We do not catch diseases. We build them.
Antoine Béchamp

We do not catch diseases. We build them. We have to eat, drink, think, and feel them into existence. We work hard at developing our diseases. We must work just as hard at restoring health. The presence of germs does not constitute the presence of a disease. Bacteria are scavengers of nature...they reduce dead tissue to its smallest element. Germs or bacteria have no influence, whatsoever, on live cells. Germs or microbes flourish as scavengers at the site of disease. They are just living on the unprocessed metabolic waste and diseased, malnourished, nonresistant tissue in the first place. They are not the cause of the disease, any more than flies and maggots cause garbage. Flies, maggots, and rats do not cause garbage but rather feed on it. Mosquitoes do not cause a pond to become stagnant! You always see firemen at burning buildings, but that doesn't mean they caused the fire...
Traditional Western medicine teaches and practices the doctrines of French chemist Louis Pasteur (1822-1895). Pasteur's main theory is known as the Germ Theory Of Disease. It claims that fixed species of microbes from an external source invade the body and are the first cause of infectious disease. The concept of specific, unchanging types of bacteria causing specific diseases became officially accepted as the foundation of allopathic Western medicine and microbiology in late 19th century Europe. Also called monomorphism, (one-form), it was adopted by America's medical/industrial complex, which began to take shape near the turn of the century. This cartel became organized around the American Medical Association, formed by drug interests for the purpose of manipulating the legal system to destroy the homeopathic medical profession.

Controlled by pharmaceutical companies, the complex has become a trillion-dollar-a-year business. It also includes many insurance companies, the Food and Drug Administration (FDA), the National Institutes of Health (NIH), the Centers for Disease Control (CDC), hospitals, and university research facilities. The microbian doctrine gave birth to the technique of vaccination that was blindly begun in 1796 by Edward Jenner. Jenner took pus from the running sores of sick cows and injected it into the blood of his 'patients.' Thus was born a vile practice (immunization/vaccination) whose nature has changed little to this day, and whose understanding is still clouded by Pasteur's theory. This also gave birth to the development of antibiotics, the first being penicillin in 1940. An antibiotic is the poisonous waste from one germ used in the attempt to kill another. Penicillin is the poison from a fungus. This has created the proliferation of aggressive and stubborn forms of resistant strains that haunt us today.

The Rife Universal Microscope, developed in the late 1930's and early 1940's, clearly established that germs (microorganisms) are the result of disease (scavengers of dead cells) rather than the cause thereof. If germs are involved, they arise as primary symptoms of that general condition. Though germs don't cause disease, secondary symptoms are produced in response to their activity (commonly called the disease). One reason the conventional medical community doesn't see the big picture is their means of looking at it. A lot depends on how you look at it and what you look at it with.

In the 3rd Edition, Basic Histology, Junqueira & Carneiro, 1980, we discover the limitations of the electron microscope in that the electron beam demands the use of very thin tissue sections enclosed in a high vacuum. The authors of these requisites state on page 9: "These conditions preclude the use of living material...and...The electron beam on an object can damage it and produce unwanted changes in tissue structures. They take a living, changing scene (the blood), and disorganize it, by staining the blood sample. They then take a snapshot of this disorganized situation and interpret it as the entire story. During the study and interpretation of stained tissue sections in microscope preparations, the observed product is the end result of a series of processes that considerably distort the image observable in the living tissue, mainly through shrinking and retraction. It has been suggested in the past that the electron-microscopic specks identified as viruses could, more than likely, be nothing more than particles of lifeless, degraded protein--disintegrated peptides from cellular death--catabolic residues of cytoplasm, or repair proteins produced by the cells in response to the imbalanced biological terrain. It has been reported by researchers searching for the hypothetical "elusive virus," that viruses can "mimic" human tissue! They are human tissue.

R. R. Rife

Perhaps the most profound confirmation of pleomorphis was executed by another nearly obliterated genius, this time an American microscopist with the name of royal Raymond Rife. His story was told in The Rife Report by Barry Lynes. It has been published in book form as The Cancer Cure That Worked! Rife's ordinary microscope (with 31,000 diameters resolution), was capable of detail and clarity surpassing the newly emerging electron microscopes. Its use of prismatically dispersed natural light frequencies, rather than electron beams and acid stains, allowed clear views of living subjects. Each microorganism has its own fundamental frequency of light, something Bechamp apparently took advantage of with his polarimeter.
Rife arrived at the conclusion that light could be used, instead of fatal chemicals, to "stain" the subject. This was brilliant. Equally brilliant was its execution. The entire optical system—lenses and prisms, as well as the illuminating units—are made of block quartz crystal. The illuminating unit used for examining the filterable forms of disease organisms contains fourteen lenses and prisms, three of which are in the high-intensity incandescent lamp, four in the Risley prism, and seven in the achromatic condenser, which has an aperture of 1.40.

Between the source of light and the specimen are subtended two circular, wedge-shaped, block-crystal quartz prisms for the purpose of polarizing the light passing through the specimen, polarization being the practical application of the theory that light waves vibrate in all planes perpendicular to the direction in which they are propagated. When light comes into contact with a polarizing prism, it is split into two beams, one of which is refracted to such an extent that it is reflected to the side of the prism, without passing through the prism, while the second ray, bent considerably less, is enabled to pass through the prism to illuminate the specimen. When the quartz prisms on the Universal Microscope (which may be rotated with vernier control through 360 degrees) are rotated in opposite directions, they serve to bend the transmitted beams at variable angles of incidence while, at the same time, since only a part of a band of color is visible at one time, a small portion of the spectrum is projected up into the axis of the microscope. It is possible to proceed this way from one end of the spectrum to the other—infra-red to ultra-violet. Now, when that portion of the spectrum is reached in which both the organism and the color band vibrate in exact accord with one another, a definite, characteristic wavelength is emitted by the organism. A monochromatic beam of light corresponding exactly to the frequency of the organism is then sent up through the specimen and the direct, transmitted light, enabling the observer to view the organism stained in its true chemical color and revealing its own structure in a field which is brilliant with light.

