 1:*** (which we call the destroyer) is toxic and within hours of being introduced into the human body breaks down into hydrochloric acid which is subsequently utilized by the immune system as a means to burn pathogens and germs.

2. ***Copound 2***, a gelling agent that stops the body's laminin from separating, and on entering the body undergoes primary metabolism, destroying the outer shell of a pathogen. This causes the pathogen to lose weight, lose energy and become more vulnerable. The process is almost as if one is introducing a virus to the virus.

3. ***Compound 3 :*** (commonly known as the "nuclear factor K.B"), which is used by the killer cell in the white blood cell, regulates the immunes response to attack pathogens. As the primary cause of a weak immune system is inflammation, the 6-methoxychromane acts as an anti-inflammatory to the white blood cell.

4. ***Compound 4:*** is a parting compound whose function is to harden cells with a pH below 5, making them more solid and easily targeted by the white blood cells. This action results in the toxins being more easily removed from the body, and plays a major role in ensuring that the toxins do not damage any organs.

5. ***Compound 5:*** which is an excellent cancer fighter, sterilizes the body within minutes of entering the human. It cauterizes, sealing off open vessels and nerve ends. It affects gene expressions and is associated with decreased Methylation of DNA in the promoter region of the gene. It decreases the frequency of the CAA → AAA mutations, loss of Heterozygosity on chromosomes 5 and 6 in the liver tumors, and is also effective in carcinomas. In addition, it causes DNA Hypomethylation, tricking the body into a process called Bio-transformation making the carcinogen more water soluble so it can be removed from the body. This process allows the body to readily detox and aids in the removal of poisons out of the tissues.

6. ***Compound 6:*** is a membrane protein. It ensures the stability of cells. With its cell recognition proteins, it allows cells to identify and interact with each other. These proteins are involved in immune response. The transport proteins play a big role in the maintenance of the ions that we artificially introduce. These transport proteins come in two forms: (1) carrier proteins and (2) channel proteins. The carrier proteins are involved in using the energy released from ATP being broken down to facilitate active transport and ion exchange. These processes ensure that useful substances are able to enter the cell and that toxic substances are pumped out of the cell – e.g. cancer cell toxins, dead matter (pathogens) as well as the chlorite ion that is so dangerous.

7. ***Compound 7:*** is used to target the brain, the pituitary gland and the pineal gland and is an excellent blood brain barrier penetration medium. Methoxyphenyl is highly effective in human MX 1 breast cancer models and is used as an anti-cancer clinical candidate.

8. ***Compound 8:*** targets the pancreas and moderates the effects of insulin – reducing diabetes in humans.

9. ***Compound 9:*** has anti-microbial properties which raises the metabolism of the cells that in turn releases enzymes into the intestinal tract. This then activates the thyroid (the thyroid controls how quickly the body burns energy, or makes proteins), and also controls how sensitive the body should be to other hormones.

10. ***Compound 10:*** is used in post menopausal osteoporosis as well as the loss of estrogen production which is usually as a result of the side-effects of chlorine in our water systems used or as in chlorite used in ***OTHER MMS products.*** We have added the ***Methoxychromane*** to balance these side-effects.

11. ***Compound 11:*** stores chemical energy and produces hormone-like substances which function on blood clotting. It also regulates blood pressure and inflammation response to infection, this in tunre aids the immune system in functioning more effectively. To our horror in past research we discovered that inflammation and blood clotting were a primary concern in most patients as a result of medications and after effects of radiation and chemo treatment.

12. ***Compound 12:*** does not store chemical energy and works in conjunction with Palmitic acid***.***

13. ***Compound 13:*** was introduced to protect the heart, liver and kidneys from toxic compounds. We have found toxic ions like chemo, chlorite, and radiation damage the organs and the patient, whilst ridding themselves of the cancer cells usually die from organ failure. Thymoquinone is an excellent cancer fighting agent if used correctly and helps the liver recover quickly.

14. ***Compound 14:*** controls photo-chemical behaviour when treating intestinal inflammation and/or intestinal mucosa thereby reducing bowel disease. By making use of Stabilised Chlorine Dioxide Gas (SCD) the bowl and intestines usually become irritated and to counteract this we introduced this compound***.***

15. ***Compound 15:*** Whilst studying fire ants, mosquitoes and various insects during the development of FAITH™, we discovered that the pheromone with the component Orgyia found in Nonacosane ,Loliolide and Di-Hydroactinidiolide (which is usually used in"queen" recognition) was used to lure germs, bacteria, viruses etc. to a component which is transported in a red blood cell or in the body's Hydrochloric Acid. This is absorbed by the T and B cells of the white blood cell which upon contact with pathogens activates the K-cell and effectively destroys it.

16. ***Compound 16*** and ***Compound 17:*** are building blocks in organic synthesis. What we discovered whilst struggling to find a "cure" for the Aids virus, is that the virus, upon entering the body, takes 24 hours to mutate and bind the RNA to the DNA in cells. The host virus is usually only controlled by ARV's and not eradicated entirely, thus resulting in "no cure medications". Whilst the FAITH™ Drops are being administered, ***Carboxylic acids*** accumulate and as the number of chlorine atoms increases, so does the electro negativity increase, resulting in the molecule adopting a more ionic character. This process causes the DNA, RNA and protein to precipitate out of solution making it possible to target and attack the HIV virus.

17. ***Compound 18:*** has an effect known as "cracking" which breaks larger molecules into smaller ones. This action is brought about during the absorbtion of FAITH™ Drops which enables the formulation to target and destroy pathogens and disease in the body.

Our FAITH™ Drops was formulated based on studies that have been carried out over many years and which have been documented by various laboratories and institutes worldwide. The compounds used in the formulation of FAITH™ Drops forms part of a patent that is pending.

These compounds and extracts form the basis of our unique formula and are phyto-chemicals and organic compounds, fatty acids and anti-oxidants.

Section

3

HERBAL EXTRACTS USED

LATIN NAME	ENGLISH
Bidens Pilosa - L	Beggars Ticks
Camptotheca Acuminata	Chinese Cancer Tree
Catharanthus Roseus	Madagascar Periwinkle
Centella Asiatica	Pennywort
Cnicus Benedictus	Holy Thistle
Dicoma Capensis	Koorsbossie
Elytropappus Rhinocerotis	Rinosterbos
Hypoxis Hemerocallidea	African Potato
Leonorus Cardiaca	Motherwort
Leonotis Leonorus	Wilde dagga
Sutherlandia Frutescens	Cancer bush
Tulbaghia Violacea	Wild garlic

Bidens pilosa - L. Beggar's Ticks

KINGDOM:	*PLANTAE*
Division:	*Magnoliophyta*
Class:	*Magnoliopsida*
Order:	*Asterales*
Family:	*Asteraceae*
Genus:	*Bidens*
Species:	*B. pilosa*
Binomial Name	*Bidens pilosa (L)*
Synonyms	*Beggars Ticks*

Physical Characteristics

Annual growing to 1m. It is hardy to zone 0. It is in flower from May to October. The flowers are hermaphrodite (have both male and female organs) and are pollinated by Bees, hover-flies.

The plant prefers light (sandy), medium (loamy) and heavy (clay) soils. The plant prefers acid, neutral and basic (alkaline) soils. It cannot grow in the shade. It requires moist soil.

Habitats

Cultivated Beds;

Edible Uses: Tea

Edible Parts: Leaves.

Leaves - raw or cooked. A resinous flavour. Added to salads or steamed and added to soups and stews, they can also be dried for later use [183].A good source of iodine. A nutritional analysis is available. Young shoot tips are used to make a tea.

Composition

Figures in grams (g) or milligrams (mg) per 100g of food.

Leaves (Dry weight)

- 295 Calories per 100g
- Water: 0%
- Protein: 24.5g; Fat: 4g; Carbohydrate: 56.4g; Fibre: 12.1g; Ash: 15.1g;
- Minerals - Calcium: 1721mg; Phosphorus: 273mg; Iron: 0mg; Magnesium: 0mg; Sodium: 11mg; Potassium: 267mg; Zinc: 0mg;
- Vitamins - A: 12mg; Thiamine (B1): 0mg; Riboflavin (B2): 0mg; Niacin: 0mg; B6: 0mg; C: 0mg;

Seed (Fresh weight)

- 0 Calories per 100g
- Water: 0%
- Protein: 17.5g; Fat: 17.1g; Carbohydrate: 0g; Fibre: 0g; Ash: 0g;
- Minerals - Calcium: 0mg; Phosphorus: 0mg; Iron: 0mg; Magnesium: 0mg; Sodium: 0mg; Potassium: 0mg; Zinc: 0mg;
- Vitamins - A: 0mg; Thiamine (B1): 0mg; Riboflavin (B2): 0mg; Niacin: 0mg; B6: 0mg; C: 0mg;

•

Medicinal Uses

Alterative; Antifungal; Anti-inflammatory; Anti-rheumatic; Styptic.

A juice made from the leaves is used to dress wounds and ulcers [218, 272]. A decoction of the leaves is anti-inflammatory, styptic and alterative [218]. The whole plant is anti-rheumatic; it is also used in enemas to treat intestinal ailments [218]. Substances isolated from the leaves are bactericidal and fungicidal; they are used in the treatment of thrush and candida [218].

Other Uses

None known

Cultivation details

We have very little information on this species and do not know if it will succeed outdoors in Britain, though it should be possible to grow it as a spring-sown annual. The following notes are based on the general needs of the genus. Succeeds in any moderately fertile moisture-retentive soil in full sun [200].

Propagation

Seed - sow early spring in a greenhouse and only just cover the seed. When they are large enough to handle, prick the seedlings out into individual pots and plant them out in May. Alternatively, a sowing in situ in mid to late spring can be tried.

References

1. Allan. H. H. Flora of New Zealand. Government Printer, Wellington. 1961
   The standard work, in 3 volumes though only the first two are of interest to the plant project. Very good on habitats.

2. Crowe. A. Native Edible Plants of New Zealand. Hodder and Stoughton 1990 ISBN 0-340-508302
   A very well written and illustrated book based on the authors own experiments with living on a native diet.

3. Kunkel. G. Plants for Human Consumption. Koeltz Scientific Books 1984 ISBN 3874292169
   n excellent book for the dedicated. A comprehensive listing of Latin names with a brief list of edible parts.

4. Facciola. S. Cornucopia - A Source Book of Edible Plants. Kampong Publications 1990 ISBN 0-9628087-0-9
   Excellent. Contains a very wide range of conventional and unconventional food plants (including tropical) and where they can be obtained (mainly N. American nurseries but also research institutes and a lot of other nurseries from around the world.

5. Huxley. A. The New RHS Dictionary of Gardening. 1992. MacMillan Press 1992 ISBN 0-333-47494-5
   Excellent and very comprehensive, though it contains a number of silly mistakes. Readable yet also very detailed.

6. Duke. J. A. and Ayensu. E. S. Medicinal Plants of China Reference Publications, Inc. 1985 ISBN 0-917256-20-4
   Details of over 1,200 medicinal plants of China and brief details of their uses. Often includes an analysis, or at least a list of constituents. Heavy going if you are not into the subject.

7. Manandhar. N. P. Plants and People of Nepal Timber Press. Oregon. 2002 ISBN 0-88192-527-6
   Excellent book, covering over 1,500 species of useful plants from Nepal together with information on the geography and peoples of Nepal. Good descriptions of the plants with terse notes on their uses.

Bidens Pilosa - L Beggars Ticks

Metabolite profiling and chemopreventive bioactivity of plant extracts from Bidens pilosa.

YM Chiang, DY Chuang, SY Wang, YH Kuo, PW Tsai, LF Shyur

Institute of BioAgricultural Sciences, Academia Sinica, Taipei 115, Taiwan, ROC.

Journal of ethnopharmacology 2004 Dec
PMID: 15507368

---

4 5-di-O-caffeoylquinic acid alpha-tocopherol Bidens pilosa extract BuOH centaurein chlorogenic acid EA Ethyl acetate nitric oxide plant extracts quercetin 3-O-rutinoside

CLINICAL STUDY

Bidens pilosa has been used as a folk medicine in various medications and as a popular ingredient in herb teas. Chemopreventive activities of crude and fractionated plant extracts of Bidens pilosa were evaluated in this study. Ethyl acetate and butanolic fractions, partitioned from the total crude extract of Bidens pilosa, exhibited significant scavenging free radical activity (IC (50) values approximately = with 14-17 microg/mL) comparable to that of alpha-tocopherol. Strong effects on the inhibition of LPS-mediated nitric oxide production in RAW 264.7 cells were also observed for the EA and BuOH fractions. Detectable Cytotoxicity on RAW 264.7 cells, however, was observed for the EA fraction at a dose >100 microg/ml. The metabolite profile and major constituents of the BuOH fraction were studied and characterized using various spectroscopic analyses. A new compound, heptanyl 2-O-beta-xylofuranosyl-(1-->6)-beta-glucopyranoside (1), and eight phenolic compounds, namely quercetin 3-O-rabinobioside (2), quercetin 3-O-rutinoside (3), chlorogenic acid (4), 3,4-di-O-caffeoylquinic acid (5), 3,5-di-O-caffeoylquinic acid (6), 4,5-di-O-caffeoylquinic acid (7), jacein (8), centaurein (9) were for the first time isolated from Bidens pilosa. Compounds 2-7 are the major antioxidative constituents in the Bidens pilosa extract.

Citation

YM Chiang, DY Chuang, SY Wang, YH Kuo, PW Tsai, LF Shyur. Metabolite profiling and chemopreventive bioactivity of plant extracts from Bidens pilosa. Journal of ethnopharmacology. 2004 Dec; 95(2-3):409-19

Article:
Study of the antitumor potential of Bidens pilosa (Asteraceae) used in Brazilian folk medicine.

MR Kviecinski, KB Felipe, T Schoenfelder, LP de Lemos Wiese, MH Rossi, E Gonçalez, JD Felicio, DW Filho, RC Pedrosa

Departamento de Bioquímica, Universidade Federal de Santa Catarina, Florianópolis, SC, Brazil.

Journal of ethnopharmacology 2008 Apr 17
PMID: 18342465

---

ascites Bdywt CHCl3 GSH LDHB MTT NRU

CLINICAL STUDY

AIM OF THE STUDY: Bidens pilosa (L.) (Asteraceae) is a medicinal plant traditionally used in Brazil for treating conditions that can be related to cancer. Therefore the present study was carried out to evaluate the antitumor activity of extracts obtained from the aerial parts of this plant species. MATERIALS AND METHODS: The crude hydroalcoholic extract (HAE) (water: alcohol, 6:4) and solvent fractions (chloroform=CHCl3, ethyl acetate=EtOAc, methanol=MeOH) were assessed for cytotoxicity assay by the brine shrimp and hemolytic, MTT and NRU assays.

The antiproliferative potential of the crude extract and fractions was investigated in vivo using the Ehrlich ascites carcinoma (EAC) in isogenic Balb/c mice that were administered intraperitoneally 150 and 300 mg/kg body weight per day for nine days beginning 24 h after tumor inoculation. RESULTS: In in-vitro cytotoxicity using Ehrlich ascites carcinoma cell line assay CHCl3 extract proved to be more toxic than the crude HAE with an IC (50) of 97+/-7.2 and 83+/-5.2 microg/mL to NRU and MTT, respectively. Histomorphological evaluations indicated that the treatment with CHCl3 and HAE extracts significantly reduced ($P<0.05$) body weight, abdominal circumference, tumor volume, packed cell volume and viable cell count, when compared to EAC control group. Furthermore, nonviable tumor cell count increased significantly ($P<0.01$) only under treatment with CHCl3 or HAE, and this was accompanied by a marked percentage increase in life span (54.2 and 41.7%, respectively). Biochemical assays revealed that CHCl3 and HAE extracts were also able to decrease serum LDH activity (39.5 and 30.6%) and GSH concentration (94.6 and 50.7%) in ascitic fluid, respectively. CONCLUSION: The chloroform fraction showed the best and methanolic the worst antitumor activity.

Citation

MR Kviecinski, KB Felipe, T Schoenfelder, LP de Lemos Wiese, MH Rossi, E Gonçalez, JD Felicio, DW Filho, RC Pedrosa. Study of the antitumor potential of Bidens pilosa (Asteraceae) used in Brazilian folk medicine. Journal of ethnopharmacology. 2008 Apr 17;117(1):69-75

Article:
The distinct effects of a butanol fraction of Bidens pilosa plant extract on the development of Th1-mediated diabetes and Th2-mediated airway inflammation in mice.

CL Chang, HK Kuo, SL Chang, YM Chiang, TH Lee, WM Wu, LF Shyur, WC Yang

Institute of BioAgricultural Sciences, Academia Sinica, Taiwan, ROC.

Journal of biomedical science 2005
PMID: 15864741

---

butanol HAND2 IFNG IGHE IL-4 IL5 ovalbumin plant extract T cell differentiation Th1 cell Th2 cell

CLINICAL STUDY

Bidens pilosa is claimed to be useful for immune or anti-inflammatory disorders; however, little scientific evidence has been published concerning its function. In this paper, immune disease mouse models were used to study the function of a butanol fraction of B.pilosa. We demonstrated treatment with the butanol fraction of B.pilosa ameliorated Th1 cell-mediated autoimmune diabetes in nonobese diabetic (NOD) mice but caused deterioration of Th2 cell-mediated airway inflammation induced by ovalbumin (OVA) in BALB/c mice. We next showed that Th2 cytokines (IL-4 and/or IL-5) increased but Th1 cytokine (IFN-gamma) decreased following injections with the butanol fraction of B.pilosa in both mouse strains. Accordingly, Th2 cytokine-regulated IgE production in mouse serum increased following treatment with this fraction. Finally, we found that the butanol fraction of B.pilosa inhibited Th1 cell differentiation but promoted Th2 cell differentiation. Taken together, the butanol fraction of B.pilosa has a dichotomous effect on helper T cell-mediated immune disorders, plausibly via modulation of T cell differentiation.

Citation

CL Chang, HK Kuo, SL Chang, YM Chiang, TH Lee, WM Wu, LF Shyur, WC Yang. The distinct effects of a butanol fraction of Bidens pilosa plant extract on the development of Th1-mediated diabetes and Th2-mediated airway inflammation in mice. Journal of biomedical science. 2005;12(1):79-89

Study of the antitumor potential of Bidens pilosa (Asteraceae) used in Brazilian folk medicine

Maicon Roberto Kviecinski[a], Karina Bettega Felipe[a], Tatiana Schoenfelder[a], Luiz Paulo de Lemos Wiese[a], Maria Helena Rossi[b], Edlayne Gonçalez[b], Joana D'arc Felicio[b], Danilo Wilhelm Filho[c] and Rozangela Curi Pedrosa[a,]

[a]Departamento de Bioquímica, Universidade Federal de Santa Catarina, Florianópolis, SC, Brazil

[b]Centro de Sanidade Animal, Instituto Biológico, São Paulo, Brazil

[c]Departamento de Ecologia e Zoologia, Universidade Federal de Santa Catarina, Florianópolis, SC, Brazil

Received 20 November 2006;

Revised 16 January 2008;

Accepted 18 January 2008.

CLINICAL STUDY

Aim of the study

Bidens pilosa (L.) (Asteraceae) is a medicinal plant traditionally used in Brazil for treating conditions that can be related to cancer. Therefore the present study was carried out to evaluate the antitumor activity of extracts obtained from the aerial parts of this plant species.

Materials and Methods

The crude hydroalcoholic extract (HAE) (water: alcohol, 6:4) and solvent fractions (chloroform = $CHCl_3$, ethyl acetate = EtOAc, methanol = MeOH) were assessed for cytotoxicity assay by the brine shrimp and hemolytic, MTT and NRU assays. The antiproliferative potential of the crude extract and fractions was investigated in vivo using the Ehrlich ascites carcinoma (EAC) in isogenic Balb/c mice that were administered intraperitoneally 150 and 300 mg/kg body weight per day for nine days beginning 24 h after tumor inoculation.

Results

In in-vitro cytotoxicity using Ehrlich ascites carcinoma cell line assay $CHCl_3$ extract proved to be more toxic than the crude HAE with an IC_{50} of 97 ± 7.2 and 83 ± 5.2 µg/mL to NRU and MTT, respectively. Histomorphological evaluations indicated that the treatment with $CHCl_3$ and HAE extracts significantly reduced ($P < 0.05$) body weight, abdominal circumference, tumor volume, packed cell volume and viable cell count, when compared to EAC control group. Furthermore, nonviable tumor cell count increased significantly ($P < 0.01$) only under treatment with $CHCl_3$ or HAE, and this was accompanied by a marked percentage increase in life span (54.2 and 41.7%, respectively). Biochemical assays revealed that $CHCl_3$ and HAE extracts were also able to decrease serum LDH activity (39.5 and 30.6%) and GSH concentration (94.6 and 50.7%) in ascitic fluid, respectively.

Conclusion

The chloroform fraction showed the best and methanolic the worst antitumor activity.

Catharanthus roseus

KINGDOM:	*PLANTAE*
Division:	*Magnoliophyta*
Class:	*Magnoliopsida*
Order:	*Gentianales*
Family:	*Apocynaceae*
Genus:	*Catharanthus*
Species:	*C. roseus*
Binomial Name	*Catharanthus roseus (L) G.Don*
Synonyms	*Vinca rosea*

Catharanthus roseus (Madagascar periwinkle)

Is a species of Catharanthus native and endemic to Madagascar. Synonyms include Vinca rosea (the basionym), Ammocallis rosea, and Lochnera rosea; other English names occasionally used include Cape Periwinkle, Rose Periwinkle, Rosy Periwinkle, and "Old-maid".
In the wild, it is an endangered plant; the main cause of decline is habitat destruction by slash and burn agriculture. It is also however widely cultivated and is naturalised in subtropical and tropical areas of the world. It is an evergreen subshrub or herbaceous plant growing to 1 m tall. The leaves are oval to oblong, 2.5–9 cm long and 1–3.5 cm broad, glossy green, hairless, with a pale midrib and a short petiole 1–1.8 cm long; they are arranged in opposite pairs. The flowers are white to dark pink with a darker red centre, with a basal tube 2.5-3 cm long and a corolla 2–5 cm diameter with five petal-like lobes. The fruit is a pair of follicles 2–4 cm long and 3 mm broad.

Cultivation and uses

The species has long been cultivated for herbal medicine and as an ornamental plant. In traditional Chinese medicine, extracts from it have been used to treat numerous diseases, including diabetes, malaria and Hodgkin's disease. The substances vinblastine and vincristine extracted from the plant are used in the treatment of leukaemia.
This conflict between historical indigenous use, and recent patents on *C.roseus*-derived drugs by western pharmaceutical companies, without compensation, has led to accusations of biopiracy.
It can be dangerous if consumed orally.[3] It can be hallucinogenic, and is cited (under its synonym *Vinca rosea*) in the Louisiana State Act 159.

As an ornamental plant, it is appreciated for its hardiness in dry and nutritionally deficient conditions, popular in subtropical gardens where temperatures never fall below 5 °C to 7 °C, and as a warm-season bedding plant in temperate gardens. It is noted for its long flowering period, throughout the year in tropical conditions, and from spring to late autumn in warm temperate climates. Full sun and well-drained soil are preferred. Numerous cultivars have been selected, for variation in flower colour (white, mauve, peach, scarlet and reddish-orange), and also for tolerance of cooler growing conditions in temperate regions. Notable cultivars include 'Albus' (white flowers), 'Grape Cooler' (rose-pink; cool-tolerant), the Ocellatus Group (various colours), and 'Peppermint Cooler' (white with a red centre; cool-tolerant).

Symptoms of phytoplasma infection

C. roseus is used in plant pathology as an experimental host for phytoplasmas.[] This is because it is easy to infect with a large majority of phytoplasmas, and also often has very distinctive symptoms such as phyllody and significantly reduced leaf size.

Alkaloids

- Vincristine, used in cancer chemotherapy.
- Vinblastine
- Reserpine

- Ibogaine

References

1. Flora of Madagascar: *Catharanthus roseus*
2. Germplasm Resources Information Network: *Catharanthus roseus*
3. DrugDigest: *Catharanthus roseus*
4. Huxley, A., ed.(1992).*New RHS Dictionary of Gardening*. Macmillan ISBN 0-333-47494-5.
5. Flora of China: *Catharanthus roseus*
6. College of Micronesia: *Catharanthus roseus*
7. Jepson Flora: *Catharanthus roseus*
8. Karasov, C. (2001). "Who Reaps the Benefits of Biodiversity?". *Environmental Health Perspectives* 109 (12): A582-A587.
9. C. Marcone, A. Ragozzino, E. Seemuller (1997) Dodder transmission of alder yellows phytoplasma to the experimental host Catharanthus roseus (periwinkle) Forest Pathology 27 (6), 347–350.
10. Chung-Jan Chang. Pathogenicity of Aster Yellows Phytoplasma and Spiroplasma citri on Periwinkle. Presented at the 89th Annual Meeting of The American Phytopathological Society August 12, 1997, Rochester, NY

    http://www.botany.hawaii.edu/bot442/36PsychoactivePlantsII.pdf

Catharanthus Roseus Madagascar Periwinkle

Effect of an anti-diabetic extract of Catharanthus roseus on enzymic activities in streptozotocin induced diabetic rats

References and further reading may be available for this article.

Som Nath Singh, Praveen Vats, Shoba Suri, Radhey Shyam, M. M. L. Kumria, S. Ranganathan and K. Sridharan

Defence Institute of Physiology and Allied Sciences, Lucknow Road, Timarpur, Delhi 110054, India

Received 9 October 2000;

Revised 1 April 2001;

Accepted 24 April 2001.

CLINICAL STUDY

Hypoglycemic activity was detected in dichloromethane:methanol extract (1:1) of leaves and twigs of Catharanthus roseus (family Apocynaceae), a traditionally used medicinal plant, using streptozotocin (STZ) induced diabetic rat model. Extract at dose 500 mg/kg given orally for 7 and 15 days showed 48.6 and 57.6% hypoglycemic activity, respectively. Prior treatment at the same dose for 30 days provided complete protection against STZ challenge (75 mg/kg/i.p.×1). Enzymic activities of glycogen synthase, glucose 6-phosphate-dehydrogenase, succinate dehydrogenase and malate dehydrogenase were decreased in liver of diabetic animals in comparison to normal and were significantly improved after treatment with extract at dose 500 mg/kg p.o. for 7 days. Results indicate increased metabolization of glucose in treated rats. Increased levels of lipid peroxidation measured as 2-thiobarbituric acid reactive substances (TBARS) indicative of oxidative stress in diabetic rats were also normalized by treatment with the extract.

Centella asiatica

KINGDOM	*PLANTAE*
Division	*Magnoliophyta*
Class	*Magnoliopsida*
Order	*Apiales*
Family	*Mackinlayaceae*
Genus	*Centelia*
Species	*C. asiatica*
Binomial Name	*Centella asiatica (L) Urban*
Synonym	*Gotu Kola*

Centella asiatica is a small herbaceous annual plant of the family Mackinlayaceae, and is native to Sri Lanka, northern Australia, Indonesia, Iran[1], Malaysia, Melanesia, New Guinea, and other parts of Asia. Common names include Gotu Kola, Asiatic Pennywort, and Luei Gong Gen, Takip-kohol, Antanan, Pegagan, Pegaga, vallaarai Kula kud and Brahmi (although this last name is shared with Bacopa monnieri and other herbs). It is used as a medicinal herb in Ayurvedic medicine and traditional Chinese medicine. Botanical synonyms include Hydrocotyle asiatica L. and Trisanthus cochinchinensis (Lour.) In Sinhalese (Sri Lanka) Gotu = conical shape and Kola= leaf

Description

Stem

The stems are slender, creeping stolons, green to reddish green in color, interconnecting one plant to another. It has long-stalked, green, reniform leaves with rounded apices which have smooth texture with palmately netted veins. The leaves are borne on pericladial petioles, around 20 cm. The rootstock consists of rhizomes, growing vertically down. They are creamish in color and covered with root hairs.

Flowers

The flowers are pinkish to red in color, born in small, rounded bunches (umbels) near the surface of the soil. Each flower is partly enclosed in two green bracts. The hermaphrodite flowers are minute in size (less than 3 mm), with 5-6 corolla lobes per flower. Each flower bears five stamens and two styles. The fruit are densely reticulate, distinguishing it from species of Hydrocotyle which have smooth, ribbed or warty fruit.

The crop matures in three months and the whole plant, including the roots, is harvested manually.

Habitat

Centella grows along ditches and in low wet areas. In Indian and Southeast Asian Centella, the plant frequently suffers from high levels of bacterial contamination, possibly from having been harvested from sewage ditches. Because the plant is aquatic, it is especially sensitive to pollutants in the water, which easily are incorporated into the plant.

Culinary Uses

Centella is used as a leafy green in Sri Lankan cuisine. It is most often prepared as mallung; a traditional accompaniment to rice and curry, and goes especially well with vegetarian dishes such as parippu' (dhal), and jackfruit or pumpkin curry.

It is considered quite nutritious. In addition to finely chopped Gotu kola, mallung almost always contains grated coconut and may also contain chillies, lime (or lemon) juice, dried fish, curry leaves, and spices such as fried mustard seeds.

Centella leaves are also used in the sweet "pennywort drink."

Actions

Gotu kola is a mild adaptogen, is mildly antibacterial, anti-viral, anti-inflammatory, anti-ulcerogenic, anxiolytic, a cerebral tonic, a circulatory stimulant, a diuretic, nervine and vulnerary.

Medicinal uses and Studies

When eaten raw as a salad leaf, Pegaga is thought to help maintain youthfulness. In Thailand cups with Gotu kola leaves are used as an afternoon pick me up. [6] A decoction of juice from the leaves is thought to relieve hypertension. This juice is also used as a general tonic for good health. A poultice of the leaves is also used to treat open sores. Interestingly, chewing on the plant for several hours induces entheogenic meditation, similar to the effects of salvia divinorum, although this practice is widely considered dangerous, as it can cause temporomandibular joint pains.

Richard Lucas claimed in a book published in 1979 that a subspecies "Hydrocotyle asiatica minor" allegedly from Sri Lanka also called "Fo ti tieng", contained a longevity factor called 'youth Vitamin X' said to be 'a tonic for the brain and endocrine glands' and maintained that extracts of the plant help circulation and skin problems. [7] However according to master herbalist Michael Moore, it appears that there is no such subspecies and no Vitamin X is known to exist.[8] Nonetheless some of the cerebral circulatory and dermatological actions claimed from Centella (as hydrocotyle) have a solid basis.
Several scientific reports have documented Centella asiatica's ability to aid wound healing, which is responsible for its traditional use in leprosy. Upon treatment with Centella asiatica, maturation of the scar is stimulated by the production of type I collagen. The treatment also results in a marked decrease in inflammatory reaction and myofibroblast production.

The isolated steroids from the plant have been used to treat leprosy.[10] [11] In addition, preliminary evidence suggests that it may have nootropic effects. [12] Centella asiatica is used to re-vitalize the brain and nervous system, increase attention span and concentration [13], and combat aging.[14] Centella asiatica also has anti-oxidant properties.[15] It works for venous insufficiency. [16] It is used in Thailand for opium detoxification.

Folklore

Gotu Kola is a minor feature in the longevity myth of the Tai Chi Chuan master Li Ching-Yun. He purportedly lived to be 256, due in part to his usage of traditional Chinese herbs including Gotu Kola.

A popular folklore tale from Sri Lanka speaks of a prominent king from the 10th century AD named Aruna who claimed that Gotu Kola provided him with energy and stamina to satisfy his 50-woman harem.

Ayurvedic View

In India it is popularly known by a variety of names: Bemgsag, Brahma manduki, Brahmanduki, Brahmi (North India, West India), Gotu kola, Khulakhudi, Mandukparni, Mandookaparni, Mandukaparni (South India), or Thankuni depending on region. It is often confused with Bacopa monnieri which is the more famous "Brahmi", both have some common therapeutic properties in Vedic texts and both are used for improving memory. However, current research has clearly established the difference in pharmacological activities of these two herbs.

Gotu Kola acts as a powerful "brain food", and is known for its ability to enhance mental ability. It supports and improves comprehension , memory and recollection . It coordinates these three aspects of mind power to develop a more effective level of performance. It has a "Vayasthapana effect", meaning that it helps retard the aging process. It is excellent for both internal and topical application. Gotu Kola nourishes the mind-body connection and enhances the psychoneuro immune (PNI) response. It supports the formation of quality blood , as well as the bone marrow and nerves .

Links

1.Monograph By Dr AJAY PADMAWAR 2.[http://www.herbsarespecial.com.au/free-herb-information/gotu-kola.html Free herb information: Gotu Kola}

References

1. magiran.com: فصلنامه پزشكي باروري و ناباروري، شماره 29
2. doi:10.1016/j.fct.2003.11.004
3. Microsoft Word - ~9446209.DOC
4. Winston, D., Maimes, S., Adaptogens: Herbs For Strength, Stamina, and Stress Relief, 2007, pp. 226-7
5. A Double-Blind, Placebo-Controlled Study on the Effects of Gotu Kola (Centella asiatica) on Acoustic Startle Response in Healthy Subjects. Journal of Clinical Psychopharmacology. 20(6):680-684, December 2000. Bradwejn, Jacques MD, FRCPC *; Zhou, Yueping MD, PhD ++; Koszycki, Diana PhD *; Shlik, Jakov MD, PhD
6. http://www.herbaled.org/media/sp2v3(a).mov Herbal Ed Smith
7. Natures Medicine by Richard Lucas et al. Prentice Hall, 1979
8. http://www.henriettesherbal.com/archives/best/1994/fo-ti.html Michael Moore "Fo ti"
9. Widgerow, Alan D.; Laurence A. Chait (2000-07). "New Innovations in Scar Management" (abstract). Aesthetic Plastic Surgery 24 (3): 227-234. Springer New York. ISSN: 0364-216X (Print) 1432-5241 (Online). Retrieved on 2007-01-28.
10. B. M. Hausen (1993)Centella asiatica (Indian pennywort), an effective therapeutic but a weak sensitizer Contact Dermatitis 29 (4), 175–179 doi:10.1111/j.1600-0536.1993.tb03532.x
11. Centella asiatica Herbal Extracts, Centella asiatica Natural Herbal Extracts Co2 Herb Extract
12. Bradwejn, J., Zhou, Y., et al, A Double-Blind, Placebo-Controlled Study On The Effects of Gotu Kola (Centella asiatica) On Acoustic Startle Response in Healthy Subjects, J Clin Psychopharmacology 2000 Dec;20(6):680-4
13. Brinkhause, B., Lindner, M., et al, Chemical, Pharmacological and Clinical Profile of The East Asian Medical Plant Centella asiatica, Phytomedicine 2000 Oct;7(5):427-48
14. Bradwejn, J., Zhou, Y., et al, A Double-Blind, Placebo-Controlled Study On The Effects of Gotu Kola (Centella asiatica) On Acoustic Startle Response in Healthy Subjects, J Clin Psychopharmacology 2000 Dec;20(6):680-4
15. Winston, D., Maimes, S., Adaptogens: Herbs For Strength, Stamina, and Stress Relief, 2007, pp. 226-7
16. Cataldo, A., Gasbarro, V., et al, Effectiveness of the Combination of Alpha Tocopherol, Rutin, Melilotus, and Centella asiatica in The Treatment of Patients With Chronic Venous Insufficiency, Minerva Cardioangiol, 2001, Apr;49(2):159-63

Centella Asiatica – Pennywort - Gotu Kola

Synonyms: Hydrocotyle asiatica L.

Vernacular Names:

Malaysia: Pegaga
English: Pennywort, Indian pennywort, centella, gotu kola
India: Mandukaparni

General Information:

An evergreen perennial creeping herb commonly found in moist places. Used in salads and cooked as a vegetable.

A trailing herb with rounded simple leaves, slender stems and inconspicuous flowers formed in short clusters.

Plant Part Used: Leaves

Chemical Constituents:

Active principles are pentacyclic tirterpenes, namely, asiatic acid, asiaticoside, madecassic acid and madecassoside. Triterpenes with healing potential were isolated, namely, terminolic acid, asiaticoside-B while sceffoleoside A and saponins (centellasaponins B,C and D) with four ursane- and oleanane-type triterpene oligoglycosides were isolated from Centella asiatica grown in Sri Lanka. Other minor saponins are centelloside, brahmoside and brahminoside. The essential oil from Centella asiatica grown in South Africa contains 11 monoterpenoid hydrocarbons (20.2%), 9 oxygenated monoterpenoids (5.46%), 14 sesquiterpenoid hydrocarbons (68.8%), 5 oxygenated sesquiterpenoid (3.9%) and 1 sulphide sesquiterpenoid (0.76%). The predominant constitutes were b-caryophyllene (19.08%), bicyclogermacrene (11.22%), germacrene B (6.29%) and myrcene (6.55%). Other reports included trans-b-farnesene and germacrene D as prominent constituents of the essential oil.

Traditional Use:

Centella has been used as a wound-healing agent and a constituent of a brain tonic for the mentally challenged. It has also been used traditionally and in Ayurvedic medicine for central nervous system ailments including failing memory, insomnia, depression, stress and epilepsy. In South Africa it was used to treat leprosy, wounds, cancer, fever and syphilis, while in Europe, the extract has been used for many years to treat wounds. The plant is also used to treat acne and allergies. and as a psycho-physical regenerator and blood purifier. In China, Centella asiatica has been used for a long time to treat dermal wounds and leprosy patients. Other folk medicine uses are for abscesses, headache, asthma, bronchitis, catarrh, convulsions, dysentery, eczema, gonorrhea, hypertension, jaundice, pleuritis, rheumatism, spasms, tuberculosis, ulcers, urethritis and as a diuretic. In Kenya, the leaves were applied after of the skull amongst the Kisii tribe to improve healing.

Pre-Clinical Data

Pharmacology

Wound-healing activity

A formulation which contained Centella asiatica plant extract induced proliferation of granulation tissue and increased tensile strength when applied locally on wounds in rats and decreased the area of skin necrosis caused by burns . The plant purportedly reduced scarring and stimulated skin growth by acting on the production of collagen fibres by fibroblasts and resulted in a decrease in the inflammatory reaction and myofibroblast production. Asiaticoside, a major constituent of the herb, promoted wound-healing by reducing lipid peroxide levels in wounds while it increased enzymatic (superoxide dismutase, catalase, glutathione peroxidase) and non-enzymatic (vitamin E and ascorbic acid) antioxidant levels.

Antibacterial activity

The essential oil of centella showed a broad spectrum of antibacterial activities against Gram-positive (Bacillus subtilis, Staphylococcus aureus) and Gram-negative (Escherichia coli, Pseudomonas aeruginosa, Shigella sonnei) organisms. Activity against Gram-positive bacteria was greater than against Gram-negatives.
Germacrene compounds in the essential oil are known to be strong antimicrobial and anti-tumour agents.

Anti-tumour activity

Methanolic extract of Centella asiatica (100 µg/mol) showed 100% cytotoxicity to two tumour cell lines (Dalton's ascites tumour cells and Ehrlich ascites tumour cells) after a 3 hour incubation at 37^{o}C . The acetone fraction of Centella asiatica extract, a partially purified fraction (3.5 & 8 µg/mL), inhibited the proliferation of mouse lung fibroblast cells after exposure for 6-7 days at 37^{o}C. Both the crude extract and the acetone fraction of Centella asiatica significantly reduced the development of murine solid tumors when administered simultaneously with tumour transplantations or given 10 days prior to tumour transplantation. The latter finding suggested a mechanism which involves stimulation of the immune system. The crude extract also significantly reduced ascites tumour growth and increased the life span of tumour bearing mice. The mechanism may involve inhibition of DNA synthesis.

Neuropharmacology and antioxidant activity

The hydroalcoholic extract of Centella asiatica leaves possesses potential anticonvulsant, antioxidant and central nervous system (CNS) depressant actions. The extract (100 mg/kg) showed 50% protection while a higher dose (200 mg/kg) completely protected against pentylenetetrazol-induced convulsions in rats. The extract also protected against convulsions induced by an increase in current electroshock and by strychnine. Spontaneous motor activity was reduced while diazepam withdrawal-induced autonomic hyperactivity was potentiated as was the pentobarbitone sleeping time in mice. The extract (100-150 mg/kg) significantly reduced the normal body temperature of mice, while in brain homogenates it (1.3-40 mg/mL) reduced the formation of lipid peroxidation products.

Aqueous extract of Centella asiatica (100-300 mg/kg) was able to prevent cognitive deficits in intracerebroventricular streptozotocin-induced cognitive impairment in rats after 14 and 21 days indicating improved acquisition and retention of memory. These doses of Centella asiatica did not affect spontaneous locomotor activity in these rats thus excluding the possibility that the CNS depressant/stimulant activity of the herb had contributed to the changes in the passive avoidance and elevated plus maze tests. After 21 days of treatment in the same groups of rats, the extract (200 & 300 mg/kg) significantly reduced brain malondialdehyde levels and increased brain glutathione levels without affecting brain superoxide dismutase activity while brain catalase levels were increased by the highest dose of the extract (300 mg/kg).

Centella asiatica extract (0.3%) and powder (5%) reduced oxidative stress when given to H_2O_2-exposed rats for 25 weeks. There was a reduction in erythrocyte malondialdehyde levels as well as a decrease in the superoxide dismutase activity of these rats given Centella asiatica although the catalase activities were higher than in the H_2O_2-fed rats.

Other effects

Asiatic acid and its derivatives protected cultured neurons from glutamate-induced excitotoxicity.

Oral administration of Centella asiatica water extract and asiaticoside reduced the size of acetic acid-induced gastric ulcers in rats at 3 and 7 days in a dose-dependent manner with concomitant attenuation of myeloperoxidase activity in the ulcer tissues. Cell proliferation and angiogenesis were promoted, the expression of basic fibroblast growth factor in ulcer tissues in rats treated with extract or compound were upregulated. The aqueous extract of Centella asiatica (0.05g, 0.25 and 0.50 g/kg) significantly inhibited ethanol-induced gastric lesions and decreased mucosal myeloperoxidase in a dose dependent manner when the extract was given before ethanol administration. These results suggest that Centella asiatica protected the gastric mucosa by improving the integrity of the mucosal lining while reduction of myeloperoxidase and gastric lesions could be due to a decrease in the recruitment of neutrophils by Centella asiatica or to its free radical scavenging activity.

Toxicities:

Aqueous extract of Centella asiatica (5 mg/plate)lack cytotoxicity and mutagenicity on Salmonella typhimurium TA98 or TA100 with or without S9 mixture (5). Acetone fraction of Centella asiatica extract did not induce cytotoxicity in normal human lymphocytes at a 50 µg/mL. Oral administration the crude extract and the acetone fraction of Centella asiatica to normal and tumour bearing mice at maximal concentrations of 500 mg/mouse did not produce any toxic symptoms while the body weights of the mice were increased. Asiaticoside, a major triterpenic acid in Centella asiatica was thought to be allergenic although in guinea pigs; centella raw extract and its triterpenic constitutents' asiaticoside, asiatic acid and madecassic acid were considered to be weak sensitizers.

Clinical Data

CLINICAL TRIALS

An herbal medicament containing Centella asiatica and Punica granatum extracts in the form of biodegradable chips for sub-gingival application elicited significant improvements of pocket depth and attachment level in adult periodontitis patients.

Slimming liposomes containing esculoside, Centella asiatica extracts, caffeine and L-carnitine potentially could provide a slimming effect in human volunteers. The slimming liposomes induced a dramatic increase in cyclic adenosine monophosphate content in human adipocytes, with a subsequent rise in the nonesterified fatty acids content of the incubation medium in in-vitro experiments. The slimming liposomes antagonized a_2-adrenergic receptors which should subsequently lead to down-regulation of lipolysis.

Thirty patients with diabetic microangiopathy treated for six months with a total triterpenic fraction of Centella asiatica (60 mg twice daily) led to significant improvement in microcirculation, decreased capillary permeability and also protected against microcirculation deterioration in these patients.

In a double-blind placebo-controlled study, a single 12g dose of Centella asiatica (encapsulated crude powder herb) was administered to 20 healthy subjects and 20 controls given the placebo. Compared with the placebo-treated group, Centella asiatica significantly attenuated the peak acoustic startle response amplitude at 30 and 60 minutes after treatment without having any significant effect on self-rated mood, heart rate or blood pressure. This early findings suggest that the herb may have anxiolytic activity in humans.

Adverse Effects in Human:

Hepatotoxicity was seen with Centella asiatica ingestion while contact dermatitis was presented after topical administration of the herb or its' constituent.

Used in Certain Conditions:

Pregnancy / Breastfeeding

No information

Age Limitations

Neonates / Adolescents
No information

Geriatrics
No information

Chronic Disease Conditions
No information

Interactions with Drugs

Can be used with most prescribed drugs

Ill-Effects:

None known

TRIALS:

Ongoing with traditional healers and institutions

CASE REPORTS

Three women aged 61, 52 and 49 years old developed jaundice after taking Centella asiatica for 30, 20 and 60 days, respectively. heir respective pathological diagnoses were granulomatous hepatitis with marked necrosis and apoptosis, chronic hepatitis with cirrhotic transformation and intense necroinflammatory activity, and granulomatous hepatitis. All patients improved with discontinuation of Centella asiatica although damage recurred in the first patient who again took the herb for two weeks. The second woman reported a similar history a year before accompanied by elevated hepatic enzymes and a negative viral serology when she took the herb for six months. At that time, the jaundice disappeared one month after stopping the herb.

The damage produced by Centella asiatica was attributed to the triterpene active principles present in the herb which may have induced apoptosis and cell death through an alteration of cell membranes. An immune-mediated mechanism was postulated to underlie the damage as autoantibodies and granulomas were present .

A 38-year old man developed eczematous response on his ears to a preparation which contained Centella asiatica extract . He showed positive patch tests with GEIDC standard series and Centella asiatica extract. An 18-year old woman presented with a pruritic eczematous eruption on an interdigital joint and face following the topical application of an ointment that contained Centella asiatica extract. She showed positive patch tests to the Centella asiatica ointment preparation (applied as is) and to a titrated extract of Centella asiatica. A 42-year old woman with no atopic history developed severe dermatitis of the legs after application of a cream that contained Centella asiatica extract. Patch testing with Centella asiatica extract showed positive in this woman. Four women aged 33, 23, 26 and 18 years old developed contact dermatitis following the application of an ointment which contained Centella asiatica extract for between 4 to several weeks. All four women showed positive patch tests with the ointment.

References

1. Oyedeji OA and Afolayan AJ. Chemical Composition and Antibacterial Activity of the Essential Oil of Centella asiatica Growing in South Africa. Pharmaceutical Biology. 2005; 43 (3) : 249–252, 2005
2. Inamdar PK, Yeole RD, Ghogare AB and de Souza NJ. Determination of biologically active constituents in Centella asiatica. Journal of Chromatography A. 1996; 742: 127-130
3. Jorge OA and Jorge AD. Hepatotoxicity associated with the ingestion of Centella asiatica. Revista Espanola De Enfermedades Digestivas. 2005; 97(2): 115-124
4. Ganachari MS, Babu SVV and Katare SS. Neuropharmacology of an extract derived from Centella asiatica. Pharmaceutical Biology. 2004; 42(3): 246-252
5. Yen GC, Chen HY and Peng HH. Evaluation of the cytotoxicity, mutagenicity and antimutagenicity of emerging edible plants. Food and Chemical Toxicology . 2001; 39: 1045-1053
6. View Abstract: Hausen BM. Centella asiatica (Indian Pennywort), an Effective Therapeutic But a Weak Sensitizer. Contact Dermatitis. 1993;29(4):175-79.
7. Vogel HG, De Souza NJ and D'sa A. Effects of terpenoids isolated from Centella asiatica of granuloma tissue. Acta Therapeutica . 1990; 16: 285-298
8. Ortiz KJ and Yiannias JA. Contact dermatitis to cosmetics, fragrances and botanicals . Dermatologi Therapy. 2004; 17: 264-271
9. Kumar MHV and Gupta YK. Effect of Centella asiatica on cognition and oxidative stress in an intracerebroventricular streptozotocin model of Alzheimer's disease in rats . Clinical and Experimental Pharmacology and Physiology. 2003; 30: 336-342
10. Babu TD, Kuttan G and Padikkala J. Cytotoxic and anti-tumour properties of certain taxa of Umbelliferae with special reference to Centella asiatica (L) Urban . Journal of Ethnopharmacology . 1995; 48: 53-57

View Abstract: Russell IJ, et al. Treatment of fibromyalgia syndrome with Super Malic: a randomized, double blind, placebo controlled, cross over pilot study. J Rheumatol. May1995;22(5):953-8.

1. Wolfe F. Fibromyalgia: on diagnosis and certainty. J Musculoskeletal Pain. 1993;1(3,4):17.
2. Cheng CL, Guo JS, Luk J and Koo MW. The healing effects of Centella extract and asiaticoside on acetic acid induced gastric ulcers in rats. Life Sci. 2004; 74(18): 2237-49

View Abstract: Cheng CL, Koo MW. Effects of Centella asiatica on Ethanol Induced Gastric

1. Mucosal Lesions in Rats. Life Sci. Oct2000;67(21):2647-53.
2. Sastravaha G, Yotnuengnit P, Booncong P, Sangtherapitikul P. Adjunctive periodontal treatment with Centella asiatica and Punica granatum extracts. A preliminary study . J Int Acad Periodontol. 2003; 5(4): 106-15

3. Tholon L, Neliat G, Chesne C, Saboureau D, Perrier E, Branka JE. An in vitro, ex vivo, and in vivo demonstration of the lipolytic effect of slimming liposomes: An unexpected alpha(2)-adrenergic antagonism . J Cosmet Sci. 2002; 53(4): 209-18
4. Cesarone MR, Incandela L, De Sanctis MT, Belcaro G, Bavera P, Bucci M, Ippolito E. Evaluation of treatment of diabetic microangiopathy with total triterpenic fraction of Centella asiatica: a clinical prospective randomized trial with a microcirculatory model. Angiology. 2001; 52(2): S49-54
5. Bradwejn J, Zhou Y, Koszycki D, Shlik, J. . A Double-Blind, Placebo-Controlled Study on the Effects of Gotu Kola (Centella asiatica) on Acoustic Startle Response in Healthy Subjects. Journal of Clinical Psychopharmacology, . 2000; 20(6): 680-684
6. Eun HC and Lee AY. Contact dermatitis due to madecassol. Contact Dematitis. 1985; 13(5): 310-313
7. Izu R, Aguirre A, Gil N and Diaz-Perez JL. Allergic contact dermatitis from a cream containing Centella asiatica extract . Contact Dermatitis. 1992; 26: 192-193
8. Bilbao I, Agiurre A, Zabala R, Gonzalez R, Raton J and Diaz Perez JL. Allergic contact dermatitis from butoxyethyl nicotinic acid and Centella asiatica extract. Contact Dermatitis. 1995; 33: 435-436

Gotu Kola

Pennywort, Indian Pennywort, Indian Ginseng, Horse-hoof *Grass, Gotu Cola, Gota Kola Centella asiatic*

syn. Hydrocotyle asiatica F. Apiaceae

Description

Perennial, creeping, ground cover, which roots at the nodes, as it spreads over the ground. Leaves, from 2-4cm wide, and kidney-shaped, with a v-shaped slot, where the leaf joins the stem: often with serrated margins, which gives them the appearance of miniature fans. Size of leaves can depend on climate, season, soil structure, fertility and growing position: whether in sun or shade.

Gotu Kola

Small-sized leaves usually hug the ground and have a short petiole stem; however, large leaves can have a petiole up to 20cm long. When plants are grown in the shade, they tend to have large leaves and very long petioles. This petiole stem can have a pink/purple tinge. Pink flowers 5mm across, usually set 2 to 4, side by side, as an umbel, developing from the stem nodes. Flowers are so small (and often hidden underneath leaves) that, generally, the flower is not noticed at all. It is only under a microscope that the flower's beauty is seen. Although gotu kola belongs to the umbel family of plants, now classified as Apiaceae, there is very little resemblance to other umbel plants: like parsley, dill, fennel and coriander. Seeds, of gotu kola, form in flat, oval capsules, usually containing two tiny, brown, kidney-shaped seeds.

Sometimes, gotu kola is mistaken for Swamp Pennywort (Centella cordifolia); as its name suggests, it does like to grow in damp places. The leaves of this species can be slightly longer than broad, with sinuate or faintly crenate margins and minute, purple flowers.

There are numerous other 'look alike' plants, that people have often brought to the herb farm to have identified, such as Kidney Weed (Dichondra repens), a herb with creeping roots, petiolled kidney-shaped leaves with scalloped margins; a traditional Chinese herb for fevers, dysentery, jaundice and to remove excess fluid from the body. Native Violet (Viola hederacea) (see p 342) similar size and shaped leaf, to gotu kola, with scallops, but both ends of the leaf tend to overlap, near the stem, and it bears lavender and white non-fragrant violets. Coast Pennywort (Hydrocotyle bonariensis) which has a creeping root; the leaf-stem is attached to the centre of the leaf with broad, scalloped margins. It is believed to have been introduced into Australia, from South America, where it has had traditional use for urinary disorders and as an anti-inflammatory. Alehoof (Glecoma hederacea) a hardy, creeping, ground cover, with dainty, kidney-shaped leaves and crenate margins: these can be used as salad greens, medicinally for colds and as a liver tonic (see p 23). Other plants that have a visual resemblance to gotu kola are several Ranunculus species, which have similar leaf formation; and other Hydrocotyle species. Before using gotu kola, it is important to make sure that it is the correct plant. I remember, several years ago, when a lady told me she had been using the native violet for some time, thinking it was gotu kola. She said "No wonder I was not getting rid of my arthritic pain".

Constituents: volatile oil containing vallerin, camphor, cineole, n-dodecane, terpene acetate, tran-B farnesene, germacrene-D, B-caryophyllene, p-cymol, a-pinene, methanol, allyl mustard oil; flavonoids, kaempferol, resin, alkaloid hydrocotyline; asiatic, betulic, brahmic, centellinic, isobrahmic, and madecassic acid; quercetin, tannin, sugar, asiaticoside, oxyasiaticoside, brahmoside, braminoside, centelloside, madecassoside, thunkuniside, bitters, sterols, pectin, B-sitosterol.

Vitamins:
A, B, C, D

Minerals:
Calcium, chromium, cobalt, magnesium, manganese, phosphorus, sodium, potassium, selenium, silica, zinc.

Actions:
Antipyretic, diuretic, antibacterial, antifungal, anti-inflammatory, sedative, antispasmodic, antioxidant, adaptogen, tonic, digestive, vulnerary, alterative, antiviral, antibiotic, nervine, rejuvenate, blood purifier, adrenal strengthener

Medicinal Uses:
Gotu kola has been known for centuries, valued for treating leprosy and tuberculosis; relieving the pain of rheumatism and arthritis; to increase brain capacity; and for longevity, often being called, the elixir of life. A legendary saying, in reference to gotu kola was: '2 leaves a day, keeps old age away'. In Sinhalese culture, they valued the herb to strengthen and revitalize worn out bodies and brains; eating 2-3 leaves a day to bring about a gradual return to health and strength, provided that the body is exposed to the sun, for a time, each day. In Ancient China, the herb was a principal ingredient in an elixir called 'fo ti tieng', a mixture that was called the fountain of youth. Many herbalists have called gotu kola: the finest of all herb tonics. It appears, they say, to have no equal in the treatment of general debility and decline. Digestion is strengthened (no doubt aided by the bitter properties) and food better utilized, with the process of overall metabolism, increased. Gotu kola has been called 'a pharmacy in one herb', offering impressive benefits. In India, gotu kola is a traditional remedy for skin conditions, wounds and bruises. With controlled tests, in which an extract of gotu kola was applied, to 20 people, suffering with slow healing wounds: 64% of the wounds healed completely and 16% improved considerably. At Sydney University, research on wound healing is being carried out, following invitro studies on the herb. It is one of the most important, rejuvenating herbs in Ayurvedic medicine, particularly valued for: revitalising nerve and brain cells, promoting calmness and clarity, helping poor memory and lack of concentration, increasing meditation ability and to help balance the left and right hemispheres of the brain. Valued as a brain food, for improving intelligence and reflexes, it has been a herb students have used for: renewing mental alertness, clarity, and energy levels, without the 'jitteriness' some people may experience with coffee. It can be used throughout life. Gotu kola contains neither caffeine, nor theobromine.

Gotu kola has always been known as a remarkable herb with a multitude of uses, and of special benefit for chronic, degenerative diseases. As one of its common names implies, 'Indian Ginseng', it is similar to ginseng in its actions. In fact, some herbalists regard gotu kola as highly as ginseng, and more affordable: besides, it is easy to grow. Note, gotu kola is not Withania somnifera, which also has the common name of Indian ginseng (see p 141). I always find it most interesting, when I dig a plant, that may be 3 to 5 years or more of age, that the root has a resemblance to ginseng root, and to the torso of the human body. This indicates a doctrine of signatures significance, of 'like cures like', a herb which benefits so many ailments of the body.

Throughout history, gotu kola has been used for a wide range of health problems, which have included:

GENERAL USES AND RELATED HEALTH SYMPTOMS

ADD, peptic ulcers, auto-immune, diseases, stress, gynaecological, disorders, asthma, low thyroid, function, neuritits, male tonic, menopausal, problems, eczema, scrofula, venereal diseases, cirrhosis, diarrhea, high blood pressure, laryngitis, stomach ache, muscular atrophy, fatigue, sore throat, schizophrenia, thrombosis, brain tonic, respiratory ailments, influenza, blood purifier, food poisoning, Vaginitis, diabetes, baldness, wounds, age spots, nervous break down, poor circulation, insomnia, retinal detachment, dysentery, liver problems, to increase energy, epilepsy, pleurisy, premenstrual pain, hair loss, blood disorders, mycosis fungoides, dementia, infections, periodontal disease, colds, coughing blood, vomiting blood, senility, hemorrhoids, prickly heat rash, measles,

Poor appetite, atherosclerosis, depression, skin ulcers, urinary tract infection, candida, tuberculosis, mental retardation, sexual debility, elephantitis, fibrocystic breast disease, gastric, hypochondria, ankylosing spondylitis, skin ulcers, failing eyesight, abscesses, mouth ulcers, for impotence, stomach upsets, bruises, scleroderma, herpes, cramps, exam tonic, lupus, bowel disorders, fluid retention, hepatitis, swollen glands,

intestinal worms, convulsions, surgical wounds, dermatitis, joint mobility, bowel disorders, anemia, hardening of, arteries, tingling in legs, to stimulate the liver,, bladder, kidneys, stimulate central, nervous system.

Many people have been able to correct high blood pressure, with consistent use of the herb. Research from the U.S. National Institute on Ageing, showed that high blood pressure can lead to atrophy and shrinkage of the brain. The study also showed, that: years of high blood pressure raises the amount of a liquid, known as cerebrospinal fluid, inside the skull, and lowers the amount of white matter. Who wants less white matter?

Gotu kola's constituents have a strong blood purifying action, and help to lower serum cholesterol levels; this could be mainly due to the action of Beta-sitosterol. The plant saponins help the function of the immune system, by assisting in breaking down the walls of diseased cells, making microbes easier to kill. It seems likely, that it is this same action that has been seen in research, which works to kill the leprosy bacteria by dissolving the waxy, protective substance around the bacteria..

Arthritis has been recognised as the single, largest and identified cause of disability and handicap in Australia, now affecting over 2.6 million people. It is an inflammatory condition of the joints (which can be of the fingers, wrists, elbows, shoulders, hips, knees, spine and toes) with symptoms of pain, swelling, stiffness and deformity. It may appear suddenly or come on gradually, with a toothache-like pain or sharp burning or grinding pain. There are many different forms arthritis can take. Osteoarthritis, a degenerative joint disease is related to the wear and tear of ageing, and involves the deterioration of the cartilage, at the end of the bones. The once-smooth cartilage becomes rough, resulting in friction; tendons, ligaments and muscles, holding the joints together, become weaker, and there is severe pain, stiffness and deformity.

Rheumatoid arthritis, an auto-immune disease, is inflammation affecting the synovial membranes. Cartilage and tissue, surrounding the lubricating fluid in the joints, can be destroyed. The body replaces this damaged tissue with scar tissue, causing the spaces between the joints to become narrow, to develop folds and to fuse together. There is stiffness, swelling, anemia, weight loss, and often crippling pain, with loss of mobility to carry out normal activity, which means the quality of life becomes greatly reduced. Gout can be classed as another form of arthritis, which attacks the smaller joints of the feet and hands, depositing crystallised uric acid salts in the joints causing swelling, redness, a sensation of heat and extreme pain. People, who wished to be free of these painful, debilitating diseases, have taken the herb. After a period of weeks to months, they usually experience a lessening of pain and disability: some report a complete cure.

Camptotheca acuminata

KINGDOM	*PLANTAE*
Division	*Magnoliophyta*
Class	*Magnoliopsida*
Order	*Cornales*
Family	*Cornaceae (Nyssaceae)*
Genus	*Camptotheca Decne*
Species	*Camptotheca Acuminata Camptotheca Lowryana*
Synonym	*Xi Shu – happy tree*

Description and Natural History of Camptotheca

Camptotheca acuminata is a member of the family Nyssaceae (tupelo family) and is native only to China and Tibet, where it is known as xi shu ("happy tree"). Its primary anti-cancer ingredient is a quinoline **alkaloid** called camptothecin, which in turn has been modified to create a host of other anti-cancer drugs, including irinotecan, topotecan, 9-aminocamptothecin, and CPT-11. Camptothecin and these analogs are being investigated to treat a wide variety of cancers, but the compounds are quite toxic, and only topotecan (Hycamtin®) and irinotecan HCl (Camptosar®) have met with FDA approval; Hycamtin® has been approved for ovarian cancer therapy, and Camptosar® is approved for metastatic colorectal cancers.

Western researchers (Dr. Monroe E. Wall of the USDA and Jonathon Hartwell of the National Cancer Institute) first discovered Camptotheca's anticancer properties in 1958. In 1966, after Wall joined the Research Triangle Institute, he and other researchers isolated camptothecin. A camptothecin analog (camptothecin sodium) was tested on gastrointestinal cancer patients in the early 70's, but the clinical trials were discontinued because the patients suffered severe side effects. Researchers continued to investigate camptothecin to develop drugs with fewer side effects, and their work began to bear fruit in the late 80's. In China, camptothecin has been used to treat **leukemia** and cancers (**carcinomas**) of the stomach and liver.

Camptotheca Acuminata - Chinese Cancer Tree

Potentiation of cell killing by low-dose-rate radiation by Camptothecin is related to an increase in the level of DNA Double-strand breaks.

Owen DG, McNamee JP, Raaphorst GP, Ng CE

Radiat Res 2002; 157:149-57.

CLINICAL STUDY

We investigated the ability of camptothecin to potentiate cell killing by low-dose-rate irradiation and whether this potentiation was associated with an increase in the level of residual DNA double-strand breaks (DSBs). Human melanoma (Sk-Mel-3) cells, grown to the confluent phase, were treated with low-dose-rate radiation (0.88 cGy/min) alone, camptothecin alone, or concurrent camptothecin and low-dose-rate radiation. Cell survival was determined using a clonogenic assay. The interactions between camptothecin and low-dose-rate radiation were analyzed further using isobolograms. DNA DSBs were determined using the neutral comet assay. We found that 10 and 25 microM camptothecin, but not 1 microM, camptothecin potentiated cell killing significantly relative to that seen with low-dose-rate radiation alone. Unexpectedly, the potentiation of the effects of low-dose-rate radiation by camptothecin was accompanied by large increases in the alpha parameter of the linear-quadratic fit rather than in the beta parameter. This suggests a modification of intrinsic radiosensitivity rather than of repair of sublethal damage. From isobologram analysis, low-dose-rate radiation interacted either

additively or supra-additively with 25 or 10 microM camptothecin. Conversely, the interaction of low-dose-rate radiation with 1 microM camptothecin was subadditive. Finally, there were strong correlations (correlation coefficients >0.9) between surviving fraction and either comet tail length or comet tail moment after concurrent treatment with 25 microM camptothecin and low-dose-rate radiation. This suggests that the level of residual DNA DSBs was a good indicator of cell killing after treatment with low-dose-rate radiation plus 25 microM camptothecin.

MeSH

Camptothecin; Cell Survival; Comet Assay; DNA; DNA Damage; DNA, Neoplasm; Dose-Response Relationship, Radiation; Gamma Rays; Humans; Melanoma; Radiation Tolerance; Radiation-Sensitizing Agents; Tumor Cells, Cultured; Tumor Stem Cell Assay

CAS Registry Number (Substance Name)

0 (DNA, Neoplasm), 0 (Radiation-Sensitizing Agents), 7689-03-4 (Camptothecin), 9007-49-2 (DNA)

Author Address

Ottawa Regional Cancer Centre, 503 Smyth Road, Ottawa, Ontario, K1H 1C4, Canada.

MEDLINE record details

Publication Type:	Comparative Study; Journal Article; Research Support, Non-U.S. Gov't
ISSN:	0033-7587
Country:	United States
Language:	eng
Date of Entry:	20020211
Unique Identifier:	11835678
Journal Subset:	I M; S

Description and Natural History of Camptotheca

Camptotheca acuminata is a member of the family Nyssaceae (tupelo family) and is native only to China and Tibet, where it is known as xi shu ("happy tree"). Its primary anti-cancer ingredient is a quinoline alkaloid called camptothecin, which in turn has been modified to create a host of other anti-cancer drugs, including irinotecan, topotecan, 9-aminocamptothecin, and CPT-11. Camptothecin and these analogs are being investigated to treat a wide variety of cancers, but the compounds are quite toxic, and only topotecan (Hycamtin®) and irinotecan HCl (Camptosar®) have met with FDA approval; Hycamtin® has been approved for ovarian cancer theray, and Camptosar® is approved for metastatic colorectal cancers.

Western researchers (Dr. Monroe E. Wall of the USDA and Jonathon Hartwell of the National Cancer Institute) first discovered Camptotheca's anticancer properties in 1958. In 1966, after Wall joined the Research Triangle Institute, he and other researchers isolated camptothecin. A camptothecin analog (camptothecin sodium) was tested on gastrointestinal cancer patients in the early 70's, but the clinical trials were discontinued because the patients suffered severe side effects. Researchers continued to investigate camptothecin to develop drugs with fewer side effects, and their work began to bear fruit in the late 80's. In China, camptothecin has been used to treat leukemia and cancers (carcinomas) of the stomach and liver.

Cnicus Benedictus

KINGDOM	*PLANTAE*
Division	*Magnoliophyta*
Class	*Magnoliopsida*
Order	*Asterales*
Family	*Asteraceae*
Genus	*Cnicus*
Species	*C. benedictus*
Binomial Name	*Cnicus benedicutus*
Synonym	*Blessed Thistle*

Cnicus benedictus - (Blessed Thistle)

The sole species in the genus Cnicus, is a thistle-like plant in the family Asteraceae, native to the Mediterranean region, from Portugal north to southern France and east to Iran. It is also sometimes called Cursed Thistle.

It is an annual plant growing to 60 cm tall, with leathery, hairy leaves up to 30 cm long and 8 cm broad, with small spines on the margins. The flowers are yellow, produced in a dense flower head (capitulum) 3-4 cm diameter, surrounded by numerous spiny basal bracts.

The related genus Notobasis is included in Cnicus by some botanists; it differs in slender, much spinier leaves, and purple flowers.

Medical uses

It has sometimes been used as an herb to promote lactation. The crude drug contains about 0.2% cnicin.

It is a component in Bitters formulas, which are used to treat digestive issues.

Edibility

These thistles are not considered edible, unlike Cirsium, Arctium and Onopordum species; the leaves are considered unpalatable if not bitter.

Cnicus Benedictus Holy Thistle

Blessed Thistle

Scientific Name(s): *Cnicus benedictus* Family: L. Asteraceae (daisies)
Common Name(s): Holy thistle, St. Benedict's thistle, cardin, spotted thistle, carduus benedictus

CLINICAL OVERVIEW

Uses of Blessed Thistle

Blessed thistle is used to stimulate secretion of gastric juices and saliva, to increase appetite and facilitate digestion, and to stimulate the flow of bile. It has been used as a minor component of the alternative cancer remedy Flor-Essence and has antibacterial and antifungal activity. Other pharmacologic activities for blessed thistle include blockade of gonadotropin and anti-inflammatory properties. However, there are no reported human clinical trials for any of these uses.

Blessed Thistle Dosing

There are no clinical studies to justify dosing of blessed thistle. Traditionally, 4 to 6 g of blessed thistle is used daily.

Contraindications

Because of its irritating effect, blessed thistle is contraindicated in gastric ulcer or in inflammatory bowel conditions such as Crohns disease.

Pregnancy/Lactation

Blessed thistle should not be used in pregnancy. No evidence exists to support the efficacy of its common use to promote lactation.

Blessed Thistle Interactions

None well documented.

Blessed Thistle Adverse Reactions

People sensitive to the sesquiterpene lactones of other asteraceous plants should use blessed thistle with caution. Blessed thistle extract was strongly sensitizing in a study of 12 species in the family Asteraceae.

Toxicology

At high single doses (5 to 6 g) blessed thistle is known to be emetic.

Botany

Blessed thistle is native to North Africa, southern Europe, and western Asia. It grows most often in stony, uncultivated places. It is an annual, growing about 0.7 m in height, with pale yellow, prickly flowers. The whole plant is covered with down.

History

The plant was widely cultivated in the Middle Ages in Europe. Its medicinal use was mentioned by Shakespeare in his play Much Ado About Nothing and was prominent in many of the herbals of the period. 1 It was thought to be useful in treating plague; however, its main uses were for digestive complaints, gout, fever, and headache. 2 Blessed thistle also was recommended as an emmenagogue, galactogogue, and abortifacient. The dried leaves, stems, and flowers are used medicinally. It is used in flavoring Benedictine liqueur and has GRAS (generally recognized as safe) status for alcoholic beverage use only. Blessed thistle has been used as a secondary component of the polyherbal alternative cancer treatment Flor-Essence (Flora Manufacturing and Distributing, Inc.). It is available as a single herb and in homeopathic preparations. Blessed thistle was approved by the German Commission E for treatment of dyspepsia and loss of appetite.

Chemistry

The most prominent constituent of blessed thistle is the bitter sesquiterpene lactone ester cnicin. 3 Other germacrane sesquiterpenes include salonitenolide and artemisiifolin. 4 The bitter lignans arctiin, arctigenin, and nortracheloside are also present. 5 Two C13 polyacetylenes have been isolated as well. 6 A patent discloses antifungal proteins active against plant pathogenic fungi, isolated from the seed of blessed thistle. 7

Blessed Thistle Uses and Pharmacology

Bitter principles such as cnicin stimulate secretion of gastric juices and saliva, thereby increasing appetite and facilitating digestion. They are also capable of stimulating the flow of bile.

Blessed thistle is a minor component of the alternative cancer remedy Flor-Essence , one of 8 herbs in the formulation. 8 In this context, cnicin is cytotoxic to leukemia cells, while sesquitepenes, lacking the ester moiety, had lesser activity. The same structural requirements apply to antibacterial activity. Similarly, cnicin was the most active sesquiterpene against a variety of fungi in another study.

Other pharmacologic activity found for blessed thistle include blockade of gonadotropin. Cnicin has been shown to have anti-inflammatory properties in a rat paw edema test.

There are no reported human clinical trials for any of these indications.

Dosage

There are no clinical studies to justify dosing of blessed thistle. Traditionally, 4 to 6 g of blessed thistle is used daily.

Pregnancy/Lactation

Blessed thistle should not be used in pregnancy. No evidence exists to support the efficacy of its common use to promote lactation.

Interactions

None documented.

Adverse Reactions

People sensitive to the sesquiterpene lactones of other asteraceous plants should use blessed thistle with caution. Blessed thistle extract was found to be strongly sensitizing in a study of 12 species in the family Asteraceae.

Toxicology

Cnicin is strongly irritating upon intraperitoneal injection. 14 Because of this irritating effect, blessed thistle is contraindicated in gastric ulcer or in inflammatory bowel conditions such as Crohns disease. At high doses (5 to 6 g), blessed thistle is known to be emetic. The oral median lethal dose for cnicin in mice was 1.6 to 3.2 mmol/kg. 14

Bibliography

1. Shakespeare W . Much Ado about Nothing . 3.4. London: Oxford University Press; 1914.
2. Grieve MA . Modern Herbal . London: Jonathan Cape, Ltd.; 1931.
3. Vanhaelen-Fastré R . Cnicus benedictus . Separation of antimicrobial constituents . Plantes Medicinales et Phytotherapie . 1968;2:294.
4. Vanhaelen-Fastré R , Vanhaelen M . Presence of salonitenolide in Cnicus benedictus [in French]. Planta Med . 1974;26:375-379.
5. Vanhaelen M , Vanhaelen-Fastré R . Lactonic lignans from Cnicus benedictus . Phytochemistry . 1975;14:2709.
6. Vanhaelen-Fastré R . Polyacetylene compounds from Cnicus benedictus. Planta Med . 1974;25:47-59.
7. Broekaert WF, et al . A family of fungicidal and bactericidal proteins from plant seeds. WO Patent No. 9305153.
8. Tamayo C , Richardson MA , Diamond S , Skoda I . The chemistry and biological activity of herbs used in Flor-Essence herbal tonic and Essiac . Phytother Res . 2000;14:1-14.
9. Vanhaelen-Fastré R . Antibiotic and cytotoxic activity of cnicin isolated from Cnicus benedictus [in French]. Pharm Belg . 1972;27:683-688.
10. Vanhaelen-Fastré R , Vanhaelen M . Antibiotic and cytotoxic activity of cnicin and of its hydrolysis products. Chemical structure - biological activity relationship . Planta Med . 1976;29:179-189.
11. Bruno M , Rosselli S , Maggio A , Raccuglia RA , Napolitano F , Senatore F . Antibacterial evaluation of cnicin and some natural and semisynthetic analogues . Planta Med . 2003;69:277-281.
12. Panagouleas C , Skaltsa H , Lazari D , Skaltsounis AL , Sokovic M . Antifungal activity of secondary metabolites of Centaurea raphanina ssp. mixta, growing wild in Greece . Pharm Bio . 2003;41:266.
13. Graham RC , Noble RI . Comparison of in vitro activity of various species of Lithospermum and other plants to inactivate gonadotropin . Endocrinology . 1955;56:239-247.
14. Schneider G , Lachner I . Analysis and action of cnicin [in German]. Planta Med . 1987;53:247-251.

Leonotis leonurus

KINGDOM:	*PLANTAE*
Division:	*Magnoliophyta*
Class:	*Magnoliopsida*
Order:	*Lamiales*
Family:	*Lamiaceae*
Genus:	*Leonotis*
Species:	*L. leonurus*
Binomial Name	*Leonotis leonurus*
Synonym	*Lions Tail*

Leonotis leonurus, also known as Wild Dagga, Lion's Tail or Lion's Ear, is a species of plant in the Leonotis genus and the Lamiaceae (mint) family native to southern Africa.

Related Species

There are about thirty species of plants from the family Lamiaceae in the genus Leonotis, but only one other, L. nepetifolia (Klip Dagga), shares the entheogenic properties of L. leonurus. The main difference between the species is that L. nepetifolia's flowers sprout from a round prickly ball.

Uses

Recreational Uses

Wild Dagga is smoked or made into a medicinal tea by the Hottentot tribe of South Africa. Wild Dagga is good for inducing a deep meditative sleep, calming, relaxing and enhancing dreaming. Because of its euphoric effects, Wild Dagga is often referred to as a Cannabis substitute.

Leonotis leonurus (Wild Dagga, Lion's Tail) species is also used in Eastern medicine as euphoriant, purgative, and vermifuge.

Medicinal Uses

Newstar-Chem pharmaceutical company asserts possible applications: (poorly translated via their website.) "treated the menstruation which was irregular, the uterine hemorrhage and the dysmenorrhea etc; The animal experimentation also indicated that the product could the increase the peripheral vascular ,the coronary artery and the cardiac muscle nutrition, increased the hematic flux, improved the micro circulation, and had the antithrombus to form" (sic) [1].

In most common uses the leaves are picked, dried, and then brewed as a tea.

Chemical Constituents

links

- Erowid's Wild Dagga Vault

Sutherlandia frutescens (L.) R.Br.

KINGDOM:	*PLANTAE*
Division:	*Magnoliophyta*
Class:	*Magnoliopsida*
Order:	*Fabales*
Family:	*Fabaceae*
Genus:	*Sutherlandia*
Species:	*S. frutescens*
Binomial Name	*Sutherlandi frutescens (L) R.Br*
Synonym	*Cancer Bush*

Family:

Fabaceae (pea & bean family/Leguminosae)

Common names:

Sutherlandia, cancer bush, balloon pea (Eng.); umnwele(Xhosa & Zulu); kankerbos, blaasbossie, blaas-ertjie, eendjies, gansiekeurtjie, klappers, hoenderbelletjie (Afr.)

Sutherlandia frutescens, is a much-respected and long-used medicinal plant that is also an attractive garden plant, and has been cultivated in gardens for many years, for its fine form, striking colour and luminous flowers.

Description

Sutherlandia is an attractive small, soft wooded shrublet, 0.5 to 1 m in height. The leaves are pinnately compound . The leaflets are 4-10 mm long, grey-green in colour, giving the bush a silvery appearance. They have a very bitter taste.

The flowers are orange-red, up to 35 mm long, and are carried in short racemes in the leaf axils at the tips of the branches in spring to mid-summer (September - December). The flowers are not typical 'pea' flowers, the wing petals are very small and are concealed in the calyx, and the standard petal is much shorter than the keel. The fruit is a large, bladder-like, papery inflated pod and is almost transparent. It can be used in dry flower arrangements as it dries well, maintaining its colour and form.

Ecology

Sunbirds pollinate the attractive, butterfly-like red flowers. The lightweight, papery, inflated pods enable the seed to be dispersed easily by wind. Stock browse the foliage.

Ecologically legumes are well known for fixing nitrogen in the soil through a symbiotic relationship with bacteria. The bacteria infect the roots, forming small growths or nodules. Inside the nodules, atmospheric nitrogen, which the plants cannot use, is converted to ammonia, which plants can use. The plant supplies sugars for the bacteria, while the bacteria provide the biologically useful nitrogen that the plant absorbs.

Distribution

Sutherlandia frutescens occurs naturally throughout the dry parts of southern Africa, in Western Cape and up the west coast as far north as Namibia and into Botswana, and in the western Karoo to Eastern Cape. It shows remarkable variation within its distribution.

Derivation of name and historical aspects

The genus Sutherlandia is so closely related to Lessertia and some botanists consider that it should be sunk in to Lessertia. This species is sometimes called Lessertia frutescens. The genus Sutherlandia was named after James Sutherland, ?1639-1719, first Superintendent of the Edinburgh Botanic Garden. The genus Lessertia is named after Jules Paul Benjamin de Lessert, 1773-1847, a French industrialist, banker, amateur botanist and owner of an important private herbarium used by De Candolle. The species name frutescens means bushy in Latin.

Sutherlandia frutescens has many common names. It has become widely known as Sutherlandia, The name cancer bush, kankerbos, comes from its reputation as a cure for cancer. The names balloon-pea, blaasbossie or blaas-ertjie (meaning bladder-bush or bladder-pea) all refer to the inflated, bladder-like fruits. The name klapper (meaning rattle) is a name applied to many species whose seeds rattle about in the mature, dry pods. The name hoenderbelletjie is in reference to the bright red flowers that are suggestive of the wattles (belletjies) of a fowl (hoender). The names eendjies and gansiekeurtjie are in reference to the inflated fruits which float on water and which are used by children as toy ducks (eendjies) and toy geese (gansies). Keurtjie is an old name applied mainly to species of Podalyria and occasionally to Sutherlandia and used as far back as 1680, derived from the Dutch keur meaning 'the pick of' or 'choice' in reference to their showy flowers. The Zulu name umnwele means 'hair' - alluding to the fact that the plant stops people 'pulling out their hair' with distress.

The Fabaceae (pea & bean or pod-bearing family) is the second largest flowering plant family. It contains more than 600 genera and 12 000 species and is found throughout the world. In southern Africa this family is represented by 134 genera and more than 1 300 species.

The genus Sutherlandia, which has since been sunk in Lessertia, used to contain only 5 species, widespread throughout southern Africa. The genus Lessertia, which now includes Sutherlandia, is widely distributed in Africa, consists of ± 60 species, with ± 50 in southern Africa.

There are other closely related species that are often confused with Sutherlandia frutescens; these are Sutherlandia Montana the mountain cancer bush, Sutherlandia Microphylla commonly known as bitterblaar or grootgansiesbos, and Sutherlandia Tomentosa, also known as eendjies or rooikeurtjie.

Uses and cultural aspects:

This plant is one of the most talked about in the ethnobotanical world because it has a strong reputation as a cure for cancer and now increasingly as an immune booster in the treatment of HIV/AIDS. Research on its properties is ongoing.

It has long been known, used and respected as a medicinal plant in southern Africa. The original inhabitants of the Cape, the Khoi San and Nama people, used it mainly as a decoction for the washing of wounds and took it internally to bring down fevers. The early colonists regarded it as giving successful results in the treatment of chicken pox, stomach problems, and in the treatment of internal cancers. It is also known to have been used in the treatment of eye troubles, the eyes being bathed with a decoction of the plant. It continues to be used to this day as a remedy for the above-mentioned ailments. It is still used as a wash for wounds, to bring down fevers, to treat chicken pox, for internal cancers, and farm workers in the Cape still use it to treat eye troubles. It is also used to treat colds, 'flu, asthma, TB, bronchitis, rheumatism, rheumatoid arthritis and osteo-arthritis, liver problems, haemorrhoids, piles, bladder, uterus & 'women's' complaints, diarrhoea & dysentery, stomach ailments, heartburn, peptic ulcers, backache, diabetes, varicose veins and inflammation. It is also used in the treatment of mental and emotional stress, including irritability, anxiety and depression and is used as a gentle tranquillizer. It is said to be a useful bitter tonic and that a little taken before meals will aid digestion and improve the appetite. It is considered to be a good general medicine.

There is as yet no scientific support for the numerous claims and anecdotes that this plant can cure cancer, but there is preliminary clinical evidence that it has a direct anti-cancer effect in some cancers and that it acts as an immune stimulant.

Sutherlandia should not be regarded as a miracle cure for cancer; its real benefits are as a tonic that will assist the body to mobilize its own resources to cope with the illness. It is known to decrease anxiety and irritability and to elevate the mood. Cancer patients, as well as TB and AIDS patients, lose weight and tend to waste away. Sutherlandia dramatically improves the appetite and wasted patients start to gain weight. It is also known to improve energy levels and gives an enhanced sense of well-being. It is hoped that treatment with Sutherlandia will delay the progression of HIV into AIDS, and even remission of the disease is hoped for.

References

- GOLDBLATT, P. & MANNING, J.C. 2000. Cape plants. A conspectus of the Cape flora of South Africa. *Strelitzia* 9. National Botanical Institute, Pretoria & Missouri Botanical Garden Press, Missouri.
- JACKSON, W.P.U. 1990. *Origins and meanings of names of South African plant genera*. U.C.T. Printing Dept., Cape Town.
- LEISTNER, O.A. (ed.) 2000. Seed plants of southern Africa: families and genera, *Strelitzia* 10. National Botanical Institute, Pretoria.
- POOLEY, E. 1998. *A field guide to wild flowers KwaZulu-Natal and the Eastern Region*. Natal Flora Publications Trust, Durban.
- ROBERTS, M. 1990. *Indigenous healing plants*. Southern Book Publishers, Halfway House, Gauteng, South Africa.
- SMITH, C.A. 1966. *Common names of South African plants*. Memoirs of the Botanical Survey of South Africa No. 35. Dept. of Agricultural Technical Services, Pretoria.
- VAN WYK, B.-E., VAN OUDTSHOORN, B. & GERICKE, N. 1997. *Medicinal plants of South Africa.* Briza Publications, Pretoria.
- VAN WYK, B-E. & GERICKE, N. 2000. *People's plants*. A guide to useful plants of southern Africa. Briza Publications, Pretoria.
- Website: http://www.sutherlandia.org/

Authors: Phakamani M' Afrika Xaba & Alice Notten
Kirstenbosch National Botanical Garden
April 2003

Sutherlandia Frutescens - Cancer Bush

Protocol components of a PhD thesis on the effectiveness of Sutherlandia OPC in controlling HIV/AIDS

1. Objective

Determining the effectiveness of an herbal mixture consisting of extracts of Sutherlandia Frutescens and Nerium Oleander on increasing the CD4 cell count of advanced HIV/AIDS patients with a starting CD4 count of less than 300.

2. Study trials presently conducted

The purpose of the study is to ascertain the effectiveness of an herbal supplement consisting of Sutherlandia Frutescens and Nerium Oleander in increasing the CD4 counts of HIV positive patients in the later stages of HIV/AIDS when their CD4 cell counts are below 300. Twenty randomly selected adult patients in the age group 18 to 64 each receives on a daily basis for sixty days 200ml of a locally produced commercially available soy based mixture enriched with the recommended daily requirements of essential vitamins and minerals. Ten of the mixes contain, in addition to the vitamins and minerals, 15ml of the herbal mix to be tested. The mixes are allocated on a random basis and neither the patients nor the administering staff knows which patients receive the added herbal supplement.

Each of the patients is allocated a number and receives the similarly numbered mix each day. Only the Principal Investigator knows which mixes contain the herbal supplement. The Cd4 count of each patient is tested by a pathology lab before the study, after a period of thirty days and again after sixty days. The herbal mix has already been in use as an herbal food supplement for a period of 3 years with anecdotal reports of success and with no reports of any adverse reactions, and there is thus virtually no risk in its administration during the study. However, nursing staff are required to report in writing any adverse reactions during the study period. Should the study prove the effectiveness of the herbal supplement, it could become an important and inexpensive addition to the treatment of HIV/AIDS. It could also open the way for a more comprehensive study with more patients and over a longer period.

3. Statement of Purpose and Background per Dissertation Proposal.

Since Robert Gallo announced in 1984 that the virus responsible for AIDS had been discovered, billions of dollars have been spent on finding a cure. During this time, some researchers, like Peter Duesburg, have questioned the causative link between Gallo's HIV virus and AIDS on the basis that it does not comply with the requirements of Koch's Laws relating to the differentiation between correlation and causation, that it is totally uncharacteristic for a retro-virus to act in this way, that the concentration of HIV viruses in CD4+ cells, even in advanced AIDS cases, are too low to explain the virulent nature of advanced AIDS, and the extraordinary as well as unpredictable long period between the initial HIV infection and the development of full-blown AIDS. (Bialy, 2004; Duesberg, 1995; Farber, 2006). They have also questioned the changing definition of AIDS, the inaccuracy of the various tests for HIV anti-bodies, the variability of the tests in different countries and the relevance of concepts like "viral load" when tested by using the polymerase chain reaction (PCR) method. (Bialy, 2004; Culshaw, 2007)

Other researchers, convinced that HIV was the single cause of AIDS have tried their best to find ways of destroying it. In pursuit of this objective, pharmaceutical companies have spent billions of dollars on "anti-retrovirals" to delay the onset of full-blown AIDS. Unfortunately, all the ant-retrovirals have side effects that can be quite severe. These effects can be liver failure, severe anemia and even destruction of cd4 T-cells. (Farber, 2006)

Although the controversy about the connection between HIV and AIDS has not been resolved satisfactorily, many researchers believe that AIDS is the result of the destruction of CD4+ T-cells mediated by the HIV virus. Exactly how this happens is not yet clear. It is thus not surprising that a third group of researchers, including Luc Montagnier, the co-discoverer of the HIV virus, have postulated that certain "co-factors" are required before HIV, a member of the family of normally harmless retro-viruses, can become a virulent T-cell killer. (Farber, 2006, p89) And it is this aspect that should be of great interest to herbalists and other practitioners of alternative therapies.

Anti-viral herbs have been used for centuries, especially in China, to combat various viral diseases like shingles, herpes simplex, measles, chicken pox, influenza and the common cold and they may well have a role to play in the unknown c-factors that have been postulated in the development of full-blown AIDS.

Herbal remedies are normally used in a palliative role with HIV/AIDS (supporting the immune system, fighting opportunistic infections and relief of the side-effects of anti-retrovirals).