Instead of the light rays from the specimen passing through the objective and converging, they pass through a series of special prisms which keep the rays parallel. It is this principle of parallel rays in the Universal Microscope, and the shortening of projection distance between the prisms, plus the fact that three matched pairs of ten-millimeter, seven-millimeter, and four-millimeter objectives in short mounts are substituted for oculars, which make possible not only the unusually high magnification and resolution, but which serve to eliminate all distortion as well as all chromatic and spherical aberration. The fine adjustment being seven hundred times more sensitive than that of ordinary microscopes, the length of time required to focus ranges up to one hour and a half. A major upshot of Rife's work was his ability, through several pleomorphic stages, to transform a virus he found in cancer tissue into a fungus, plant the fungus in an asparagus-based medium, and produce a bacillus E. coli, the type of microform indigenous to the human intestine. This was repeated hundreds of times. Rife showed that the pleomorphic capacity of microforms goes beyond the bacterial level to the fungal level, and its progression to the last stage—mold. Included in this cycle are the very important stages intermediate to microzymas and bacteria, the protein complexes usually referred to as viruses, and their immediate descendants, the cell-wall deficient forms.

Rife identified 10 families in the whole spectrum of microlife. Within each family, any form/member could become any other. Also, the fact that organisms have resonant frequencies allowed Rife to further develop his r.f. "beam ray," which helped rid the body of cancer symptoms. What marvelous and beneficial revelations might have arisen with Rife's technology guided by Bechamp's vision? These waves, or this ray, as the frequencies might be called, have been shown to possess the power of devitalizing disease organisms, or "killing" them when tuned to an exact wavelength, or frequency, for each different organism. In reality, it is not the bacteria themselves that produce the disease, but the chemical constituents of these microorganisms enacting upon the unbalanced cell metabolism of the human body that in actuality produce the disease symptoms. Disease-associated microorganisms do not originally produce the condition which has supported their morbid evolution in the body.

Biological Terrain
A healthy or diseased biological terrain is determined primarily by four things: its acid/alkaline balance (pH); its electric/magnetic charge (negative or positive); its level of poisoning (toxicity); and its nutritional status. One critical symptom of diseased terrain is low oxygen. Another is a stoppage of movement or stagnation in the colloidal body fluids between cells. Still another is loss of electrical charge on the surface of red blood cells. This contributes to a condition called rouleau, sometimes called "sticky blood."

Within a cell's wall, all the chemicals and components acting together make up life. Nothing within the cell is believed to be alive of itself. But, when you look at live blood, you can observe that microorganisms undergo an exact, scientifically verifiable cycle of change in their form. As profound as the change of a caterpillar to a butterfly, this evolution is even more fantastic, since it can happen quite rapidly (sometimes in a matter of minutes!). There are no enemies or specific diseases to fight. There is only the consequence of balance or imbalance. The universe seems to operate by keeping opposites in balance. When things get out of balance, a sign usually appears to make it known. Health is balance in the system.

If you want to see a rough comparison of what's happening in a sick body, try not cleaning your house for about a year.

In that environment, all kinds of small "guests" will come out of nowhere to take up residence with you. Similarly, the stresses of our wrong eating habits and way of life "dirty up" our inner environment. Our terrain becomes overly acidic (pH imbalance)--paving the way for unwanted guests. In this unbalanced environment, morbid bacteria can issue from our own cells. These tiny life forms can rapidly change their form and function. Through a process called pleomorphism, (pleo = many; morph = form), bacteria can change into yeast, yeast to fungus, fungus to mold. Microorganisms such as a specific bacterium, can take on multiple forms. This is a change of function as well as shape. It's analogous to someone with multiple personalities, the person's physiology changes with the personality changes. Dr. E.C. Rosenow of the Mayo Biological Labs, and other bacteriologists, demonstrated that a media change could alter streptococci to pneumococci and the food change back would reverse pneumococci to streptococci. This showed that bacteria are scavengers of nature and being essentially bags of enzymes, alter their shape and enzyme production for the purpose of dissolving to its smallest element whatever dead tissue is present. In addition to pH and pleomorphism, we need to consider a most important concept--the difference between the symptoms of a disease and the disease condition. In pleomorphism, a so-called species is just a stage in the growth cycle of a family of beings. Each member functions differently and looks a lot different from the others.

What most people call a "disease" is really a symptom or a collection of symptoms. For example, cancer tumors are symptoms, which is why trying to fight them has resulted in the epidemic we have today. What people commonly think of as causes of disease, are symptoms. In this category are bacteria, yeast, and their descendants. When germs are involved in illness, they are producing, or influencing the body to produce, secondary symptoms. In orthodox medicine, these secondary symptoms are thought of as the disease. The answer though, lies in the condition of your terrain. Is it in balance? Or will it support the development of unwanted guests? Once it gets going, the imbalance becomes a vicious circle.

In pH imbalance, body tissues are on the acid side. The acid condition is promoted by a number of things, the main ones being food types and poor digestion. In poor digestion, food is either fermenting or putrefying. In the early stages of the imbalance, the outer symptoms may not be very intense and are frequently treated (manipulated) with drugs. They include such things as: skin eruptions, headaches, allergies, colds and flu, and sinus problems. As things get further out of balance, more serious conditions arise. Weakened glands, organs and systems start to give way--thyroid, adrenals, the liver, etc.

Unfortunately, symptom manipulation plays a major role in creating worse symptoms later. But most people don't consider or realize this when they go for the quick medical fix. Even most doctors are not aware, or aren't telling. The medical/militaristic approach is a substitution of artificial therapy over natural, of poisons over food, in which we are feeding people poisons (drugs), trying to correct (attack) the reactions of starvation. Lack of understanding creates fear, but when we understand that both health and disease are created
by our own living and eating habits, then there is no longer any fear of "germs." Our individual
immune systems are inescapably linked to the planet Earth, of whose substance we are made.
The entire planet Earth, the complete geosphere, has its own functioning immune system, a
self-protecting, regenerating, healing system. When we are not integrated in that system, or
we harm that system, the inevitable result is our own degeneration. There is no blessing that
anyone has ever received that was not linked to the Earth, even if it came from the Internet!
Even the British Medical Journal of November 1950 admitted: "With the best of care, heavy
bacterial contamination of vaccine lymph is inevitable during its preparation, and as many as
500 MILLION organisms per ml. may be present..." This being true, if bacteria caused
disease, everyone receiving their first vaccination would expire within 24 hours of
inoculation.

History

Rudolf Virchow, father of the germ theory, stated in his later years, "If I could live my life
over again, I would devote it to proving that germs seek their natural habitat--diseased
tissues--rather than causing disease." Pasteur (1822-1895) and Paul Ehrlich (1854-1915) jointly
gave to the civilized world the disease theory doctrines of microbiology and immunology
before vitamins, trace elements, and other nutrients had even been discovered. From their
efforts and dubious discoveries, vaccines became vogue and were embraced by leading
medical scientists--those longing for a sound and simple explanation for the inexplicable.
Antoine Béchamp, M.D., one of the world's foremost bacteriologists and Pasteur's
contemporary, was making great scientific discoveries and some of the greatest minds of his
day accepted his theories and findings as definitely established facts. Béchamp attained so
many achievements that it took eight pages of a scientific journal to list them when he
died. Among many other things, he saved the French silk industry from devastation by
silkworms, under the nose of Pasteur, who had been commissioned to solve it. He clearly
described the process of fermentation for what it is: a process of digestion by microscopic
beings. He was the first to assert that the blood is not a liquid, but a flowing tissue. He
developed; a cheap process for the production of aniline which was the foundation of the dye
industry.

What makes the germ theory so dangerous is that it seems so obviously true. But it is true
only secondarily. Bechamp said "There is no doctrine so false that it does not contain some
particle of truth. It is thus with microbial doctrines." Béchamp discovered Microzyma (now
known as micro-organisms) minute or small ferment bodies--the basic structure of cell life;
and that germs definitely are the result, not the cause of disease. Through his experiments he
showed that the vital characteristics of cells and germs are determined by the soil in which
their microzyma feed, grow and multiply in the human body. Both the normal cell and germ
have constructive work to do. The cells organize tissues and organs in the human body. Germs
cleanse the human system and free it from accumulations of pathogenic and mucoid matter.
We are constantly breathing in some 14,000 germs and bacteria per hour. If germs are so
harmful, why aren't we all dead?

In the primary stages of inflammation (pus formation), the bacteria present are streptococci
but as blood cells and tissues further disintegrate, the "streps" turn into the staphylococcus--
changing into forms native to their new surroundings of dead tissues. Bacteria do not have
any action on live cells; only dead cells. They are not the cause of disease but the result
thereof. That's why in many cases of pneumonia; the pneumococci don't appear on the
scene until 36 to 72 hours after the onset of the disease. His biological work might then
have revolutionized medicine with profound insight into the nature of life. But in a political
world, he found himself up against a skillful politician with wealthy connections--Louis
Pasteur. Antoine Béchamp was a scientist, while apothecary Pasteur was a chemist with no
education in life sciences, and an advertiser, plagiarized the research of Béchamp, distorted
it, submitted it to the French Academy of Science as his own! And by making public these
premature research findings, Pasteur had a devoted following--people acclaiming him a
scientific genius. Pasteur was responsible in large part for the onslaught of animal
experimentation in medical research. Pasteur used preparations made from the diseased
tissues of previously sick animals, thus making the injected ones sick. This gave the
appearance that a germ caused a disease, when if fact these preparations were extremely poisonous. This is not a scientific procedure, but simply demonstrates the fact that you can make someone sick by poisoning his or her blood. Based on his theory of microzymas, Béchamp warned emphatically against such direct and artificial invasion of the blood.

The German bacteriologist, Robert Koch, set forth rules by which microorganisms could be ruled as the cause of a disease or discounted as non-pathogenic (good) germs. He provided his famous Postulates Of Koch to assist in making the differentiation. The only problem was that none of the microorganisms, in practice, could satisfy the requisites necessary to confirm them as the cause of any given disease. Unfortunately, when these demands of causation failed to qualify a bacterium as the responsible culprit, a great void was left in the philosophy of medical science's most cherished fantasy--the microbe THEORY of disease causation. When the inconsistencies of the germ theory of disease threatened the bacteria/disease premise, Eli Metchnikoff (1845-1916) bolstered the shaky germ theory of disease causation by revealing novel concepts about leukocytic phagocytosis (how certain white blood cells engulf foreign agents in the circulating blood and tissues), starting the indomitable THEORY of immunology. The newly developed concepts of Metchnikoff erased the obvious inadequacies of the germ theory: why everyone exposed to the same microbe didn't develop the disease. Theoretical immunology per Ehrlich, Pasteur and Metchnikoff could now explain the whys and why-nots.

If a person's immune cells were smart and could recognize the enemy--the invading bacterium--then phagocytosis immediately engulfed and destroyed the invader. If the leukocyte was incompetent (by whatever strange reason) the invader took control and proceeded to destroy the victim. The answer was to educate the leucocytes so they could recognize and destroy the invading microorganisms. This Platonic academia gave rise to the theory that injection of disease residues, (fractions of pus, into a healthy person), would provoke an immune reaction (the antigen/antibody theory). Thus, a sharpening up of leucocytes so they could recognize the invader and engulf it. Our bodies are densely populated with microorganisms, inside and out. What inhabits us doesn't hurt us and is essential to us. We live in a symbiotic, mutually beneficial, mutually necessary relationship with our personal population of bacteria.