In Sub-Saharan Africa where AIDS is reported to be pandemic, various herbal concoctions are being administered by traditional healers who claim various degrees of success. Such claims, although anecdotal, may well be based on the fact that substances derived from plants, including alkaloids, coumarins, flavonoids, lignans, phenolics, quinines, saponins, terpenes, sterols and xanthones all have some degree of anti-HIV activity (Singh et al, 2005). On a more scientific basis, it has been shown that the Trichosantin in the Chinese herb Trichosantes kirilowiithe can inhibit HIV infection through its action on the chemokines and chemokin receptors. (Zhao, et al, 1999). Aqueous extracts of the African Sutherlandia frutescens and Lobostemon trigonus have been shown to have anti-HIV activities (Harnett, et al, 2005). In 1997, an extract of Nerium Oleander was patented in the USA under the name Anvirzel and, in the patent application Dr Ozel, who used the extract for more than 30 years in Turkey as a treatment for cancer, made the claim that it is also effective in controlling HIV/AIDS (Ozel, 1992).

In South Africa, where the research is conducted, HIV/AIDS has become a major problem. Combined with this is the government's reluctance to implement the general administration of pharmaceutical anti-retrovirals on a national scale due to the influence of those who question their efficacy. The government, through the Minister of Health, has also indicated that they see a role for natural medicine in combating the disease. This attitude has led to widespread criticism in the media and a general ridicule of natural remedies in this field. A properly conducted, placebo controlled study of a locally produced herbal mix will contribute to dispelling the so-called "unscientific" basis of natural remedies and, should the results be positive, provide an affordable treatment of HIV/AIDS without the lethal side-effects of the presently used anti-retrovirals like AZT and Nevirapine.

The specific reasons why the herbal mix of Sutherlandia frutescens and Nerium oleander will be used in the research are:

the ingredients are readily available and are not expensive

toxicity tests have already been done on the ingredients at established research institutions (Southern Research Institute, Birmingham, AL; Southwest Research Institute, San Antonio, TX; Medical Research Council of South Africa)

The herbal mix has already been in use as a "herbal food supplement" in South Africa for the past three years with many anecdotal reports of success, even in advanced cases of AIDS.

It is important that human subjects at an advanced stage of the disease be used because it is specifically this subgroup that has been neglected in respect of effective treatment. Should the results of the study prove positive, it is almost certain that the government will fund a much larger research project so that the mix can be used in the rest of Africa as well as in places like India where the spread of HIV/AIDS is becoming a major problem.

References.

Bialy, H. (2004). Oncogenes, Aneuploidy and AIDS: A Scientific Life and Times of Peter H. Duesberg. Berkley, CA. North Atlantic Books.

Culshaw, R. (2007). Science Sold Out: Does HIV really cause AIDS? Berkley, CA. North Atlantic Books.

Duesberg, P. (1995). Infectious AIDS: Have we been misled? Berkley, CA. North Atlantic Books

Farber, C. (2006). Serious Adverse Events: An uncensored history of AIDS. Hoboken, NJ: Melville House Publishing.

Harnett SM et al,(2005). Anti-HIV activities of organic and aqueous extracts of Sutherlandia frutescens and Lobostemon trigonus. Journal of Ethnopharmacology, 2005 Jan 4; 96(1-2).

Ozel, HZ (1992). Extracts of Nerium species and use therefor. US Patent#5,135,745, August 4, 1992

Sing, I,P et al, (2005). Anti-HIV Natural Products. Current Science, Vol 89, No2, 25 July 2005.

Zao et al, (1999). The ability of anti-HIV agent trichosantin to stimulate chemotaxis and G protein activation. Journal of Experimental Medicine, 1999 Jul 5; 190(1)

4. Subjects.

The subjects recruited are patients with advanced HIV/AIDS symptoms being treated at a Clinic in Johannesburg. The specific criteria is the following:

Age group 18 -64 years of age

CD4+ T-cell count < 300

Both male and female

Pregnant women to be excluded

Not receiving anti-retrovirals

Must not be cognitively impaired

Must be literate to understand the contents of the consent form

Participation are on a voluntary basis. The purpose of the study and the procedures for administering the herbal supplement will be explained to small volunteer groups of potential participants (identified by nurses and caregivers at participating clinics and/or hospices) in their own language. Virtually all people living in the Johannesburg have English as a second language and are mostly conversant in that language.

Schooling is done in English and most people are literate in English, more so than in their own languages. However, provision are made for an interpreter fluent in both Zulu and South Sotho, the other two languages spoken in the region.

The Clinic is responsible for maintaining physical care of the blood draws. Blood is drawn under supervision of a senior nursing sister. The Physician Notification Document will be signed by the head of the clinic as the Dot program requires.

5. Research Design and Methods.

Twenty volunteers will be selected on a random basis from the final group of volunteers that meet the criteria specified (The PARTICPANTS). Each of the PARTICIPANTS will sign a consent form that has been translated into his/her home language. Before the study commences, blood samples will be taken from each of the PARTICIPANTS under supervision of the supervising physician and this will e analyzed at a professional pathology laboratory to confirm his/her HIV status and CD4+ T-cell count. The Principal Investigator will select on a random basis 10 people from the PARTICIPANTS who will receive the herbal mix (the HERBAL GROUP). During the sixty days of the study, each one of the PARTICIPANTS will receive on a daily basis 200ml of a locally produced and commercially available long-life soy mixture, fortified with the recommended daily requirements of important minerals and vitamins. After the selection of the HERBAL GROUP, the Principal Investigator will prepare 60 containers of the 200ml soy mixture for each of the 20 PARTICIPANTS (the duration of the study will be 60 days). By arrangement with the producer of the soy mixture, he will add 15ml of an herbal mix consisting of Sutherlandia Frutescens and Nerium Oleander to the soy mixture of the HERBAL GROUP. Each of the 200ml containers will be clearly marked with the name of the participant for whom it is intended so that no mistake can be made as to which person receives the plain soy mixture and which one receives a mixture containing the herbs. Neither the PARTICIPANTS nor the administering nurses will know which containers have the herbal mix as they will all be identical., apart from having the names of the PARTICPANTS on them,

After thirty days, a further blood sample will be taken from each of the PARTICIPANTS and the CD4 T-cell count will again be established by a professional pathology laboratory. This procedure will be repeated after 60 days, at the conclusion of the study. Statistical analysis will be done of the data to establish whether there is a statistical difference between those individuals who received the herbal mix and those who did not

If, as is expected, there will be a noticeable difference between the HERBAL GROUP and the rest of the PARTICIPANTS after 60 days, those PARTICIPANTS who had not received the herbal mix will be given the option of receiving it on a daily basis for the following 60 days.

The soy mixture and the herbs will be supplied free of charge to all the PARTICIPANTS.

Copies of the consent forms, adverse event forms and data recording forms are attached hereto as Addenda.

6. Potential Benefits.

The participants in the study will effectively be those unfortunate individuals who have been designated as cases where the hope of recovery is either negligible or non-existent. This study may be the last opportunity that they have of survival. If the results should prove to be positive, it will give a great impetus to those practitioners who believe that herbal treatment is an important modality in the yet-unresolved HIV/AIDS crisis. It will also be an important step towards finding treatments without the debilitating side-effects of current and still controversial HAART (Highly Active AntiRetroviral Therapy) treatments. The present use of AZT for pregnant mothers-to-be, sometimes on a non-voluntary basis, can have devastating effects on the future of the yet-to-be born child. A harmless herbal remedy may well be a welcome substitute.

7. Risks.

There are no known risks for participants in the study. All anecdotal and other evidence after 3 years of use of the herbal mix show that it has no adverse side-effects. More than 500 individuals have been using it on a regular basis. Toxicity studies of both ingredients have shown that there is no dose-limiting toxicity of either. Both herbal ingredients are water extracts prepared by a trained and experienced herbalist (Dr Wilma Van der Walt, graduate of the College of Herbal Medicine, London). The oleander extract is standardized to specific gravity of 1.08 and is prepared strictly in accordance with Dr Ozel's instructions as contained in the Anvirzel oleander patent application. Research participants who receive the herbal supplement will only ingest a maximum amount of 15ml per day of the water extract. As toxicity studies of oleander have shown that there is no dose-limiting toxicity of the hot water extract, this relatively small amount is completely safe. A good example of the safety of the mix was provided recently by a medical doctor in Cape Town who provided 500ml of the mix to one of his AIDS patients.

The patient took 250ml of the mix at one time, 16 times the daily dosage for the research project, and reported heart palpitations. This condition returned to normal without any medication within a period of 6 hours.
According to Dr Ozel, the harmful substances in oleander, including Oleandrin, the main cardiac glycoside, are inactivated after 3 hours of boiling at 100 degrees centigrade. (Ozel, 1992) This is probably due to the fact that the heat changes the structure of the glycoside AND that oleandrin is insoluble in water Most of the insoluble oleandrin crystals are filtered out of the aqueous solution during preparation. The oleander solution used in the Sutherlandia/Oleander mix is boiled for a minimum of 4 hours. All solids are then filtered out and the solution is then boiled for a further 2 hours after which any remaining solids are filtered out again. Tests have shown that the oleander filtrate contains 5 polysaccharides and 2 cardiac glycosides. The remaining glycosides seem to be inactive in respect of any deleterious cardiac effects.

In order to further minimize the risk, the study will be done in a clinical setting and adverse-event feedback will be required from nurses administering the herbal mix. The nurses will be informed about the typical symptoms of oleander poisoning, including nausea, vomiting and heart palpitations. Although it is not expected, should any of these symptoms occur with a patient at the low dosages administered during the research, the specific patient will immediately be taken off the project and will receive appropriate treatment at the clinic.

8. Confidentiality.
Apart from the doctors and nurses who are already aware of the HIV status of the participants, only the Principal Investigator will have access to the names and personal particulars of each participant. The final results and statistical analysis will not require any personal details of participants to be made public and access at all times will be limited to the Principal Investigator.
(The final results of the above study which is presently under way at a clinic in Johannesburg, will be published in the Government Medical Journal as the results become conclusive as to date human trials will be conducted in America by a South African representative in an anti-vaxine substance for Aids related diseases.

Leonurus cardiaca - Motherwort

KINGDOM:	*PLANTAE*
Division:	*Magnoliophyta*
Class:	*Magnoliopsida*
Order:	*Lamiales*
Family:	*Lamiaceae*
Genus:	*Leonorus*
Species:	*L. cardiaca*
Binomial Name	*Leonurus cardiaca*
Synonym	*Heartwort*

Names:

Lion's tail, heartwort; Agripaume, Herbe battudo (French); Agripalma, Melissa salvatica (Italian); Aartgespan, Hartgespan (Dutch); yi mu cao (Chinese); yakumos (Japanese); ikmoch'o (Korean); Hjärtstilla, bonässla; äkta hjärtstilla (ssp. cardiaca), ullig hjärtstilla (ssp. villosus) (Swedish); Løvehale (Norwegian); Almindelig Hjertespand (Danish); Nukula (Finnish); Echtes Herzgespann, Echtes Lövenschwanz (German); Løvehale (Norwegian); Scerdecznik pospolity (Polish); Agripalma, marihuanilla (Spanish)

Description:

an upright prickly bush with a height of up to 5 feet and a width of 2 feet. The flowers are pale pink to purple, very hairy, in whorls of 6 to 12, alternating up the stems with leaves. The leaves are dark green above, pale below, oak-shaped and deeply lobed into three, especially at the bottom. Prickly. Blooms in late-June to August.

Constitutents:

essential oil, alkaloids (stachydrine, leonurinine), glycosides (leonurine, leonuridin), flavonoids, diterpenes, caffeic acid, tannins, vitamin A.

History:

The early Greeks gave motherwort to pregnant women suffering from anxiety. This use continued and gave the herb the name mother wort, or "mother's herb." Its other prominent action is on the heart, giving it the species name cardiaca or the Greek kardiaca, or heart. Leonurus comes from the Greek leon for "lion" and ouros for "tail", as the plant was thought to resemble the tail of a lion. There is an old tale about a town whose water source is a stream flowing through banks of motherwort. Many of the townspeople lived to be 130 years old and recall one who reportedly lived to 300 years. In ancient China, motherwort was reputed to promote longevity. In Europe, motherwort first became known as a treatment for cattle diseases. Colonists introduced motherwort into North America and the 19th century Eclectics recommended it as a menstruation promoter and aid to expelling the afterbirth. They did not consider it a heart remedy at all. The Cherokees used the herb as a sedative for nervous afflictions. In the Victorian Language of Flowers it symbolizes concealed love.

Properties:

Emmenagogue, astringent, carminative, cardiac tonic, diuretic, antispasmodic, anti-rheumatic

Medicinal:

Motherwort is primarily an herb of the heart. Several species have sedative effects, decreasing muscle spasms and temporarily lowering blood pressure. Chinese studies found that extracts decrease clotting and the level of fat in the blood and can slow heart palpitations and rapid heartbeat. Another of motherwort's uses is to improve fertility and reduce anxiety associated with childbirth, postpartum depression, and menopause. If used in early labor it will ease labor pains and calms the nerves after childbirth. It also reduces fevers, and is especially suggested for illnesses associated with nervousness or delirium. Motherwort was formerly used to treat rheumatism and lung problems, like bronchitis and asthma. Motherwort may help an overactive thyroid but does not depress normal thyroid function. Chinese medicine uses the seeds to aid in urination; cool the body system; treat excessive menstrual flow, absence of menstruation.

Toxicity:

Motherwort leaves occasionally produce skin dermatitis when touched. Because of the possible anti-clotting effect those with clotting disorders should avoid it.

References:

1. The Complete Medicinal Herbal, Penelope Ody, Dorling Kindersley, 1993
2. The Healing Herbs, Michael Castleman, Rodale, 1991
3. Herbal Delights, Mrs. C.F. Leyel, Faber & Faber, 1989
4. The Herbal Menopause Book, Amanda McQuade Crawford, Crossing Press, 1996
5. The Illustrated Herb Encyclopedia, Kathi Keville, Mallard Press, 1991
6. The Master Book of Herbalism, Paul Peyerl, Phoenix Press, 1984
7. Medicinal Herbs in the Garden, Field & Marketplace, Lee Sturdivant and Tim Blakley, 1998
8. Planetary Herbology, Michael Tierra, Lotus Press, 1988
9. The Roots of Healing, Deb Soule, Citadel Press, 1995

Elytropappus Rhinocerotis Herba

KINGDOM:	*PLANTAE*
Division:	
Class:	
Order:	
Family:	*Asteraceae*
Genus:	
Species:	*E. rhinocerotis*
Binomial Name	*Elytropappus Rhinocerosis Herba*
Synonym	*Renosterbos*

Botanical description:

This exceptionally common Cape plant is an erect bushy shrub of up to one metre in height. The minute, greyish-green leaves are tightly grouped on the thin stems. The tiny flower heads are inconspicuous with a single floret in each. Renosterveld, a distinctive veld type in some parts of the Western and Eastern Cape provinces is named after this dominant and invasive species.

Plant Parts Used:

The young tips of the branches are used.

Medicinal uses:

Infusions of the young branches in brandy or wine are a traditional Cape medicine for indigestion, dyspepsia, ulcers and stomach cancer. It may also be taken as a tonic to improve a lack of appetite and as a stomach bitter. Some reports claim it to have been a popular remedy during the 1918 influenza epidemic and that it stimulates perspiration.

Preparation and dosage:

Infusions or tinctures were traditionally used – a small amount taken three times a day.

Active Ingredients:

Some of the activity of the medicine may be due to rhinocerotinoic acid, a labdane diterpenoid which had been isolated from *E. rhinocerotis.*

Pharmacological effects:

Rhinocerotinoic acid has significant anti-inflammatory activity but tested negatively as an anti-arthritic.

References:

1. Levyns, M.R. 1935, A revision of Elytropappus Cass. Jl. S. Afr. Bot. 1: 89
2. Smith, C.A. 1966. Common Names of South African Plants. Memoirs of the Botanical Survey of South Africa 35. 642
3. Watt, J.M. & Breyer-Brandewijk, M.G. 10762. The Medicinal and Poisonous Plants of Southern and Eastern Africa. 2nd Edition. Livingstone, London.
4. Rood, B. 1994. Uit die Veldapteek. Tafelberg, Cape Town
5. Dekker, T.G. et al. 1988. Studies of South African Medicinal Plants. Part 7. Rhinocerotinoid acid: a labdane diterpene with anti-inflammatory properties from Elytropappus rhinocerotis. S. Afr. J. Chem. 41: 33-35

Elytropappus Rhinocerotis Rinosterbos

Definition

Elytropappus Rhinocerotis Herba consists of the fresh or dried young tops of Elytropappus rhinocerotis (L.f.) Less. (Asteraceae).

Synonyms

Stoebe rhinocerotis L.f.

Vernacular names

renosterbos, renostertoppe (A)

Description

A much-branched grey to grey-green aromatic shrub 0,6 - 2,5m in height with young stems densely woolly; leaves minute, numerous, adpressed to the stem, usually woolly on both surfaces; flowers (Mar.-Sept.) inconspicuous, yellow, tubular, borne in capitula of mostly 3 florets, pappus well developed; fruit an achene with prominent longitudinal ribs.

The characteristic features are: the abundant long unicellular clothing hairs of leaf and stem, loose or attached to fragments of epidermis; the distinctive glandular hairs of leaf lamina and margin, with multicellular heads (up to 12 cells) and dark yellow-brown resinous contents, staining red with Soudan IV; the absence of calcium oxalate crystals.

Crude drug

Bundles of young twigs, grey-green in colour with a distinctive aromatic odour, bitter taste and sticky resinous feel.

Geographical distribution

Common on dry clay flats and slopes throughout the Western and Eastern Cape Provinces, up to Namaqualand. Capable of forming pure stands covering a large area (renosterveld).

Quality standards

Identity tests

Thin layer chromatography on silica gel using as solvent a mixture of toluene:diethyl ether:1.75M acetic acid (1:1:1). Reference compound cineole (0,1% in chloroform). Method according to Appendix 2a. R_f values of major compounds: 0,78 (purple); 0,87 (pink); cineole: 0,84 (blue-purple)

HPLC on C_{18} column, method according to Appendix 2b.

Major compounds:

Methanol extract:

Retention times (mins): 15.65; 19.62; 23.92; 24.87; 25.16; 27.46

– MeOH HPLC spectrum

- DCM HPLC spectrum

Dichloromethane extract:

Retention times (mins): 2.72; 4.18; 8.07

Ethanol (70%) soluble extractive value: not less than 20% (range: 20.69-34.92%)

Volatile oil content: not less than 0,33% V/W (range: 0,33-0,66%)

Purity tests

Assay

Not yet available

Major chemical constituents

Microchemical tests in our laboratories indicated the presence of cardiac glycosides (2/3 collections), saponins, tannins and reducing sugars (3/3 collections) but not alkaloids or cyanogenic glycosides. Rhinocerotinoic acid, a labdane diterpene, has been isolated from the overground parts of this species[2].

Dosage forms

For children, the young tops are given orally as a powder; for adults a brandy or wine infusion is the traditional dosage form[3].

Medicinal uses

For the treatment of colic, wind, diarrhoea and acidity in young children; adult use is mainly for digestive disorders and as a bitter tonic to stimulate appetite

Pharmacology/bioactivity

No in vitro antimicrobial activity against Pseudomonas aeruginosa, Candida albicans or Mycobacterium smegmatis was observed in the concentrations used for disc assays in our laboratories. Some activity was recorded against Staphylococcus aureus.

Some preliminary studies on the use of this herb as an anti-hypoglycaemic were apparently carried out during the period 1975-1980 by the late Professor W. Jackson, at the Department of Endocrinology at Groote Schuur Hospital. We have not been able to follow up this report.

Contraindications

None documented or recorded by traditional healers and herbalists.

Adverse reactions

None documented or recorded by traditional healers and herbalists.

Precautions

No special precautions

Dosage

Children: half to one teaspoonful of young tops, powdered and dried, with a little warm water, for the relief of colic or mild diarrhoea.

Adults:

As directed.

[2] Dekker, T.G. et al. (1988). Studies of South African medicinal plants Part 7: Rhinocerotinoic acid – a labdane diterpene with anti-inflammatory properties from Elytropappus rhinocerotis. South African Journal of Chemistry 41: 33-35.

[3] Anon. (1992). Herbs of the Montagu Museum. Press, Montagu.

Dicoma Capensis (Asteraceae)

KINGDOM:	*PLANTAE*
Division:	
Class:	
Order:	
Family:	*Compositae*
Genus:	
Species:	*D. capensis*
Binomial Name	*Dicoma Capensis*
Synonym	*koorsbossie*

Botanical description:

This indigenous herb is a small plant with creeping branches spreading from a woody, perennial rootstock. The leaves are variable in shape, often oblong but sometimes very narrow, greyish-green in colour and covered with short, dense, white hair. Flower heads are pale mauve and inconspicuous, with a neat halo of numerous spreading bracts. These are long, thin and somewhat spiny; superficially resembling those of true karmedik (see Cnicus). Another species, *D. anomala* is also used medicinally. It differs in the bright green upper surfaces of the leaves and the larger flower heads.

Plant Parts Used:

The leaves and twigs are mainly used, but roots are often included.

Medicinal uses:

As the Afrikaans vernacular suggests, the plant is widely used to treat fever, but also for an upset stomach and numerous other ailments including influenza, high blood pressure, diarrhoea and even cancer. D. anomala is used for similar conditions. In addition to the use of aboveground parts, the roots of D. anomala are ground and snuffed as a treatment for colds or a decoction of it in gin has been used to treat haemorphoids and fever. Anecdotes exist for several other species of dicoma.

Preparation and dosage:

For an upset stomach and fever an infusion of the leaves is used – precise details are not available.

Active Ingredients:

There is no scientific evidence to substantiate the reported beneficial effect of this traditional medicine. Several lactones were isolated from aerial parts of D. capensis of which 15-acetoxy-14-hydroxycostunolide was the main ingredient, together with small amounts of an acetate of brachylaenolide and various minor compounds. These lactones have not yet been associated with any biological activity.

Pharmacological effects:

As a treatment for fever, the infusion is said to induce perspiration but the pharmacology of the medicine appears to be unknown.

References:

1. Pope, G.V. 1992, Compositae (Dicoma), Flora Zambesiaca 6(2): 41-42
2. Watt, J.M. & Breyer-Brandwijk, M.G. 1962. The medicinal and Poisonous Plants of Southern and Eastern Africa. 2nd edition. Livingstone, London.
3. Shearing, D. 1994. Karoo, South African Wild Flower Guide 6. Botanical Society of South Africa, Claremont.
4. Rood, B. 1994. Uit die Veldapteek. Tafelberg, Cape Town
5. Zdero, C. & Bohlmann, F. 1990. Sesquiterpene lactones from Dicoma species. Phytochemistry 29: 183-187

Tulbaghia Violacea

KINGDOM:	*PLANTAE*
Division:	
Class:	
Order:	
Family:	Alliaceae
Genus:	
Species:	*T. Violacea*
Binomial Name	*Tulbaghia Violacea*
Synonym	*Wild Garlic*

Common names: wild garlic (Eng.); wildeknoflok, wilde knoffel (Afr.)

Description

Tulbaghia violacea is a fast-growing, bulbous plant that reaches a height of 0.5 m. The leaves are long, narrow, strap-like, slightly fleshy and smell strongly of garlic when bruised. They grow from fat, tuberous roots which spread to form clumps of plants. The pinkish mauve, tubular flowers, clustered into umbels of up to twenty flowers, are held above the leaves on a tall flower stalk, and appear over a long period in summer (January to April). They too smell of garlic when picked. The fruit, triangular capsules, are grouped into a head, and when ripe they split to release the flattened, hard black seeds.

Derivation

of name and historical aspects. Tulbaghia is named after Ryk Tulbagh (died 1771), governor of the Cape of Good Hope and violacea means violet-coloured. Only two species are grown as ornamentals and enjoy popularity in cultivation.

Ecology

Most of the species of Tulbaghia are adapted for moth pollination and have dull flowers that become sweetly scented at night. T. violacea seems likely to be pollinated by butterflies and bees as they are scented during the day.

Uses and cultural aspects

The crushed leaves may be used to help cure sinus headaches and to discourage moles from the garden (by their strong smell). The smell repels fleas, ticks and mosquitoes when crushed on the skin. The fresh bulbs are boiled in water and the decoctions are taken orally to clear up coughs and colds. The bulb has been used as a remedy for pulmonary tuberculosis and to destroy intestinal worms. Wild garlic may prove to have the same or similar antibacterial and anti-fungal activities as has been scientifically verified for real garlic. The leaves are used to treat cancer of the oesophagus. The Zulus use the leaves and flowers as spinach and as a hot, peppery seasoning with meat and potatoes. They also use the bulb to make an aphrodisiac medicine. Wild garlic is a very good snake repellent and for this reason the Zulus plant it around their homes.

References and further reading

1. Borchers, H. 1996. Greening the KwaZulu-Natal midlands. SHARE-NET, Wildlife Society of Southern Africa, Howick.
2. Du Plessis, N. & Duncan, G. 1989. Bulbous plants of southern Africa. Tafelberg, Cape Town.
3. Dyson, A. 1998. Discovering indigenous healing plants of the herb and fragrance gardens at Kirstenbosch National Botanical Garden. The Printing Press, Cape Town.
4. Hyam, R. & Pankhurst, R. 1995. Plants and their names: a concise dictionary. Oxford University Press
5. Joffe, P. 1993. The gardener's guide to South African plants. Tafelberg, Cape Town.
6. Manning, J., Goldblatt, P. & Snijman, D. 2002. The color encyclopedia of Cape bulbs. Timber Press, Portland.
7. Van Wyk, B-E., Van Oudtshoorn, B. & Gericke, N. 1997. Medicinal plants of South Africa. Briza Publications, Pretoria.

Tulbaghia Violacea – Wild Garlic

Common Names: society garlic, pink agapanthus
Family: **Amaryllidaceae** (amaryllis Family)

Description
Society garlic is a clump-forming herbaceous perennial with narrow, grayish green leaves and large clusters of lavender or lilac flowers. The plant looks like an especially showy garlic or garlic chives plant. Society garlic has just 4-9 grass-like leaves, each about a foot long and a half-inch wide. The leaves grow straight up out of a swollen underground rhizome that looks like a corm or bulb. A single 2 ft (0.6 m) scape (flowering stalk) grows up from the center of the rosette of leaves. Atop the scape sits a large umbel (flower cluster in which all the pedicels (flower stems) originate from the same point) of sweet-scented lilac-pink flowers. The flowers are tubular, expanding to six pointed stars at their ends. They are a little less than an inch long and wide, and there are 8-20 of the dainty little flowers in each umbel. The blossoms are produced sporadically from early summer until late autumn. The leaves and rhizomes of society garlic smell like garlic, but the flowers are sweet, smelling like hyacinths, and some people say they are too sweet! The cultivar, 'Silver Lace' (a.k.a. 'Variegata') has larger flowers and leaves with cream stripes. 'Tricolor' has pink and white variegations.

Location
Society garlic is native to Natal, Transvaal and the astern Cape region in South Africa where it grows in rocky grasslands.

Culture
Society garlic is easy to grow in light, sandy soils. Light: Society garlic does best in full sun. Plants will grow well in shade, but may not flower much. Indoor plants should be kept in the brightest light possible. Moisture: Water society garlic frequently during the growing season, less frequently during flowering, and reduce watering during the winter resting period to just enough to keep the rootball from completely drying out. At any stage, established plants can survive extended droughts if they have to. Hardiness: USDA Zones 7 - 10. Society garlic tolerates moderate frosts and light freezes down to about 20º F (-6.7º C).

Propagation:
Propagate society garlic by dividing off pieces of rhizome while the plant is dormant.

Features
The name, "society garlic" comes from the assumption that, although it tastes like garlic, you don't get bad breath from eating it. There are a couple dozen species of Tulbaghia in South Africa. Some authorities split the huge Amaryllidaceae family into several smaller families, and include Tulbaghia, along with the onions and garlics (genus Allium), in the family Alliaceae.

Clinical studies with above extract are presently being done by various institutions as well as Damaansa Holdings Pty Ltd South Africa in the combination of 12 herbal extracts making use of sodium chlorite Ion as a preservative and resulting in a medication known as Faith Drops, Immune Forte and Starlight drops. This medication is used with an activator resulting in chlorine dioxide being formulated in the body known as SCD breaking down to hydro-chloric acid which is then absorbed and utilized by the immune system of the body subsequently the drops and herbal extracts known as Faith drops have been accepted and coded by the MCC of South Africa.

Hypoxis

KINGDOM:	*PLANTAE*
Division:	*Magnoliophyta*
Class:	*Liliopsida*
Order:	*Asparagales*
Family:	*Hypoxidaceae*
Genus:	
Species:	*Hypoxis L*
Binomial Name	
Synonym	*African potato*

Common names: yellow stars, star lily, African potato (Eng.); sterretjie, Afrika-patat (Afr.); inkomfe, ilabatheka (isiZulu)

Hypoxis, a well-known genus of the family Hypoxidaceae, easily recognizable by its bright yellow star-shaped flowers and strap-like leaves, has a long history of medicinal use on the African continent and is currently being used in South Africa in primary health care as an immune booster for patients with HIV/AIDS.

Description

Being geophytic herbs, *Hypoxis* plants overcome winter conditions in the form of an underground rootstock called the corm. Corms are hard, fleshy, mucilaginous and white or yellow-orange within. Sliced corms, when exposed to the atmosphere, turn black with oxidation. In spring, a new set of leaves grows from the apex of the corm. In most species, leaves are arranged one above the other in three rows that radiate outwards. In some species, leaf bases are enclosed in a sheath, forming a false stem. Leaves range from linear to broadly lance-shaped, are hairy in most species and die back over the winter months. Flowering stems appear with the leaves after the first rains in spring. They are unbranched, with 2-12 flowers per stalk. Flowers are symmetrical with 6 tepals, rarely 4 or 8, are bright yellow, giving the genus its common name "yellow stars". Only in two taxa, *H. membranacea* and *H. parvula* var. *albiflora* are the flowers white. The fruit is a capsule that splits across its diameter to expose the small black seeds.

The name *Hypoxis* is coined from the Greek words *hypo* meaning below and *oxy* referring to the pointed base of the ovary or fruit.

Ecology

Hypoxis flowers are short-lived and are pollinated by solitary and honey bees. Pollen grains in *Hypoxis* are yellow and are visible through the transparent pollen sacs of honey bees visiting flowers. The fruiting capsule in *Hypoxis*, called a pyxis, splits along its diameter and the upper portion of the capsule drops off, exposing the black seeds. In a few species such as *H. angustifolia*, the remaining lower portion of the capsule splits further longitudinally to aid dispersal.

Economic and cultural value

In the genus, two species, *H. hemerocallidea* and *H. colchicifolia* are most sought after for their use in African traditional remedies as well as for preparation of herbal teas and tinctures. This places demand on existing populations of these species in southern Africa and as such, the species are under threat.

The rootstock of *Hypoxis* is used in various ways in South Africa. *H. hemerocallidea* and *H. colchicifolia* rootstocks were used by Zulu traditional healers for centuries in the treatment of urinary infections, heart weakness, internal tumours and nervous disorders. Corms of the latter species are used as an emetic against fearful dreams. The Sotho people use *Hypoxis* as a charm against lightning and storms. *H. argentea* has small white rootstocks, and in times of famine the rootstocks are boiled or roasted by the Sotho and Xhosa people as a source of food.

References

- Gillmer, M. & Symmonds, R. 1999. Seed collection and germination: Hypoxis hemerocallidea. *Plantlife* 21: 36, 37.
- Snijman, D.A. 2000. Hypoxidaceae. Cape plants. A conspectus of the Cape flora of South Africa. *Strelitzia* 9: 108-110.
- Snijman, D.A. & Singh, Y. 2003. Hypoxidaceae. In G. Germishuizen & N.L. Meyer, Plants of southern Africa: an annotated checklist. *Strelitzia* 14: 1071-1074. National Botanical Institute, Pretoria.
- Singh, Y. 1999. Hypoxis: yellow stars of horticulture, folk remedies and conventional medicine. *Veld & Flora* 85: 123-125.
- Van Wyk, B-E. 2000. *People's plants*. Briza Publications, Pretoria.

Hypoxis Hemerocallidea African Potato

Hypoxis hemerocallidea—Not merely a cure for benign prostate hyperplasia

S.E. Drewes[a], E. Elliot[b], F. Khan[a], J.T.B. Dhlamini[c] and M.S.S. Gcumisa[d]

[a]School of Chemistry, University of KwaZulu-Natal Pietermaritzburg, Private Bag X01, Scottsville 3209, South Africa

[b]School of Biochemistry, Genetics, Microbiology and Plant Pathology, University of KwaZulu-Natal Pietermaritzburg, Private Bag X01, Scottsville 3209, South Africa

[c]10 Baverstock Street, Pietermaritzburg 3201, South Africa

[d]P.O. Box 2116, Pietermaritzburg 3201, South Africa

Received 19 May 2008;
Accepted 22 May 2008.

CLINICAL STUDY

The use of *Hypoxis hemerocallidea* Fisch. and C.A. Mey. (Hypoxidaceae) extracts for ailments other than benign prostate hyperplasia (BPH) is now a reality. The whole extract, the phytosterols, as well as the major constituents it contains (hypoxoside, and its active derivative rooperol) are now finding new applications in the area of anti-oxidants, anti-inflammatories, anti-diabetics, anti-convulsants, inhibitors of drug marker substances and new evidence is presented of activity against cancerous and pre-malignant cancer cells. In addition, the over-the-counter (OTC) trade has undergone enormous expansion.

Section

4

STABILISED CHLORINE DIOXIDE

IMPORTANT INFORMATION

THE INFORMATION YOU ARE ABOUT TO READ IS TO ENLIGHTEN YOU AS TO THE MOST COMMON FORM OF CHLORINE DIOXIDE.

PLEASE NOTE – THE FORM OF CHLORINE DIOXIDE THAT IS USED IN THE MANUFACTURING PROCESS OF FAITH™ DROPS IS NOT INDUSTRIAL CHLORINE DIOXIDE, BUT A STABILISED FORM (SCD) AND WITH THE ADDITION OF 12 HERBAL EXTRACTS (18 COMPOUNDS), ENSURES THAT NO TOXIC RESIDUE IS LEFT BEHIND IN THE BODYS CELLS AND TISSUES.

Chlorine Dioxide is a chemical compound with the formula ClO_2. This reddish-yellow gas crystallizes as orange crystals at -59°C. As one of several oxides of chlorine, it is a potent and useful oxidizing agent used in water treatment and in bleaching.

USES

Chlorine Dioxide is used primarily (≥ 95%) for bleaching of wood pulp, but is also used for the bleaching of flour and for the disinfection of municipal drinking water. The Niagara Falls, New York water treatment plant first used Chlorine Dioxide for drinking water treatment in 1944 for phenol destruction. Chlorine dioxide was introduced as a drinking water disinfectant on a large scale in 1956, when Brussels, Belgium, changed from Chlorine to Chlorine Dioxide. It's most common use in water treatment is as a pre-oxidant prior to chlorination of drinking water to destroy natural water impurities that produce trihalomethanes on exposure to free chlorine. Trihalomethanes are suspect carcinogenic disinfection by-product associated with chlorination of naturally occurring organics in the raw water. Chlorine Dioxide is also superior to chlorine when operating above pH7, in the presence of ammonia and amines and/or the control of biofilms in water distribution systems. Chlorine Dioxide is used in many industrial water treatment applications as a biocide including cooling towers, process water and food processing. Chlorine Dioxide is less corrosive than chlorine and superior for the control of legionella bacteria.
Chlorine dioxide is more effective as a disinfectant in most circumstances than chlorine against water borne pathogenic microbes such as viruses, bacteria and protozoa – including cysts of *Giardia* and the oocysts of *Cryptospordium.*

The use of Chlorine Dioxide in water treatment leads to the formation of the by-product chlorite which is currently limited to a maximum of 1 ppm in drinking water in the USA. This EPA standard limits the use of chlorine dioxide in the USA to relatively high quality water or water which is to be treated with iron based coagulants. (Iron can reduce chlorite to chloride).

Protective effect of low-concentration chlorine dioxide gas against influenza a virus infection Ogata N, Shibata T.
J Gen Virol 89 (2—8), 60-67; DOI 10.1099/vir.0.83393-0
http://vir.sgmjournals.org/cgi/contents/abstract/89/1/60

It can also be used for air disinfection, and was the principal agent used in the decontamination of buildings in the United States after the 2001 anthrax attacks. Recently, after the disaster of Hurricane Katrina in New Orleans, Louisiana and the surrounding Gulf Coast, chlorine dioxide has been used to eradicate dangerous mould from houses inundated by water from massive flooding.
Chlorine dioxide is used as an oxidant for phenol destruction in waste water streams, control of zebra and quagga mussels in water intakes and for odour control in the air scrubbers of animal byproduct (rendering) plants.

Stabilised chlorine dioxide can also be used in an oral rinse to treat oral disease and malodor, but its adverse side-effects are still being investigated.

PREPARATION

Chlorine dioxide is a highly endothermic compound that can decompose extremely violently when separated from diluting substances. As a result preparation methods that involve producing solutions of it without going through a gas phase stage are often preferred.

In a laboratory, Cl0² is prepared by oxidation of sodium chlorite:

$2NaClO_2 + C1_2 \rightarrow 2ClO_2 + 2\ NaC1$

Over 95% of the chlorine dioxide produced in the world today is made from sodium chlorate and is used for pulp bleaching. It is produced with high efficiency by reducing sodium chlorate in a strong acid solution with a suitable reducing agent such as hydrochloric acid and sulfur dioxide. The reaction of sodium chlorate with hydrochloric acid proceeds in one reactor via the following pathway:

$HC1O_3 + HC1 \rightarrow HC1O_2 + H0C1$

$HC1O_3 + HC1O_2 \rightarrow 2C1O_2 + C1_2 + 2H_2O$

$HOC1 + HC1 \rightarrow C1_2 + H_2O$

A much smaller but important market for chlorine dioxide is for use as a disinfectant. Since 1999 a growing proportion of the chlorine dioxide made globally for water treatment and other small scale applications has been made using the chlorate, hydrogen peroxide and sulfuric acid method which can produce a chlorine free product at high efficiency. Tradionally, chlorine dioxide for disinfection applications has been made by one of three methods using sodium chlorite or the sodium chlorite-hypochlorite method:

$2NaC1\ O_2 + 2HC1 + NaOC1 \rightarrow 2C1O_2 + 3NaC1 + H_2O$

or the sodium chlorite – hydrochloric acid method:

$5NaC1O_2 + 4HC1 \rightarrow 5NaC1 + 4C1O_2 + 2H_2O$

All three sodium chlorite chemistries can produce chlorine dioxide with high chlorite conversion yield, but unlike the other processes the chlorite-HC1 method produces completely chlorine free chlorine dioxide but suffers from the requirement of 25% more chlorite to produce an equivalent amount of chlorine dioxide.

Very pure chlorine dioxide gas (7.7% in air or nitrogen) can be produced by the Gas: Solid method, which reacts dilute chlorine gas with solid sodium chlorite.

$2NaC1O_2 + C1_2 \rightarrow 2C1O_2 + 2NaC1$

These processes and several slight variations have been reviewed.

HANDLING PROPERTIES

At concentrations greater than 15% volume in air at STP, C1O² explosively decomposes into chlorine and oxygen. The decomposition is initiated by light. Thus it is never handled in concentrated form, but is almost always used as a dissolve gas in water in a concentration range of 0.5 to 10 grams per litre. Its solubility increases at lower temperatures: it is thus common to use chilled water (5°C or 41°F) when storing at concentrations above 3 grams per liter. In many countries, such as the USA, chlorine dioxide gas may not be transported at any concentration and is almost always produced at the application site using a chlorine dioxide generator. In some countries, chlorine dioxide solution below 3 grams per liter in concentration may be transported by lands, are relatively unstable and deteriorate quickly.

REFERENCES

1. US Patent 4689215

2. Derby, R.I.; Hutchinson, W.S. 'Chlorine (IV) Oxide' Inorganic Syntheses, 1953, IV, 152-158

3. White, G.C. 'Handbook of Chlorination and Alternative Disinfectants', 4th Edition (Wiley, 1999).

What Is Chlorine Dioxide?

- Chlorine dioxide has been studied by scientists for many years and has been mentioned in many scientific journals.
- Do not confuse sodium chlorite with common table salt, which is sodium chloride
- Chlorine Dioxide is created by mixing sodium chlorite with an "activator." The formula is 1 drop of sodium chlorite with 1 drop of the activator. More will be said about the activator in the following chapters..
- As a matter of terminology, 1 drop of sodium chlorite, mixed with 1 drop of activator, is said to be "one drop of chlorine dioxide." Thus, the 1 drop of sodium chlorite is converted into 1 drop of chlorine dioxide via 1 drop of activator.
- Normal stabilized oxygen (e.g. Vitamin O, Aerobic O7 or Aerobic KO7) is usually between 3% and 6% sodium chlorite.
- Stabilized oxygen (i.e. sodium chlorite) has been used in alternative medicine for several decades. It is used primarily to prevent viral infections, such as colds and the flu, and to treat allergies.

The things you should NOT mix with sodium chlorite are just as important as the things you should mix with it.

Vitamin C, Antioxidants and Immune Builders

Vitamin C and other antioxidants can interfere with this treatment, and we therefore recommend that you do not mix protocols. If you are using an alternative treatment (something other than standard allopathic medicines), the complete the course or end it BEFORE beginning the FAITH Drop protocols.
This cannot be emphasized enough; you should not start this treatment until you have gone at least three days without any antioxidant (e.g. vitamin C, vitamin E, selenium, etc.) or immune builder.

Read the ingredient listing on your multi-vitamins. If they contain any of the above items do not continue taking the multi-vitamin until you have completed your course of FAITH Drops. You need to be extremely observant about checking the ingredients shown on your supplements and in your food, as Vitamin C and other antioxidants can neutralize the FAITH Drop protocols.

MSM is used during this treatment and unfortunately most MSM creams have antioxidants added to them. Do NOT use any MSM cream if any antioxidants have been added.

It is all right to eat foods or drink liquids which have vitamins or antioxidants in them naturally. But do NOT consume any foods or liquids which have had antioxidants added as a preservative, stabilizer or for any other reason.

A number of products are marketed as ***stabilised*** chlorine dioxide (SCD). These solutions do not actually contain chlorine dioxide but consist of solutions of buffered sodium chlorite. A weak acid can be added to SCD to ***activate*** it and make chlorine dioxide in-situ without a chlorine dioxide generator. The SCD is effective when the demand for chlorine dioxide is low and when impurities such as small amounts of sodium, can be tolerated. To ensure that the levels of sodium and the resulting toxins from the oxidation of pathogens do not accumulate, the FAITH™ Drops formula contains various extracts to readily and easily remove these toxins and render them totally harmless.

Chlorine Dioxide and Blood Chemistry

In order to understand why and how FAITH™ Drops works one must understand some of the chemistry of Stabilised Chlorine Dioxide and some of the chemistry of blood.

Chlorine dioxide is a gas that is dissolved in water when in the body. Chlorine and chlorine dioxide have been used as disinfectants for more than a hundred years and there is little doubt that they simply destroy pathogens of all kinds. Both have been used in water purification systems for more than 50 years. In recent years, in water purification systems chlorine has been used less and chlorine dioxide a great deal more as it has many benefits over chlorine. Chlorine dioxide is used extensively in water purification systems throughout Europe.

Although chlorine dioxide is somewhat more expensive than chlorine, its many benefits over chlorine have resulted in it being more extensively used in water purification systems than chlorine. In 1998 The American Chemical Society, Analytical Chemistry Division said chlorine dioxide is the most powerful antimicrobial agent known to man.

Chlorine dioxide kills pathogens by oxidation, a completely different chemical reaction than that of chlorine (chlorination) and oxidation results in no harmful chemicals. A 10-ppm drink of chlorine in juice will cause a healthy person several hours of nausea, while a 10-ppm drink of chlorine dioxide causes no nausea at all for a healthy person, and yet it is more efficient in killing pathogens than chlorine.