Leeuwenhoek discovered life on man with a 17th-century microscope and with unbiased detachment, contemplated the host of living things living on himself--not as disease causation. Social attitudes have developed over bacteria in relation to dirt, filth or cleanliness. Even Freudian views have entangled bacteria with sexual attitudes. Pasteur stated later in his career that germs and bacteria are not the exact and primary cause of disease. He abandoned his earlier beliefs on the Germ Theory and became convinced that the disease came first, the germ second. He stated, "The presence in the body of a pathogenic agent is not necessarily synonymous with infectious disease." Pasteur was aware that fermentation (which he studied extensively while formulating his germ theory) only occurs in injured, bruised or dead material, and that bacteria are a natural result of fermentation, not the cause. He realized later that germs and bacteria change their form according to their environment. Unfortunately, the stepping-stones of modern-day medicine were already in place and Pasteur could not reverse the situation.

Most all textbooks of bacteriology reveal that the NORMAL throat routinely carries:

1. Alpha-hemolytic streptococci
2. Neisseria (gonorrhea and meningitis)
3. Coagulase-negative staphylococci
4. Staphylococcus Aureus
5. Group A streptococcus
6. Hemophilus hemolyticus
7. Yeasts, diptheroids and anaerobes
8. Pneumococci and gram-negative bacillus
9. Gamma Streptococci
Most infectious pathogenic bacteria, yeast, mold, and fungus, thrive in an imbalanced pH. The following bacteria, all well known enemies of modern science's war on bacteria, grow optimally on pH imbalanced media:

*staphylococcus* (staph infection), *meningococcus* (meningitis),

*streptococcus* (strept throat), *corymbacterium diptheria* (diptheria),

*pneumococcus* (pneumonia), *clostridium tetani* (tetanus),

*h. influenza*

(The flu) and others

The germ theory, virus theory, genetic theory and autoimmune theory--contemporary disease causation theories--are all based upon and rely upon IMMUNOLOGY. Immunology is based upon and must be supported by Darwinian concepts of evolution. Pull out the evolutionary foundation and all the prevailing theories collapse; the highly publicized, but nonexistent, advances of modern medicine are exposed as scatologists! Nonetheless, the germ theory is still believed to be the central cause of disease, because around it exists a global supportive infrastructure of commercial interests that built multi-billion-dollar industries based upon this theory.

**Virus**

The inability of the Germ Theory to satisfy the POSTULATES OF KOCH...the Virus Theory can't survive the basic requisites of scientific scrutiny to remain a theory, much less become a LAW. Dorland's Illustrated Medical Dictionary tells us that a VIRUS is a minute, infectious agent not resolved (distinguished separately by the light microscope). It is without independent metabolism and can only replicate (reproduce itself) within a living host cell. A virion is defined as a complete viral particle found outside of host cells and can survive in crystalline form and can infect a living cell. In other words, the most intelligent virus (no brain or nervous system) outwits a cell membrane (the guardian of the cytoplasm), passes into the cells interior, sneaks by the lysosomes that normally ingest and digest intracellular decayed or foreign matter, trick the ribosomes and polysomes into believing that the virus is a friendly amino acid, enters into the amino acid polypeptide chain of amino acid residues, takes over the ribosomal control (coup d'etat), reproduces itself many times over and then kicks out a virion (crystalline) to attack the adjoining cell!

Russian bacteria hunter Dimitri Iwanowski, who gathered fluid from diseased tobacco plants, achieved the first isolation of a virus in 1892. He passed this liquid through a filter fine enough to retain bacteria; yet to Iwanowksi's surprise, the bacteria-free filtrate easily made healthy plants sick. In 1898, a Dutch botanist, Martinus Willem Beijerinck, repeating the experiment, also recognized that there was an invisible cause and named the infectious agent "tobacco mosaic virus." In the same year as Beijerinck, report, two German scientists purified a liquid containing filterable viruses that caused foot-and-mouth disease in cattle (viruses were at one time called filterable viruses, but eventually came to apply only to viruses, and was dropped). Walter Reed followed in 1901 with a filtrate responsible for yellow fever, and soon dozens of other "disease-causing" viruses were found. In 1935, another American, Wendell M. Stanley, went back to the beginning and created pure crystals of tobacco mosaic virus from a filtered liquid solution. He affirmed that these crystals could easily infect plants, and concluded that a virus was not a living organism, since it could be crystallized like salt and yet remains infectious. Subsequently, bacteriologists all over the world began filtering for viruses, and a new area of biology was born--virology. Historically, medical science has vacillated on the question of whether a virus is alive. Originally it was described as nonliving, but is currently said to be an extremely complex molecule or an extremely simple microorganism, and is usually referred to as a parasite having a cycle of life. Commonly composed of either DNA or RNA cores with protein coverings, and having no inherent
reproductive ability, viruses depend upon the host for replication. They must utilize the nucleic acids of living cells they infect to reproduce their proteins, which are then assembled into new viruses like cars on an assembly line. Theoretically, this is their only means of surviving and infecting new cells or hosts.

Underlying the birth of virology was the doctrine of monomorphism--that all microorganisms are fixed species, unchangeable; that each pathological type produces only one specific disease; that microforms never arise endogenously, i.e., have absolute origin within the host; and that blood and tissues are sterile under healthy conditions. Theoretically, under ideal health conditions, the blood might be sterile, though it has the inherent potential to develop morbid microforms, as discussed earlier. Long and repeated observation of live blood in the phase-contrast, dark-field microscope, however, shows that the blood can contain various microforms in an otherwise asymptomatic host, or in a condition, or in a condition defined as normal or healthy in orthodox terms. Monomorphism was the cornerstone of developments in 20th-century medical research and treatments. Refusal by the mainstream to examine fairly, much less accept, the demonstrated facts of pleomorphism--that viruses and bacteria, yeast, fungi and mold, are evolutions from microzyma; that microforms can rapidly change their form (evolve and devolve) in vivo, one becoming another, dependent upon conditions in the biological terrain (environment); that blood and tissues are not necessarily sterile; and that there are no specific diseases, but only specific disease conditions--was the foundation of the debate. It is so called because those who wore the "robes" of scientific authority would not be swayed from folly when resented with its contrary proofs. These proofs began in earnest with Antoine Béchamp in the nineteenth-century.

In the early third of the 20th-century, the heated debate took place over filterable bacteria versus non-filterable. This was a major battle concerning micromorphology. The orthodox view prevailed: bacterial forms were not small enough to pass, or did not have a smaller, earlier stage. What passed through "bacteria-proof" filters was something else, i.e., viruses. Standard medical textbooks long made this filtering distinction between bacteria and viruses. Subsequently, however, the cellular nature of many filterable forms originally thought to be viruses, such as some mycoplasmas, rickettsias, and various other groups, has been established. With the victory of the monomorphic view, deeper understanding of infectious "disease" was lost, setting the stage for cancer, degenerative symptoms and AIDS.

A typical bacterium is about 1 micron in size. Most filterable forms now called viruses range in size from 0.3 micron to 0.01 micron--partially in the colloidal range. Most of the larger viruses are a third to a quarter the size of the average bacterium. Size is critical because 0.3 microns is the resolution limit of modern-day light microscopes. Thus, as viruses were discovered, they required an electron microscope to be seen, especially given the fact that Royal Rife's microscope technology and career were destroyed by vested interests. Unfortunately, electron microscopes and the process of chemical staining disorganize all specimens, whereas Rife's technology allowed life to proceed and thus evolve under its lens. As viruses became visible to advancing technology, the ramification was that the technology revealed, to minds infected with monomorphism, protein structures deemed foreign to the body. What is really known about viruses is that they are, according to Biochemistry, Lubert Stryer, 2nd Edition, 1981..."the most efficient of the self-reproducing intracellular parasites." Yet, in the next sentence: "Viruses are unable to generate metabolic energy or to synthesize proteins."--It's a paradox! Maybe someday soon, with improvements in the electron microscope, we will find out that what are now being called and classified as viruses will prove to be intracellular crystallizations of protein catabolism--meaning the destructive process by which complex substances are converted into simple compounds.

The 7th edition of Russell L. Cecil's A Textbook Of Medicine (1947), said then, what is still the case today: "The nature of viruses is not yet definitely known, but certain facts appear well established. At the present time it is convenient to think of viruses as though they were obligate intracellular parasites of extremely small size." From whatever cause, when the proteinaceous structure of cellular cytoplasm is damaged, the bags of enzymes inside the cell, called lysosomes, release proteolytic enzymes that digest the dead protein of the cytoplasm. With death of the cell and disintegration of the cell nucleus, ribonuclease and
Deoxyribonuclease enzymes catalyze the depolymerization of RNA and DNA—providing the free strands of nucleoprotein which "mimic viruses" when viewed with the electron microscope. Volumes could be written about the assumptions, theories and hypothesis associated with immunology, the germ theory and the virus theory. Virologists today will state that the "virus" remains dormant and hidden in the body and some leading authorities reveal that these little trick-or-treaters are actually hiding in the nerve sheaths.

**Immunology**

If the concept of immunology can in any way be substantiated, then evolution has really let us down. The only thing that benefits from evolutionary progress is the microbe that outsmarts man, the virus that outsmarts the cell membrane and the rodent that by-passed man 65 million years ago (approximate time that man supposedly lost his ability to manufacture vitamin C)! If the antigen/antibody reaction is true...we have also been outwitted by anaphylaxis (an exaggerated reaction of an organism to an injected foreign protein. Such an injection renders the animal or human hyper-susceptible to a subsequent injection) which cannot exist under the circumstances. Dr. W. H. Manwaring, Professor of Bacteriology and Experimental Pathology at Leland Stanford University proclaimed: "Not only is there no evidence of these so-called antibodies being formed. But there is ground for believing that the injected germ proteins hybridize with the body proteins to form new tribes, whose characteristics and effects cannot be predicted. Even non-toxic bacterial substances sometimes hybridize with serum albumins to form specific poisons which continue to multiply, breed and cross-breed, ad infinitum, doing untold harm as its reproductivity may continue while life lasts." He continued, "In spite of millions of dollars spent on research and tens of millions spent in commercial exploitation, of 100 theoretically logical monovalent, polyvalent, prophylactic and curative anti-sera, 95% of them were thrown into the clinical discard. The same thing is true of vaccines...and we call this scientific medicine. Twelve years of study with immuno-physiological tests have yielded a mass of experimental evidence contrary to, and irreconcilable with, the Ehrlich theory, and have convinced me that his conception of the origin, nature and physiological role of the specific "anti-bodies" is erroneous."

Many harmful and unexpected reactions occurred during the original experimentation. Nevertheless, it was assumed that since man and animal derived from the same evolutionary beginnings, the disease residues could first be injected into animals and animal serum would produce antibodies acceptable to humans. That particular concept was not appetizing to the average scientist until Charles Darwin (1809-1882) assumed the "evidence" that man and lower animals were indeed blood brothers. According to Dr. Frances K. Widmann, M.D., Associate Professor of Pathology at Duke University said in her 1979 printing of Clinical Interpretation of Laboratory Tests page 439: "The fact that a patient's serum contains a particular antibody does not prove that his ongoing or recent illness was due to that organism. If serum has little or no antibody at the beginning of an illness, and if high levels are present in the "convalescent" sample drawn several weeks later, there is strong circumstantial evidence only, that the illness was due to that organism." She continues on page 401: "The war between microorganisms (germ and viruses) continues unremittingly. "Wonder drugs" have not eradicated infectious disease; they have merely changed the conditions and natural history of many infections. Organisms (microbes) display remarkable adaptative capacity, so that drugs effective today become ineffective against the same type of infection tomorrow." Isn't it strange that modern scientists have become so deeply entrenched in the microbial infection theory of disease causation that they are unable to comprehend that infection is not infection...but inflammation. Few people will consider chronic poisoning and/or malnutrition as possible factors in the futile search for disease eradication.