None of the functions or elements of the human body including friendly aerobic bacteria are affected by chlorine dioxide in diluted solutions of 50-ppm or less. On the other hand, solutions of 0.1 to 1-ppm seem to induce a spectacular immune response reaction attacking anaerobic bacterium, viruses, parasites, harmful molds, yeasts and other pathogens.

Without realizing it, hundreds of thousands of Americans have been drinking diluted solutions of chlorine dioxide for more than 100 years in various health waters sold to the public.
Diluted solutions of salt treated with electricity have been sold as "health water" under various names such as "Willard Water" which is still being sold. Most of these waters contain low levels of chlorine dioxide as a result of the electrolytic treatment. The chlorine dioxide concentration in such water was very low and thus was never strong enough to do a thorough job of killing pathogens in the body, however the benefits claimed for these health waters were more than likely caused by the chlorine dioxide as there is no other element in the water that would seem beneficial. Other health drinks have been sold that contain various chlorine derivatives. Stabilized Oxygen which is a diluted solution of sodium chlorite when diluted further with water very slowly gives off chlorine dioxide. FAITH™ is just a stronger solution to which a food-grade acid has been added. The citric acid often used in soft drinks reduces the solution to an acid condition but still within a food range which releases up to about 1-ppm chlorine dioxide, a level of concentration that is sometimes found in processed food but is 100's of times that which is produced in Stabilized Oxygen.

Because of the acetic acid in the citric acid, when added to a sodium chlorite solution, the solution begins to release chlorine dioxide on a linear timed basis for up to 12 hours. Stomach acid does not tend to significantly change this timed release. The amount of salts is calculated to release one milligram of chlorine dioxide per hour. An hour is the amount of time that it takes one milligram of chlorine dioxide to deteriorate into table salt and other harmless chemicals plus one very useful chemical. The linear production of chlorine dioxide and its constant deterioration into table salt and chemicals brings about a constant level of chlorine dioxide in the body for approximately 12 hours at which time all chlorine dioxide deteriorates leaving no trace and nothing that is deleterious to the body. Thus the poison index after that period of time is zero.

Hospitals and laboratories have used chlorine and chlorine dioxide for more than a hundred years as a disinfectant for cleaning floors, benches, and tools. No pathogen can resist them and no disease, either bacterial or virus has ever developed a resistance to chlorine dioxide. The human body has very few mechanisms that can differentiate between oxygen and chlorine dioxide. Since red blood cells cannot tell the difference, strong evidence indicates that as FAITH™ enters the stomach, absorption mechanisms in the stomach walls allow the red blood cells to absorb the chlorine dioxide and carry it to various areas of the body where oxygen ions are normally taken.

The natural pH of the human body is approximately 7. At pH 7 chlorine dioxide, in the absence of light, is fairly stable for a few minutes. However, disease pathogens are essentially all anaerobic and have a different fingerprint than that of friendly aerobic bacteria as do malaria parasites. As mentioned above, the red blood cells readily absorb the chlorine dioxide and once in the cell they attack the malaria parasite because the surface of the parasite has a lower pH than the blood.
It is the volatile nature of chlorine dioxide when it comes into contact with pathogen that makes it so effective both in water systems and within the human body. As previously indicated, the very nature of the malaria

parasite prevents it from ever developing a resistance to chlorine dioxide. However, we also believe that the volatility of chlorine dioxide also helps prevents pathogens from developing a resistance to it. It's like trying to develop a resistance to hand grenades. It just can't be done.

Normal levels of oxygen in the blood cannot destroy all of the pathogens present under disease conditions, however, when chlorine dioxide is adsorbed with the oxygen it is a different story. When a chlorine dioxide ion contacts a harmful pathogen it instantly accepts five electrons from the pathogen, or it might be more descriptive to say that it instantly tears off five electrons. An extremely fast chemical reaction is in essence an explosion, and this is exactly what happens on a microscopic level. The damage to the pathogen is a result of losing electrons to the chlorine ion and the release of energy. The pathogen, basically, is oxidized by chlorine ions and as a part of the action the chlorine becomes a harmless chloride (table salt). Two atoms of oxygen are released as ions from the chlorine dioxide ion but the oxygen has little effect other than to attach to hydrogen ions making water or attach to a carbon ion to make carbon dioxide.

It is the process of the chlorine dioxide ion oxidizing pathogens or other harmful chemicals that is beneficial to the body. Although the two oxygen ions of the chlorine dioxide ion are released, their charge level does not result in oxidation. The same process continues throughout the body where chlorine dioxide ions contact pathogens. It does not attack beneficial bacteria or healthy body parts, as their pH is not below 7. It will also oxidize diseased cells, such as infections or cancer. In the event that the chlorine dioxide does not contact a pathogen or other poison, it deteriorates into table salt and hypo-chlorous acid that is useable by the body.

The lymph nodes, for example, are one of the areas where the blood normally releases oxygen to oxidize various poisons in the node and then it carries the oxidized poisons away to the liver. The red blood cells carry the chlorine dioxide ions the same as oxygen and thus chlorine dioxide ions are also released in the lymph nodes. The chlorine dioxide ions are inert to normal cells but they will destroy disease pathogens found there.

A minute amount of naturally produced chlorine dioxide is found in the human body and one of the chemicals that chlorine dioxide helps to create as it deteriorates is myeloperoxidase a chemical that the immune system needs. The immune system uses this chemical, myeloperoxidase, to generate hypo-chlorous acid. The body uses hypo-chlorous acid extensively to kill parasites, bacteria, fungi, viruses, tumor cells, natural killer cells, and to destroy some waste products under normal conditions. However, diseases and body conditions can result in a deficiency in the hypo-chlorous acid needed to destroy the pathogens that are present. This is due to a medical condition known as myeloperoxidase deficiency. In the case of many other diseases there are other immune system reactions that can overcome the diseases, however in the cases of malaria and other extreme diseases, there is not enough hypochlorous acid to kill the parasites or pathogens, nor are there any other immune system reactions that can destroy them. Thus the hypo-chlorous acid created by chlorine dioxide as it deteriorates in the body is probably another mechanism by which malaria and other diseases are destroyed.

In the case of FAITH™ when taken by mouth by a malaria victim after adding citric acid and water, all malaria symptoms including chills, fever, aching muscles and joints, headache, nausea, and other symptoms are gone within four hours in 98% of all cases. The other 2% are symptom free within 12 hours. Although some malaria victims are sick from other diseases, we have never found a case in which the malaria parasite was not destroyed.

To this date, July 1, 2006, more than 75,000 malaria victims have been treated with no serious side effects reported. Since normally two deaths per each 250-malaria victims is expected, and zero deaths were reported in the 75,000 cases treated, we must assume that 300 lives have been saved and that the supplement is doing its job.

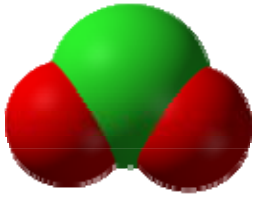
In February of 2006 clinical trials were conducted in a prison in the country of Malawi East Africa. The results were a 100% cure rate of all malaria victims treated in the prison. Several months later in the same year the Malawi government made its own separate clinical trials. They reported with the same results. All malaria victims treated recovered and there were no failures.

In the case of AIDS, when the supplement is injected as an IV solution into the blood, it is carried in the blood plasma throughout the body while generating chlorine dioxide that is no doubt absorbed into the red blood cells. In a series of 390 AIDS cases treated by IV in a small clinic in Kampala Uganda over an eight-month period beginning March 2004, 60% of the cases were considered free of AIDS in three days. The remaining 40% were judged free of AIDS in four to 30 days. Most of the AIDS victims treated were those that were sent home from the local hospital to die as the hospital could do nothing for them. Unfortunately, AIDS blood tests could not be made as the money and facilities were not available, however, all victims were known AIDS victims and the majority went back to work or to their lives with no AIDS symptoms left. Only two cases out of 390 were considered to have failed. Those few that were reviewed later, from one week to a couple of months, were still symptom free.

Section

5

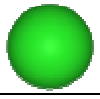
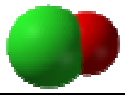
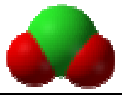
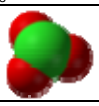
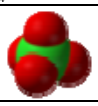
Chlorite



The chlorite ion is ClO_2^-. A chlorite (compound) is a compound that contains this group, with chlorine in oxidation state +3. Chlorites are also known as salts of chlorous acid.

Oxidation states

Chlorine can assume oxidation states of −1, +1, +3, +5, or +7 corresponding to the anions Cl^-, ClO^-, ClO_2^-, ClO_3^-, or ClO_4^-, respectively (known as chloride, hypochlorite, chlorite, chlorate, and perchlorate.)

Oxidation state	-1	+1	+3	+5	+7
Anion name	chloride	hypochlorite	chlorite	chlorate	perchlorate
formula	Cl^-	ClO^-	ClO_2^-	ClO_3^-	ClO_4^-
structure					

Some chlorite compounds

- sodium chlorite, $NaClO_2$
- magnesium chlorite, $Mg(ClO_2)_2$

Manufacture

The free acid, chlorous acid, $HClO_2$, is only stable at low concentrations. Since it cannot be concentrated, it is not a commercial product. However, the corresponding sodium salt, sodium chlorite, $NaClO_2$ is stable and inexpensive enough to be commercially available. The corresponding salts of heavy metals (Ag^+, Hg^+, Tl^+, Pb^{2+}, and also Cu^{2+} and NH_4^+) decompose explosively with heat or shock.

Sodium chlorite is derived indirectly from sodium chlorate, $NaClO_3$. First, the explosively unstable gas chlorine dioxide, ClO_2 is produced by reducing sodium chlorate in a strong acid solution with a suitable reducing agent (for example, sodium chloride, sulfur dioxide, or hydrochloric acid). The chlorine dioxide is then absorbed into an alkaline solution and reduced with hydrogen peroxide, H_2O_2 yielding sodium chlorite.

Usage

The main application of sodium chlorite is the generation of chlorine dioxide for bleaching and stripping of textiles, pulp, and paper. It is also used for disinfection in a few municipal water treatment plants after conversion to chlorine dioxide.

An advantage in this application, as compared to the more commonly used chlorine, is that trihalomethanes are not produced from organic contaminants. Sodium chlorite, $NaClO_2$ also finds application as a component of contact lens cleaning solution under the trade name purite.

Sodium chlorite, like many oxidizers, should be protected from inadvertent contamination by organic materials to avoid the formation of an explosive mixture.

References

- Chemistry of the Elements, N.N. Greenwood and A. Earnshaw, Pergamon Press, 1984.
- Kirk-Othmer Concise Encyclopedia of Chemistry, Martin Grayson, Editor, John Wiley & Sons, Inc., 1985

WARNING: PLEASE NOTE.

To ensure that Chlorite is rendered harmless to the human body FAITH™Drops has included in its formulation 12 herbal extracts (18 compounds) that effectively and readily remove all toxins from oxidized pathogens and the residue of Chlorite, from the body.

Please ensure that when taking FAITH™Drops, the container has the official FAITH Drops Trademark on it and that you buy your drops from a reputable and accredited dealer.

FAITH™practitioners are put through a rigorous training course and are accredited by the manufacturer as being capable and competent in the use and application of the FAITH™Drops.

Section

6

Citric Acid

Citric acid is a weak organic acid.
It is a natural preservative and is also used to add an acidic, or sour, taste to foods and soft drinks. In biochemistry, it is important as an intermediate in the citric acid cycle and therefore occurs in the metabolism of almost all living things. It also acts as an antioxidant.

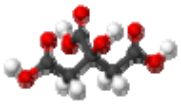
It exists in a variety of fruits and vegetables, most notably citrus fruits. Lemons and limes have particularly high concentrations of the acid.

Citric acid is recognized as safe for use in food by all major national and international food regulatory agencies. It is naturally present in almost all forms of life, and excess citric acid is readily metabolized and eliminated from the body.

FAITH™ Drops is purchased with a 30ml bottle of Activator of Citric Acid

To make a 10% solution of citric acid.

- The formula for mixing powdered citric acid with water for use as an activator in the drops is: 1:9.
- Mix one tablespoon of citric acid to 9 tablespoon of filtered or distilled water in a clean glass or jar.
- When the crystals have dissolved this is a 10% solution.

CITRIC ACID	
	
IUPAC name	2-hydroxypropane-1, 2, 3-tricarboxylic acid
Other names	3-hydroxypentanedioic acid-3-carboxylic acid Hydrogen citrate
IDENTIFIERS	
CAS number	[77-92-9]
PubChem	311
ChemSpider ID	305
PROPERTIES	
Molecular formula	$C_6H_8O_7$
Molar mass	192.123 g/mol (anhydrous) 210.14 g/mol (monohydrate)
Appearance	Crystalline white solid
Density	1.665 g/cm³
Melting point	153 °C
Boiling point	Decomposes at 175 °C
Solubility in water	133 g/100 ml (20°C)
Acidity (pK_a)	pK_{a1}=3.15 pK_{a2}=4.77 pK_{a3}=6.40
HAZARDS	
Main hazards	Skin and eye irritant
Flash point	?°C
RELATED COMPOUNDS	
Sodium Citrate, Calcium Citrate	

Section

7

RECOMMENDED TREATMENTS

This section of the document pertains specifically to research completed over more than 15 years.

The treatments indicated are a guideline only and are easily adjustable according to the patient's requirements.

FOR TREATMENT GUIDE SEE CHAPTER 9 FOR LISTING OF DISEASES AND APPLICABLE DOSAGES.

Curing Diseases

We do not suggest that the FAITH™ Drops cures disease we say only that FAITH™ Drops supplies the immune system with the tools it needs to fight disease. The fact that the FAITH™ Drops do not attack healthy cells is evidence that the immune system is in control. When using the FAITH™ Drops the immune system becomes more efficient.

About the size of drops:

I refer in all cases to the standard FAITH™ bottle and cap shown in this book, which is a 30ml bottle with a dropper cap.

The 30ml bottle holds approximately 450 drops. One milliliter (or one CC) is equal to approximately 15 drops.

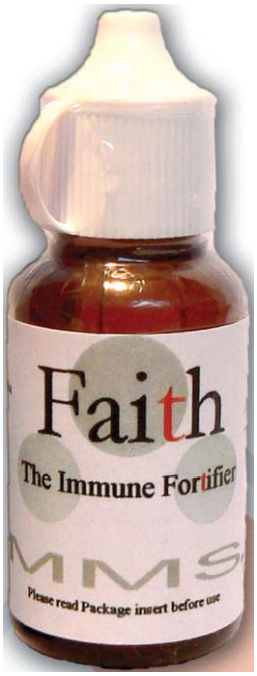


Fig.1. A standard FAITH™ 30ml HDPE bottle with dropper cap

Fig.2. A standard FAITH™ 30ml HDPE dropper cap

GENERAL INFORMATION:

When we refer to ***FAITH™ Drops***, we refer to the bottle containing the 12 Herbal Tinctures / extracts in a Stabilised Chlorine Dioxide solution.

When we refer to ***Activator***, we refer to the bottle containing the 9% Citric Acid solution.

When we refer to ***Mixers***, we refer to any of the following:

BLACK Herbal tea, Rooibos tea, Coffee, Ceylon Tea. ***OR***

FRUIT juices that DO NOT contain VITAMIN C - PREFERABLY, grape Juice, apple juice, pineapple juice or cranberry juice would be suitable provided they have no VITAMIN C added.

WHAT IS A PATHOGEN?

A pathogen is described as any biological agent that causes disease or illness to its host. Types of pathogens include Bacteria, Protozoa, Fungi, Parasites and Proteins.

Examples and/or typical effect of Bacteria Pathogens include:
Urinary Tract infections
Peritonitis
Typhoid
Foodborn illness such as Salmonella or E. coli
Tuberculosis
Anthrax
Toxic Shock Syndrome
Strep Throat
Pneumonia
Stomach Ulcers
Tularemia
Lyme Disease

Examples and/or typical effect of Virus Pathogens include:
HIV / Aids
Hepatitus A, B, C, D and E (liver disease)
Herpes
HPV (i.e. Genital Warts; HPV infection is a necessary factor in the development of nearly all cases of Cervical Cancer).
Warts
Chicken Pox, Small Pox, Cold Sores and Measles
Colds, Influenza Virus (i.e. H5N1, “Bird Flu”

Examples and/or typical effect of Protozoa Pathogens include:
Malaria
Giardiasis
Cryptosporidiosis
Chagas Disease

Examples and/or typical effect of Fungi Pathogens include:
Opportunistic Pneumonia
Ringworm
Candidiasis (Yeast Infection)
Histoplasmosis (i.e. “Darlings Disease”)
Cryptococcosis

Examples and/or typical effect of Parasite Pathogens include:
Roundworm
Tapeworm

Examples and/or typical effect of Protein Pathogens include:
BSE (Mad Cow Disease)
vCJD (Creutzfeldt-Jakob Disease)

We quote below from excerpts from the **Research Paper "War Against Microbes" written by the Bradford Reasearch Institute,** wherein it describes the virus inactivation as a result of a product called Dioxychlor®. This product is an inorganic sodium salt which under acidic conditions becomes unstable and decomposes into a variety of products including but not limited to chloride ions, hyperchlorous ions and nascent (atocmic) oxygen., resulting in a neutral molecule consisting of three electronegative atoms held together by covalent and coordinate covalent bonds. From this cluster, a single atom of highly reactive nascent oxygen is liberated onto the target organisms. This product has the same active ingredient as FAITH Drops which is derived from actived Chlorine Dioxide and so this process is the process that Faith Drops undergoes when activated with citric acid. One possible mechanism for the liberation of nascent oxygen from the chlorite ion (ClO_2) in an acidic environment involves the association or binding of "H" (proton normally bound to the oxygen of water as H_2O) to any of the three pairs of unused electrons in the outer shell of chlorine.

Virus Inactivation:

A virus typically consists of an outer shell or coating of protein encapsulating a nucleic acid which may be either DNA or RNA (a retrovirus). The skeletal backbone of the nucleic acids includes derivatives of phosphoric acid (H_3PO_4 a very strong acid) in which two of the original three hydroxyl groups (-OH) are substituted, leaving only one active hydroxyl group per phosphate.

Some viruses may have some glycoproteins incorporated into their protein coats that is proteins to which polysachirides (sugar chains) have been attached. The bound polysaccharides may attach to specific sites on the protein coat, effectively converting a protein surface into a polysugar surface. This new surface has specificity for certain polysaccharides found on the surface of specific cell types, thereby conveying specificity to virus binding as well as a degree of immunological protection.

Once bound to the appropriate cell type, the nucleic acid component of the virus is injected into the cell and in many ways, takes over the protein synthesis processes of the cell. Certain segments of the viral nucleic acid consist of genes that are responsible for the replication of the coat. The nucleic acid component replicates by a process known as "base pairing" in which each base of the original strands attracts and binds the corresponding base, forming a pair (A-T and C-G, described more fully below) through hydrogen bonding. The result is the replication of the complete virus until the cell bursts, releasing many additional viral particles into the surrounding medium. In the presence of these acidic nucleic acids, the dioxychlor molecule becomes unstable and releases nascent oxygen into the medium.

Nucleic acids, both RNA and DNA have many characteristics in common in fact, they are almost chemically identical. Each consists of a chain of alternating sugar (a modification of ribose, deoxyribose) and phosphate groups, known as the "phosphate – sugar backbone". Attached to a specific carbon of each deoxyribose group is an organic ring compound known as a "base". Althogether there are only 4 types of bases found in DNA namely, guanine "G", cytosine "C", one segment from DNA differ from another. RNA differs chemically from DNA in that the base thymine is replaced by the base uracil "U", representing a very subtle bio-chemical difference. There is also a subtle difference in the sugar deoxyribose. .

The base guanine found in both RNA and DNA, is very sensitive to oxidation, forming 8-oxoguanine as the oxidation product. The release of Dioxychlor® results in the oxidation of the guanine residue with a formation of 8-oxoguanine, thereby disallowing the replication of the viral nucleic acid base pairing. Although the replication of the protein coat may continue, the formation of a complete functional virus has been blocked by Dioxychlor® oxidation.

For the full report go to the Dioxychlor® website

THE STANDARD FAITH™ FORMULA PROTOCOL

The standard FAITH™ formula is administered or taken a maximum of three times per day and each dose does NOT EXCEED more than 3 drops per dose and a maximum of 9 drops per day. We recommend that the last dose be taken at bed time. Reduce the number of drops immediately nausea is experienced. Increase number of drops one at a time until just under nausea level.

Day 1 - First dose:

- One (1) drop of FAITH™ Immune Fortifier in a clean glass.
- Add to these drops 1 drop of **ACTIVATOR.**
- Swirl the glass to mix the activator and FAITH™ drops together. (Without the **ACTIVATOR** it will not work).
- Set the timer and wait three (3) minutes.
- After three minutes, gently blow once or twice onto the surface of the mixture to remove the gas build up and then add to the activated FAITH™ ¼ of a glass of tap water or any suitable **MIXER**.

Drink this solution IMMEDIATELY.
If no nausea was experienced continue with the protocols as follows:

Day 1 - Second dose:

- Two (2) drops of FAITH™ Immune Fortifier in a clean glass.
- Add to these drops 2 drops of **ACTIVATOR**
- Continue with the protocols as for the first dose.

Drink this solution IMMEDIATELY.
If no nausea was experienced continue with the protocols as follows:

Day 1 - Third dose:

- Three (3) drops of FAITH™ Immune Fortifier.
- Add to these drops 3 drops of **ACTIVATOR**
- Continue with the protocols as for the previous doses

Drink this solution IMMEDIATELY.
If no nausea was experienced continue with the protocols as follows:

Continue with protocols as per Day 1. Do not exceed a total of nine (9) drops per day. Follow Standard Faith Formula Protocol for until patient has recovered.

THE AGGRESSIVE FAITH™ FORMULA PROTOCOL

The Aggressive FAITH™ formula is administered or taken a maximum of eight times per day (every hour) and each dose does NOT EXCEED more than 15 drops per dose. We recommend that the last does be taken at bed time. If nausea is experienced reduce the number of drops immediately drop by drop until nausea recedes. Continue with protocols, slowly increasing the dosage drop by drop with each dose to just under nausea level.

Day 1 - First dose:

- Three (3) drops of FAITH™ Immune Fortifier in a clean glass.
- Add to these drops 3 drops of **ACTIVATOR.**
- Swirl the glass to mix the activator and FAITH™ drops together. (Without the **ACTIVATOR** it will not work).
- Set the timer and wait three (3) minutes.
- After three minutes, gently blow once or twice onto the surface of the mixture to remove the gas build up and then add to the activated FAITH™ ¼ of a glass of tap water or any suitable **MIXER.**

Drink this solution IMMEDIATELY.
If no nausea was experienced continue with the protocols as follows:

Day 1 - Second dose:

- Four (4) drops of FAITH™ Immune Fortifier in a clean glass.
- Add to these drops 4 drops of **ACTIVATOR**
- Continue with the protocols as for the first dose.

If no nausea was experienced continue with the protocols as follows:

Day 1 - Third dose:

- Five (5) drops of FAITH™ Immune Fortifier.
- Add to these drops 5 drops of **ACTIVATOR**
- Continue with the protocols as for the previous doses

If no nausea was experienced continue with the protocols as follows:

Day 1 - Fourth dose:

- Six (6) drops of FAITH™ Immune Fortifier.
- Add to these drops 6 drops of **ACTIVATOR**
- Continue with the protocols as for the previous doses

If no nausea was experienced continue with the protocols as follows:

Day 1 - Fifth dose:

- Seven (7) drops of FAITH™ Immune Fortifier.
- Add to these drops 7 drops of **ACTIVATOR**
- Continue with the protocols as for the previous doses

If no nausea was experienced continue with the protocols as follows:

Day 1 - Sixth dose:

- Eight (8) drops of FAITH™ Immune Fortifier.
- Add to these drops 8 drops of **ACTIVATOR**
- Continue with the protocols as for the previous doses

If no nausea was experienced continue with the protocols as follows:

Day 1 - Seventh dose:

- Nine (9) drops of FAITH™ Immune Fortifier.
- Add to these drops 9 drops of **ACTIVATOR**
- Continue with the protocols as for the previous doses

If no nausea was experienced continue with the protocols as follows:

Day 1 - Eighth dose:

- Ten (10) drops of FAITH™ Immune Fortifier.
- Add to these drops 10 drops of **ACTIVATOR**

If no nausea was experienced continue with the protocols as follows:

- Continue with the protocols as for the previous doses for Day 2.
- Continue increasing the drops daily with each dose until you reach a maximum of 10 drops per dose every hour or until nausea level is reached.
- Once nausea is experienced resume dosage at the previous level where there was no nausea experienced.
- Follow Aggressive Faith Formula Protocol until patient has recovered.
- Then resume treatment following the Maintenance Formula Protocols (see below)

THE MAINTENANCE FAITH™ FORMULA PROTOCOL

The Maintenance FAITH™ formula is as follows:

Follow the protocols for mixing the FAITH™ drops and do not exceed a total of three (3) drops ONCE daily for not more than ten (10) days per month.

Alternatively, administer three (3) drops of FAITH™ three (3) times a day at the onset of flu or if you experience any feelings of being unwell.

Drink this solution IMMEDIATELY it is mixed.

Recommended dosages for Children:

It is perfectly safe to have children and babies to take FAITH™.
Children should have fewer drops than adults.
For children 12 years and younger no more than TWO drops in total – starting with one drop, twice daily.
For children 13 years and older
- The formula is ONE drop per 10kg of weight not exceeding 3 drops per dose.
- Do not exceed this dose and not more than 3 times daily.

Larger doses.

Do not allow yourself to be fooled into doubling or tripling the doses. It does not mean that if 15 drops is good (per dose) that perhaps 45 drops per dose is three times as good. This is not necessarily the case.

DO NOT EVER BEGIN WITH MORE THAN 3 DROPS

Exception to the rule.

- In the event the person has a life-threatening disease only then could one start off with a large dose such as 15 drops.
- A large dose of drops often assists recovery in patients in the event of one having been poisoned, if one has had food poisoning or if one has been exposed to an infectious disease.

What time during the day is best to take FAITH™?

If you have recommended one dose per day of FAITH™, it is best to take just before going to bed as it works very fast and as a result, people often become sleepy after taking a dose of FAITH™. This simply indicates that the immune boosting process has begun. This sleepiness is a very good sign so allow them to take a nap if possible, for it is during sleep that the healing usually begins and they often feel much better when they awaken.

If your recommendation is to take it twice in a day, take one of the doses it in the evening before going to bed. More aggressive regimes require multiple doses – ensure that the last dose is taken in the evening before going to sleep.

However, if you feel a cold coming on in the morning or in the afternoon do not wait until bedtime to take a dose. Take a dose anytime you feel like something is trying to come on.

Side Effects:

The immune system attacks unhealthy conditions using the FAITH™ drops and to date there has never been any evidence of an attack on healthy cells. However, if one supplies the immune system with excessive FAITH™ Drops, the immune system appears to attack unhealthy conditions vigorously but a nauseous reaction sometimes occurs, occasionally even vomiting and diarrhoea, this presents itself in 1:500 cases. When this does occur, one has simply taken too large a dose at first. Note that when you kill a lot of bacteria, viruses or parasites that have poison in them, that poison is likely to be dumped into the system and the end result is usually nausea and often even vomiting or loose stools. Simply reduce the number of drops.

One may also experience isolated pains related to the illness the person taking the drops has. This is as a result of the FAITH Drops assisting the immune system in attacking the pathogen / virus / bacteria etc. Do not stop drinking the drops at this point, rather continue, as the pain will disperse once the condition has been rectified by the body.

Please note: normally healthy people can take these drops without nausea, especially after a meal.

Stabilised Chlorine dioxide (SCD) is more powerful than any drug by far when utilised in the body to boost the immune system. The immune system selects and attacks many things that are not natural to the body and immediately destroys poisons that have been generated by disease. With the addition of the 12 herbal extracts (18 compounds), FAITH™ Drops has become an effective and powerful tool to ensure the removal of all of these toxins generated by disease as well as any toxic residue of the Chlorite used to generate SCD.

All known diseases and negative medical conditions:

We have not listed a great number of diseases which can be handled by the immune system in hours, days, or only a week or two, as there are so many. FAITH™ will probably help the immune system do its job no matter what the disease. For easy reference refer to the dosage table in Chapter 9 of this manual.

Diseases that are not caused by viruses, bacteria, and other germs may not be attacked directly by the FAITH™ but the benefit may come indirectly. Almost any disease generates various poisons which in turn cause the body to be sick.

When the immune system has SCD (Stabilised Chlorine Dioxide) which, of course, is furnished by FAITH™ it can often neutralize such poisons. Never assume that FAITH™ will not improve the immune system no matter how weak a condition the Immune system might be in or no matter what disease may be present itself in the body. It is not the disease that FAITH™ Drops is fighting – the drops are merely a tool to be utilized BY the body.

Take FAITH™ daily to keep the body clear of most poisons and disease-causing organisms.

Diseases that the immune system cannot help directly:

The immune system can use the FAITH™ to attack diseases caused by bacteria, viruses, parasites, yeast and moulds, but many diseases are caused by other medical conditions. Perhaps this is fact but since the first lot of research done, hundreds of people have reported almost every medical condition known as having been improved. There are no known diseases that do not respond to FAITH™ in some measure. Some diseases need to be handled by a proper diet and the immune system, when supplied with FAITH™ almost always produces some improvement in these diseases and their associated conditions.

Patients taking the drops and presenting with Lupus, Fibromyalgia, Diabetes, Depression and even ADD have reported improvements in their condition or in some cases complete recovery.

To ensure that the immune functions at optimum levels, we recommend that one makes use of the Maintenance Formula Protocols. A weakened immune system allows bacteria and viruses to infiltrate the weakened areas of the body and can often cause illnesses such as pneumonia etc.

With FAITH™ the immune system can fight back and often overcome the infections or other conditions that have been caused by the weakened condition. This can in turn help other diseases to clear up.

Remember, Stabilised Chlorine Dioxide is the most powerful killer of pathogens known to man. To ensure the safe removal of toxins, we have added 18 compounds (12 herbal extracts) to assist the body in the removal of any toxic residue.

FAITH™ can also be used Transdermally, anally and intravenously either with drip or direct injection. For these protocols contact the supplier directly, and / or refer to the dosage table in Chapter 9 of this manual.

Please note that in order to administer the drops intravenously, the person must be a licensed healthcare practitioner who has the permission of the MCC to administer the drops.

We at FAITH™ do not claim to heal anyone or anything. We only claim that our Immune Fortifier is exceptionally effective and provides the body with the necessary tools to do the job itself.

The immune boosting capabilities of the herbal extracts used in our formula are well documented.

Warnings:

1. Do not allow children to use FAITH™ unsupervised,

2. Do not allow FAITH™ to sit in direct sunlight even if it is in a colored bottle as it will create pressure in the container which could rupture and cause severe burns.

3. FAITH™ that has been sitting in direct sunlight can cause very painful burns.

4. Never allow full strength FAITH™ to remain on your skin for more than 10 seconds as it can cause mild burns.

5. Ensure that the product you use carries the official FAITH™ Drops Trademark to ensure that you do not cause additional damage to organs by drinking generic copies of our product.

6. Please ensure that should you venture upon a “generic” version of our product that you request from the supplier copies of the products NAPPI Code, the registration documents with the Medicine Control Council as well as the Consumer Council registration Documents. If you are still not sure that it is FAITH™ Drops that your have been sold, check for the call centre number on the labels and boxes as well as batch numbers and expirey dates. Generic copies of our product are currently being manufacturered at home WITHOUT the essential 12 herbal extracts that protect the body from toxin. The supplier of this generic product will not be able to show you documentation of the pharmaceutical company that is authorized to manufacture their product under licence. The manufacturing company should be registered with the Pharmaceutical Council of South Africa. If after all this you are unsure, FAITH™ has a very sophisticated consumer and agent registration database – we can tell you with ONE phone call if the person selling you this product is a registered agent or NOT. If the agent is registered it means they have undergone training in the use and application of the FAITH™ Drops and have been accredited by the manufacturer of the product.

Using FAITH™ on the Outside of the Body:

Please read this carefully.

It is possible to cause problems on the outside of the body when using FAITH™ in too strong a solution.
Once you have added the activator to FAITH™ Drops it can no longer cause a burn, but it can still cause a problem when used full strength.

- When adding six to ten drops in a glass with 6 – 10 drops activator, with the exception of insect bites covering small areas of the body, always add at least 125ml (125cc) of water before putting the diluted solution on the skin or in the hair. For specific dosages refer to Chapter 9.
- Never add the 10 drops mixture to any kind of body lotion.
- When the FAITH™ solution is too strong on the outside of the body, it can weaken the cells and make them more susceptible to bacteria and infection.

When the problem doesn't clear up right away:

SCD is an exceptionally strong oxidizer and its purpose in the body is to oxidize any unhealthy deposits in critical areas that are making you ill. Poisons such as heavy metal deposits or bacteria growing somewhere or any other unhealthy conditions will need to be worked on continuously by the immune system. However, the few drops that one takes daily will result in only a few milligrams of SCD entering the system and it is this small quantity of SCD that has to aid the body to remove pathogens. This could be a long slow process or one could see or experience a difference in a very short space of time. Each person is different.
If you are experiencing nausea when you try to increase your dosage level this should indicate to you that the immune system is coping with toxins in the body. As advised already, reduce the number of drops to just below nausea level. Remain at that level until you are able to increase the drops – slowly. Some people are able to immediately begin with 3 drops and increase daily until they are taking 15 drops per dose without any problem whatsoever. Others might find it difficult to begin with even one drop. As explained each person is different and perseverance is the key to success.

Diabetes, ALS and many other diseases

The Coxsackie's B virus, according to much of the present medical literature, causes up to 1/3 of the heart attacks. It causes the heart to become inflamed. The heart doesn't work very well when inflamed. It is also reported that this virus causes the pancreas to become inflamed thus causing type 1 and type *2* diabetes.

In the case of ALS (Lou Gehrig disease) there is medical literature indicating the echo virus - 6 and - 7 is most likely the cause. If that is so, then there is a chance that FAITH™ can help cases of ALS.
The idea is to keep the body as saturated as possible with the SCD.

There is no guarantee, but up until now there has never been even a slight glimmer of hope.

Curing diseases with drugs?

Can it be done? No. The only thing that ever heals the body is the various mechanisms of the body. Healing is controlled by the body. NO drug AND no nutrient can heal the body. There are things that the body can use to aid in the healing process, but in the final analysis, the body always does the healing.

FAITH™ cannot heal or cure the body of anything. It may or may not kill pathogens in the body without the body's control. However, once the germs, pathogens or poisons are destroyed, healing can take place at a much faster rate. This is why healing in so many parts of the body seems to happen so much quicker. It is not that FAITH™ has healed anything, it cannot - but it can clear the way for healing to take place.

We have every confidence in our product, however, what we don't have confidence in is mans impatience with himself and the possible factor of human error.

In cases of chronic diseases such as cancer, hepatitis, heart conditions and diabetes, we recommend that you consult with your healthcare practitioner before beginning the drops and that you continue with your regular check-ups and medication.

Our Head Office will be able to refer you to a Doctor that is accredited in the use and application of FAITH™ Drops. Please feel free to call them at any time.

- Always reduce the number of drops if you feel nausea, but continue *to* increase the number of drops, keeping below the nausea level as much as you can.
- ***Do not*** remain at high dosages unless you really see an improvement in the condition you are trying to handle.
- When the condition is overcome, be sure to drop back to make use of the Maintenance Formula Protocols.

Antidote for too much FAITH™:

- For someone who has taken too large a dose of FAITH™ and is then nauseous, it is possible to drink a glass of cold water to which has been added 1000 MG of vitamin C.
- Bicarbonate of soda also as such an antidote. Use a level teaspoon full of Bicarbonate of Soda or "Enos" in a glass of water.
- If you us the vitamin C do not use the Bicarbonate of Soda or "Enos".
- Use either one but not both.

Overdose of FAITH™:

- Anyone who has consumed more than 2.5ml (2.5cc) of FAITH™ directly from the bottle – inactivated and undiluted one should immediately drink as much water, as much as possible.
- It is possible to drink as much as several tablespoons of FAITH™ straight from the bottle, but this would make one very sick, and is NOT the way the drops are intended to be utilisted.
- It is best to add ½ teaspoon full of Bicarbonate of Soda to each glass of water. Be sure to see a doctor or emergency poison clinic as soon as possible.

Training the individual:

You as the healthcare practioner have read these notes and hopefully you now know how to use the FAITH™ drops BUT if you have recommended that your patient take the FAITH™ drops, YOU must train them to use it properly. Do not expect that you can rely only on the directions on the insert. People must be trained to use the drops by actually holding a training session.

Have the individual drop two drops of FAITH™ Drops into an empty glass, add an equal number of drops of ACTIVATOR. Wait the prescribed 3 minutes then add a MIXER, such as water.

Every mistake in mixing the drops has been made to date – mostly because people either don't listen, don't read or don't understand. If you sit with them whilst they mix their first dose and they make their own notes – they cannot make a mistake.

Making mistakes in mixing the formula only hinders their recovery. Train them properly – today.

Please stress to the user that they should ALWAYS read the bottle labels and leaflet/inserts and should err on the side of caution if they are still unsure of how to proceed. Make sure that the user is able to understand the importance of this.

ALWAYS READ LABELS AND INSERTS. MAKE SURE YOU UNDERSTAND HOW TO PROCEED.

REFER ANY QUERIES TO YOUR HEALTHCARE PRACTIONER OR EMAIL US ON: damaansax@vodamail.co.za

Observations:

The following information has been discussed with medical doctors who have agreed with me, but some had their own opinion as to what FAITH™ actually does in the body. These notes are from ten years of observing people that are recovering whilst taking FAITH™ drops.

What appears to be happening in the body when FAITH™ is ingested after using the various activators listed are:

1). FAITH™ Drops destroys anaerobic microorganisms including viruses, bacteria, molds, yeast, and parasites. These are the disease causing organisms. There are many reasons to believe that this is what happens. This generally happens between 4 hours and 4 weeks, but in less than one week in most cases. This includes all forms of infection and other microorganisms, as well as blood diseases such as leukemia.

2). FAITH™ Drops oxidizes the heavy metals within the body. We believe this because there have been a number of tests where the hair roots were checked before and after taking FAITH™. Afterwards, the heavy metals were gone. That includes mercury and lead and several other metals. Unfortunately, hair root testing is not totally accurate, but it is a good indication. Oxidation of the heavy metals is not the same process as chelating, but the results are the same. When a heavy metal is oxidized it is neutralized and is simply washed out of the body.

3). FAITH™ Drops is carried throughout the body where it neutralizes foreign matter that is generally poisonous to the body. When oxidized, these poisons are neutralized and merely wash out of the body. Almost all poisonous material will be acidic in nature, thus allowing FAITH™ to recognize it. These poisons will all be attached at various locations and they will be hindering the function of the body. As they are oxidized they will no longer stay attached and will *be* washed out of the body.

4). Most forms of poisons from snakes and other venomous animals are oxidized when adequate amounts of FAITH™ Drops is taken. Most food poisons found in restaurants or in your refrigerator are oxidized, which is why one should take a number of doses when feeling the effects of food poisoning.

5). The poison generated in burns, particularly type 3 burns when covered immediately with FAITH™, or even within hours, is neutralized by the FAITH™ Drops. The FAITH™ Drops solution should not be left on more than 1 minute and it should be rinsed off with sterile water.

Using FAITH Intravenously

For making use of FAITH™ intravenously, kindly contact Dr. Michael McDonald via email.
Anyone attempting to perform intravenous applications without first being a registered medical practitioner and without MCC permission does so at their own risk.

Dr. Michael McDonald
Email: damaansax@vodamail.co.za
Cell: +27823399799

Overview of the Use of FAITH and Main Points

1. A maintenance dose of FAITH™ is three drops once a day for ten days in one month.

2. A full dose to overcome diseases is maximum 10 drops per dose. This is for Chronic Diseases or for life threatening disorders.

3. For life-threatening disease a full dose would be administered every hour each day until the disease is gone. Other protocols may apply for certain diseases. See table in Chapter 9.

4. One drop of FAITH™ contains nine milligrams of sodium chlorite.

5. When six drops of FAITH are mixed with six drops of **ACTIVATOR** in a dry clean glass, one milligram of chlorine dioxide will be generated in three minutes. The solution will not become much stronger than one milligram as the chlorine dioxide near the surface of the liquid goes into the air. You can make it stronger by putting a lid on the solution preventing much of the chlorine from escaping.

6. When 125ml (125cc) of apple juice, grape juice, or pineapple juice **MIXER** is added to the mixture and the drink is consumed, one milligram of chlorine dioxide will be generated each hour for approximately 12 hours within the human body.

7. Chlorine dioxide, generated by FAITH™ Drops, is the most powerful killer known to man of microorganisms, such as, viruses, bacteria, parasite, molds and yeasts.

8. Chlorine dioxide has been known and used for over 100 years as a sterilizer for hundreds of uses in hospitals and the food industry.

9. Do not allow FAITH™ to sit in direct sunlight. It creates high pressure and has been known to blow the lid off. The liquid after contacting sunlight becomes very strong and will create burns if not washed off immediately. In the case of contact with eyes, flush with water for several minutes.

10. Any dose of FAITH™ requires an equal number of drops of **ACTIVATOR** in the form of citric acid **with the exception of intravenous use.** Without citric acid there is very little benefit.

11. Do not use **ACTIVATOR** (citric acid) when used intravenously. The blood will accomplish what the **ACTIVATOR** would do otherwise, but it does it more slowly.

12. Only registered Medical Practitioners may administer the drops intravenously and only with the express permission of the MCC.

13. Sodium chlorite is used throughout the world to generate chlorine dioxide for water purification.

14. Sodium chlorite was first used for treatment of humans in 1926 in Germany by Dr. William F. Koch, MD, Ph.D. It has been use in the U. S. since 1930.

15. Since 1926 it has been considered by those who use sodium chlorite that it is Stabilized Oxygen and that it furnishes oxygen to various parts of the body. That is a mistaken idea. No useable oxygen is available from sodium chlorite; however Chlorine dioxide is also an oxidizer and is much more powerful than oxygen.

16. Vitamin C that is used in juices as a preservative will completely prevent the FAITH™ from working. **DO NOT USE JUICES THAT HAVE VITAMIN C ADDED TO THEM. READ THE INGREDIENTS ON THE CONTAINER FIRST.**

17. Some pure apple juices do not have added vitamin C.

18. Orange juice will prevent FAITH™ from working. It prevents the chlorine dioxide from being generated.

19. Any of the following **MIXERS** - Apple juice, cranberry juice, grape juice, and pineapple juice are okay to add to the FAITH™ formula, after the three minute wait - if the juices have not had vitamin C added.

20. Shelf life, if the bottle has not set in the direct sunlight, is two to four years if the bottle is dark glass or plastic. If the bottle is in the direct sunlight it will last only about an hour even when if it is in dark glass or plastic.

21. Full strength FAITH™ Drops is alkaline at a pH of 13. It can cause a slight burn if not washed off of the skin in less than a minute. Flush with water. When activator is added to 6 or 12 or even 15 drops the pH is then 4.5. When apple juice is added after three minutes the pH matches the apple juice exactly, which is approximately 4.8. The other juices mentioned in this book are similar. Use only apple, grape, pineapple or cranberry juices that do not have vitamin C added.

22. FAITH™ Drops can be used to purify water. Use 8 drops per gallon when in the jungle or in the woods. Wait 8 hours after adding the drops. The water is then safe. Or use 6 drops per gallon in a foreign country to make the water safe.

Section

8

ADDITIONAL RESEARCH

The Overnight Cure for Cancer (OCC)

by R. Webster Kehr of the Independent Cancer Research Foundation, Inc.

Disclaimer

This treatment has not been evaluated by the FDA. The term "cure," as used in this article, is the alternative medicine definition of "cure," meaning the vast majority of the cancer cells are killed or reverted into normal cells.

General Warnings

This cancer treatment is new. It is experimental, though it has been proven to be totally safe even for very advanced cancer patients. In other words, its safety is NOT experimental, only its effectiveness is experimental. This treatment is based heavily on a great deal of scientific evidence combined with solid cancer theory.