**Microzymas**

"From dust you are and to dust you shall return" Genesis 3:19
Thirty years prior to the rise of monomorphism, Béchamp brought his attention to tiny "molecular granulations" found in body cells, which other observers had noted before him. They had been scantily defined, and no one had identified their status or function. After 10 years of careful experimentation, Béchamp brought to the world in 1866 the profound revelation that the granules were living elements. He renamed them microzymas, meaning "small ferments." During the following 13 years, Béchamp, with his devoted co-worker, Professor Estor, developed and refined the Theory of Microzymas.

The essence of this theory is that the microzyma, an independently living element, exists within all living things, and is both the builder and recycler or organisms. It inhabits cells, the fluid between cells, the blood and the lymph. In a state of health, the microzymas act harmoniously and fermentation occurs normally, beneficially. But in the condition of disease, microzymas become disturbed and change their form and function. They evolve into microscopic forms (germs) that reflect the disease and produce the symptoms, becoming what Béchamp called "morbidly evolved" microzymas. This occurs due to modification of our terrain by an inverted way of eating and living. Béchamp observed granules linking together and lengthening into bacteria. He therefore observed, explored and expressed the concept of pleomorphism first. Being at the foundation of organization in the body, microzymian transformations build up cells and eventually the whole organism in which they exist. Their function is twofold, and they are poised to recycle the physical body upon death. It is matter, which cannot be created or destroyed, and is the precursor to all living organized matter.

The microzyma is a ferment: a living element capable of fermenting sugar. This is a digestive (chemical) process carried on by enzymes (from Greek, meaning "to ferment"). There are various classifications of fermentations, based on the final products. Alcohol is one such product, so there are alcoholic fermentations. There are also lactic fermentations, resulting in the production of lactic acid. This kind of fermentation happens in muscle, creating the fatigue and pain we're all familiar with. Béchamp saw the life process as a continual cellular breakdown by microzymian fermentation--even in a healthy body. Renewal is happening as well, which is also being done by the microzymas. When illness is present, fermentative breakdown is not only accelerated, but is taken over by morbid evolutions, including bacteria, yeast, fungus and mold. These are the upper development forms of the microzyma, which feed on vital body substances. This results in degenerative disease symptoms.

**Enzymes**

Not only fermentation, but nearly all chemical reactions in the body are carried out, or controlled, by enzymes. Enzymes are catalysts--substances that assist chemical processes. They are complex proteins and perhaps the most amazing body substances. They quickly accomplish complex reactions at body temperature that would take days in a lab with very special equipment, or would be impossible altogether. According to Béchamp's discoveries, it is possible that enzymes create, or themselves become, microorganisms. It is known that enzymes take part in repairing damaged genes--the elements that define and control our heredity and function. Béchamp suggested that microzymas coagulate to become genetic material. Enzymes, then, are quite magical and mysterious substances. Behind every enzyme is a microzyma. In one sense, the gene may be seen as the tool of the microzyma. The mechanism for repair could be that enzymes construct or become repair proteins, which are then spliced into the gene. There is a good possibility that this is what "viruses" are--repair proteins, or structures that do gene repair, not forms that cause symptoms. Most viruses are made of a core of genetic material surrounded by a protein coat.

The repair process has been misconstrued by mainstream bioscience as a disease, and its tools, the repair proteins, have been called viruses, particularly retroviruses. Retroviruses have the ability to insert themselves into our DNA. Supposedly, this is what the retrovirus HIV does. Observers with a certain bias could easily assume the thing shouldn't be there. Such is the kind of error to which the conditioned scientific mind can be led by germ theory. Since viruses don't have a reproductive mechanism, they must use the host cell to reproduce. But
perhaps the reason they can't replicate outside the cell is that they're not intended to. Perhaps something in the cell is producing or becoming viruses for a reason. There is the possibility that a virus may have a complex of microzymas in the center. And, as with bacteria, monomorphic medical science offers no explanation as to where these forms come from in the first place. Pleomorphism, however, easily suggests an answer.

Disease conditions weaken our enzyme system so that "improper" repair structures can be formed. Since enzymes must have minerals to function, even a simple mineral deficiency could be involved in the failure of gene repair. A faulty protein structure may still have the ability to get into the DNA, but it may cause malfunction. If so, it would fail to fulfill properly its original purpose, and possibly instigate another morbid situation in the cell as well.

Another possibility is that even if the repair structure is correct, nutritional deficiency or depletion of the enzyme potential may prevent proper function. Once a protein structure is floating around, it could evolve into a higher morbid form itself, depending on circumstances. It may evolve into a bacterium. This has been well documented in the lost chapters in the history of medical biology. And in a compromised terrain, today's bacterium can be tomorrow's terrain-poisoning yeast, fungus, or mold. Pasteur denied that bacteria could change their form. Only the unchanging, specific germs of the air were the cause of disease, he said. Béchamp, on the other hand, never denying that the air carried germs, maintained that airborne forms were not necessary for disease. Pasteur wished to establish that we must be invaded (and therefore be protected by profitable vaccination). But the true scientist showed that an independently living element, which could morbibly evolve, already exists in all cells of the body, and showed evidence that it is all that is needed for the appearance of symptogenic organisms. The body naturally has within it the factors and potential necessary to produce the symptoms of disease, including microorganisms. It means we also have the innate ability to become, and to stay, healthy.