Be aware that chlorine dioxide is toxic in high doses. The doses chosen for this treatment have been chosen to be well within safe, non-toxic levels. However, do not assume significantly higher doses of chlorine dioxide will be safe. Stick within the safe doses of this treatment. Several people have already taken this treatment and no one has had the slightest complaint about the doses.

Please note that this treatment is spread out over 12 hours.

This is also part of the safety of this treatment. Do not take the total daily doses in less time than the treatment prescribes!!

Note further that DMSO is far, far less toxic than chlorine dioxide, thus the doses of DMSO are simply not a factor. Earlier versions of this treatment used 25 tablespoons of DMSO without a single complaint. This treatment uses less than ½ teaspoon of DMSO during the entire treatment.

Because this is a new treatment, this article changes from time to time. It is important to read this article in its entirety just before starting the treatment (i.e. after you have obtained the necessary materials). This article is still changing as feedback is received from cancer patients who have taken the treatment.

The OCC is Not Ready for Advanced Cancer Patients

It will take several months before the OCC can be fine-tuned to be effective for advanced cancer patients.
Thus, the Overnight Cure for Cancer should NOT be used by advanced cancer patients. This is not because the OCC is dangerous; it is because advanced cancer patients should not take a week off for any cancer treatment which has not been proven to be effective for advanced cancer patients.
In other words, advanced cancer patients should ONLY use alternative cancer treatments which have been proven to be effective for advanced cancer patients, such as the Cellect-Budwig Protocol or the Bill Henderson Protocol or the Cesium Chloride Protocol.

See the Cancer Tutor website for a discussion of the proven alternative cancer treatments.
Children under Twelve Should NOT use This Treatment except under the supervision of a Medical Professional.

Do NOT Use This Treatment whilst using Prescription Drugs.

This alternative cancer treatment should NOT be combined or used with ANY prescription drugs. The reason is that this treatment may greatly enhance the effectiveness of prescription drugs. For example, if a prescription drug binds to DMSO, which is part of this treatment, the DMSO may drag the prescription drug into the cancer cells, thus killing the cancer cells. This treatment is designed to transform cancer cells back into normal cells. Killing cancer cells may yield undesirable inflammation and swelling and/or create excess debris from dead cancer cells.

Do NOT Use This Treatment with some Alternative Cancer Treatments

There are two kinds of alternative cancer treatments or products which should NOT be used with this treatment.

1. This cancer treatment should NOT be combined with alternative cancer treatments which kill cancer cells. Should a product which kills cancer cells bind to the DMSO, the DMSO may allow it to kill far more cancer cells than it normally would. This could lead to excess debris from dead cancer cells. In other words, do NOT combine this treatment with any alternative cancer treatment or product which kills cancer cells!!
   This treatment is so potent; if cancer cells were killed it could create a dangerous situation for the patient!! Use either DMSO combined with Faith or select the alternative treatment of your choice BUT DO NOT combine the two treatments.

2. This treatment should NOT be used with alternative cancer treatment products which contain Vitamin C, Vitamin E, selenium or any other antioxidant or immune builders. These products will neutralize the effectiveness of this treatment. More will be said about these products below.

Warning For Women Who Are, or Might Be, Pregnant

Women who are pregnant, might be pregnant, might become pregnant, or are nursing, should NOT take this treatment. The affect on an unborn fetus could be fatal to the fetus due to the high doses of chlorine dioxide in this treatment combined with the extremely low weight of the fetus!! In addition, fetus have many undifferentiated cells and this treatment will TARGET cancer cells, which are also undifferentiated!! Thus, this treatment may inadvertantly target undifferentiated fetal cells!!!!

TAKE THIS WARNING VERY, VERY SERIOUSLY!!!

ALLERGIES TO DMSO

I have never seen a case of an allergy to DMSO, but apparently in rare cases someone is allergic to DMSO. When you get your bottle of DMSO put one drop on your skin and spread it out and see if you have an allergic reaction. If not, an hour later put 10 drops on your skin and spread it out. If you do not have a reaction, go ahead with the treatment.

What Causes Cancer?

Most people believe that it is DNA damage that causes cancer. While in rare situations, DNA can have a negative affect on a person's immune system. DNA normally has absolutely nothing to do with the development of cancer.

The "theory" that DNA causes cancer is driven by a desire to convince the general public that a cure for cancer is 100 years away. This deception is to convince the general public that cancer can only be treated as a highly profitable chronic disease. The cancer treatments and propaganda which are chosen by the FDA and pharmaceutical industry (and world-wide for that matter, I know of no country on earth with honest politicians) are chosen on the basis of profitability, not effectiveness. There is no money in curing cancer, but there are hundreds of billions of dollars in pretending cancer is a chronic disease and there is no cure for cancer. All of this is nonsense driven by greed.
The fact is that cancer is caused by a special type of microbe which gets inside of normal cells and turns the cells cancerous.

Dr. Royal Rife did an enormous amount of research into the relationship between microbes and cancer in the 1930s. He would inject mice with a virus and in 100% of the time the mice would get cancer.
Dr. Rife proposed a cure for cancer which did nothing but kill these viruses. His cure was successful. However, note that his cure had no intention of killing cancer cells; its only goal was to kill microbes which were inside of the cancer cells. Once the microbes were dead the cancer cells were able to revert back into normal, differentiated cells.

Many other cancer researchers, starting over 100 years ago in the 1800s, have isolated the cause of cancer to be microbes, though they did not understand the mechanism inside the cell which caused a microbe to make a cell cancerous.
Now, the entire mechanism inside the cell which allows microbes to cause cancer is understood. We now know that a microbe which is able to get inside of a normal cell blocks glucose from being used to create pyruvate, which in turn blocks the Citric Acid Cycle and in turn the Electron Transport Chain, both in the mitochondria. Blocking these two chemical chains cause the number of ATP molecules in a cancer cell to plummet!!

A detailed discussion of how microbes cause cancer can be found in the Cancer Theory article. In essence, the article on cancer theory is also the theory behind this treatment. The cancer theory article also discusses the four different categories of treatments which can cure cancer. See this article:
Cancer Theory.
You may have noted in the article just linked to that as long as microbe(s) are inside cancer cells, the cell is unable to revert into a normal cell.

While many people have tried to replicate Dr. Rife's electromedicine cancer treatment (which was destroyed by the FDA and AMA), this treatment, the Overnight Cure For Cancer, is the first non-electromedicine cancer treatment ever designed to specifically kill the microbes inside the cancer cells as a cure for cancer.

If you kill the microbe(s) inside the cancer cells the cancer cells WILL NOT DIE!! The cancer cells will actually be able, within a few days, to restore their Krebs Cycle and Electron Transport Chain and become normal, differentiated cells again. Thus, there is zero debris from dead cancer cells or broken-apart DNA. That is why this treatment can be so effective so fast.

This treatment is not only based on solid cancer theory, it has behind it a great deal of scientific evidence.
So how is it possible to kill a microbe which is comfortably living inside a cancer cell?
First, you must get a chemical which is known to kill microbes inside the cancer cell. Chlorine dioxide is such a molecule.

So how do you get chlorine dioxide inside the cancer cells?
You use DMSO. DMSO is officially: Dimethyl Sulfoxide. DMSO is a byproduct of the wood industry and is totally natural and will bind to many different kinds of molecules and drag them through the skin into the bloodstream (i.e. transdermally).

The details of the necessary sequence for the Overnight Cure For Cancer (OCC) to work is as follows:
1) You find a molecule known to kill microbes on contact chemically, not mechanically. Chlorine dioxide is such a substance. In fact, chlorine dioxide is the substance used in the OCC to kill the microbes inside the cancer cells. Because chlorine dioxide normally stays in the bloodstream, it generally only kills microbes in the bloodstream.

2) DMSO must be able to bind to chlorine dioxide so that the chlorine dioxide will get into the bloodstream transdermally. Taking chlorine dioxide orally can be a very slow process; taking weeks or months to build up to therapeutic doses. DMSO has been studied and used since the early 1960s to bind to molecules and drag them through the skin into the bloodstream.

3) Once inside the body, the DMSO, with chlorine dioxide in tow, must target cancer cells. This is a very well-known ability of DMSO. DMSO has been combined with chemotherapy, and many other substances, to get them inside of cancer cells. The DMSO/chemotherapy cancer treatment, which was designed to kill cancer cells by using DMSO to get chemotherapy inside the cancer cells, was a superb cancer treatment, but it was shut down by the FDA in Georgia.

4) Once at the site of a cancer cell, the DMSO and chlorine dioxide must get inside the cancer cell.

5) Once inside the cancer cell the chlorine dioxide must be able to kill the microbe(s) inside the cancer cells.
Once the microbe(s) are killed inside the cancer cell, the cell will be able to restore its Citric Acid Cycle and Electron Transport Chain (ETC). In about a week the cancer cell will be a normal cell. The cell will revert from an undifferentiated cell to a differentiated cell.

Most of the above items are known to be true. For example, it is KNOWN that DMSO and chlorine dioxide will bind together. And it is KNOWN that DMSO will carry chlorine dioxide through the skin.
It is also known that chlorine dioxide can kill microbes while bound to DMSO. For example, I sprayed some chlorine dioxide, bound to DMSO, on some mould. Within a minute the mould was dead. Chlorine dioxide bound to DMSO has also been used to cure toenail fungus, thus we know DMSO and chlorine dioxide will penetrate skin, and while bound together, chlorine dioxide can kill microbes.
In fact, the only issue which has not been proven is that DMSO and chlorine dioxide, bound together, can get inside a cancer cell. However, knowing how cell membrane ports are built using proteins, and knowing the size of the DMSO / chlorine dioxide molecule, it seems obvious that they will get inside the cancer cells.

Furthermore, as just mentioned, DMSO is known to pull some forms of chemotherapy inside of cancer cells. Thus, it is highly likely it will pull chlorine dioxide through the cancer cell ports.

However, a new issue which has recently come to light is whether the diet of the person may neutralize, to some degree, the effectiveness of the chlorine dioxide itself.
This treatment is very different than the normal way that DMSO and chlorine dioxide are used. The reason for the intensity of this treatment is that it is necessary to kill EVERY microbe inside of EVERY cancer cell in a short amount of time. If you don't accomplish that, the surviving microbes will continue to breed inside the cancer cells and the cancer will again start spreading. So it is a safe, but intense, treatment.

Why Is This Called the: Overnight Cure for Cancer?

The vast majority of alternative cancer treatments kill cancer cells. Cancer treatments which kill cancer cells can only kill so many cancer cells per day or else the debris from dead cancer cells can overwhelm the liver.

While chemotherapy must be "paced" because of all the damage done to non-cancerous cells; many alternative cancer treatments must be "paced" because they target cancer cells and kill so many of them that the liver is burdened with debris from dead cancer cells.

Thus, most alternative cancer treatments must be "paced," meaning doses of substances must be limited to the ability of the liver to process the debris from dead cancer cells.

Some of the treatments that kill cancer cells also cause swelling and inflammation; even tumors can swell during the treatment. The reason for this is that if cancer cells are killed slowly, the immune system will recognize the cells as being "sick" and will attack them. The inflammation, swelling and possibly congestion (for lung cancer) can also cause alternative cancer treatments to need to be paced.

For example, the normal dosage for cesium chloride and DMSO must be cut in half for brain cancer and certain other cancer conditions.

However, when you kill the microbe(s) inside a cancer cell, but do NOT kill the cancer cell itself, the immune system is clueless as to what is going on, thus there is NO inflammation or swelling.
But equally important, when you revert a cancer cell into a normal cell there is no debris from dead cancer cells or broken apart DNA. The cell stays intact and the cell deals with the debris from the dead microbes "in house," so to speak. The debris which goes outside the cell is minimal because the cancer cell itself is not killed.

Thus, in theory, a treatment which reverts cancer cells into normal cells could cure cancer within 24 hours!! But the only way to do that would be to kill the microbes inside the cancer cells without killing any cancer cells! That is exactly why the Rife Machine could safely cure cancer within minutes, without any danger to the patient.

Excluding electromedicine, there are more than a dozen natural substances which are known to be able to revert cancer cells into normal cells. However, none of them are practical as a cancer treatment for a variety of reasons.

But this treatment is practical, and that is why this treatment is called the "Overnight Cure For Cancer." When this treatment is perfected, it literally will be able to cure cancer within 24 hours, without any debris from dead cancer cells, debris from broken DNA or swelling or inflammation from the immune system attacking cancer cells which are slowly dying.

The OCC is also safe for the liver, unless the liver has already been damaged by debris from dead cancer cells or chemotherapy.

The importance of perfecting this treatment cannot be overestimated. It overcomes all the problems of other alternative cancer treatments.

A CRITICAL, CRITICAL CONCEPT!!!
Curing cancer, especially advanced cancer, is in two parts. They are both equally important!!
The two parts are the "cancer cells" and the "non-cancerous cells." The importance of the cancer cells is obvious. So why are the non-cancerous cells just as important as the cancer cells when treating cancer?
Many cancer patients, perhaps most cancer patients, die because of the damage done to their non-cancerous cells. Cancer cells steal vital nutrients from non-cancer cells, that is one reason cancer patients become so weak. In addition, chemotherapy and radiation do incredible damage to non-cancerous cells. Thus, in advanced cancer, the non-cancerous cells are very, very weak and very, very sick.

The Overnight Cure For Cancer will ONLY deal with cancer cells, it WILL NOT help the non-cancerous cells.

For example. Suppose there was a "magic bullet" (which hopefully the OCC will become) which safely rid the body of all cancer cells within one day. Would the cancer patient be guaranteed to survive their cancer? The answer is 'no', because the non-cancerous cells are the cause of death in many cancer patients, if not most cancer patients. Thus, getting rid of the cancer cells is only half of the battle with cancer.

So here is the key question. Should a cancer patient deal with the cancer cells first or the non-cancer cells first?

This question will be answered with a parable:
The Parable of the Thugs and the Preachers

Suppose there were 100 thugs who were locked in a building with 1,000 preachers. Suppose at every opportunity the thugs beat up the preachers. The preachers were getting weaker and weaker because of getting beat up daily by the thugs.

You are assigned to go in and help nourish the preachers back to health. What is the first thing you should do?

The first thing you should do is get rid of the thugs!! If you don't get rid of the thugs you will not be able to nourish the preachers because they will continue to get beat up as you are trying to help them.

In exactly a similar way, it is critical to get rid of the cancer cells as quickly as possible!!
However, you cannot kill the cancer cells quickly or it will create so much debris you may kill the cancer patient.

But the Overnight Cure for Cancer does not kill cancer cells, not a single one. The OCC is designed to revert cancer cells into normal cells very, very quickly.

- **This treatment should be used three times, until more is known about its effectiveness.**
- **There should be a two day period BETWEEN each of the three times this treatment is taken.**
- **The pre-OCC, which is taken the night before the actual OCC, can be counted as one of the two rest days.**

Thus, the schedule will look like this:

Day 1) Pre-OCC Day (4 "doses" taken the night before the OCC). This day will be discussed below.

Day 2) The complete OCC

Day 3) Rest and eat healthy foods to nourish the non-cancerous calls.

Day 4) Rest and eat healthy foods to nourish the non-cancerous calls, but also take the pre-OCC

Day 5) The complete OCC

Day 6) Rest and eat healthy foods to nourish the non-cancerous calls

Day 7) Rest and eat healthy foods to nourish the non-cancerous calls, but also take the pre-OCC

Day 8) The complete OCC

After this, you should go on other alternative cancer treatments.

During the time you are buying the items in the OCC you should also be ordering the items in the Cellect-Budwig Protocol, the Bill Henderson Protocol or whatever alternative cancer treatment you choose.

Taking Chlorine Dixoide: Oral or Transdermal?

As mentioned above, Vitamin C, other antioxidants and immune builders, should not be taken during the same time periods as MMS/Chlorine Dioxide. This is good advice.

However, most websites recommend chlorine dioxide be taken orally. When taken orally, the treatment can cause diarrhea, nausea, vomiting, etc. The side-effects can sometimes be so severe it can take many weeks for a patient to build up to a therapeutic dose. These side-effects only happen if you take this treatment orally. It is the stomach which is causing these side-effects. If you take this treatment transdermally, meaning through the skin; the stomach, and its side-effects, can be totally avoided.

Due to the volume of chlorine dioxide which will be taken in a short amount of time, taking chlorine dioxide orally is absolutely not an option for this treatment.

In addition, since the DMSO is so very critical to this treatment, the DMSO will also cause some stomach upset if taken orally. Thus, there is a second reason to take the treatment transdermally.

The most important advantage of taking it transdermally is that with transdermal applications, higher doses can be taken (actually small doses are taken several times), and the high daily doses can be achieved much more quickly.

It is rare when more than 30 drops of chlorine dioxide are taken in a day. In this protocol, 130 drops, depending on the weight of the patient, are taken. The drops are spread out evenly over 12 hours (it is critical to spread out the drops). Thus, this is a different kind of treatment.

The Substances Needed For the OCC

Here is a checklist of things you need for this treatment.

1. FAITH DROPS - At least 4 bottles
2. ACTIVATOR
3. 500ml DMSO – diluted with 125ml of distilled WATER – then decant into storage bottles.
4. MSM crystals to be made into "MSM Water" (see below).

DO NOT use a DMSO gel or DMSO cream. These will not bind to chlorine dioxide!!!

The purpose of the MSM is to prevent the DMSO from breaking down inside the body. It is a very important part of the treatment!! MSM will penetrate the skin, just like DMSO, but it will NOT bind to other molecules or carry them through the skin.

In some cases a person can obtain all the substances needed for the OCC except for the MSM. The MSM Water is highly recommended for this treatment, but it is optional. In other words, don't let the lack of MSM stop the rest of this treatment.

Making "MSM Water"

Here is how you make MSM water:

1. Take 4 Litres of DISTILLED water
2. ADD 1 ½ CUPS (375ml) of MSM granules to the container of distilled water.
3. It will take about half-an-hour for the MSM to totally dissolve in the water.
4. Shake the container every few minutes until it is totally dissolved at the bottom of the jug. This is the "MSM Water."

How to Make "ONE DOSE" of Chlorine Dioxide and DMSO

AT ALL TIMES DURING THE MAKING OF YOUR DOSE OF CHLORINE DIOXIDE WHEN EVER POSSIBLE, USE A PURE SILVER TEASPOON. IF ONE IS NOT AVAILABLE, USE A STAINLESS STEEL TEASPOON BUT NEVER A PLASTIC TEASPOON.

How many times you take the dose of chlorine dioxide and DMSO will be discussed later. But first, we need to understand how to make "One Dose."

READ THIS SECTION SEVERAL TIMES to make sure you aren't missing anything. Especially read it ***AFTER*** making one or two doses!! You would also be smart to have a second person look at the instructions to make sure you both agree on how to make "One Dose."

Step 1: Put exactly 20 FAITH drops into a small glass bowl.

Step 2: Add 20 drops of activatorto the FAITH in the small glass bowl.

Step 3: Your FIRST Wait of 3 Minutes.
AFTER MIXING the FAITH drops with the activator, stir the mixture using as already instructed a pure silver teaspoon if possible, but not plastic, then let it sit for 3 minutes. Stir the mixture every 30 seconds. This three minute wait creates the chlorine dioxide.

Step 4: Measuring the DMSO
AFTER the 3 minutes needed to make chlorine dioxide, add the liquid DMSO to the mixture.
In the same small bowl add (¾ of a **teaspoon).75cc** of DMSO. In other words, this is added to the chlorine dioxide you made above regardless of your weight.

Step 5: Your SECOND Wait of 3 Minutes
After ADDING the DMSO to the chlorine dioxide you need to mix the mixture, then wait an additional 3 minutes, stirring the mixture every 30 seconds.
This is the SECOND TIME you have waited 3 minutes. This time you are waiting for the DMSO to bind to the chlorine dioxide.
After this second wait of 3 minutes you have a mixture which is defined to be "One Dose" of Chlorine Dioxide / DMSO.

Clarifying What "One Dose" Means

The steps above can be summarized thusly:
1) Put 20 drops of FAITH in a small glass bowl,
2) Add 1 teaspoon of citric acid.
3) WAIT 3 minutes (stir at first and every 30 seconds) to make the chlorine dioxide,
4) Add ¾ of a ***TEASPOON*** of DMSO
5) WAIT an additional 3 minutes (stir at first and every 30 seconds) for the DMSO to bind to the chlorine dioxide.

You Have Now Made "One Dose"!!

Applying the DMSO dose Transdermally

- When the second three minute wait is completed, you can rub the entire mixture onto your skin.
- Spread the mixture so that it is thin on your skin. This way it will penetrate faster and will create less of a skin rash.
- If is very important to rotate where you put the mixture on the skin.
- During the "prep" day you will take "One Dose" 4 times, where each dose is separated by 1 hour.
- The first time you may want to put it on your arms.
- The second time you may want to rub it on your leg thighs.
- The third time you may want to rub it on your calf muscles.
- The next time you use it you will rotate back to your arms etc.
- The person's back can also be used.

By rotating where you put the mixture your skin has 3 hours to completely recover from the DMSO pulling the chlorine dioxide through the skin.

Having said all of these things, an even higher priority would be to put the mixture as close to the cancer as possible. As much as your skin can tolerate it, put as much of the mixture on the skin above where the cancer is located.

There are ways to protect your skin, no matter where you put the mixture. Ten minutes after putting the "One Dose" on the appropriate place on your body (if you can wait that long), you can put MSM Water on that location of the skin if there is any rash developing.

Thus, you have two different ways to protect your skin during the treatment; first, by spreading the mixture as thin and wide as possible, and second, by using MSM water ten minutes after spreading the mixture on the skin. But as mentioned before, put the mixture as close to the cancer as possible as much as you can.

It should be mentioned that latex gloves, rubber gloves or any other kind of gloves should NOT be used to spread any mixture containing DMSO. The DMSO can pull the materials in these gloves through the skin. Always use bare hands to spread the mixture.

Phase One of the OCC - the "Pre-OCC" - the Night Before the Main OCC

Note: If at any time during the "Pre-OCC Day" or the "OCC Day," if you do not feel well, terminate the treatment immediately. This treatment is not toxic, but there may be individuals who have a reaction to the DMSO or chlorine dioxide.

For most situations, the chlorine dioxide / DMSO protocol will be in two phases:

Phase One:

- This is the day before the actual Overnight Cure For Cancer (OCC).
- On this day you will take four doses of chlorine dioxide and DMSO, separating each dose by one hour.

You should take these four doses after dinner. Thus, you might take them at:

- 6:00 PM (1800)
- 7:00 PM (1900)
- 8:00 PM (2000)
- 9:00 PM (2100)

Also, at the one-half hour mark, between the one hour marks, you need to spread one tablespoon of MSM Water on the skin, especially where you had put the DMSO. This is in ADDITION to any MSM Water you used to prevent skin rashes.

Thus, your Pre-OCC schedule might be like this:

- 6:00 PM (1800) - One Dose of the Chlorine Dioxide / DMSO Mixture
- 6:30 PM (1830) - MSM Water ONLY
- 7:00 PM (1900) - One Dose of the Chlorine Dioxide / DMSO Mixture
- 7:30 PM (1930) - MSM Water ONLY
- 8:00 PM (2000) - One Dose of the Chlorine Dioxide / DMSO Mixture
- 8:30 PM (2030) - MSM Water ONLY
- 9:00 PM (2100) - One Dose of the Chlorine Dioxide / DMSO Mixture

This pre-OCC is critical!!! The purpose of Phase One is to kill the microbes in the bloodstream. If you do not do this, some of the chlorine dioxide / DMSO in Phase Two, the actual OCC, will be diverted to kill microbes in the bloodstream. This is not the goal of Phase Two. The goal of Phase Two is to kill the microbes INSIDE the cancer cells to revert the cancer cells back into normal cells.

Phase Two of the OCC - The Main OCC

- The actual OCC (i.e. Phase Two) consists of 13 doses of chlorine dioxide and DMSO.
- If you cannot manage the 13 doses, do the best you can.
- As before, they should be taken one hour apart.
- As before, at the half-hour mark between CD/DMSO doses, you should put MSM Water on your skin.

Let us assume you start at 8:00 A.M. Your schedule would look like this:

DOSE NUMBER	TIME	WHAT TO TAKE
1	08:00	One dose
1	08:30	MSM water ONLY
2	09:00	One dose
2	09:30	MSM water ONLY
3	10:00	One dose
3	10:30	MSM water ONLY
4	11:00	One dose
4	11:30	MSM water ONLY
5	12:00	One dose
5	12:30	MSM water ONLY
6	13:00	One dose
6	13:30	MSM water ONLY
7	14:00	One dose
7	14:30	MSM water ONLY

DOSE NUMBER	TIME	WHAT TO TAKE
8	15:00	One dose
8	15:30	MSM water ONLY
9	16:00	One dose
9	16:30	MSM water ONLY
10	17:00	One dose
10	17:30	MSM water ONLY
11	18:00	One dose
11	18:30	MSM water ONLY
12	19:00	One dose
12	19:30	MSM water ONLY
13	20:00	One dose
13	TREATMENT COMPLETE	MSM water NOT REQUIRED

It doesn't matter what time of the day you take the actual treatment.
That is up to you, but from beginning to end it is 12 complete hours.

As mentioned above, the intent of this treatment is to kill every MICROBE, inside of every cancer cell. Any cancer cell which has all of its microbes killed will, in about a week, revert into a normal cell.
As a final comment, this treatment may cause bad breath on the day of the OCC and the day after the OCC.

What To Eat For The Treatment

Pay close attention to the "cancer diet" while on any cancer treatment. AVOID sugar, refined flour, meat (unless the patient is extremely frail), dairy products (except for the Budwig Diet), etc. If you eat whole, raw foods, you will be OK. During this treatment, the wrong foods will feed cancer cells and will interfere with the ability of DMSO to penetrate the cell membranes.

What To Expect From This Treatment

The objective of this treatment is to revert cancer cells into normal cells.

If this is what happens, this is what you can expect from this treatment:
First, reverting cancer cells into normal cells WILL NOT shrink tumors. If the cancer cells are removed from the tumor by this treatment, the body should eventually get rid of any tumors, but it will not happen quickly.

Second, for the same reasons, the OCC will not get rid of any fibrin. What happens to the fibrin when the cancer is gone is unknown at this time.

Third, the OCC SHOULD reduce the pain of cancer within 2 or 3 weeks. Whether the pain is caused by lactic acid or some other cause, most types of pain will be reduced by this treatment. Pain caused by tumors pressing against some other part of the body will not be immediately affected by this treatment.

Fourth, a cancer patient who has very low energy levels can expect an increase in energy within a couple of weeks. As cancer cells are reverted into normal cells the non-cancerous cells get a boost of energy because the cancer cells are no longer stealing glucose and nutrients from the non-cancerous cells.

Fifth, the OCC should stop the spread of cancer. This will not be obvious for awhile; but without any cancer cells, there is no reason for the cancer to spread. This, of course, is more important for fast-spreading cancers.

Sixth, swelling and inflammation should also be reduced by this treatment within a few weeks. However, this will depend on what is causing the swelling and inflammation.
In summary, tumors and fibrin will not immediately be affected by this treatment. These will take the longest to be affected by this treatment. The reduction of fibrin may be helped by taking proteolytic enzyme supplements, also known as pancreatic enzyme supplements.

How You Can Help Other Cancer Patients!!

This treatment can never be perfected without information from people who have used the treatment. It is this information, and nothing else, which will allow us to fine-tune this treatment for other cancer patients. If you do not contact us, then you are only benefiting yourself, not others, with information that may help them.
REMEMBER that it will take about two weeks to notice ANY difference because it will take about two weeks for the cancer cells to make the adjustment in their metabolism to become normal cells again.

The second most important thing you can do for other cancer patients is keep a daily diary of your experiences on this treatment, whether you take the OCC once or twice or three times. The main things to include in the diary are how you feel, any unexpected symptoms, a general description of your diet (not too detailed), and similar types of information.
Start the diary the day before the OCC and explain exactly how the cancer patient (which may be you or someone else) feels. Then keep the daily diary going for at least three or four weeks after the OCC, explaining how the cancer patient feels every day. Also include the results and dates of CT scans or PET scans.

Email this accumulating diary to the damaansax@vodamail.co.za every two weeks!!

Contact DAMAANSA HOLDINGS whether you have questions or comments or need to tell us you are taking the protocol, email support will be provided. Be sure to include "OCC" OR faith drops somewhere in your Subject line so your email is not mistaken for spam. See the contact details on the last page of this manual.

Section

9

TABLE OF RECOMMENDED DOSAGES

GENERAL EXPLANATIONS

**	Wherever these asterisks appear – it is recommended that the protocols are used in conjunction with each other
Grey Shaded Area	All Protocols that are suggested as a combined treatment are shaded in grey, and we recommend that they be used in conjunction with each other
Orally	Always mix the recommended drops with an equal number of activator together in a glass, wait the prescribed 3 minutes, add a mixer as per Chapter 7, and drink immediately.
Transdermally	Always mix the recommended drops with an equal number of activator together in a glass, wait the prescribed 3 minutes, add the prescribed amount of DMSO, wait an additional 3 minutes – then apply to the skin using your bare hands. NEVER use latex gloves. In the event of risk of contamination to the person applying the DMSO – (in the case of a patient with open sores from AIDS/HIV – apply to an area that does not present open sores, or use a wooden spatula or the back of a solid silver / stainless steel spoon to apply.
Intravenously	Always add the recommended number of drops of FAITH, UNACTIVATED to a 500cc saline solution drip. Wait 1 hour and then follow normal protocols for inserting an intravenous drip. Entry ratio is 1 x 500cc : 1-2 hours
Anally	Always mix the recommended drops with an equal number of drops of ACTIVATOR – wait the prescribed 3 minutes then mix ACTIVATED solution with 30cc of water. Using a syringe and soft tube – insert into the anus. Alternatively use an enema pump.
Allopathic Medicines	It is quite safe to combine FAITH Drops with other medicines EXCEPT other alternative medicines. We prefer that you use ONLY one protocol at a time.
DMSO	Dimethyl Sulfoxide. DO NOT use in conjunction with cortisone medication. Wait 8 hours before starting DMSO protocol.
Atropine	DO NOT use in conjunction with DMSO protocol
Adrenaline	DO NOT use in conjunction with DMSO protocol

** INDICATES THAT PROTOCOLS SHOULD BE COMBINED

ILLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Abscesses / boils - Orally	3	3	Day 1 to 7 4 x Daily thereafter	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Abscessed teeth – Orally	6	6	2 x Daily – until clear	Mix activated drops with 125ml (125cc) water then rinse out the mouth. Do not leave this solution in the mouth for longer than 60 seconds. In our experience, the pain of an abscessed tooth has been overcome by the immune system in about four hours and patient presents a healthy mouth in less than three weeks. EXCEPTIONS: An abscessed tooth where the abscess is inside the tooth and the FAITH mixture cannot reach it through a hole or some other way, the FAITH treatment will not then handle the abscess.
Aids – Orally – Initial & Maintenance Dose **	3	3	2 x Daily – to maintain	FAITH does not attack AIDS, the immune system does. FAITH Drops provide the immune system with the ammunition. Some cases may only clear up with intravenous injections which may be administered only by a doctor. Start out with the Initial Oral dose and then combine that with the Intravenous, Transdermal and Anal Protocols ALL AT THE SAME TIME. Thereafter continue with Maintenance Dose. Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Aids - Intravenously **	…	…	Day 1 to 10 2 x Daily	Calculate 1 drop per 10kg of body weight. Add UNACTIVATED Drops to 500ml (500cc) drip.
Aids – Transdermally DMSO Protocol **	20	20	Day 1 to 20 2 x daily	Mix drops and activate – wait the prescribed 3 minutes and then mix with 2.5ml (2.5cc) (1/2 a teaspoon) DMSO – then wait a further 3 minutes. Thereafter, add 1.25ml (1.25cc) (1/4 of a teaspoon) of water, swirl the solution in the glass to mix well then apply activated drops topically using your bare hands. DO NOT USE LATEX GLOVES TO APPLY
Aids – Anally **	3	3	Day 1- 20 3 x Daily	Mix drops and activate, wait the prescribed 3 minutes and then mix with 30ml (30cc) water.
Allergies - Orally	3	3	2 x Daily – until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
A.L.S. – Lou Gehrig Disease - Orally	3	3	3 x Daily - until tests clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.

ILLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Anaemia – Orally	3	3	Day 1 to 7 4 x Daily thereafter 3 x Daily until normalised	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Arteriosclerosis – Orally	3	3	3 x Daily Until tests clear	As you are aware there are many causes for hardening and clogging of the arteries, but cholesterol seems to be one of the best known reasons. Several people have reported to date that taking the FAITH has reduced the closing of the arteries due to cholesterol. One example was a patient that was told that her veins were 80% clogged. Improvement was documented after FAITH treatment
Arthritis - Orally	3	3	Day 1 to 7 4 x Daily thereafter 2 x Daily - until clear	Ascertain the type of arthritis being treated as FAITH will help with rheumatoid arthritis and Lyme arthritis and some others, but not the tissue damage with normal arthritis.
Arthritis - Lyme - Orally	3	3	2 x Daily – until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers. This is a long term treatment
Asthma - Orally	3	3	2 x Daily – until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers. This is a long term treatment
Athlete's feet - Topically	10	10	4 x Daily – until clear	Mix activated drops with 125ml (125cc) of water. Apply the solution to affected area. Wash off after 3 minutes and dry well.
Bacteraemia (Blood-poisoning) - Orally	3	3	4 x Daily – until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Bedsores Diabetes sores / ulcers	10	10	Every 2 hours until healing begins	Mix activated drops with 60ml (60cc) of water and pour into a spray bottle. Spray bedsore with a fresh solution every 2 hours until healing takes place.
Bronchitis - Orally	3	3	4 x Daily - until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Bites - animal, insect, human, snake or spider - Orally	3	3	Hourly for 4 hours thereafter 2 hourly until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.

ILLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Cancer - Orally * *	2	2	Day 1 to 7 4 x Daily thereafter 3 x Daily until tests are clear	Chlorine dioxide gives the immune system almost perfect ammunition to attack cancer cells. We believe the theory has proven true as many people with cancer have reported that the cancer went away or reduced greatly after taking FAITH. The results we have received have proven to be better results than that of standard medical treatment. We have observed that skin cancer usually dries up and drops off within one week of taking FAITH three times a day. We do not claim that FAITH caused the effect, but we did observe the effect. It is our opinion that when one is working with cancer and it is not getting better an over ruling concept is that you are not taking or administering enough FAITH drops. Ideally we prefer the "AGGRESSIVE MIX" but the dosage alongside could be used to start the person off. If this does not clear the problem - then make use of the "Aggressive Mix" dosage. CONTINUE VISITING YOUR DOCTOR AND TAKING ANY PRESCRIPTION MEDICINES. MAKE SURE YOU CONTINUE WITH ANY RADIATION OR CHEMOTHERAPY PRESCRIBED FOR YOU. Use all 4 protocols below - together
Cancer - Transdermally - DMSO - (OCC Protocol) recommended * *	20	20	Day 1 1 x per Hour for 4 hours Day 2 1 x per Hour for 13 hours Day 3 Rest. Day 4 1 x per Hour for 4 hours Day 5 1 x per Hour for 13 hours Day 6 Rest Day 7 1 x per Hour for 4 hours Day 8 1 x per Hour for 13 hours	Mix drops and activate – wait the prescribed 3 minutes and then mix with 2.5ml (2.5cc) (1/2 a teaspoon) DMSO – then wait a further 3 minutes. Thereafter, add 1.25ml (1.25cc) (1/4 of a teaspoon) of water - swirl to mix well then apply topically using your bare hands. DO NOT USE LATEX GLOVES TO APPLY See OCC Protocol in Chapter 8 of Faith Protocols

ILLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Cancer - Intravenously **	1	Nil	Day 1 to 10 2 x Daily	Calculate 1 drop per 10kg of body weight. Add UNACTIVATED drops to a 500ml drip, twice daily.
Cancer – Anally **	1	1	Day 1 to 10 3 x Daily	Calculate 1 drop per 10kg of body weight. ACTIVATE, wait prescribed 3 minutes and mix with 30cc of water.
Candida – Thrush - Orally	3	3	Day 1 - Hourly thereafter 4 x Daily - until clear.	Mix activated drops with 125ml (125cc) water and rinse out the mouth. Do not leave this solution in the mouth for longer than 60 seconds
Candida – Thrush – Topically	10	10	3 x Daily - until clear.	Mix the activated drops with 20ml (20cc) of water. Apply the solution to affected area.
Cellulites - Orally	3	3	4 x Daily - until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Cholesterol - Orally	3	3	2 x Daily – until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Chicken-pox – Orally	2	2	Day 1 – Hourly thereafter 4 x Daily - until clear	Mix activated drops with 75ml of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Cholera - Orally	3	3	Day 1 – Hourly Day 2 - Every 2 hours not more than 4 x Daily Day 3 - Every 4 hours - not more than 2 x Daily	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Common Cold - Orally	3	3	4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Crabs – lice – Topically	10	10	Repeat every 2 hours until clear.	Dilute activated drops into 125ml (125cc) of water. Apply to area and rinse off after 3 minutes
Croup – Orally	2	2	4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.

ILLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Cystitis – Orally	3	3	Day 1 - 4 x Daily thereafter 3 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Cysts – Orally	3	3	Day 1 - 4 x Daily thereafter 2 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Dandruff – Topically	10	10	2 x Daily until clear.	Dilute activated drops into 125ml (125cc) of water. Apply to area and rinse off after 3 minutes.
Dermatitis - Orally	3	3	4 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Diabetes - Orally	2	2	Day 1 – Hourly thereafter 4 x Daily until normalised	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Diarrhoea - Orally	3	3	Day 1 – Hourly thereafter Day 2 – Every 2 hours not more than 4 x Daily Day 3 - Every 4 hours not more than 2 x Daily	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Diverticulitis - Orally	3	3	Day 1 - 4 x Daily thereafter 3 x Daily - until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Eczema - Orally	3	3	3 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Encephalitis - Orally	3	3	Day 1 - hourly thereafter 4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.

ILLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Eye Infections - Stye Conjunctivitis - Iritis - Orally **	3	3	Day 1 - hourly thereafter Day 2 - Every 2 hours Day 3 – Every 2 hours Thereafter take Maintenance Dose of 3 drops 3 x Daily for ten days	Combine with Eye Rinse Protocol as below
Eye Infections - Stye Conjunctivitis Iritis Extreme Eye Infections Eye Rinse Protocol **	1	1	Repeat every 2 hours until infection has cleared.	Combine with Oral Treatment as above FOLLOW INSTRUCTIONS WITH EXTREME CARE, AS YOU CAN CAUSE DAMAGE TO THE EYES. o Use one drop of FAITH in 15ml (15cc) (1 tablespoon) of distilled water or eye drops. o Wash eye with this solution, applying directly into the eye using an eye rinse bowl. o Allow it to remain in the eye for 15 seconds. o SET A TIMER. DO NOT GUESS AT THE TIME. o Then use distilled water or eye drops to wash the eye until you are certain that you have washed every bit of liquid out of the eye. Rather over rinse than under rinse. o Repeat this every two hours until the infection has cleared. o If you are unable or unwilling to administer the drops directly into the eyes, you can depend upon the doses by mouth if it is done every hour. o REMEMBER: DO NOT allow even one drop of FAITH mixture to remain in the eye, If you do it will cause a burn. o In one case where a person did not rinse their eye sufficiently, assuming that the solution was so ineffectual that it would not cause any harm; the result was the skin surrounding the eye drooped considerably and it appeared as if the eye would actually fall out of the socket. This however did clear up after a few days. But, are you prepared to take the risk of it not clearing up. o So, pay attention and don't guess the formula mix or the time you allow it to sit in the eye nor take for granted the fact that you must thoroughly flush the eye after 15 seconds.
Flu – Orally	3	3	Day 1 - 4 x Daily thereafter 3 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.

ILLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Food poisoning – Orally	3	3	Hourly for 4 hours thereafter Every two hours until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Gastritis - Orally	2	2	Day 1 - 4 x Daily thereafter 3 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Glandular fever – Orally	3	3	Day 1 - 4 x Daily thereafter 3 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Gout – Orally	3	3	Day 1 to Day 7 – 4 x Daily thereafter 2 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Head Sores – Topically	10	10	1 x daily - repeat until clear	Add 125ml (125cc) water to the 10-drop ACTIVATED solution of FAITH. o When combed into the hair with enough solution to penetrate to the scalp it will cure most head sores in a few hours. o If you use it daily it makes for a healthy scalp, but it also opens the cuticle scale of the hair and strips the natural melanin out of the hair. So, if you are not a natural blonde we suggest you use it once or twice a month. o When used daily you begin to notice that your is bleaching blond after a few days. (It is a very nice blond.)
Heart - Pericarditis Orally	1	1	Day 1 – Hourly thereafter 2 drops every 2 hours until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Hepatitis A – Orally	2	2	Day 1 - Every hour Day 2 – 3 drops every 2 hrs Day 3 - 3 drops 4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.

ILLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Hepatitis B – Orally	2	2	Day 1 – every hour Day 2 – 3 drops every 2 hours Day 3 – 3 drops 4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Hepatitis C - Orally	2	2	Day 1 – 2 drops every hours Day 2 – 3 drops 4 x daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Herpes – Orally	3	3	4 x Daily	Mix activated drops with 75ml (75cc) of water and drink. Herpes virus should be gone in about two weeks. However, in very bad cases, it might take up to two months to finally overcome the Herpes virus. With severe cases take the formula every two hours for several days. This aids the FAITH drops to penetrate deeper into the tissues. In worse cases, one may have to use the drops intravenously, by calculating 1 drop per 10kg of body weight. Add UNACTIVATED drops to 500ml drip twice daily. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Infected Gums – Orally	6	6	2 x Daily	Mix activated drops with 125ml (125cc) of water and use this solution to rinse the mouth. Do not leave this solution in the mouth for longer than 60 seconds.
Insect Bites – Topically	10	10	As required	Although this is not particularly dangerous or poisonous - more irritating, yet a severe mosquito bite can be very uncomfortable for several hours and if continually scratched can become infected. Use this solution to apply dermally by gently tapping the solution onto the bites with your fingertips to help the solution to penetrate. The itching from the bite will be gone in 5 minutes with the bump showing signs of diminishing almost immediately. You do not need to wash this solution off, for once you have added the activator to the drops you have negated its ability to burn your skin. Once citric acid has been added the alkalinity of the solution has been destroyed. However, when using the solution in larger areas of the body than a small insect bite always add about 75-125ml (75-125cc) of water to the 10-drops solution that you mix - depending on the area needing to be treated.
Jock Itch – Topically	6	6	3 x Daily – until clear.	Mix activated drops with 125ml (125cc) of water. Apply the solution with your finger tips to affected area. Rinse the area after 3 minutes as the area is very sensitive.

	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Kidney-Pylonephritis - Orally	2	2	4 x Daily – until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Laryngitis – Orally	2	2	4 x Daily – until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Leukemia – Orally	3	3	2 x Daily – until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Lupus – Orally	3	3	2 x Daily – until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Lyme Disease – Orally	3	3	Day 1 to 14 Every 2 hours thereafter 3 x Daily - until clear.	Mix activated drops with 75ml (75cc) of water and drink. It might take as long as a year to overcome Lyme Disease. There is no proof yet but the information we have received is that everyone who has Lyme Disease and is taking FAITH is experiencing improvement. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Malaria - Orally	10	10	Day 1 – 2 x hourly thereafter 4 hourly until tests negative or symptoms have cleared.	Mix activated drops with 75ml (75cc) of water and drink. The procedure for malaria is to always start with a 10 drop dose, and give a second 10 drop dose in one to two hours. Most of the symptoms should have cleared within four hours of the second dose. Should the symptoms persist after the second dose, simply give a third dose. All malaria parasites should be dead after second dose, so, if the patient is still sick, it will not be from malaria, but rather from some other disease. In that case, continue with at least two 10 drop doses each day until they are feeling well. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Measles	1	1	Day 1 - 2 x hourly thereafter Every 4 hours thereafter until clear.	Mix activated drops with 75ml (75cc) water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.

ILLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Melanomas – Orally **	1	1	Begin with 1 drop and increase daily.	Begin the Standard Formula Protocol and increase until you are able to administer the "Aggressive Mix". If necessary, exceed the prescribed number of drops to 15 drops per dose three times a day. We do not normally recommend such high individual doses but as it is usually only about a week or two before you notice the shrinkage. This shrinkage can often be indicated by a white ring around the melanoma and it then it becomes smaller and smaller until after about two weeks when it is usually gone from the surface. You would obviously need to do all necessary tests to confirm this. *Feedback we have received is:* Small cancerous sores on the body or hands that have not responded to treatment sometimes for over a year, treat with 1 drop of FAITH mixed with 3 drops of the **ACTIVATOR,** wait 3 minutes and then add 2 drops of DMSO. This sometimes can be quite painful as it burns excessively but the pain usually is alleviated after 3 minutes.
Melanoma – Transdermally **	5	5	4 x Daily until it falls off	Mix activated drops in a tot measure and wait prescribed 3 minutes. Mix in 5 drops (using an eye dropper) of DMSO into the activated solution. Wait an additional 3 minutes. Mix this solution with 5ml (5cc) of water. Invert tot measure over the melanoma and hold firmly in place for 3 minutes. This will ensure that the melanoma is totally submerged in the FAITH solution.
Meningitis – Orally	2	2	Day 1 – Hourly thereafter 2 hourly thereafter until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Mumps – Orally	2	2	Every 3 hours until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Obesity – Orally	2	2	3 x Daily	Calculate 1 drop for every 10kg of body weight. Increase dose by 1 drop daily until full dose reached according to weight. Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Osteomylitis – Orally	3	3	Day 1 – 2 hourly thereafter 4 hourly until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Otitis - infections	2	2	4 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Pancreatitis – Orally	2	2	Day 1 to 2 4 hourly thereafter 4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.

LLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Pneumonia – Orally	3	3	Day 1 – 4 hourly Thereafter 4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Pyorrhea – Orally	6	6	2 x Daily until clear.	Activate drops and use solution to brush the teeth. Make and use a new solution every morning. Do not leave this solution in the mouth for longer than 60 seconds, as it might damage your sight, there are people who regained their sight merely by replacing the metal in their mouth.
Ringworm – Orally * *	3	3	4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Ringworm – Topically * *	10	10	Repeat every 3 hours until clear	Mix activated drops in a tot measure and wait prescribed 3 minutes. Mix in 5 drops (using an eye dropper) of DMSO into the activated solution. Wait an additional 3 minutes. Mix this solution with 5ml (5cc) of water. Invert tot measure over the ring worm and hold firmly in place for 3 minutes. This will ensure that the ringworm is totally submerged in the FAITH solution.
Scabies – Orally	3	3	2 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Scabies – Topically	10	10	Repeat every 3 hours until clear	Dilute with 125ml of water. Apply to area then rinse off after 3 minutes.
Septicaemia – Orally	3	3	Every hour for 1 day thereafter every 4 hours thereafter until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Shingles / Herpes - Orally	2	2	Every 2 hours for 1 day thereafter 3 drops 4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Sinusitis - Orally	3	3	Every 4 hours until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.

ILLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Spider Bites - Brown Recluse Spider – Orally **	3	3	3 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. Use in conjunction with Topical Protocol below. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Spider Bites - Brown Recluse Spider – Topically **	10	10	3 x Daily for two days	Mix activated drops in a tot measure and wait prescribed 3 minutes. Mix in 5 drops (using an eye dropper) of DMSO into the activated solution. Wait an additional 3 minutes. Mix this solution with 5ml (5cc) of water. Invert tot measure over the spider bite and hold firmly in place for 3 minutes. This will ensure that the bite is totally submerged in the FAITH solution. In conjunction with this apply any nappy rash ointment containing at least 40% zinc oxide, 5 minutes after the application of the DMSO protocol. Nappy rash ointment containing at least (higher if possible) 40% zinc oxide will kill most of the poison and reduces the pain and itching of a brown recluse spider bite in less than one day. We have seen many people treat this bite successful with this nappy rash ointment.
Spider Bites - Black Widow – Orally **	3	3	3 x Daily for 2 to 3 days to aid the body in recovering	Mix activated drops with 75ml (75cc) of water and drink. Use in conjunction with Topical & Intravenous Protocols below. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Spider Bites - Black Widow – Topically **	10	10	3 x Daily for 2 to 3 days to aid the body in recovering	Mix activated drops in a tot measure and wait prescribed 3 minutes. Mix in 5 drops (using an eye dropper) of DMSO into the activated solution. Wait an additional 3 minutes. Mix this solution with 5ml (5cc) of water. Invert tot measure over the spider bite and hold firmly in place for 3 minutes. This will ensure that the bite is totally submerged in the FAITH solution.
Spider Bites - Black Widow – Intravenously **	3	Nil	3 x Daily for 2 to 3 days to aid the body in recovering	Mix UNACTIVATED drops with 20cc (20ml) of sterile water in a glass. Using a syringe siphon up un-activated solution and inject intravenously, very slowly. (30 seconds) Use in conjunction with Topical Protocol above.
Tuberculosis - Orally	2	2	Day 1 - 2 drops every hours Day 2 - 2 drops every 2 hours Day 3 - 3 drops 4 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.

ILLNESS	FAITH DROPS	ACTIVATOR	DROPS SCHEDULE	COMMENTS
Tumors – Orally **	3	3	3 x Daily until tumour has gone. mixers.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable
Tumours – Transdermally **	20	20	2 x Daily until tests are clear	Mix drops and activate – wait the prescribed 3 minutes and then mix with 2.5ml (2.5cc) (1/2 a teaspoon) DMSO – then wait a further 3 minutes. Thereafter, add 1.25ml (1.25cc) (1/4 of a teaspoon) of water - swirl to mix well then apply topically using your bare hands. DO NOT USE LATEX GLOVES TO APPLY See OCC Protocol in Chapter 8 of Faith Protocols
Urinary tract infections Orally	3	3	4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Ulcers – Orally	3	3	4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Vaginal infections – Orally	3	3	4 x Daily until clear.	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Vaginitis – Orally	3	3	4 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Vaginosis – Orally	3	3	4 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Warts – Topically	10	10	Repeat daily until wart falls off	Mix the drops and apply directly onto wart. Rinse off after 3 minutes.
Weight Control	3	3	3 x Daily until normalised	Mix activated drops with 75m (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Whooping Cough – Orally	2	2	4 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.
Yeast infection – orally	3	3	3 x Daily until clear	Mix activated drops with 75ml (75cc) of water and drink. See Chapter 7 – Page 53 of Protocols for various acceptable mixers.

section

10

APPENDICES & REGISTRATION DOCUMENTS

Food & Drug Registration

Code of Federal Regulations]
[Title 21, Volume 3, Parts 170 to 199]
[Revised as of April 1, 2000]
From the U.S. Government Printing Office via GPO Access
[**CITE**: **21CFR173.300**]

TITLE 21--FOOD AND DRUGS

CHAPTER I--FOOD AND DRUG ADMINISTRATION, DEPARTMENT OF HEALTH AND HUMAN SERVICES (CONTINUED)

PART 173--SECONDARY DIRECT FOOD ADDITIVES PERMITTED IN FOOD FOR HUMAN CONSUMPTION--Table of Contents

Chlorine dioxide (CAS Reg. No. 10049-04-4) may be safely used in food in accordance with the following prescribed conditions:

(a) The additive is generated by treating an aqueous solution of sodium chlorite with either chlorine gas or a mixture of sodium hypochlorite and hydrochloric acid. The generator effluent contains at least 90 percent (by weight) of chlorine dioxide with respect to all chlorine species as determined by Method 4500-ClO<INF>2</INF> E in the ``Standard Methods for the Examination of Water and Wastewater,'' 18th ed., 1992, or an equivalent method. Method 4500-ClO<INF>2</INF> E is incorporated by reference in accordance with 5 U.S.C. 552(a) and 1 CFR Part 51. Copies are available from the Center for Food Safety and Applied Nutrition (HFS-200), Food and Drug Administration, 200 C St., SW., Washington, DC 20204-0001 and The American Public Health Association, 1015 Fifteenth St., NW. Washington, DC 20005, or may be examined at the Office of the Federal Register, 800 North Capitol St., NW. suite 700, Washington, DC.

(b)(1) The additive may be used as an antimicrobial agent in water used in poultry processing in an amount not to exceed 3 parts per million (ppm) residual chlorine dioxide as determined by Method 4500-ClO<INF>2</INF> E, referenced in paragraph (a) of this section, or an equivalent method.

(2) The additive may be used as an antimicrobial agent in water used to wash fruits and vegetables that are not raw agricultural commodities in an amount not to exceed 3 ppm residual chlorine dioxide as determined by Method 4500-ClO<INF>2</INF> E, referenced in paragraph (a) of this section, or an equivalent method. Treatment of the fruits and vegetables with chlorine dioxide shall be followed by a potable water rinse or by blanching, cooking, or canning.

[60 FR 11900, Mar. 3, 1995. Redesignated at 61 FR 14245, Apr. 1, 1996, as amended at 61 FR 14480, Apr. 2, 1996; 63 FR 38747, July 20, 1998]

Cytotoxicity Report

Cytotoxicity of six South African medicinal plant extracts used in the treatment of cancer

V. Steenkamp and M.C. Gouws

[a]Department of Urology, Faculty of Health Sciences, University of Pretoria, PO Box 667, Pretoria 0001, South Africa

Received 25 October 2005;
Accepted 23 February 2006.
Edited by P.J. Houghton.
Available online 1 August 2006.

Abstract

Aqueous extracts prepared from six South African medicinal plants, with cancer-related ethnobotanical uses, were tested for their cytotoxic ability *in vitro* against three human cancer cell lines: DU-145 prostate cancer cells, MDA-MB-231 and MCF-7 breast cancer cells and a non-malignant breast cell line, MCF-12A. The plants studied were: *Bidens pilosa*, *Centella asiatica*, *Cnicus benedictus*, *Dicoma capensis*, *Hypoxis hemerocallidea* and *Sutherlandia frutescens*. Of these plants, only *D. capensis* exhibited pronounced cytotoxic effects in two of the cell lines tested: MCF-7 and MCF-12A.

Keywords: Cancer; Cytotoxity; Medicinal plants; South Africa

Fig. 1. The effect of 50 mg/ml plant extract on (A) DU-145 prostate cancer cells, (B) MDA-MB-231 breast cancer cells, (C) MCF-7 breast cancer cells and (D) MCF-12A non-malignant breast cells after an exposure time of 72 h; (A) *Bidens pilosa*; (B) *Hypoxis hemerocallidea*; (C) *Sutherlandia frutescens*; (D) *Centella asiatica*; (E) *Cnicus benedictus*; (F) *Dicoma capensis*. The values are expressed as means ± S.E.M. (n = 3).

South African Journal of Botany
Volume 72, Issue 4, November 2006, Pages 630-633

Medicines Control Council

MEDICINES CONTROL COUNCIL DOCUMENTATION

REGISTRATION DATE: 08-07-2008

REGISTRATION NUMBER: 023205

NAPPI CODE: 710761-001

CONSUMER COUNCIL GS1 MEMBER NUMBER: 6009801809

MEDICINES CONTROL COUNCIL

APPLICATION FOR REGISTRATION OF A MEDICINE

APPLICATION NUMBER

023205

PART 1 ADMINISTRATIVE INFORMATION

PART 1A ADMINISTRATIVE PARTICULARS

a) Particulars of the Applicant/Prospective holder of the certificate of registration (PHCR)

Name: **ANNO ORGANIX (PTY) LTD** ----------
Business address: 22 Mooigezicht Street, Bellville, 7530.----------
Postal address: P. O. Box 95, WITELSBOS, 6304, Eastern Cape----------
Telephone No: 082 339 9799 ----------
Fax No: (042) 293 1750----------

E-Mail address: damaansax@vodamail.co.za / boniswa@mailbox.co.za ----------

Site Master File Number: To be submitted----------

Person responsible/authorized to communicate with Council

Name: DR. MICHEAL MCDONALD, Research & Development Director----------
Business address: 22 Mooigezicht Street, Bellville, 7530.----------
Telephone No: 082 339 9799 ----------
Fax No: (042) 293 1750----------
E-Mail address: damaansax@vodamail.co.za / boniswa@mailbox.co.za ----------

(Attach a letter of authorization signed by the person responsible for the overall management and control of the business)

The undersigned hereby declares that all the information herein and in the PARTS hereto are correct and true and are relevant to this particular medicine.

.....
Signature of Managing Member/Authorized person

.....**DR. URSELA VAN DEVENTER**..... .....17 June 2008.....
Name in block letters Date of application

.....**CEO**..... ….....N/A.....
Designation Date of current amendment **(Post-registration only)**

PART 1C LABELLING

a) PACKAGE INSERT

The under-mentioned information with regard to this medicine shall appear on the package insert. The information shall be presented in the format stipulated: Provided that the Council may authorize any deviation from such information or such format (refer to Regulation 9 of the Act).

1. Scheduling status
2. Proprietary name and dosage form
3. Composition
4. Pharmacological classification
5. Pharmacological action (Pharmacokinetics, pharmacodynamics and summary of clinical studies, where applicable)
6. Indications
7. Contra-indications
8. Warnings
9. Interactions
10. Pregnancy and lactation
11. Dosage and directions for use
12. Side effects and special precautions
13. Known symptoms of over dosage and particulars of its treatment
14. Identification
15. Presentation
16. Storage instructions
17. Registration number
18. Name and business address of the holder of the certificate of registration
19. Date of publication of the package insert

Scheduling status:

Schedule C0

Proprietary name (and dosage form):

ANNO ORGANIX

FAITH
DROPS

PHARMACOLOGICAL CLASSIFICATION:

A. 32.16 Other. Complementary Medicine submitted according to the Complementary Listing System. African Traditional and Western Herbal Medicine.

Pharmacological action:

ANNO ORGANICS IMMUNE BOOSTER is a good general natural herbal detoxifier, immune booster and tonic, which is particularly beneficial to AIDS patients.

This Immune Booster essentially services the vital organs, whose proper functioning is broken down by immune deficiency. It cleanses and removes impurities from the blood, assisting to reducing cholesterol and fat. Due to oxygenation of the blood, energy levels rise and blood pressure is assisted to be regulated. It helps to detoxify the cells and assists in reducing the acidity levels in the body. The immune system is boosted, helping to restore the body's natural ability to fight disease and stay healthy.

The Immune Booster contains of a unique combination of pure, dried South African medicinal plants. Sutherlandia and eleven other extracts. In recent years these plants have been researched and their beneficial effect on the human body noted.

Sutherlandia contains a number of highly active compounds, including canavanine, pinitol and the amino acid GABA occurs. L-canavanine is a potent L-arginine antagonist that has documented anti-cancer (Swaffer et al. 1995. Crooks & Rosenthal 1994) antiviral activity, including use against the influenza virus and retroviruses (Green 1988). Canavanine is an inhibitor of nitric oxide synthase, and may be beneficial in certain forms of heart failure. Pinitol is a known anti-diabetic agent (Narayanan et al. 1967) that also has an application in treating wasting in cancer and AIDS patients (Oshund & Shenman 1996).

Recent published scientific studies on Sutherlandia have shown interacting results, including anti-HIV activity, anti-oxidant activity, anti-inflammatory activity, and anti-cancer activity. Phagocyte derived reactive oxygen species, such as hydrogen peroxide and superoxide radicals, are responsible for the pathogenesis of various inflammatory conditions. Sutherlandia possesses superoxide as well as hydrogen peroxide scavenging activities and powerfully assists the body to mobilize its own immunological physiological resources to cope with diverse physical, mental and chemical stressors.

There is an ancient wisdom that believes our physical health is directly linked to our emotional well-being. Negative emotions release toxins into the body, thus preventing the body from functioning effectively. Stress, in particular, causes changes in heart rate, blood pressure and blood sugar levels. It also alters the secretion of gastric acid, adrenaline and other strong chemicals whose production should only be accelerated at specific times. Worse of all, stress depresses the natural functioning of the immune system, impairing our ability to fight infections and chronic illnesses such as AIDS and cancer. Chronic stress creates damaging physiological changes. These could be insulin resistance, heart disease, memory loss, Immune system dysfunction and decreased bone-mineral density (osteoporosis). The active GABA (gamma-aminobutyric acid) in Sutherlandia has anti-wasting capacity and is an inhibitory neurotransmitter that accounts for its use in alleviating anxiety and stress.

Indications:

Contra-indications:

Warnings:

Interactions:

Pregnancy and lactation:

Dosage and directions for use:

Side effects and special precautions:

Known symptoms of over dosage and particulars of its treatment:

Identification:

Presentation:

Storage instructions:

Store in a cool dark dry place below 25°C. Do not expose to direct sunlight. Keep tightly closed.

KEEP OUT OF REACH OF CHILDREN.

Listing number:

To be allocated.

Name and address of applicant:

ANNO ORGANIX (PTY) LTD
22 Mooigezicht Street
BELLVILLE, 7530
Western Cape.

Date of publication of this package insert:

June 2008

PART 1 C (c) SPECIMEN OF THE LABEL

A specimen of the immediate container label and, if applicable, the outer label shall be included here. This shall conform to Regulation 8 of the Act.

Proposed Label for ANNO ORGANIX FAITH DROPS

Schedule C0 Listing Number:

ANNO ORGANIX

IMMUNE BOOSTER

30ml Drops

INDICATIONS:

COMPOSITION:

C O N T R A - I N D I C A T I O N S :

WARNINGS:

INTERACTIONS:

PREGNANCY AND LACTATION:

DOSAGE AND DIRECTIONS FOR USE:

Store in a cool dark dry place below 25°C. Do not expose to direct sunlight.

Keep tightly closed.

KEEP OUT OF REACH OF CHILDREN.

ANNO ORGANIX (PTY) Ltd

22 Mooigezicht Street

BELLVILLE, 7530

Western Cape.

Batch Number: Expiry Date:

PART 1 D FOREIGN REGISTRATION

a) A list of countries in which an application has been lodged and the status of these applications shall be furnished, detailing approvals, deferrals, withdrawals and rejections.

b) If the medicine has been registered by the regulatory authorities with whom Council aligns itself, i.e. USA (FDA), European Union (EMEA), UK (MHRA), Sweden (MPA), Canada (Health Canada), Australia (TGA), and Japan (MWH), include

- a copy of the certificate of registration,
- the conditions of registration and
- the approved package insert (data sheet) translated into English where relevant.

c) Details of any negative decision by any regulatory authority reflected in PART 1D b) shall be provided.

ANNO ORGANIX FAITH DROPS have been formulated in South Africa and they will be exported to the surrounding SADC Countries as well as all other countries worldwide.

PART 3B FORMULATION

a) Pharmaceutical medicine: final dosage form
Biological medicine: final filling lot/batch

Below is a schedule of the names and quantities of each active and inactive pharmaceutical ingredient contained in a dosage unit. If no dosage unit exists, another suitable unit of mass or volume of the medicine may be used as long as the relevant particulars regarding the active pharmaceutical ingredients correspond in the package insert and on the label.

The purpose(s) of each inactive ingredient in the formulation shall be specified, including that of those ingredients used during manufacturing but which are not present in the final product.

Approved Name	Quantity per Dosage Unit* per 1 ml	Active or Inactive	Purpose of Inactive
Leonurine Extract derived from Leonotis leonurus		**Active**	
Cnicus benedictus Extract		**Active**	
Camptotheca acuminate Extract		**Active**	
Motherwort Extract stachydrine		**Active**	
Hypoxis Extract		**Active**	
Sutherlandia frutescens Extract		**Active**	
Tulbaghia violacea Extract		**Active**	
Catcharanthus roseus		**Active**	
Dicoma benedictus			
Elytropoppus rhinocerotis			
Sodium Chlorite		**Active**	**Preserving Agent**
Purified Water		**Inactive**	**Diluent/Vehicle**
TOTAL VOLUME			

This is an abridged version of our registration form with Medicines Control Council. We have safeguarded our formula only.

Department of Health

MBR20.8

DEPARTMENT OF HEALTH

APPLICATION FOR THE SUBMISSION IN TERMS OF CALL UP NOTICE R204; GOVERNMENT NOTICE NO 23128 AS PUBLISHED ON 22 FEBRUARY 2002 FOR COMPLEMENTARY MEDICINE (MEDICINES AND RELATED SUBSTANCES ACT; ACT 101 OF 1965; SECTION 14 (1))

1. **PARTICULARS OF APPLICANT**

   NAME: **ANNO ORGANIX (PTY) LTD**

   PHYSICAL ADDRESS: ***22 Mooigezicht Street, Bellville, 7530, Cape Town, RSA***

   CONTACT TELEPHONE NUMBER: ***082 339 9799***

2. **PRODUCT NAME**

   ANNO ORGANIX FAITH DROPS

   CATEGORY: ***A 32.16 Other. Submitted according to the Complementary Listing System. African Traditional and Western Herbal Medicine.***

   DATE OF APPLICATION: 7 July 2008.

3. **SUBMISSION OF DOCUMENTS TO MEDICINE CONTROL COUNCIL (person delivering)**

   NAME: ... ***V. PONTE***

   SIGNATURE:

   DATE: 7 July 2008

4. **DEPARTMENT OF HEALTH STAMP**

   DEPARTMENT OF HEALTH
   RECEIVED
   2008 -07- 08
   MEDICINES CONTROL COUNCIL

5. **DATE:**

6. **REGISTRY NO:** 028205

7. **PLEASE NOTE**

   (i) This document indicates that the Medicines Regulatory Affairs on behalf of the Registrar of Medicines has taken receipt of the above-mentioned documents.

   (ii) This document does not authorize the use of MCC's / MRA's name for trading purposes or for any other official use other than that of the Registry itself.

   (iii) This document must accompany a copy of the MRF1 form, PARTs1 and 3B.

   (iv) Failure to provide the correct information may lead to prosecution in terms of the Medicines and Related Substances Act, 1965 (Act 101 of 1965).

Laboratory Reports

SANAS
ACCREDITED
LABORATORY
T0050

MICRO LABORATORIES (Pty) Ltd
7 Warrington Road ▪ Claremont ▪ Cape Town ▪ 7708
Tel: +27(21)683 8436 / 08613 SWIFT ▪ Fax: +27(21)683 8420
E-mail: info@swift.co.za ▪ Web: www.swift.co.za

This Report Replaces Micro Report CT 95779/08

MICRO REPORT
ADDENDUM

ANNO-ORGANIC
P.O. BOX 95
WITELBOS
6304

ATTENTION: **COLLEEN O' GARROLL / DR. M. McDONALD**

DATE: 11/08/08
DATE RECEIVED: 06/08/08
DATE TESTED: 06-11/08/08

REQ NO: CT 95779/08-A

SAMPLE TYPE: **SUPPLEMENT**
METHOD NO: **SWJM 35; 50**

SAMPLE TYPE	TEST TYPE	BACT.COUNT CFU/gram
Supplement		
Supplement	TMA	No Growth
	Yeast & Mould	No Growth

SEAN SWATTON
LABORATORY MANAGER

BRENDA DU TOIT
LABORATORY MANAGER

Forensic Drug Laboratory
2009/04/23
11:55 AM

BUSINESS ENTERPRISES
UNIVERSITY OF PRETORIA

Forensic Division
Department of Chemistry
Pathology Building
Room 3-40
University of Pretoria
C/o Dr Savage Rd & Voortrekker Str
Pretoria
0001

For Client
Dr. Micheal McDonald

Reference : **McDonald, Dr. M.**
ID No : **6209135226083**
Ref Lab : **Damaansa Holding SA**

UNKNOWN SUBSTANCE SCREEN

Analysis performed by Gas chromatography-Mass spectrometry (GC-MS)

➢ Specimen Type

Liquid (Yellow – Water soluble; pH 4)

➢ Description

Plastic container containing liquid with sharp, acrid odour. Strong indication of acidic solution containing chlorine.

➢ Results

Crude and purified neutral (Hexane) organic extractions were performed, and subsequently analysed by GC-MS. The results were qualitatively assessed and each chromatographic peak compared with electronic mass spectrometry database matches. Compounds with a comparative match of greater than 70% are reported. The assay indicated the presence of the following:

1. Fatty acids (Lauric acid; Palmitic acid; Stearic acid; Nonacosane; Triacontane)
2. 3,5-Dicyclopropyl-1-(4-methoxyphenyl)-2-methylbenzol
3. 6-Methoxychromane

6-Methoxychromane is part of a group of natural compounds with the parent structure (3,4-dihydro-2H-1-benzopyran)-, of which Vitamin E (α-Tocopherol) is the most commonly known.
The listed fatty acids are common constituents of herbal and pharmaceutical preparations.

Crude and purified acidic (Diethyl ether) organic extractions were performed, and subsequently analysed by GC-MS. The results were qualitatively assessed and each chromatographic peak compared with electronic mass spectrometry database matches. Compounds with a comparative match of greater than 70% are reported. The assay indicated the presence of the following:

1. Chloroacetic acid
2. Dichloroacetic acid
3. Amylene dichloride
4. Benzoic acid
5. Di-isobutyl phthalate
6. Fatty acids (Palmitic acid; Stearic acid)
7. Thymoquinone
8. 6-Methoxychromane

Chloroacetates are strong organic acids and known toxins (Rat LD_{50} = 0.5g/kg; Chloroacetic acid), however there are reports on oncogenic therapy utilizing low dosage dichloroacetic acid.
Benzoic acid and di-isobutyl phthalate are common contaminants from plastic containers. Benzoic acid is also a common preservative.
Thymoquinone is a phytochemical with reported antioxidant properties.

Crude and purified basic (Chloroform) organic extractions were performed, and subsequently analysed by GC-MS. The results were qualitatively assessed and each chromatographic peak compared with electronic mass spectrometry database matches. Compounds with a comparative match of greater than 70% are reported. The assay indicated the presence of the following:

1. Dihydroactinidiolide
2. Loliolide
3. 3,5-Dicyclopropyl-1-(4-methoxyphenyl)-2-methylbenzol

Dihydroactinidiolide and loliolide are structurally related phytochemicals.

GC-MS is an internationally accepted comparative analytical technique where compounds are characteristically separated in the gas phase and unique patterns (mass spectra) of the separated compounds are obtained. It is most suited in the analysis of small, semi-volatile, thermally stable compounds. Considering the composition of the submitted specimen, analysis focusing on the specific species and concentration of chlorine containing compounds is recommended. Additionally, analysis for larger, thermally labile compounds by liquid chromatographic techniques may also be advisable.

Yours sincerely

Dr. Tim Laurens (FRSC, MFSS) Adriaan Marais (B.Sc Hons) Maraliese Jordaan (M.Sc)

Tel: +27 12 319 2116, Cell: +27 82 891 4886, Fax: +27 12 319 2915, E-mail: tim.laurens@up.ac.za
Tel: +27 12 420 2515, Cell: +27 83 276 3139, Fax: +27 12 319 2915, E-mail: adriaan.marais@up.ac.za
Tel: +27 12 420 2515, Cell: +27 83 324 6472, Fax: +27 12 319 2915, E-mail: maraliese.jordaan@up.ac.za

SELECTED TESTIMONIALS

KINDLY NOTE:

Names and contact details disclosed in the attached Selected Testimonials have been disclosed with permission from the patients, who have agreed to waive Doctor/Patient confidentiality, for research and medical purposes.

Please ensure that these notes are given TO Medical Practitioners only and not to Non-medical personnel or the general public, to ensure as much privacy as we can afford these patients.

THIS IS MY STORY …

Hi there my name is Lynne, I have been living with poor health and various Cancers my entire Adult life, I was cancer free for a period of 8 years and then in 2003 I contracted a "FLU" virus, which due to large doses of Chemo and radiation being administered to "TREAT THE CANCER" and the resultant "Organ" damage, and depletion of my "Immune System" the "FLU VIRUS" penetrated the "Cell " , the "Nucleus" and became "D N A " and hey presto … I had been diagnosed with "Lymphoma Leukemia" coupled with "Epstein Barr Virus", "Diabetes" and "Chronic Anaemia".

I made the decision that I would not have any form of Chemical treatment whatsoever and that my "Fate" lay in God's Hands…..

I LIVED with Cancer until February 2008-07-11, when I was approached by a Doctor, who asked me if I was prepared to do a trial on a plant extract therapy that he had developed, furthermore he claimed to have had resounding success with various ailments and diseases like, Malaria, TB, PHSYORISIS and certain types of Cancer, however, he did not have testimony that these drops could be beneficial in Tumour forming as well as Blood Cancers.

I agreed to become their "Guinea Pig" and provide a "Living Log" as to what I experienced as a result of taking these Drops.

I started my treatment on the 01st of February 2008, I administered the dosage Extremely Aggressively and experienced side effects in varying degrees, Nausea, vomiting, diarrhoea , severe Headaches as well as extreme tiredness. In having said this I must impress upon you that strange as it may sound, I also experienced a feeling of unequalled "Well being", I noticed changes first in my skin, it took on a "Glow" I lost the black/dark shadows under my eyes, my hair started to take on a shine and became thicker, the ridges in my fingernails all but disappeared, even my eyesight seemed to improve, the chalky appearance and pallor of my skin diminished. I WAS FEELING INCREDIBLE.

To cut a long story short; I went for "Blood tests" on the 20th February 2008 and received most of the results on the 22nd February, 2008. It read "PLATELETT NUMBERS NORMAL" also, there was no sign of Diabetes, and Chronic Anaemia was also within normal ranges. I was "CANCER FREE". The results for the "Epstein Barr Virus" was only received 9 days later, and read that there was previous "EPSTEIN BARR VIRUS" infection, however, there was no infection active at present!..... (EBV) a "Virus" which attacks your immune system ferociously and relentlessly had also been destroyed.

I believe that coupled with Gods love, your FAITH, lifestyle and diet adaptation and with "FAITH" One will definitely benefit from taking these drops.

"I DID".

GO WITH GOD.
STAY WITH GOD…

KANKER IS NIE 'N DOODSVONNIS NIE! HOOP IN 'N DRUPPELTJIE!

Ek is Andre van der Bank, 61 jaar oud, sakeman en vervaardigende juwelier van Pretoria. Ek het gedurende 2008, bewus geraak van die feit dat ek gewig verloor, gepaardgaande met geweldige moegheid en nagsweet. Gedurende Julie 2008 het vergrote kliere in my nek voorgekom - na menige bloedtoetse, x-strale, CAT Scans, ens is ek op die 14de Augustus 2008 met Dermkanaal Kanker - fase 4 - gediagnoseer met **3 maande oor om te leef**. Ek is na 'n 2de Spesialis waar dit bevestig was, nadat hy onder narkose 'n klier uit my nek verwyder het en vir ontleding gestuur het. Ek is verwys na die Onkologie afdeling by 'n hospitaal in Pretoria vir Chemoterapie. Na deeglike ondersoek en gesprek met die Onkoloog, het ek en my familie daarteen besluit en die alternatiewe roete gekies.

Ek het onmiddelik met alternatiewe behandeling begin by Prof Fouche van Krugersdorp en Dr Stewart van Johannesburg.

Dit was verseker ook nie 'n maklike pad nie. Ek was baie siek en het in totaal 26kg verloor.

Ek het begin met daaglikse binne-aarse Ozoon behandeling by Dr Stewart. Ek het ook ander aanvullings geneem, asook my dieet drasties aangepas, soos voorgestel op die Fase 4, Cancer Tutor webblad.
Ek het onmiddelik sout, suiker, vleis, suiwel en verfynde voedsels uitgeskakel. Water, vars groente en vrugte was my voorland. Om my liggaam alkalies te kry en te hou, was ook 'n uitdaging omdat kankerselle nie in 'n alkaliese liggaam leef nie. Geestelike selfondersoek was ook belangrik. In meeste gevalle loop ons rond met bagasie van die verlede waarmee ons nog nie gedeel het nie, wat ook 'n negatiewe uitwerking op ons gesondheid kan hê.

Gedurende hierdie tyd het Prof Fouche my ook voorgestel aan Dr Mc Donald van die Faith druppels. Ek het die druppels in baie hoe dosis per mond onder toesig van beide Prof Fouche en Dr Mc Donald geneem vir 'n periode van 6 weke. Na 'n rusperiode het ek op die volle Fase 4 protokol gegaan wat 'n kombinasie van DMSO en Faith druppels ingesluit het, geduernde hierdie protocol het ek ook faith mms binneaars gekry. Die laaste behandeling was die Koeksodabehandeling wat ek binne-aars ontvang het onder toesig van Prof Fouche.
Newe- effekte wat ek gedurende hierdie tyd ondervind het was ligte naarheid, ligte koorsigheid wat voorgekom het en 'n mislike gevoel. Dit het gewoonlik vir kort periodes na sekere behandelings voorgekom, waarna ek dan weer beter gevoel het. Baie belangrik is dat ek gedurende die behandeling nooit enige griep of verkoues gekry het nie, wat beteken dat die alternatiewe behandeling deurentyd my immuniteit opgebou het.

Dit is nou 8 maande verder en ek is dankbaar om te sê dat ek volkome genees is. My gewig het gestabiliseer - ek het ongeveer 3kg opgetel en werk reeds weer vir die laaste 3 maande voldag en het baie energie. Ek is steeds op instandhouding met die Faith druppels, asook 'n paar belangrike aanvullers en 'n gesonde dieet natuurlik.

Om alternatief te gaan beteken nie noodwendig net een pad nie, omdat alle kankers nie dieselfde reageer op een behandeling nie - in my geval het ek drastiese en 'n verskeidenheid van behandeling nodig gehad. Dieet, rus, 'n positiewe en hoopvolle gemoed en 'n goeie ondersteuning sisteem is beslis baie belangrik. Ek is so opgewonde oor wat die Faith druppels vir my beteken het dat ek dit aanbeveel vir almal om my en glo dat elke huishouding dit moet kry, veral met die winter in aantog. Dit werk vinnig en effektief en is bekostigbaar. Ek is ook n geregistreerde agent vir die bemarking en verkope van FAITH druppels

Ek het 'n dankbare hart teenoor die Medici vir wonderlike en simpatieke behandeling, vir alternatiewe geneeskundiges wat vir my hoop gegee het en tot die besef gebring het dat Kanker nie 'n doodsvonnis is nie. Dankbaar teen oor my vrou en kinders, familielede, vriende en kennisse se ondersteuning en gebede. Dankbaar teenoor my Hemelse Vader wat vir my gevul het met krag om hierdeur te kon kom en met insig vir alternatiewe uitkoms en met geloof dat Hy groter is as Kanker of enige ander siekte.

Navrae:
Prof Fouche: 0845808079
Dr Mc Donald: 0823399799
My nommer, Andre: 0826806785 - na 7uur saans asb .of stuur gerus 'n e-pos aan my by andre@vdbj.co.za of gerda.vanderbank@vodamail.co.za. Ons gesels graag met u.

Getuienisse van mense vir wie ek Faith aanbeveel het:

1. ‘n Vriendin, Mev. J. Becker van Jhb het vir n vriend wat erge malaria onderlede gehad het, Faith Druppels gegee. Hy het binne ‘n paar ure opgestaan met net n ligte hoofpyn. In die proses van die behandeling het sy oë ook verbeter, soveel so dat dit nou 3 weke verder is en hy steeds sonder die bril funksioneer. Mev. Becker – 0829208795

2. Mnr. Aukamp het Faith Druppels vir sy skoonma gegee en sy is skoon getoets vir been kanker na 3 maande se gebruik.0824445048

3. Dawn is binne 3 dae van baie erge malaria genees en behandel nou haar kind wat leukemia het. 0767416607

4. Gerrie werk op hulle myn in die D.R.C. en het verlede jaar baie malaria gevalle, asook ander onbekende siektes behandel. Almal was binne ure en dae genees tot almal se verbasing.082568 4245.

5. Gospel sanger Leon en die hele famielie gebruik net Faith Druppels. Sy dogter is n swemmer en sy word nie meer siek van die swem nie te danke aan Faith, hy gebruik ook Faith ook na elke sang optrede en kry nie meer seer keel en infeksie nie.

6. Pada is van Zimbawe en was verwittig dat sy vrou en kind Kolera het en reeds baie erg siek is, ek het vir hom 2 pakkies Faith Druppels gegee en dadelik op n bus gekry en toe hy by sy mense kom was hulle baie siek . Hy se vir my met sy terug keer dat hulle die volgende dag gesond was en toe behandel hy somer nog 10 van die mense wat na hom toe gekom het ook met Kolera, almal is genees oor hy terug geezer het, hulle was almal verbenas en baie dankbaar. Sel no 0728330226

Daar is nog so baie gevalle maar te veel om op te noem.

Andre.

SELECTED CASE STUDIES:

amarentia

From: "amarentia"
To:
Sent: 04 April 2009 12:44 PM
Attach: Before.jpg; After.jpg
Subject: Emailing: Before, After

Geagte Dr. McDonald

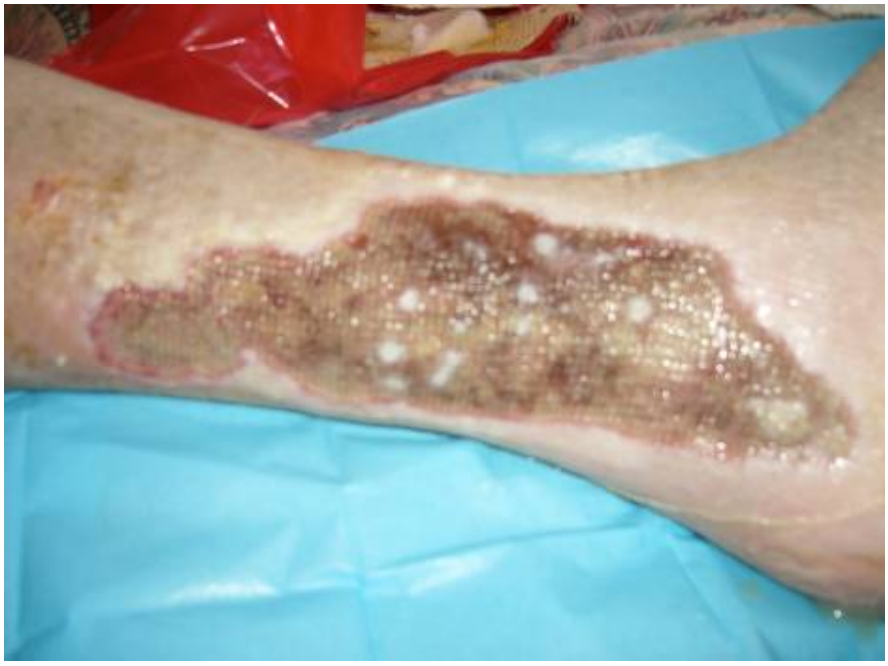
Mr. Weigall het n septiese wond gehad waarby ek n kweking gedoen het op die 09/12/2008 wat Klebsiella pneumoniae, Proteus mirabilis en Enterococcus faecalis getoon het. Ek het pasient op Faith terapie geplaas en op die fotos attach sien mens die wonderbaarlike verbetering.
Pasient gebruik nog Faith daagliks

Die kweking verslae sal ek nou deur faks.

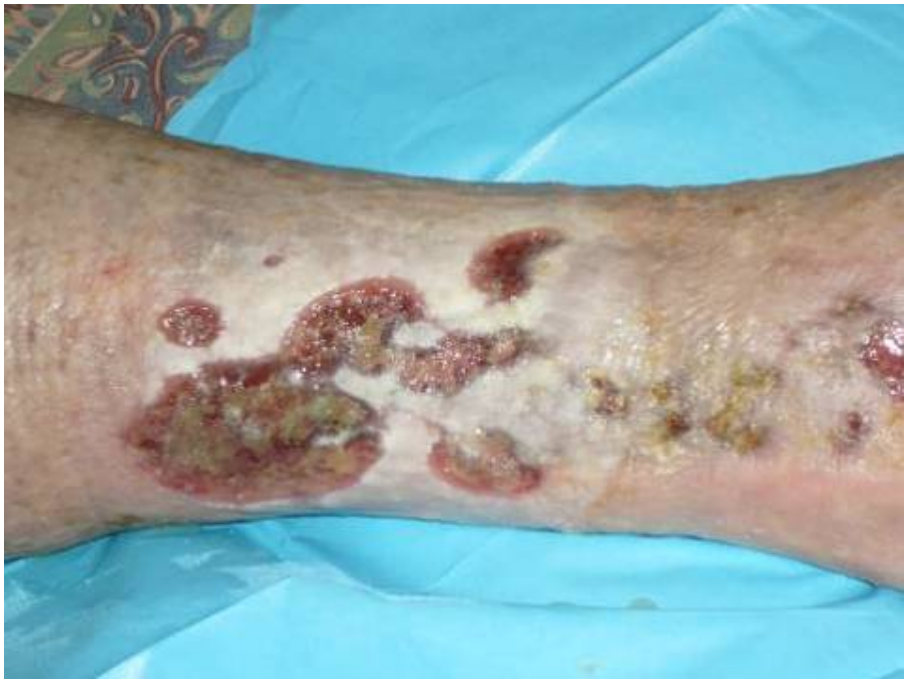
Groete
Sr. Rensia Lyons

CASE STUDY NUMBER 1: CANCER LOWER LEG AND ANKLE:

BEFORE:



AFTER:



CASE STUDY NUMBER 2: CANCER – HEEL

PATOLOË : PATHOLOGISTS
Drs Du Buisson, Brulnette, Kramer Inc./Ing.
AMPATH

2-4 Uur kontaknommer / Hour contact number 012 427 1600

PASIENT:

DOKTER: 9351
PTA GOS VERPLEEGDIENS
SR RENTIA LYONS
PETRICKLAAN 844
FAERIE GLEN
0043 ROETE:2026:205

VERWYSENDE DR:
PTA GOS VERPLEEGDIENS
AFSKRIF DR(S):

Manlik/

FINALE VERSLAG **MIKROBIOLOGIE**

FOLIO:

VERW NR : 60109800

M/A :
LID :
NR :

MONSTER :06:MA01D1676R
KONTROLE :0114 - 0020
GROEP # :6530908

GEKOLLEKTEER:24/08/06 0930
ONTVANG :24/08/06 1152
GEDRUK :28/08/06 0653

AANGEVRA: ETTER DEP: MIKROSKOPIE, KWEKING

KOMMENTAAR: C/:SPECIMEN RECEIVED WITHOUT NAME

MONSTER: Etter depper

PROSEDURE		RESULTAAT
> MIKROSKOPIE		
Leukosiete	:	1+
Epiteelselle	:	Enkele
Gisselle	:	Geen giste waargeneem
Gram neg basille	:	1+
> BAKTERIELE KWEKING		
2+ Klebsiella pneumoniae		

Hierdie organisme produseer 'n ESBL (uitgebreide spektrum beta-laktamase) wat bestandheid teen die derde generasie kefalosporiene (bv. kefotaksiem, keftriakson, keftasidiem), en vierde generasie kefalosporiene, (kefepiem, kefpirom) tot gevolg het. ESBL-produserende organismes kan steeds gevoelig wees vir kinolone en aminoglikosiede, maar karbapenems (imipenem, meropenem, ertapenem) word vir ernstige infeksies aanbeveel. Maatreels vir die beheer van moontlike kruisinfeksie mag aangedui wees.

2+ Proteus mirabilis

NPG

=NUWE RESULTAAT SEDERT VORIGE VERSLAG / NEW RESULTS SINCE PREVIOUS REPORT
AFWYKENDE NORMALE WAARDEWINKEL SEDERT VORIGE VERSLAG / ABNORMAL RANGES SINCE PREVIOUS REPORT C/=INCORRECT/ABNORMAL RESULT(S) / HISTORICAL RESULTS

PATOLOË · PATHOLOGISTS

Drs Du Buisson, Bruinette, Kramer Inc./Ing.