Whether Pasteur or Béchamp is correct may still be an issue for some people. It does seem unusual, though, that Antoine's name, and the controversy itself, have been omitted from history, medical and biology books—even encyclopedias. Given the magnitude and number of Béchamp's discoveries, it is more-than-likely that this omission is more than oversight. The historical assassination of Antoine Béchamp resulted in medical science drawing conclusions from a half-truth. This has meant untold misery for the human race, especially in the West. The resulting concept of diseases as entities that attack us is highly questionable and is a major block to resolving health care issues today.

The odd thing is, Pasteur himself was reported to have admitted on his deathbed that, "Claude Bernard was right--the microbe is nothing, the terrain is everything." But, even as he way dying, he would not give credit for the demonstration of this fact to whom it was due--Antoine Béchamp! One organism can rapidly assume many forms and it may be in several stages at once. The toxins (acids) from the whole spectrum of these microforms combine to produce symptoms, or provoke the body to produce them. The toxic output of yeast, fungus and mold is a primary disruptive influence in the body. But, it is not the microforms themselves that initiate disease. They only show up because of a compromised biological terrain. Pleomorphism is observable if only medical science will take the trouble to look. Once this cycle of development has begun, it further compromises the terrain, creating a vicious circle of imbalance. As explained earlier, humans rely on certain microorganisms for life, as does every higher organism on Earth. They reside primarily in our digestive tract. This is an incontestable fact. It isn't much of a stretch to imagine that other forms could take over if the habitat changes. Invasion is not necessary for this to happen. They can evolve right out of any cell. To understand the principles of pleomorphism and terrain is to understand why we are sick and tired. Once we understand WHY we are sick and tired, we can start making the necessary changes in our lifestyle to bring our bodies back into balance.

Dark-Field Microscopy

By reviewing living blood under a dark-field, phase-contrast microscope, pleomoric forms can be seen. This type of live-cell analysis is also used in marine biology for observing tiny sea life with fragile outer skins. The high-powered microscope can magnify objects up to 28,000
times, enabling one to clearly view bacterial and fungal forms in exact detail in the blood! The blood specimen is lit by a special apparatus in the microscope called a phase-contrast condenser. Objects under the lens show up against a black and/or gray background. This provides superior quality images. One can see red and white blood cells; crystallized exotoxins, mycotoxins, cholesterol, metals; blood clots; signs of oxygen deprivation; undigested fats; bacteria, yeast, mold, and many other things—all in ONE drop of live blood! Watching live blood on a slide, or on a video, one can actually see bacteria, yeast, fungus and mold feeding and growing as the blood loses its nutrition and oxygen. Most amazing is to see these forms coming right out of previously healthy red and white blood cells! They live off your body's vital nutrients: glucose, protein, fats, hemoglobin, tissues and organs. They disorganize, or change form, in the presence of oxygen.

The American medical establishment does not look at live blood. They focus primarily on chemical analysis to make their diagnosis, and in doing so, are missing the show. Also, when looking at blood, their practice of "staining" samples disorganizes them. In fact, biological forms and elements have been defined by the artificial convention of staining, thus throwing that bias on the whole subject. This approach is an ingrained habit religiously taught in medical schools and practiced in research. But it is narrow and restricted, virtually blinding those who rely on it. The action of the chemical stain visually enhances certain things, such as the cell wall and nucleus. But this is at the cost of disturbing and disorganizing all the living, moving, feeding microforms--they become invisible or unidentifiable. Consequently, observers of dead blood refer to these forms as "artifacts," "organelles," "microsomes," etc. Once a person has made the corrections necessary to reclaim their inner terrain, their blood is again examined under the microscope. It's plain to see when the symptogenic microforms are reduced or have been completely eradicated. The bottom line is that we must provide an appropriate environment for our tiny life units. We must deal with them on their level, for after that they will become what they must, and no amount of manipulation with drugs will stop their evolution or completely subdue their progeny. If it could, it would be the end of the host as well.

Yeast, Fungus and Mold

Yeast and fungus are single-celled forms of plant life. Inhabiting land, air and water, they are everywhere. Mold, which is closely related to them, is the end-stage of all pleomorphic cycles in the body. Single fungal cells can be seen only under a microscope, but a colony of them make a visible presence like the form of mushrooms, toadstools, and the sometimes fuzzy molds we've seen growing on things. For hundreds of millions of years, yeast, fungus and mold have developed into over 500,000 different identifiable forms. For that period of time, they've undergone little genetic change. Apparently, they haven't needed it, because they're created as opportunists and survivalists, and perfectly suited for what they do. They can go from rapid growth to thousands of years of dormancy. This has been seen in their living spores which have been found in Egyptian tombs. There is a sound biological basis for our inherent ability to produce these pleomorphic forms. While humans, higher plants and animals are alive; bacteria, yeast, fungus and mold are unable to overcome entirely the natural balancing mechanisms that higher forms of life possess. But once the host organism dies, these microforms are the principal "undertakers" which reduce the higher life form into basic materials.

In biology, this is known as the carbon cycle, and it is a natural, necessary life process. The recyclers have evolved from, and are actually a scavenging form of, microzymas. And microzymas naturally reside within all pleomorphic microforms as they do within all living things. They are the ultimate imperishable form to which organic matter is reduced. Yeast and fungus can start their takeover while we're still living. Because the microzymas are getting the chemical signal, from an acid terrain, that this organism is dead or disorganizing! The body naturally goes acid when it dies or when the cells begin to disorganize. And without respiration, oxygen is lost. One of the symptoms of terrain imbalance is lack of oxygen. These morbidly evolved organisms thrive without oxygen, i.e., they are anaerobic. We predispose ourselves to this takeover with various stresses. The main ones are chronic
improper diet and/or other chronic toxicity. Emotional upheaval and unloving thoughts, anger, etc., have a strongly acidifying effect in the tissues.