AMPATH

24 Uur kontaknommer / Hour contact number 012 427 1800

PASIENT:

Manlik/

FOLIO:

M/A :
LID :
NR :

DOKTER: 9351

PTA OOS VERPLEEGDIENS
SR RENTIA LYONS
PETRICKLAAN 844
FAERIE GLEN
0043 ROETE: 2026:205

VERWYSENDE DR:

PTA OOS VERPLEEGDIENS
AFSKRIF DR(s):

FINALE VERSLAG

MIKROBIOLOGIE

VERW NR : 60109800

MONSTER :06:MA01016?6R
KONTROLE :0114 - 0020
GROEP # :6530908

GEKOLLEKTEER: 24/08/06 0930
ONTVANG :24/08/06 1152
GEDRUK :28/08/06 0653

AANGEVRA: ETTER DEP: MIKROSKOPIE, KWEKING

KOMMENTAAR: C/:SPECIMEN RECEIVED WITHOUT NAME

MONSTER: Etter depper

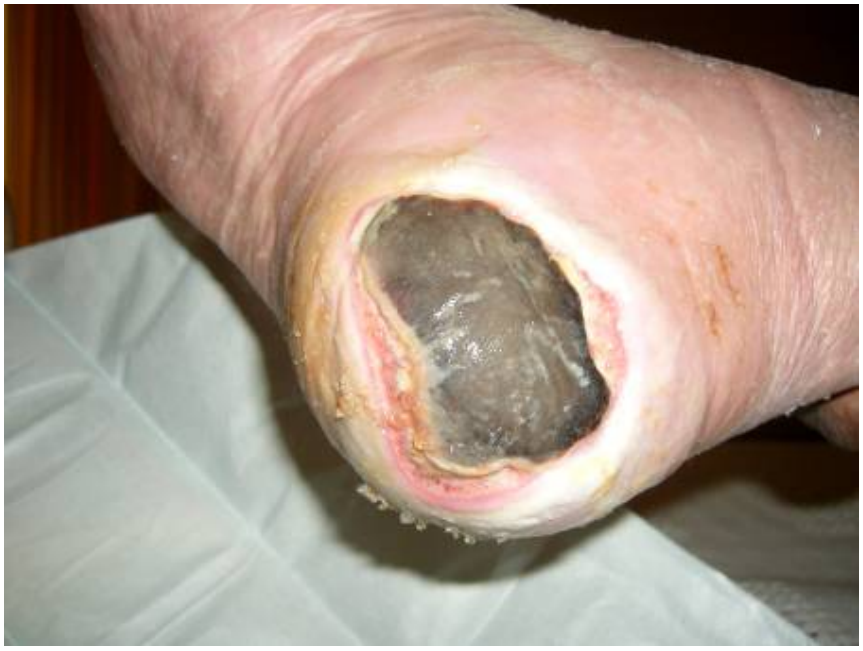
PROSEDURE		**RESULTAAT**
> MIKROSKOPIE		
Leukosiete	:	1+
Epiteelselle	:	Enkele
Gisselle	:	Geen giste waargeneem
Gram neg basille	:	1+
> BAKTERIELE KWEKING		

2+ **Klebsiella pneumoniae**

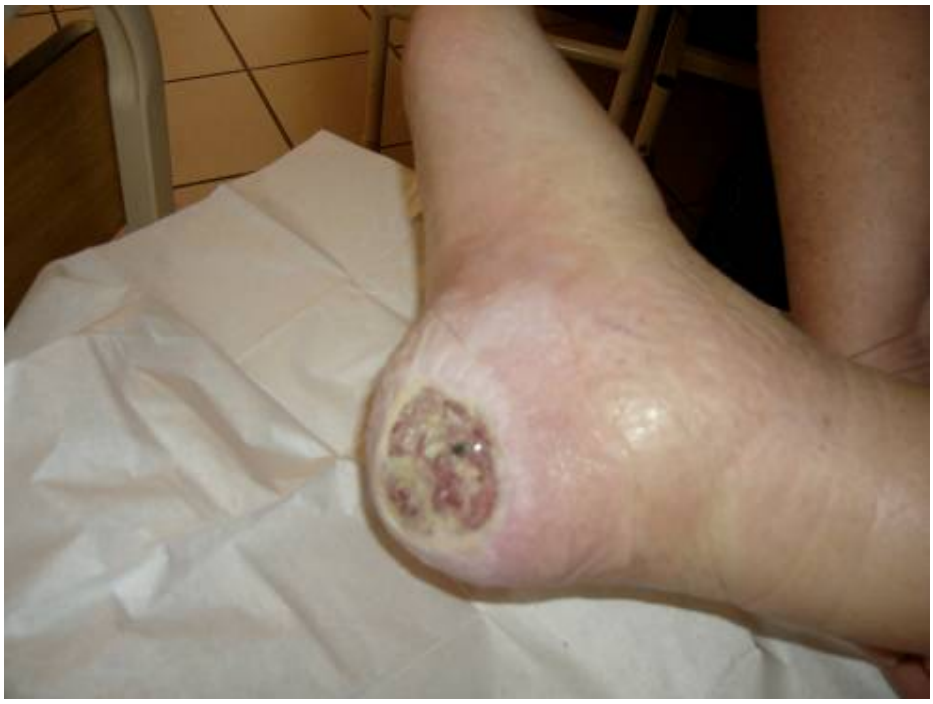
Hierdie organisme produseer 'n ESBL (uitgebreide spektrum beta-laktamase) wat bestandheid teen die derde generasie kefalosporiene (bv. kefotaksiem, keftriaksoon, keftasidiem), en vierde generasie kefalosporiene, (kefepiem, kefpiroom) tot gevolg het.
ESBL-produserende organismes kan steeds gevoelig wees vir kinolone en aminoglikosiede, maar karbapenems (imipenem, meropenem, ertapenem) word vir ernstige infeksies aanbeveel.
Maatreels vir die beheer van moontlike kruisinfeksie mag aangedui wees.

2+ **Proteus mirabilis**

BEFORE:



AFTER:



CASE STUDY NUMBER 3: TUMOUR – BUTTOCK

Sr. R . Lyons
PR. 6846626

Po Box 37713
Faerie Glen
0043

Telephone no. (012) 991 4473
Faks no. :0869890957
E-mail:rensia@mweb.co.za

Geagte Dokter

Insake Mr. JJ Malan

Bg. pasient het met n septiese wond op regter boud area na n opratiewe operasie om sepsis te verwyder my kom sien vir wondsorg. Toetse is gedoen op 18/02/2006 en pasient het n CRP van 146 gehad en Escherichia Coli is gekweek. Pasient is op Faith terapie geplaas . Soos sigbaar op foto is wond genees .

Dankie
Sr R Lyons

AH: Dr. Du Wilch.

PATHOLOGISTS · PATOLOË

PR/2004/31

24 Uur kontaknommer / Hour contact number 012 427 1800

Drs. Du Buisson, Bruinette & Kramer Inc./Ing.

AMPATH

PASIENT:

MALAN, JJ JACOBUS
POSBUS 153
WAPADRAND
0050

Manlik/19510317/54
ID : 5103175034088
H: C:0845053823
FOLIO:

M/A :BONITAS-MEDSCHEME
LID :MALAN, JJ JACOBUS
NR :02002789121

DOKTER: 9351

PTA COS VERPLEEGDIENS
SR RENTIA LYONS
PETRICKLAAN 944
FAERIE GLEN
0043 ROETE:2026:205

VERWYSENDE DR:

PTA COS VERPLEEGDIENS
AFSKRIF DR(s):

FINALE VERSLAG

MIKROBIOLOGIE

VERW NR : 58108816

MONSTER :06:MA0018549R
KONTROLE :0028 -
GROEP # :4836445

GEKOLLEKTEER:18/02/06 1500
ONTVANG :18/02/06 1818
GEDRUK :21/02/06 1025

AANGEVRA: ETTER DEP: MIKROSKOPIE, KWEKING

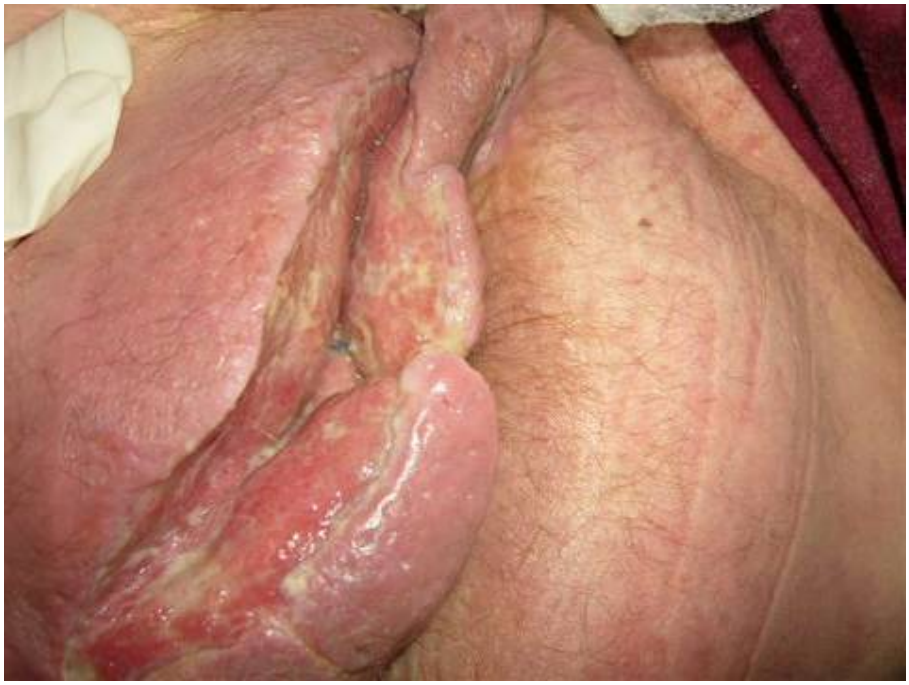
KOMMENTAAR: DEPPER VIR MKS VOET ANALE ABSES WOND

MONSTER: Ettar depper

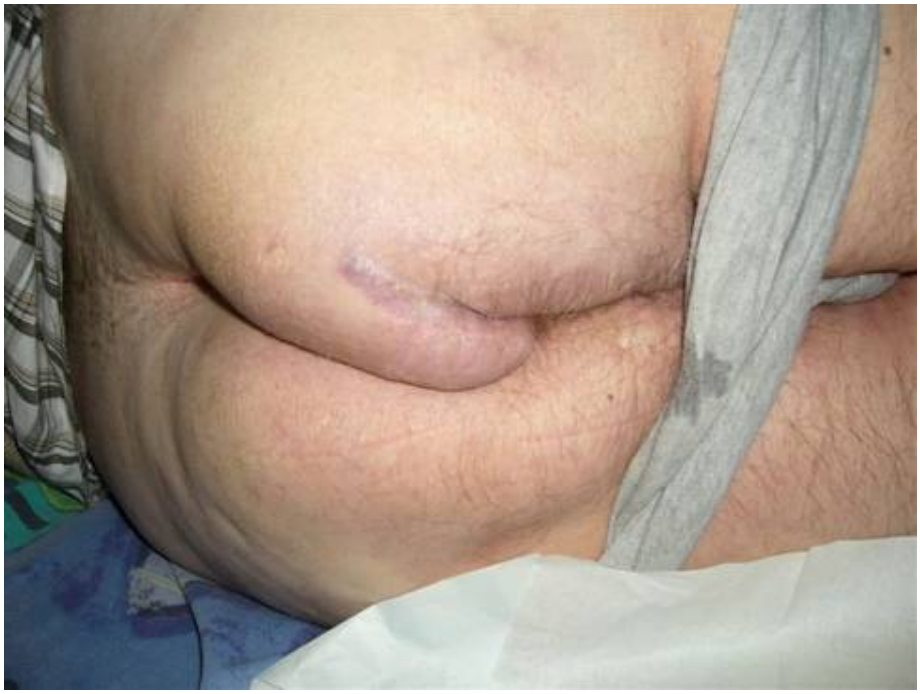
PROSEDURE	**RESULTAAT**
> MIKROSKOPIE	
Leukosiete	: 2+
Epiteelselle	: Enkele
Gisselle	: Geen giste waargeneem
Bakteriee	: Geen bakteriee waargenoem
> BAKTERIELE KWEKING	
Enkele **Escherichia coli**	
	E. coli
BETA-LAKTAME	
PENISILLIENE	
Ampisillien	R
Amoksisillien + Klavulaanseuur	R
Piperasillien	R
Piperasillien + Tasobaktam	R
KEFALOSPORIENE	
Kefalotien	R
Kefuroksiem	R
Kefotaksiem/keftriaksoon	S
Keftasidiem	S
Kefepiem	S
Kefpiroom	S
KARBAPENEMS	
Imipenem	S
Meropenem	S
Ertapenem	S
AMINOGLIKOSIEDE	
Amikasien	S
Gentamisien	S
Tobramisien	S
KINOLONE	
Ofloksasien/siprofloksasien	S
ANDER	

NPG

BEFORE:



AFTER:



CASE STUDY NUMBER 4: CANCER – BREAST

Sr. R . Lyons
PR. 8846626

Po Box 37713
Faerie Glen
0043

Telephone no. (012) 991 4473
Faks no. :0866880957
E-mail:rensia@mweb.co.za

Geagte Dokter

Mr. C Pickard het n abses op boud gehad wat gedreineer was. n Kweking is gedoen op 25/01/2007 wat toon Serratia marcescens , Staphylococcus aureus.

Pasient is op teraple geplaas en die genesing is duidelik sigbaar op fotos.
As wond genees neem ek nie weer n depper vir MK&S nie op kostes te bespaar. Wond sal nie genees indien daar nog bakteries teenwoordig was nie.

Dankie
Sr R Lyons

PATOLOË · PATHOLOGISTS

Drs Du Buisson, Bruinette, Kramer Inc./Ing.

AMPATH

24 Uur kontaknommer / Hour contact number 012 427 1800

PASIENT:	DOKTER: 9351	VERWYSENDE DR:
PICKARD,C COLLIN VAN HEERDENSTR 248 CAPITAL PARK 0084	PTA OOS VERPLEEGDIENS SR RENTIA LYONS PETRICKLAAN 844 FAERIE GLEN 0043 ROETE:3026:205	A ANSIE VENTER AFSKRIF DR(s): PTA OOS VERPLEEGDIENS
Manlik/19680624/38 ID : 6806245032085 H:0123233011 C:0837774692 FOLIO:	**FINALE VERSLAG** VERW NR : 61953681	**MIKROBIOLOGIE**
M/A :POLMED MHG LID :PICKARD,C COLLIN NR :000089369	MONSTER :07:MA0009506R KONTROLE :0028 - 0020 GROEP # :7913428	GEKOLLEKTEER:25/01/07 1300 ONTVANG :25/01/07 1604 GEDRUK :29/01/07 0624

AANGEVRA: ETTER DEP: MIKROSKOPIE, KWEKING

MONSTER: Etter depper

PROSEDURE		RESULTAAT
> MIKROSKOPIE		
Leukosiete	:	2+
Spiteelselle	:	Afwesig
Gisselle	:	Geen giste waargeneem
Gram pos kokke	:	Enkele
Gram neg basille	:	Enkele
> BAKTERIELE KWEKING		

1+ **Serratia marcescens**

Hierdie isolaat produseer 'n induseerbare chromosomale beta-laktamase. Behandeling met derde generasie kefalosporiene mag teenonderdrukte (derepressed) mutante selekteer wat hierdie ensieme op 'n konstitutiewe wyse produseer. Hierdie seleksie is meer waarskynlik in gedebiliteerde hospitaalpasiente, byvoorbeeld in intensiewe sorg-eenhede. Die gebruik van derde generasie kefalosporiene in sulke gevalle word gevolglik nie aanbeveel nie, veral nie vir isolate vanaf die lugwee nie, aangesien geneesmiddelkonsentrasies wat hier bereik word relatief laer is.

2+ **Staphylococcus aureus**

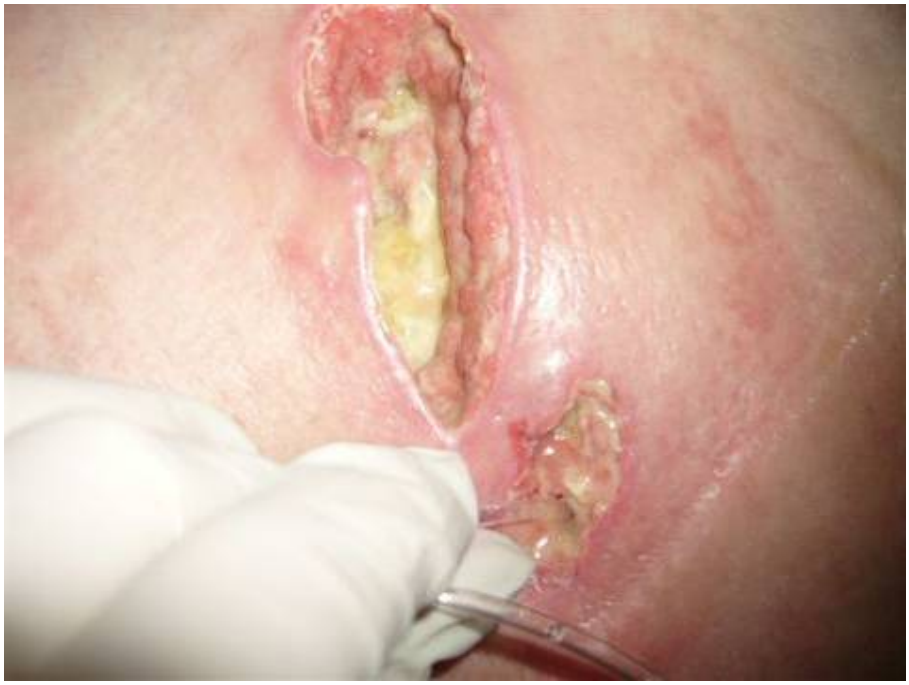
STAFILOKOKKE EN BETA-LAKTAM ANTIBIOTIKA

Oksasilliensensitiewe stafilokokke is sensitief vir kloksasillien, beta-laktamase-inhibeerderkombinasies, kefalosporiene en karbapenems.
KLOKSASILLIEN is steeds die middel van keuse vir die behandeling van hierdie infeksies.

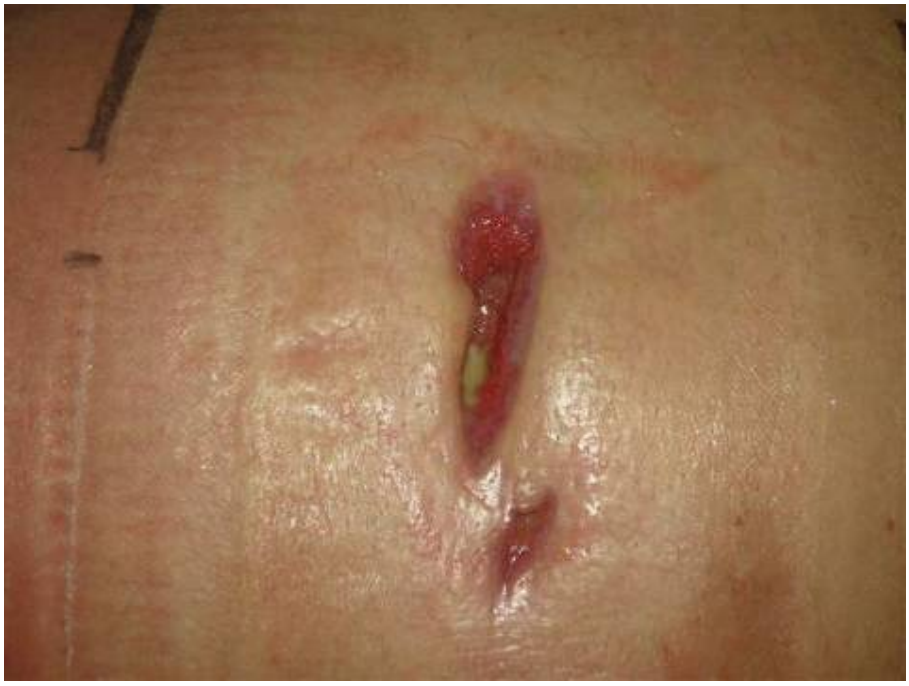
NB. RIFAMPISIEN moet NOOIT as enkelmiddel vir stafilokokkale infeksie gebruik word nie.

NPG

BEFORE:



AFTER:



CASE STUDY NUMBER 5: CANCER – SKIN

Sr. R . Lyons
PR. 8846026

Po Box 37713
Faerie Glen
0043

Telephone no. (012) 991 4473
Faks no. :0866890957
E-mail:rensia@mweb.co.za

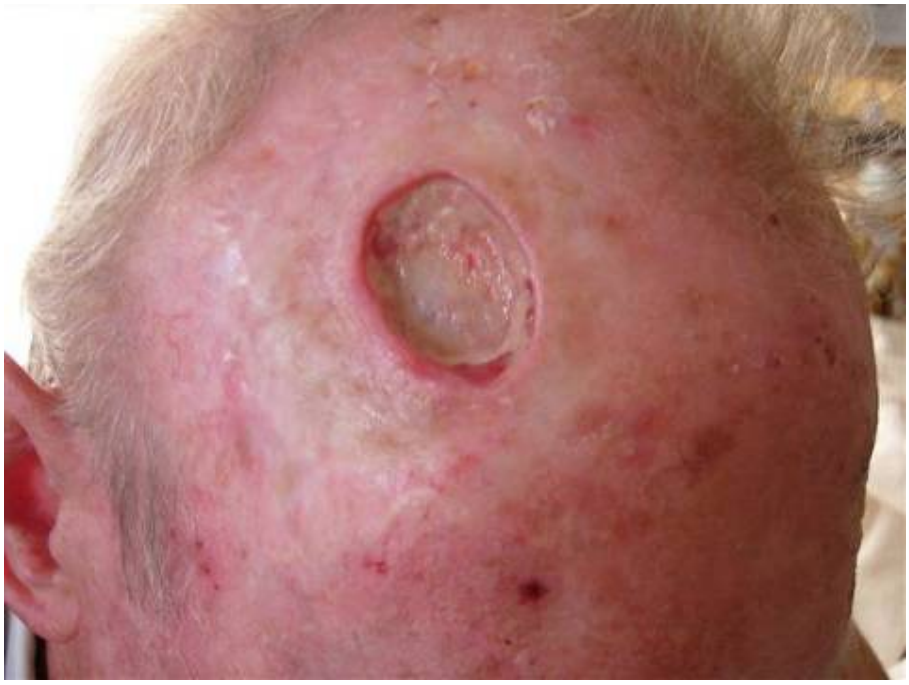
Geagte Dokter

Mr. het velkanker op kop gehad wat verwyder is. Die moontlikheid dat dit sou groei of selfs nie genees nie was baie sterk.

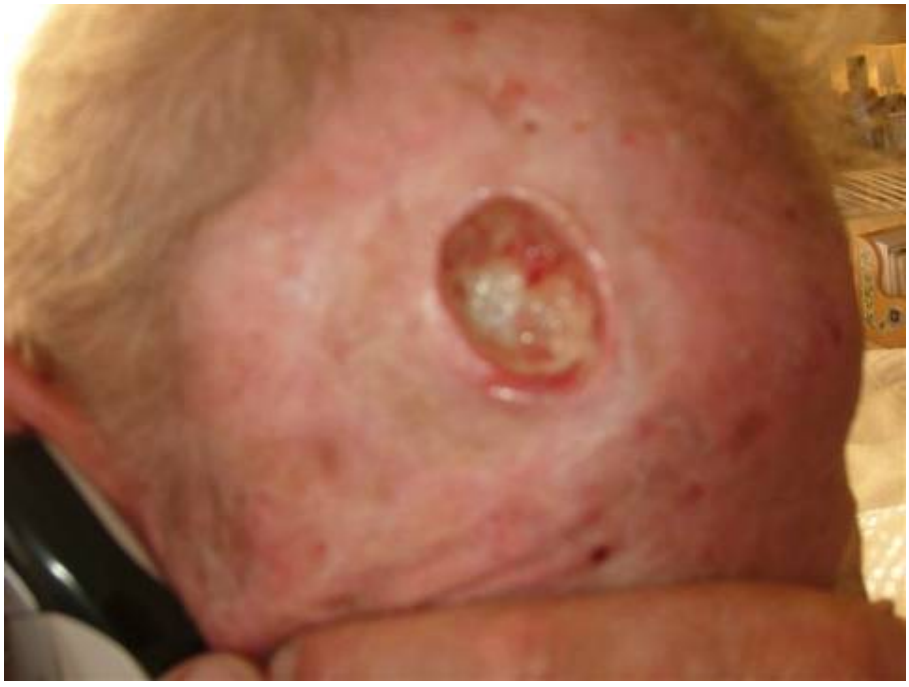
Pasient is op terapie geplaas wat sigbaar is op fotos. Pasient het later net vir veloorplanting gegaan

Dankie
Sr R Lyons

BEFORE:



AFTER:



CASE STUDY NUMBER 6: BEDSORE – COCCYX

Sr. R . Lyons
PR. 8846626

Po Box 37713
Faerie Glen
0043

Telephone no. (012) 991 4473
Faks no. :0866890957
E-mail:rensia@mweb.co.za

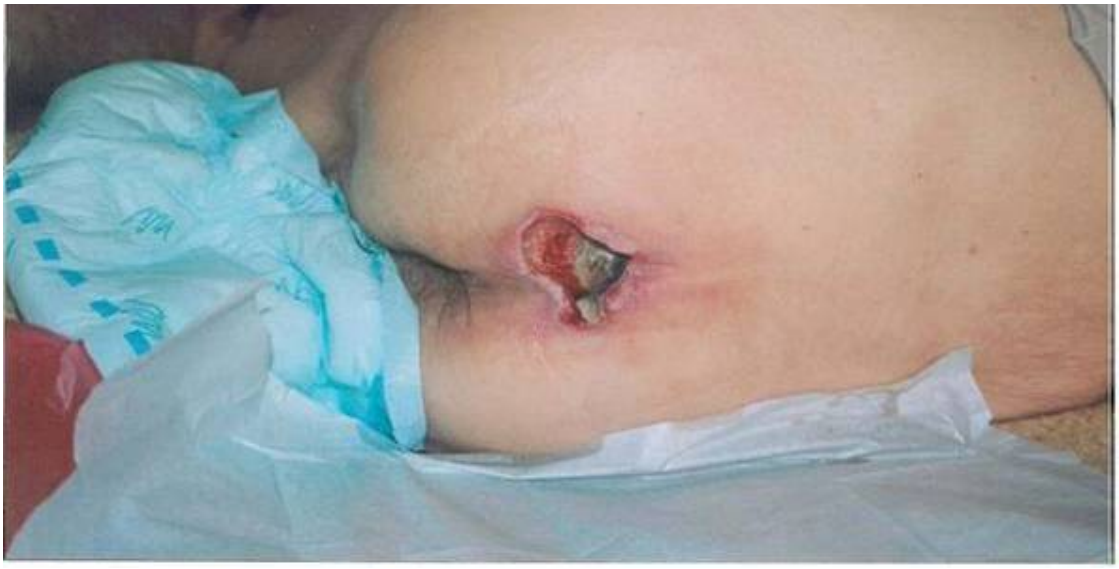
Geagte Dokter

Mr. het n septiese drukseer op sakrum. Wond ongeveer 4.7 cm diep, dreineer +++ etter en wondvog. Nekrotiese weefsel teenwoordig.

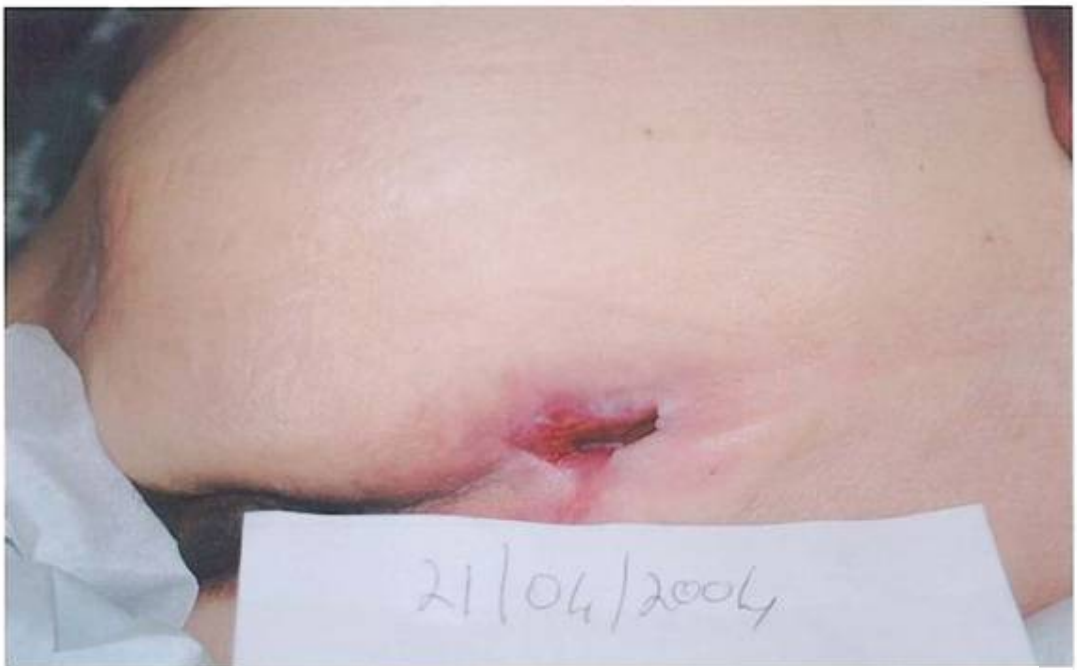
Pasient op teraple geplaas waarna wond heeltemal genees het, sonder veloorplanting . Soos sigbaar op foto

Dankie
Sr R Lyons

BEFORE:



AFTER:



CASE STUDY NUMBER 7: BEDSORE – HIP

Sr. R . Lyons
PR 8846626

Po Box 37713
Faerie Glen
0043

Telephone no. (012) 991 4473
Faks no. :086689095/
E-mail:rensia@mweb.co.za

Geagte Dokter

Mr. Stoltz het n drukseer aan regter heup gehad wat ongeveer 16cm diep was , met swak sirkulasie. Daar was Escherichia coli, Acinetobacter baumannii en Beta-hemolitiese streptokok gekweek op die 05/06/2006.

Pasient is op teraple geplaas waar die volgende kweking op die 07/06/2006 slegs Staphylococcus toon. Op die fotos is dit duidelik dat gesonde weefsel teenwoordig is. Pasient het vir n veloorplanting gegaan omrede die weefsel nou vatbaar sou wees vir oorplanting.

Dankie
Sr R Lyons

PATOLOE PATHOLOGISTS
Drs Dy Buisson, Bruinette, Kramer Inc./Ing.
AMPATH

24 Uur kontaknommer
Hour contact number 012 427 1800

PASIENT:	DOKTER: 9351	VERWYSENDE DR:
STOLTZ,C CORNEL MEADOW MRW 33 MEADDOW STRAAT QUESTRIA 0184	PTA OOS VERPLEEGDIENS SR RENTIA LYONS PETRICKLAAN 844 FAERIE GLEN 0043 ROETE:2026:205	PTA OOS VERPLEEGDIENS AFSKRIF DR(s):
anlik/19750221/31 ID : 7502215069087 :0128077697 C: OLIO:331294	**FINALE VERSLAG**	**MIKROBIOLOGIE**
	VERW NR : 53449966	
I/A :MEDIHELP ID :STOLTZ,C CORNEL R :5112818	MONSTER :06:MA0065630S KONTROLE :2119 - 0020 GROEP # :5813918	GEKOLLEKTEER:07/06/06 1330 ONTVANG :07/06/06 1631 GEDRUK :09/06/06 1001

ANGEVRA: ETTER DEP: MIKROSKOPIE, KWEKING

ONSTER: Etter depper

ROSEDURE	RESULTAAT
MIKROSKOPIE	
Leukosiete	: 1+
Epiteelselle	: Enkele
Gisselle	: Geen giste waargeneem
Bakteriee	: Geen bakteriee waargeneem
BAKTERIELE KWEKING	
1+ Staphylococcus aureus	
Metisillien weerstandig	

Maatreels vir die beheer van moontlike kruisinfeksie mag aangedui wees vir metisillienweerstandige S.aureus.

STAFILOKOKKE EN BETA-LAKTAM ANTIBIOTIKA

Oksasillienweerstandige stafilokokke is ook weerstandig teen metisillien en teen alle ander beta-laktam antibiotika. Hulle is dikwels ook weerstandig teen ander antibiotika. 'n Glikopeptied of oksasolidinoon word vir ernstige infeksies aanbeveel.

PATOLOE PATHOLOGISTS
Drs Du Buisson, Brulnette, Kramer Inc./Ing.

24 Uur kontaknommer / Hour contact number 012 427 1800

PASIENT:	DOKTER: 9351	VERWYSENDE DR:
STOLTZ,C CORNEL MEADOW MEW 33 MEADOW STRAAT EQUESTRIA 0184	PTA OOS VERPLEEGDIENS SR RENTIA LYONS PETRICKLAAN 844 FABRIE GLEN 0043 ROETE:2026:205	PTA OOS VERPLEEGDIENS APSKRIF DR(s):
Manlik/19750221/31 ID : 7502215069087 H:0128077691 C: FOLIO:331294	**FINALE VERSLAG**	**MIKROBIOLOGIE**
	VERW NR : 58917361	
M/A :MEDIHELP LID :STOLTZ,C CORNEL NR :5112818	MONSTER :06:MA0064264R KONTROLE :0028 - 2120 GROEP # :5789022	GEKOLLEKTEER:05/06/06 1300 ONTVANG :05/06/06 1608 GEDRUK :07/06/06 1016

AANGEVRA: NTTER DEP: MIKROSKOPIE, KWEKING

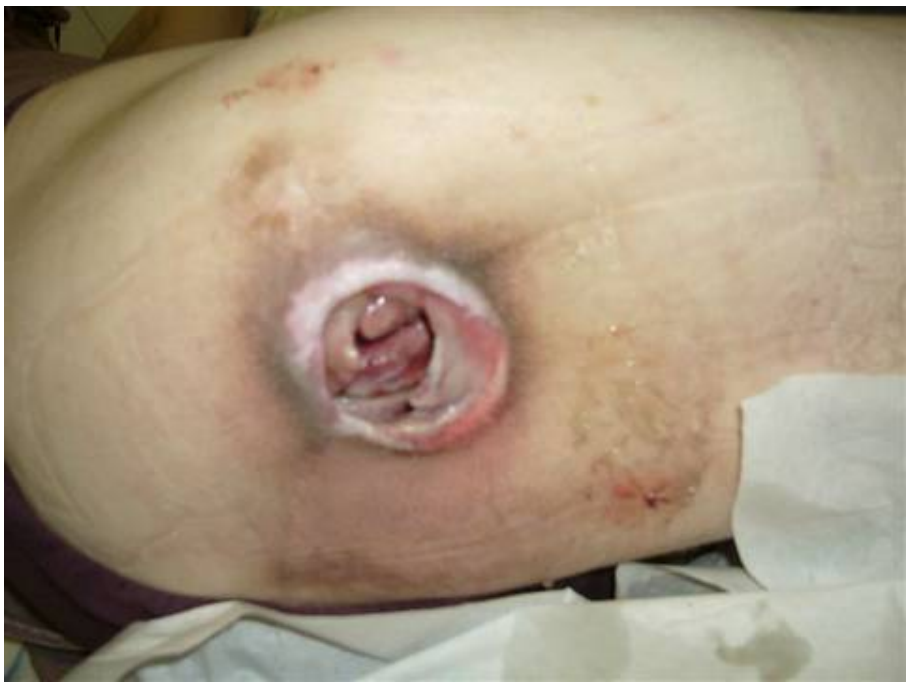
KOMMENTAAR: VIR AANDAG DR AMOR VAN ZYL

MONSTER: Etter depper

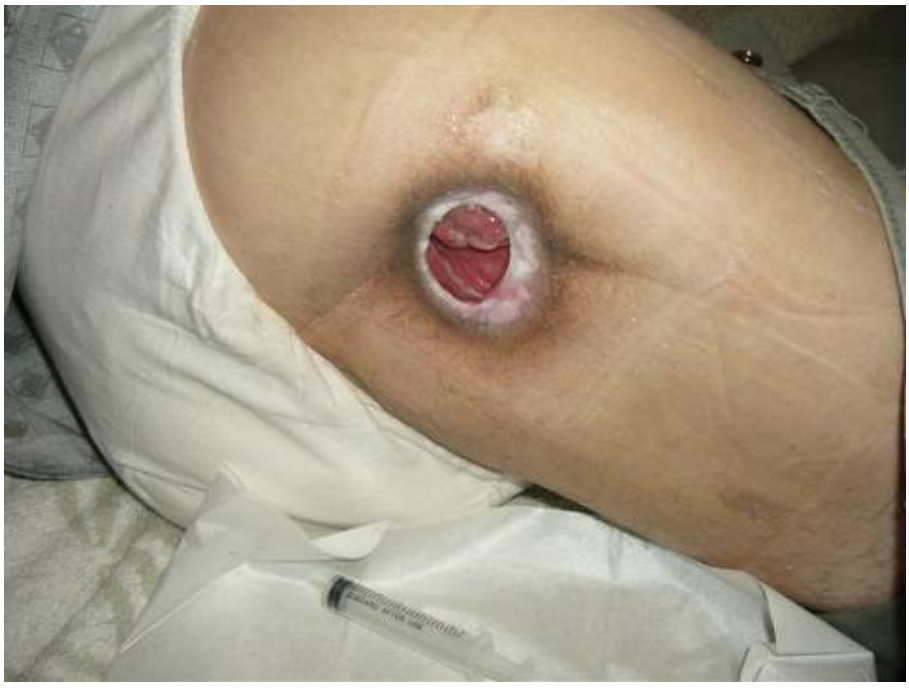
PROSEDURE		RESULTAAT
MIKROSKOPIE		
Leukosiete	:	1+
Epiteelselle	:	Enkele
Gisselle	:	Geen giste waargeneem
Gram pos kokke	:	1+
Gram neg basille	:	Enkele
> BAKTERIELE KWEKING		
1+ Escherichia coli		
1+ Acinetobacter baumannii		
1+ Beta-hemolitiese streptokok		
Identifikasie en sensitiwiteit volg.		

**NUWE RESULTAAT SEDERT VORIGE VERSLAG / NEW RESULTS SINDS PREVIOUS REPORT
BETEKENISVOLLE VERANDERING SEDERT VORIGE VERSLAG / SIGNIFICANT CHANGE SINCE PREVIOUS REPORT *) / **) HOOGS ABNORMALE RESULTATE / HIGHLY ABNORMAL RESULTS

BEFORE:



AFTER:



CASE STUDY NUMBER 8: CANCER - THROAT

Sr. R . Lyons
PR. 8846626

Po Box 37713
Faerie Glen
0043

Telephone no. (012) 991 4473
Faks no. :0866890957
E-mail:rensia@mweb.co.za

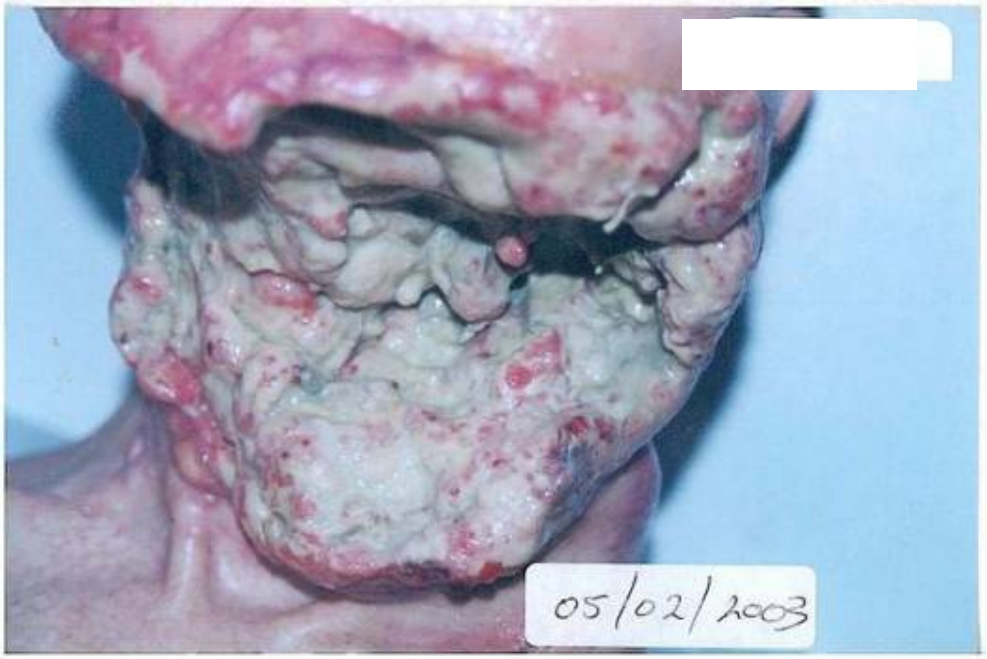
Geagte Dokter

Mev. is deur my versorg. Sy het gevorderde kanker tumor gehad wat deur kanker vernietig word.

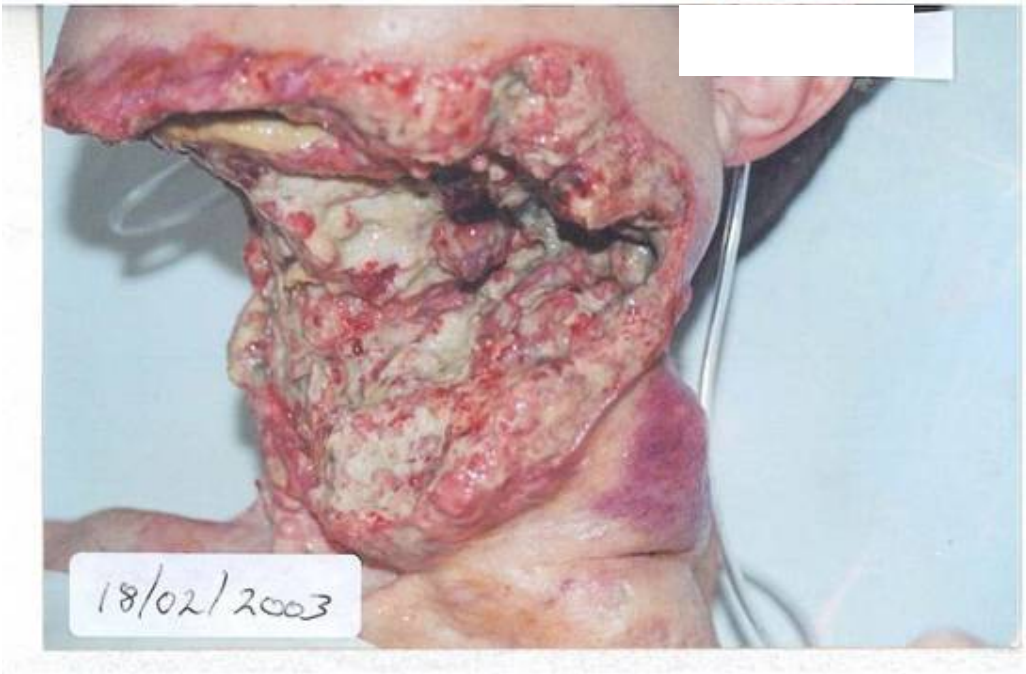
Ek het pasient op terapie geplaas en soos sigbaar het wond bale verbeter en kanker het nie verder versprei nie. Geen patologiese toetse was gedoen nie omrede dit kanker was.

Dankie
Sr R Lyons

BEFORE:



AFTER:



CASE STUDY NUMBER 9 : CANCER – FOOT

Sr. R . Lyons
PR. 8846626

Po Box 37713
Faerie Glen
0043

Telephone no. (012) 991 4473
Faks no. :0866890957
E-mail:rensia@mweb.co.za

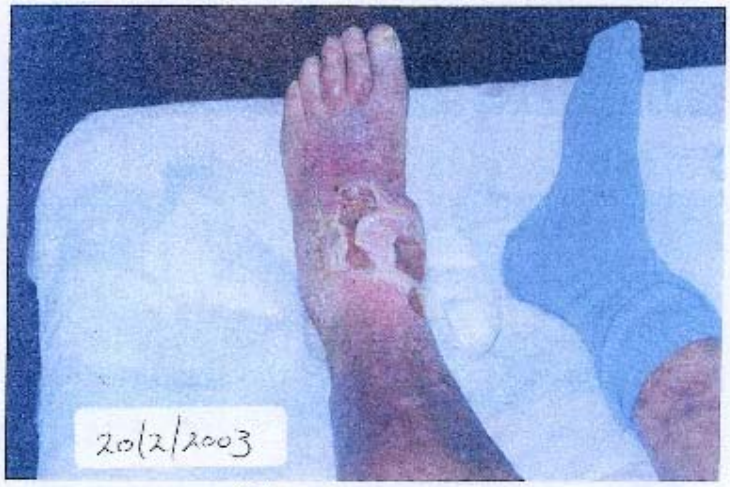
Geagte Dokter

Mr. Potgieter is het al vir 20 jaar die erge wonde op linker voet wat later as kanker gediagnoseer was.

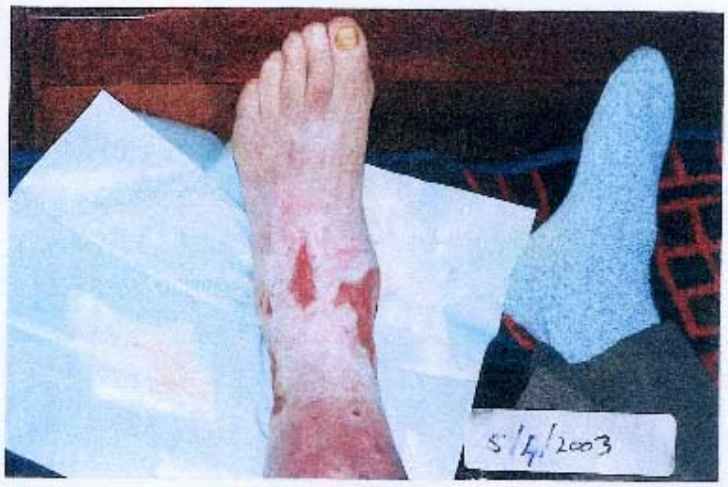
Pasient is deur my op teraple geplaas en die wond het merkbaar verbeter. Soos gewysig op foto

Dankie
Sr R Lyons

Mr. Potgieter



Before



After

LABORATORY REPORTS:

PATOLOË · PATHOLOGISTS
Drs Du Buisson, Bruinette, Kramer Inc./Ing.
AMPATH

24 Our contact number / Hour contact number 031 566 2694

PASIENT:	DOKTER:	VERWYSENDE DR:
Taylor,Graeme Vaughn P O Box 201315 Durban North 4016	Pta Oos Verpleegdiens Sr Rentia Lyons Petricklaan 844 Faerie Glen XXXX ROETE:03000:025	Pta Oos Verpleegdiens **AFSKRIF DR(s):**

Manlik/19520122/57
ID : 5201225069086
H:Not available C:0824542200
FOLIO:Not available

FINALE VERSLAG

VERW NR : 02082283

M/A :Cash Patients - Ampath R
LID :Taylor,Graeme Vaughn
NR :Rec: 17517

MONSTER :0330:AS02321R
PS LOK :58000
GROEP # :3370734

GEKOLLEKTEER:30/03/09 0930
ONTVANG :30/03/09 0930
GEDRUK :01/04/09 1150

AANGEVRA: VBT, UE, Lewerfunksie, C-reaktiewe proteien, CEA, CA 19-9

KOMMENTAAR: Fax - 012 9914473

Toets	ABN	Resultaat	Reikwydtes	Eenhede
VOLBLOEDTELLING				
=> Hemoglobien	L	11.6	13.0-17.0	g/dl
=> Rooiseltelling	L	3.92	4.50-5.50	10^12/l
=> Hematokrit	L	32.2	40.0-50.0	%
=> GKV	L	82.2	84.0-98.0	fl
=> GKH		29.6	28.0-32.5	pg
=> GKHK		36.0	31.0-37.0	g/dl
=> RDW	H	14.9	12.0-14.5	%
=> Witseltelling		9.71	4.60-11.50	10^9/l
=> Neutrofiele		76.0		%
=> Neutrofiele abs	H	7.38	2.00-6.50	10^9/l
=> Limfosiete		14.4		%
=> Limfosiete abs		1.40	1.30-3.70	10^9/l
=> Monosiete		5.9		%
=> Monosiete abs		0.58	0.25-0.80	10^9/l
=> Eosinofiele		1.8		%
=> Eosinofiele abs		0.18	0.00-0.40	10^9/l
=> Basofiele		0.4		%
=> Basofiele abs		0.04	0.00-0.07	10^9/l
=> GOS		1.4		%
=> GOS abs		0.13	0.00-0.30	10^9/l
=> Plaatjietelling	H	478	150-400	10^9/l
INFLAMMATORIESE MERKERS				
=> C-reaktiewe proteien	# H	35	< 5	mg/l
UREUM & ELEKTROLIETE				
=> Natrium	L	135	136-145	mmol/l

PATOLOË · PATHOLOGISTS
Drs Du Buisson, Bruinette, Kramer Inc./Ing.
AMPATH

24 Uur kontaknommer / Hour contact number 031 566 2694

PASIENT: Taylor,Graeme Vaughn
FOLIO:Not available
GROEP # : 3370734

DOKTER: Pta Oos Verpleegdiens
VERW NR: 02082283

VERVOLG BLADSY: 2

FINALE VERSLAG
GEKOLLEKTEER: 30/03/09 0930
GEDRUK : 01/04/09 1150

Toets	ABN	Resultaat	Reikwydtes	Eenhede
UREUM & ELEKTROLIETE				
=> Kalium	H	5.2	3.5-5.1	mmol/l
=> Chloried	L	96	98-107	mmol/l
=> CO2	# L	21	22-29	mmol/l
=> Ureum	#	4.9	1.7-8.3	mmol/l
=> Kreatinien		68	64-104	umol/l
LW: Die reikwydtes het verlaag agv herstandardisasie van die metode in ooreenstemming met internasionale riglyne.				
=> eGFS (MDRD)		> 90	62-106	ml/min
LEWERFUNKSIES				
=> Totale proteien		73	60-83	g/l
=> Albumien		46	35-52	g/l
=> Globulien		27	20-39	g/l
=> Bilirubien totaal	# H	41	5-21	umol/l
=> Bilirubien gekonjugeer	# H	8	0-5	umol/l
=> Bilirubien ongekonjugeer	H	33	0-18	umol/l
=> Alkaliese fosfatase		118	40-130	U/l
=> Gamma-GT		22	< 60	U/l
=> ALT		5	< 50	U/l
=> AST	H	39	< 38	U/l
=> Laktaatdehidrogenase	# H	833	100-250	U/l
TUMORMERKERS				
=> CA 19-9 (Roche)	#*H	1277	0-37	E/ml
=> CEA (Roche)	#	5	0-5	ng/ml

GENEESHEER NAVRAE:

Haem	Drs C Moore, T Ihlenfeldt, S Asmal	031 327 7500
Chem	Drs R Buck, J Knoblauch, C Smith	031 327 7500
Ser	Drs N Miller, S Khan	031 327 7500

Sr. R . Lyons

PR. 8846626

Po Box 37713
Faerie Glen
0043

Telephone no. (012) 991 4473
Faks no. :0866890957
E-mail:rensia@mweb.co.za

Geagte Dokter

Mev

Bg. pasient het n DVT aan linker kuit. Paient is op Wafferin geplaas. PI toets en weekliks gedoen, maar DVT was steeds teenwoordig.

Pasient is op Faith terapie geplaas vir 2 volle dag en na 2dae was DVT nie meer voelbaar nie.

Geneesheer het pasient weer vir opvolg toets gestuur wat geen DVT demonstreer.

Dankie
Sr. R Lyons

Dr Maritha Fourie

Dr M Fourie MB ChB (Pret)
PR No: 1565168
GENEESHEER / MEDICAL PRACTITIONER

Kamers • Rooms
Unitas Hospitaal • Hospital 302
☎ (012) 664-1148 • Fax: (012) 664-5091

Wilgers Hospitaal • Hospital
Laer Grondvlak • Lower Ground Level
☎ (012) 807-1780 • Fax: (012) 807-1780

2016116
Lyttelton 0140

Rekeninge • Accounts
Unitas Hospitaal • Hospital 302
☎ (012) 664-5344

Nood/Emergency: 333-6000

DUPLEKS DOPPLER – PERIFERE VENEUSE SISTEEM

DATUM	:	**20-03-2009**
PASIëNT	:	**MEV S NELL**
GEBOORTEDATUM	:	**14-06-1922**
HOOFLID	:	**MNR DH NELL**
VERWYS DEUR	:	**DR JC MALAN**

Beste dr Malan
Dankie vir die verwysing.

Been: Links

DOPPLER	Com. Fem	Sup. Fem	Pop.	Post. Tib	Peroneus
Patent	+	+	+	+	+
Spontane vloei	+	+	+	+	+
Fasisiteit	+				
Augmentasie	+	+	+	+	+
2D					
Trombus	-	-	-	-	-
Saamdrukbaarheid	+	+	+	+	+

Die linker been se diep veneuse sisteem is patent en saamdrukbaar met fasisiteit. Kan geen DVT demonstreer nie.

Geen trombose meer in die peroneale -of kuitvenas gedemonstreer nie.

Groete
Martha

DR MARITHA FOURIE

Sr. R . Lyons
PR. 8846626

Po Box 37713
Faerie Glen
0043

Telephone no. (012) 991 4473
Faks no. :0866890957
E-mail:rensia@mweb.co.za

Geagte Dokter

24/02/009

Bg. pasient was 2 jaar gelede vir n heupvervanging en het Escherichia Coli in haar blaas opgetel. Geneesheer het haar die 11/02/2009 weer vir n toets gestuur - soos wysig op verslag wat n hoe telling toon van tussen 10 000 - 100 000 org/ml

Pasient is op Faith terapie mondelings geplaas vanaf 20/02/2009 tot 22/02/2009 waarna daar weer deur Geneesheer toetse gedoen is wat toon dat daar geen groei was nie.

Pasient was dus vir 2 jaar op verskeie medikasie maar niks kon die Escherichia Coli dood nie. Haar weerstand het in die 2 jaar so afgeneem , dat sy kronies siek was met geen energie.

Bewyse op verslae is sigbaar.

Dankie
Sr. R Lyons

PR. 8846626

B

012 367 4270

PASIENT:

van Niekerk, Johanna J
Veresterstraat 646
Elarduspark
0181

Vroulik/19290120/80
ID : 2901200014089
H:0123451256 C:0820166113
FOLIO:

DOKTER:

D Kirstein
Urologie Hospitaal Kamer 4
H/V Pretorius & Grosvenor
Arcadia, PTA
D093 KORTE:01560:010

VERWYSENDE DR:

D Kirstein
AFSKRIF DR(e):

KOPIE VERSLAG

VERW NR : 50502489

M/A :Medihelp
LID :van Niekerk, Michael
NR :C103942

MONSTER :09:UR0027132R
PG LOK :03110
GROEP # :3017728

GEKOLLEKTEER:11/02/09 1355
ONTVANG :11/02/09 1522
GEDRUK :02/03/09 1048

AANVRAAG: Uriene: Uriene MKS

MONSTER : Uriene **BESKRYWING : Nie gespesifiseer**

PROSEDURE	RESULTAAT
> MAKROSKOPIE	
Voorkoms	Troebel
> MIKROSKOPIE	
Etterselle (<5/uL)	>100
Rooibloedselle (<5/uL)	6 - 10
Epiteelselle	Enkele plaveiselepiteelselle
Silinders	Afwesig
Parasiete	Afwesig
Gisselle	Afwesig
> CHEMIE (DOOPSTROKIE)	
Glukose	Afwesig
Bilirubien	Afwesig
Ketone	Afwesig
S.G. (Normaal 1.003-1.030)	1.025
Bloed	Spoor
pH (Normaal 5.0 - 8.0)	6.0
Proteïene	+ (0.3 - 0.9 g/l)
Urobilinogeen	Nie verhoog
Nitriet	Positief
Leukosiet esterase	++

Die leukosietesterase resultaat (spesifiek vir neutrofiele) is nagegaan.

> AEROBE KWEKING

Escherichia coli	
Kolonie telling	10 000 - 100 000 org/ml

012 367 4270

PASIENT:	DOKTER:	VERWYSENDE DR:
van Niekerk, Johanna J Versterstraat 646 Elardus park 0181	EP Erasmus Kloof Hospital, Suite 206 Jochemus Street Erasmuskloof 0181 POSTE:03110;010	EP Erasmus AFSKRIF DR(s): Kloof Hospitaal Medies Kloof Hospitaal Infeksiebeheer

Vroulik/18290120/80
ID : 2901200014085
H:0123451256 C:0828166113
FOLIO:51995

KOPIE VERSLAG

VERW NR : 50501628

M/A :Medihelp	MONSTER :09:UR00359669	GEKOLLEKTEER:24/01/09 1150
LID :van Niekerk, Michael	PS LOK :03110	ONTVANG :24/01/09 1214
NR :0103942	GROEP # :3017722	GEDRUK :02/03/09 1048

AANGEVRA: Uriene: Uriene MKS

KOMMENTAAR:

MONSTER : Uriene **BESKRYWING :** Nie gespesifiseer

PROSEDURE	RESULTAAT
> MAKROSKOPIE	
Voorkoms	Helder
> MIKROSKOPIE	
Witselle (<5/uL)	6 - 10
Rooibloedselle (<5/uL)	6 - 10
Epiteelselle	Afwesig
Silinders	Afwesig
Parasiete	Afwesig
Gisselle	Teenwoordig
> CHEMIE (DOOPSTROKIE)	
Glukose	Afwesig
Bilirubien	Afwesig
Ketone	Afwesig
S.G. (Normaal 1.003-1.035)	1.010
Bloed	Spoor
pH (Normaal 5.0 - 8.0)	7.0
Proteiene	Afwesig
Urobilinogeen	Nie verhoog
Nitriet	Afwesig
Leukosiet esterase	Spoor
> AEROBE KWEKING	
Geen groei.	
> ANTIMIKROBIESE AKTIWITEIT	
Antimikrobiese aktiwiteit	Teenwoordig

GENEESHEER NAVRAE:

Drs M van Rensburg, P Botha, G Weldhagen

Sr. R . Lyons
PR. 8840026

Po Box 37713
Faerie Glen
0043

Telephone no. (012) 991 4473
Faks no. :0866800957
E-mail:ronsia@mweb.co.za

Geagte dokter

Mr. Roy Williams

Bg. pasient het vroeg in Januarie n amputasie van sy regter onderbeen gehad a.g.v. sepsis. Daar is deur toetse bewys dat pasient in linker kniee n Methicillin Resistant Staphylococcus aureus gekweek is op 30/01/2009. Geneesheer het oorweeg om amputasie te doen. Pasient is op Faith terapie geplaas en verslae toon geen Methecillin Resistant Staphylococcus nie. Soos wysig op verslae van 02/03/2009

Pasient is ontslaan uit hospitaal vir verdere opvolg verslae.

Dankie
Sr. R Lyons

5

National Health
Laboratory Service

(Pr 5200296)
Pretoria Campus / Pretoriakampus
Dr. Savage Road / Dr. Savagesweg
Pretoria

Call Centre 24 hours
Tel: (012) 354 1578 or 354 1132
Fax: (012) 354 1691 or 328 0224

Tshwane Academic Division

Labno GTS1819053

Patient WILLIAMS,R,ROY

Age|Sex|DoB 21y (M) 05/03/1987

DR VISSER #61343
W44A Orthopaedic Ward
PRETORIA ACADEMIC HOSPITAL
PRIVATE BAG X169
PRETORIA
0001

Ref Dr DR VISSER #61343
Ward-Hosp **W44a Orthopaedic Ward**
PRETORIA ACADEMIC HOSPITAL
Hosp NO **GT42507551**
Taken 30/01/09 12:00 Regd 30/01/09 19:10
Report 09/02/09 10:36

SCAT

LABORATORY REPORT

Clinical data Sepsis
Specimen Pus Swab
Tests ordered Pus,Staphs

MICROBIOLOGY : PUS

GRAM STAIN
Neutrophils ..... **NOT observed**
No bacteria observed

CULTURE RESULT
Aerobic organisms ..... **Methicillin Resistant Staphylococcus aureus**

ANTIBIOTIC SUSCEPTIBILITY	**MRSA**
Vancomycin	S

MRSA - *Methicillin Resistant Staphylococcus aureus*

S-Susceptible R=Resistant I-Intermediate

Authorised by : AMD Test(s): Pus, Staphs

-- End of Laboratory Report -

After.

PATOLOË · PATHOLOGISTS
Drs Du Buisson, Bruinette, Kramer Inc./Ing.
AMPATH

24 Uur kontaknommer / Hour contact number 012 998 8665

PASIENT:	DOKTER:	VERWYSENDE DR:
Williams,Roy PO Box 37713 Faerie Glen 0043	JA Venter Pta-Oos Hospitaal Suite M22 Garsfonteinweg Moreletapark 0181 ROKTB:01002:005	JA Venter **AFSKRIF DR(s):** Pta Oos Verpleegdiens
Manlik/19870305/21 ID : 8703055142088 H:Not available C:Not available **FOLIO:**	**FINALE VERSLAG** **VERW NR : 50499134**	
M/A :Private Patient LID :Williams,Roy NR :	MONSTER :09:BL00116553 PS LOK :03300 GROEP # :3057156	**GEKOLLEKTEER**:02/03/09 1400 ONTVANG :02/03/09 1845 GEDRUK :05/03/09 0947

AANGEVRA: Bloed: Bloedkultuur, BL mikroskopie, Blood kwek

KOMMENTAAR: C/:DIAGNOSIS sTAPHYLOCOCY L BEEN,T:36

MONSTER : Blood **BESKRYWING :**

PROSEDURE	**RESULTAAT**
BOTTELS ONTVANG	
Bloedkultuur bottels	1X Aerobic/F* Plus 1X Anaerobic/F* Plus
GROEI INDEKS	
Positiewe bottel(s)	1X Anaerobic/F* Plus binne 2 dae
MIKROSKOPIE	
Anaerobic/F* Plus	Gram positiewe kokke teenwoordig
KWEKING	
Koagulase negatiewe stafilokok	
	COAGNEG
BETA-LAKTAME	
PENISILLIENE	
Penisillien	R
Ampisillien / Amoksisillien	R
Kloksasillien / Metisillien	R
KEFALOSPORIENE	
Kefuroksiem / Kefprosil	R
MLS GROEP	
Klindamisien	R
ANDER	
Kotrimoksasool	R
Rifampisien	S
Linesolied	S

Koagulase neg. stafilokok: Antibiogram
STAFILOKOKKE EN BETA-LAKTAM ANTIBIOTIKA
Metisillien-/oksasillien-/kloksasillienweerstandige stafilokokke is ook weerstandig teen alle ander beta-laktam antibiotika. Hulle is dikwels ook

PATOLOË · PATHOLOGISTS

Drs Du Buisson, Brulnette, Kramer Inc./Ing.

AMPATH

24 Uur kontaknommer
Hour contact number 012 427 1800

PASIENT:	DOKTER:	VERWYSENDE DR:
Williams,Roy PO Box 37713 Faerie Glen 0043	Pta Oos Verpleegdiens Sr Rentia Lyons Petricklaan 844 Faerie Glen XXXX ROUTE:03000:025	A Venter **AFSKRIF DR(s):** Pta Oos Verpleegdiens
Manlik/19870305/22 ID : 8703055142088 H:Not available C:Not available **FOLIO:Not available**	**FINALE VERSLAG** **VERW NR : 50742630**	
M/A :Private Patient LID :Williams,Roy NR :	MONSTER :0308:AS02C51R PS LOK :01000 GROEP # :3094020	**GEKOLLEKTEER:08/03/09 1500** ONTVANG :08/03/09 1722 GEDRUK :09/03/09 0710

AANGEVRA: VBT, C-reaktiewe proteien

Toets	ABN	Resultaat	Reikwydtes	Eenhede
VOLBLOEDTELLING				
=> Hemoglobien	L	9.7	14.0-17.5	g/dl
=> Rooiseltelling	L	4.69	4.90-5.80	10^12/l
=> Hematokrit	L	36.6	41.5-53.5	%
=> GKV	L	78.0	84.0-98.0	fl
=> GKH	*L	20.7	28.0-32.5	pg
=> GKHK	L	26.5	31.0-37.0	g/dl
=> RDW	H	17.7	12.0-14.5	%
=> Witseltelling	H	11.78	4.60-11.50	10^9/l
=> Neutrofiele		64.0		%
=> Neutrofiele abs	H	7.54	2.00-6.50	10^9/l
=> Limfosiete		21.0		%
=> Limfosiete abs		2.47	1.30-3.70	10^9/l
=> Monosiete		3.0		%
=> Monosiete abs		0.35	0.25-0.80	10^9/l
=> Eosinofiele		6.0		%
=> Eosinofiele abs	H	0.71	0.00-0.40	10^9/l
=> Basofiele		0.0		%
=> Basofiele abs		0.00	0.00-0.07	10^9/l
=> GOS		0.0		%
=> GOS abs		0.00	0.00-0.30	10^9/l
GOS (groot ongekleurde selle) - gewoonlik reaktiewe limfosiete.				
=> Stafselle		5.0		%
=> Stafselle abs	H	0.59	0.00-0.30	10^9/l
=> Mielosiete		1.0		%
=> Mielosiete abs	*H	0.12		10^9/l
=> Plaatjietelling	H	444	150-400	10^9/l

=> Kommentaar

Die rooiselle vertoon hipochroom mikrosities met elliptositose en teikenselle.
Stel voor ysterstudies indien kliniek aangedui.

PATOLOË · PATHOLOGISTS
Drs Du Buisson, Bruinette, Kramer Inc./Ing.
AMPATH

24 Uur kontaknommer / Hour contact number 012 427 1800

PASIENT:	DOKTER:	VERVOLG BLADSY: 2
Williams,Roy	Pta Oos Verpleegdiens	**FINALE VERSLAG**
FOLIO:Not available		GEKOLLEKTEER: 08/03/09 1500
GROEP # : 3094020	VERW NR: 50742630	GEDRUK : 09/03/09 0710

Toets	ABN	Resultaat	Reikwydtes	Eenhede
Neutrofiel leukositose aanwesig met 'n verskuiwing na links en toksiese granulasie waargeneem. Die bevindings dui op 'n akute bakteriele infeksie. Geringe eosinofilie is aanwesig.				
INFLAMMATORIESE MERKERS				
=> C-reaktiewe proteien	H	23	< 5	mg/l

GENEESHEER NAVRAE:
Haem : Drs N Lategan, B Oberholster, M Ferreira, P Wessels, E van Vuuren
Chem : Drs MM van Niekerk, H Rossouw, M du Plessis, C Vorster,
R de Villiers
Ser : Drs LH van Rooyen, C van Rooyen

PATOLOE · PATHOLOGISTS
Drs Du Buisson, Bruinette, Kramer Inc./Ing.
AMPATH

24 Uur kontaknommer / Hour contact number 012 427 1800

PASIENT:

Williams,Roy
PO Box 37713
Faerie Glen
0043

Manlik/19670305/22
ID : 8703055142088
H:Not available C:Not available
FOLIO:Not available

DOKTER:

Pta Oos Verpleegdiens
Sr Rentia Lyons
Petricklaan 844
Faerie Glen
XXXX ROETE:03000:025

VERWYSENDE DR:

A Venter
AFSKRIF DR(s):
Pta Oos Verpleegdiens

FINALE VERSLAG

VERW NR : 50741765

M/A :Private Patient
LID :Williams,Roy
NR :

MONSTER :0314:AS04728R
PS LOK :01000
GROEP # :3176263

GEKOLLEKTEER:14/03/09 1330
ONTVANG :14/03/09 1728
GEDRUK :16/03/09 0715

AANGEVRA: VBT, C-reaktiewe proteien

Toets	ABN	Resultaat	Reikwydtes	Eenhede
VOLBLOEDTELLING				
=> Hemoglobien	L	10.2	14.0-17.5	g/dl
=> Rooiseltelling	L	4.69	4.90-5.80	10^12/l
=> Hematokrit	L	35.2	41.5-53.5	%
=> GKV	L	75.0	84.0-98.0	fl
=> GKH	*L	21.7	28.0-32.5	pg
=> GKHK	L	28.9	31.0-37.0	g/dl
=> RDW	H	21.5	12.0-14.5	%
=> Witseltelling		7.88	4.60-11.50	10^9/l
=> Neutrofiele		57.8		%
=> Neutrofiele abs		4.55	2.00-6.50	10^9/l
=> Limfosiete		30.9		%
=> Limfosiete abs		2.44	1.30-3.70	10^9/l
=> Monosiete		5.3		%
=> Monosiete abs		0.41	0.25-0.80	10^9/l
=> Eosinofiele		3.5		%
=> Eosinofiele abs		0.28	0.00-0.40	10^9/l
=> Basofiele		1.3		%
=> Basofiele abs	H	0.10	0.00-0.07	10^9/l
=> GOS		1.2		%
=> GOS abs		0.09	0.00-0.30	10^9/l
GOS (groot ongekleurde selle) - gewoonlik reaktiewe limfosiete.				
=> Plaatjietelling	H	454	150-400	10^9/l

=> Kommentaar
Microcytic, hypochromic anemia.
Dit is belangrik om ystergebrek by mans uit te skakel aangesien dit sterk dui op bloedverlies vanaf ander onderliggende patologie.

F.A.Q.

FREQUENTLY ASKED QUESTIONS

What is FAITH™ and how does it work?

FAITH™ works on the immune system, providing it with Chlorine Dioxide, a vital supplement necessary for a healthy body. The Chlorine Dioxide ensures that the immune system works at optimum levels, destroying pathogens, bacteria or viruses which are causing imbalance or illness.

FAITH™ is a blend of Chlorine Dioxide and twelve (12) assorted extracts from herbs and plants indigenous to South Africa.

In the event of an overdose of the already activated mixture - take 1000mg of Vitamin C orally to counteract the ill effects.

In the even of one digesting undiluted FAITH™ directly from the bottle – neutralize this IMMEDIATELY by drinking a solution of 2 tablespoons of Bicarbonate of Soda mixed into a glass of water.

How do I mix FAITH™ ?

General Use:

Add one (1) drop of ACTIVATOR to every one (1) drop of FAITH™. This solution must be mixed in a glass. NOT in a metal container. Allow the solution to stand for three (3) minutes. Set a timer as the "standing" period is vital. When the timer goes off, smell the glass to check that there is a chlorine smell present. If the smell of chlorine is present, add about 100 to 150ml of any acceptable MIXER such as pure apple juice or fruit juice. Make sure that you choose a brand that does NOT have Vitamin C added to it. This Is Very Important!!

If no fruit juice is available, water will suffice. (See suggested MIXERS at start of Chapter 7).

What do I do next?

Once the fruit juice has been added, the solution is now ready to drink. Gently blow the surface of the juice to remove excess gas and then drink. You may follow this mouthful of solution with an additional mouthful of plain fruit juice to help remove any residue of taste from the mouth.

How often do I take FAITH™

Drink the suggested solution every hour during the day between the hours of 07h00 and 19h00 increasing the dose to just below the nausea level. The level of nausea differs from person to person but is a good sign that the supplement is working!

For those unable to take the solution during these hours, the same suggested solution must be drunk three (3) times a day (every 5-6 hours).

All illness or imbalances presents differently in everyone, so it is imperative that you follow the directions of your health care practitioner or consult the Help Line or Email us at the address shown overleaf.

Note that the general use solution will assist your body in recovering its balance and health. It is advised that you take a maintenance dose of six (6) drops two to three times a day to ensure your continued health.

What must I avoid when taking FAITH ™

Do not take any additional vitamin supplements or anti-oxidants in conjunction with your FAITH dose, as Vitamin C neutralizes the balancing action of our supplement.

Do not drink excessive amounts of milk and other dairy products. Restrict yourself to two cups of tea or coffee WITH milk per day. This must be drunk at least 15 to 20 minutes before or after you have taken FAITH.™. alternatively, if you are using your morning tea or coffee as a MIXER for FAITH, make sure it is BLACK tea or BLACK coffee.

Remember, FAITH is a supplement and is totally natural so you are able to continue to use prescription medication in conjunction with your FAITH™. Always consult your health care practitioner before adjusting or adding to your prescription medication.

What must I never do?

- Never drink the FAITH™ directly from the bottle.
- Never drink FAITH™ neat (undiluted)
- Never drink FAITH™ before the three (3) minute "standing" period is over.
- Never mix the solution and wait longer than five (5) minutes before drinking it.
- Never mix a full day's dose and carry it with you pre-mixed.

If you spill any of the FAITH™ onto your skin or splash it accidentally into your eyes, rinse extremely well with water.

Where do I store FAITH™

Store your FAITH™ drops in a cool dark place. Never store it in direct sunlight or near any U.V. lamps – this will neutralize the product and render it ineffective.

We recommend storing your drops in the 'fridge.

Other suggested 'mixers' for FAITH™

FAITH™ drops can be successfully mixed with the following:

Mix the FAITH™ drop with the ACTIVATOR (allow standing for the recommended activation period of three minutes), then any one of the following **MIXERS** can be used –

Apple Juice

Cranberry Juice

Pineapple Juice

Grape Juice (white and red)

½ glass pre-mixed Roses Lime juice

Black tea or coffee

Black Herbal tea

Plain tap water

KINDLY TAKE NOTE:

If your decision is to mix the activator and the FAITH™ drops with a fruit juice carrier – ENSURE that you read the ingredients before you purchase the juice. The juice should for obvious reasons NOT be a citrus fruit juice and should NOT have Vitamin C added to the juice in ANY DOSAGE.

In the event of an overdose of the already activated mixture - take 1000mg of Vitamin C orally to counteract the ill effects.

In the even of one digesting undiluted FAITH™ directly from the bottle – neutralize this IMMEDIATELY by drinking a solution of 2 tablespoons of Bicarbonate of Soda mixed into a glass of water.

WHAT CAN WE EAT?

We are not registered dieticians, HOWEVER, the positive effects of a balanced, healthy diet is recorded and available widely on the internet or from your health care practitioner. Nevertheless, from the various patients that have made use of FAITH™, the feedback we have received is that one can basically eat anything that is recommended by a dietician or a health care practitioner.

We do stress once again that all fruit, vegetables (carbohydrates) and protein are acceptable whilst undergoing this treatment – ***EXCEPT FOR ANY CITRUS FRUIT such as MANDARINS, ORANGES, MINEOLAS, NAARTJIES, GRAPEFRUIT ETC***

Things such as alcohol, cigarettes and 'recreational – non-prescription drugs' ***ARE NOT RECOMMENDED AT ALL.***

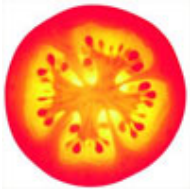
'Off the shelf' medication from the pharmacy for the relief of various ailments such as pain and diarrhoea is not recommended during the treatment. Our suggestion for an upset stomach is the old traditional cure of a grated apple left to stand and turn brown – then it is eaten. The pectin is ideal for upset stomachs.

For the duration of the treatment – reduce your dairy product intake to a bare minimum. Only make use of yoghurt during your 'off times' i.e. when you are resting between treatments. Yoghurt is used to replenish the 'good bacteria' in the colon.

Dietary suggestions

These fruit and vegetables should be incorporated into ones daily diet in quantities recommended by your health care practitioner:

A sliced Carrot looks like the human eye. The pupil, iris and radiating lines look just like the human eye... and YES, science now shows carrots greatly enhance blood flow to and function of the eyes.



A Tomato has four chambers and is red. The heart has four chambers and is red. All of the research shows tomatoes are loaded with lycopine and are indeed pure heart and blood food

Grapes hang in a cluster that has the shape of the heart. Each grape looks like a blood cell and all of the research today shows grapes are also profound heart and blood vitalizing food

A Walnut looks like a little brain, a left and right hemisphere, upper cerebrums and lower cerebellums. Even the wrinkles or folds on the nut are just like the neo-cortex. We now know walnuts help develop more than three (3) dozen neuron-transmitters for brain function.

Kidney Beans actually heal and help maintain kidney function and yes, they look exactly like the human kidneys.

Celery, Bok Choy, Rhubarb and many more look just like bones. These foods specifically target bone strength. Bones are 23% sodium and these foods are 23% sodium. If you don't have enough sodium in your diet, the body pulls it from the bones, thus making them weak. These foods replenish the skeletal needs of the body.

Avocadoes, Eggplant and Pears target the health and function of the womb and cervix of the female - they look just like these organs. Today's research shows that when a woman eats one avocado a week, it balances hormones, sheds unwanted birth weight, and prevents cervical cancers. And how profound is this? It takes exactly nine (9) months to grow an avocado from blossom to ripened fruit. There are over 14,000 photolytic chemical constituents of nutrition in each one of these foods (modern science has only studied and named about 141 of them).

Figs are full of seeds and hang in twos when they grow. Figs increase the mobility of male sperm and increase the numbers of Sperm as well to overcome male sterility.

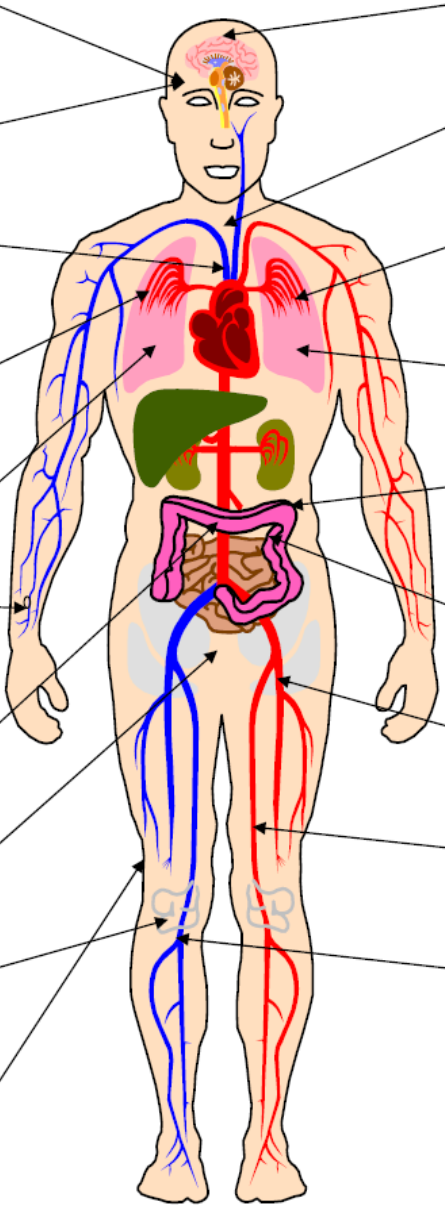
Sweet Potatoes look like the pancreas and actually balance the glycemic index of diabetics.

Olives assist the health and function of the ovaries

Onions look like the body's cells. Today's research shows onions help clear waste materials from all of the body cells. They even produce tears which wash the epithelial layers of the eyes. A working companion, Garlic, also helps eliminate waste materials and dangerous free radicals from the body.

During our research we came across the following chart which we found extremely interesting. Try incorporating some of the foodstuff mentioned on the chart.

NEVER SICK AGAIN



HEADACHES : FISH (PROTEIN)
Eat lots of fish as fish oil helps to prevent headaches. So does ginger which reduces inflammation and pain.

HAYFEVER : YOGHURT
Eat lots of yoghurt before pollen season.

STROKES : TEA
Prevents buildup of fatty deposit on artery walls with regular doses of tea.

INSOMNIA : HONEY
Use Honey as a tranquilizer and as a sedative.

ASTHMA : ONIONS (RED)
Eating onions helps ease constriction of bronchial tubes.

ARTHRITIS : FISH
Salmon, tuna, mackerel and sardines actually prevent arthritis.

UPSET STOMACH : BANANAS, GINGER : Bananas will settle an upset stomach. Ginger cures morning sickness and nausea.

BLADDER INFECTIONS : CRANBERRY JUICE : High-acid cranberry juice controls harmful bacteria.

BONES PROBLEMS : PINEAPPLE Bones fractures and osteoporosis can be prevented by the manganese in pineapple.

PMS : CORNFLAKES
Women can ward off the effects of PMS with cornflakes, which help reduce depression, anxiety & fatigue.

MEMORY PROBLEMS : OYSTERS
Oysters help increase your mental functioning by supplying much needed zinc.

COUGH : RED PEPPER
A substance similar to that found in cough syrup is found in hot red pepper.

BREAST CANCER : WHEAT BRAN, CABBAGE : Wheat bran and cabbage help maintain estrogen at healthy levels.

LUNG CANCER : ORANGE, GREEN VEGETABLES : A good antidote is beta-carotene, a form of Vitamin A found in orange & green vegetables.

ULCERS : CABBAGE
Cabbage contains chemical that help heal both type of ulcers.

DIARREA : APPLES
Crate an apple with its skin. Let it turn brown and eat it to this condition.

CLOGGED ARTERIES : AVOCADOS
Mono-unsaturated fat in avocados lower cholesterol.

HIGH BLOOD PRESSURE : OLIVE OIL, CELERY : Olive oil has been shown to lower blood pressure. Celery contains a chemical that lowers blood pressure too.

BLOOD SUGAR IMBALANCE : BROCOLLI, PEANUTS : The chromium in broccoli and peanuts helps regulate insulin and blood sugar.

ATTACH TO REFRIGERATOR DOOR, WALL OR THE BULLETIN BOARD FOR HANDY REFERENCE.

Diet Protocol

The cancer countdown

1. Stop the cancer
2. Protect the healthy cells.
3. Stop the spreading of cancer
4. Remission treatments

a. Kill remaining cells
b. Build the immune system
c. Repair the electrical balance of the cells.
d. Flood body with ionic materials.

General

- When a person has cancer it indicates multiple nutritional deficiencies in the body.
- To strengthen the immune system the person, the person will overcome the deficiencies.
- That can be done by good healthy diet, which will also detoxify the body.
- Change life perception and outlook to become a cancer-warrior by having a loving and forgiving spirit.
- Learn to relax and enjoy life. Exercise daily so the cells have a better oxygen flow and help to destroy the cancer cells.
- Do not use plastic for water or food, as it cause cancer especially plactic+food+heat, as it releases dioxin which causes cancer. Use glass or ceramic, especially not plastic food wrap.

Recommended Foods:

Dark fish
Chicken

Beans and legumes and peas
Barley and whole grains
Wheat
Brown rice
All kinds of nuts

Green vegetables-not too much at one time
Yellow and red vegetables
Celery
Spinach

Fruits
Whole of dark and red grapes-skins and pips
Bananas
Paw-paw-and unripe paw paws
Whole of the pineapple-include the stem
Pomegranate
Berries

Drink
Black rooibos tea-the carrier for the drops
Green tea
Purified or filtered water
Fruit and vegetable juices

Foods to Avoid:

Meat
Sugar and its substitutes
Milk
Coffee
Tea
Chocolate
Grapefruit seed extract-too much vitamin C
Very sweet fruits
Distilled water-its too acidic

Foods to Add:

Fish oil capsules
Wheatgrass juice
Fenugreek
Iodized salt
Fresh Lemon juice
Spirulina and chlorella
Vit C-large doses between treatment with drops-repairs blood vessels, etc. and ‘buys time’
Sutherlandia Fruticas
Vitalzym-not to take on days with barley
Black Rooibos tea- also the carrier
Green tea
Spirulina, chlorella
Grape juice with added: barley-powder, wheatgrass, and spirulina

To Do:

If root-canal treatment- have it removed by Biological Dentist or Holistic Dentist
Relax Plenty
Exercise moderate
Enough purified or filtered water

Acknowledgement is given to Jim Humble of: 'MMS - Miracle Mineral Supplement'

Selected extracts from various research points have been utilized in this document to assist in clarifying the difference between Sodium Chlorite, Chlorine Dioxide and SCD (Stabilised Chlorine Dioxide) (this process is used worldwide and is a patented process).
However, it must be noted that is where the similarity ends. FAITH™ Drops makes use of Sodium Chlorite as a preservative and a means of transporting additional ions only. It is the addition of the 12 herbal extracts (and in turn 18 various compounds) that play the most important role and is the secret to the success of our formulation.

We further acknowledge various Doctors and Research Institutes that have conducted tests over the years (for more information contact Dr. McDonald).

Dr. Michael McDonald
Email: damaansax@vodamail.co.za
Cell: +27823399799

Research into Sodium Chlorite, Chlorine Dioxide and Citric Acid has been extracted with thanks from Wikipedia.

http://en.wikipedia.org/wiki/Chlorine_dioxide - Wikipedia, see "Uses"
http://en.wikipedia.org/wiki/Sodium_chloride - Wikipedia
http://en.wikipedia.org/wiki/Citric_acid - Wikipedia

For information regarding the distribution of FAITH™ DROPS contact:

Colleen O'Carroll
Damaansa Holdings (Pty) Ltd
P.O.Box 46816
Glosderry
7702
Cape Town
South Africa

Fax: - +27 (0)86 547 1910
Email: colleeno@masterparts.com

Faith

MEDICAL QUESTIONNAIRE

Doctor:	
Pathologist (LAB)	
Previous Operation/s	
Current State of Health	
Current Medication	

Comments:			
Weight Loss	Yes	No	
Do You Smoke	Yes	No	
Do You Drink	Yes	No	
Allergies	Yes	No	

Are you experiencing any problems		Comments:	
Heart	Yes	No	
Lungs	Yes	No	
Kidneys	Yes	No	
Liver	Yes	No	
Heartburn	Yes	No	
Diabetes	Yes	No	
Blood Pressure	Yes	No	

Any other problems that are not listed above:		
Have you received treatment for your condition before:	Yes	No
If so, State what type of treatment:		

Signed: _____

Date: _____

DAMAANSA HOLDINGS (PTY) LTD

Faith

PRESCRIPTION & PROTOCOL FORM

Doctor:		Contact Number:	
Doctor:		Contact Number:	

Patient Name:					
ID Number		Age:		Weight:	

Fingerprint:	Left Thumb	Right Thumb

ORAL PROTOCOL			
Drops	Activator	Frequency	Comments

INTRAVENOUS PROTOCOL			
Drops	Drip	Frequency	Comments

ANAL PROTOCOL				
Drops	Activator	Sterile Water	Frequency	Comments

TRANSDERMAL PROTOCOL					
Drops	Activator	DMSO	Sterile Water	Frequency	Comments

Signed: _____

Date: _____

DAMAANSA HOLDINGS (PTY) LTD

MEDICAL
WAIVER & CONTRACT

General Details:			
Referring Doctor:			
Start Date of Faith Drops Therapy:			
Personal Details:			
Surname:			
First Name:			
ID Number:			
Home Address:			
Postal Address:			
Telephone Number:		Cell Number:	
Medical Aid Details:			
Medical Fund:			
Number:			
Main Member:			
Main Member ID Number:			
Other Contact Details:			
Name:			
Telephone Number:			
Relationship:			

I hereby confirm the information above is true and accurate.

Signed: _____ Date: _____

Waiver of Liability and Hold Harmless Agreement

I hereby release, waive, discharge and covenant not to sue Damaansa Holdings and/or Faith™ Drops, their officers, agents, servants, or employees (hereinafter referred to as releasees) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, as a result of my undertaking to undergo Faith™ Drops therapy.

I am fully aware of the risks involved and hazards connected with Faith™ Therapy including but not limited to the OCC, DMSO, Intravenous, and Anal Protocols and I hereby elect to voluntarily participate in said Therapy with full knowledge that said activity may be hazardous to me. I voluntarily assume full responsibility for any risks of loss, damage or personal injury, including death, that may be sustained by me, as a result of being engaged in such an activity, whether caused by the negligence of releasees or otherwise.

I further hereby agree to indemnify and hold harmless the releasees from any loss, liability, damage or costs, including court costs and attorney fees, that they may incur due to my participation in said activity, whether caused by negligence of releasees or otherwise.

I understand that the releasees and Damaansa Holdings Pty Ltd do not maintain any insurance policy covering any circumstance arising from my participation in this event or any activity associated with or facilitating that participation. As such, I am aware that I should review my personal insurance portfolio.

It is my express intent that this Waiver of Liability and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a release, waiver, discharge and covenant not to sue the above-named releasees. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the law of South Africa.

In signing this release, I acknowledge and represent that I have read the foregoing Waiver of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this release for full,
adequate and complete consideration fully intending to be bound by same.

In witness whereof, I have hereunto set my hand and sign on this_____

day of _____ at _____

Witnesses:_____ Signature:_____

Date:_____

Participant:_____ Signature:_____

Date:_____