These morbidly evolved organisms are literally eating us alive and polluting us. The thing is, we pollute ourselves first, thus creating the one physiological disease: pH imbalance/toxicity in our biological terrain. Toxins and an acid-forming diet disrupt body chemistry, and this loss of balance in turn disturbs the central balance of the microzyma. Nutritional deficiencies can have the same effect, but can also be created by acidification. Unless fatal or permanently damaging, an acute toxicity in a healthy terrain will only temporarily disrupt things and minimally disturb the microzymas, with a quick return to balance. Otherwise, in the chronic situation the one sickness follows: the evolution of microzymas into bacteria and ultimately into a yeast and fungus infestation. Yeast and fungus can infest the blood and any cell or tissue, resulting in a wide range of symptoms. The primary diet of yeast and fungus in our bodies is glucose for energy, plus fats and protein (even our genetic nucleic acids) for development and growth. As these organisms feed, they produce waste, just like you do. Their “urine and feces” are called mycotoxins (myco = fungus; toxin = poison), and they are very poisonous to humans! This poisoning of the body by mycotoxins is called mycotoxicosis. Being acids themselves, mycotoxins greatly worsen the acidity caused by diet. They are released into the blood as well as inside cells. The blood poisoning results in more cell and tissue poisoning, and all of this further disturbs the microzymas, making us sick and tired. Also, since many of these poisons are acids, they chemically destroy or break down our cells and tissues.

The symptoms of disease show up in two primary modes: (1) an attempt by the body to deal with toxic poisoning, and (2) a result of the action of toxins on body chemicals, cells and tissues. A combination of these two primary modes is also common. Most toxins are the metabolic waste of yeast and fungus, and this includes a large number of environmental chemical poisons we are exposed to. Primary mycotoxins are produced directly by the organisms, and secondary mycotoxins are either breakdown products or products resulting from combination. Although yeast and fungus wreak most of the havoc in the body, the earlier, or bacterial stages can produce considerable effects themselves by means of their metabolic wastes (exotoxins) and chemical contents (endotoxins). Bacterial forms don't always evolve into fungus, nor does fungus always become mold, the end-stage form. It depends on the particular form and the condition of the terrain. In addition to our own ability to generate various microforms, we also have them entering the respiratory system and intestinal tract due to our exposure to the world at large. Béchamp saw that in plants, bacterial “invaders” appear to grow in the host as they would in a lab culture. But he concluded that what is really happening is that their presence initiates similar development in the plant’s own bacterial/fungal precursors. He suggested that the same thing happens in humans, and that both cases depend on prior susceptibility. Thus, we may or may not experience such a result from these “intruders.” One might contract a yeast and/or fungal infection such as athlete’s foot, vaginal yeast infection, strep throat, or ringworm on the skin. But s/he must be predisposed to it internally. At the other extreme is the person with AIDS, who faces major, death-threatening yeast and fungus infection because of a highly compromised terrain.

Although the immune system can become stressed and lose its effectiveness against yeast and fungus, anti-infectivity is not its primary role. It cannot be the “first line of defense,” as is commonly thought. By the time it comes into play to deal with infectious agents in the body, the terrain’s pH has already been compromised. The only part of the immune system that could be called a “line of defense” is that which stands between our inner terrain and the planetary environment--the mucosal barrier. The primary, ongoing role of inner immune function is that of an elegant janitorial service. It must constantly pick up and discard filth, including the body’s metabolic waste. It also deals with remnants of the 24 billion cells that die and are replaced everyday! It is so amazing that it not only picks up this waste, but recycles a good deal of it. Without this service, we’d get rather choked up inside with debris. But immunity to infection does not, and cannot, create wellness. Thus, infectious immunity is a back-up system--a spare tire, if you will. A balanced biological terrain is the primary discouragement to morbid microforms. The misplaced emphasis on immunity and stimulating
immune function is an unfortunate hangover from germ theory. The result can be over-reliance on the system, so that most of us are riding around on the spare tire all the time.

Between the extremes of athlete's foot and AIDS are the yeast and fungus overgrowths underlying symptoms such as diabetes, cancer, atherosclerosis, osteoporosis, chronic fatigue, and more, including infections which appear to be transmitted among humans. Most disease symptoms, chronic and degenerative ones, follow bacteria, yeast and fungus, and their associated exotoxins and mycotoxins. In the 1930s and '40s, as many as one thousand compounds, classifiable as mycotoxins, were studied by the pharmacology industry as potential antibiotics. Most were discarded as too poisonous for higher life forms to be of value in treating bacterial symptoms. These toxicity studies actually outlined the dangers of these substances. What was identified was the whole spectrum of symptomologies produced by mycotoxins! Some researchers believe there are more than a thousand toxins produced by yeast, fungus and mold. One common mycotoxin that is particularly troublesome is acetaldehyde. It is quite detrimental itself, yet also breaks down to other products (called metabolites) including oxalic acid, lactic acid, uric acid, and alcohol. All are disruptive waste products of yeast and fungus and are found in the flood and tissues of a compromised terrain. Compounding the situation is the fact that the presence of acetaldehyde and other mycotoxins causes the liver to increase low density lipoprotein in the blood. This high-cholesterol complex is used to bind with toxins, thereby deactivating them. The binding process is often referred to as chelation. However, the resulting substance also has the tendency to become oxidized and stick to lesions (toxin damage) in the artery walls, producing atherosclerosis. Minerals are used for chelating purposes also. Acetaldehyde can reduce strength and stamina, cause excessive fatigue, cloud thinking and take away ambition. One mechanism for these problems is that it directly destroys neurotransmitters, which are chemicals responsible for completing all nerve impulses. Another mechanism is that it can bind to the walls of red blood cells, making them less flexible and therefore less able to get into and through the capillaries of the circulatory system. This causes starvation and oxygen deprivation in the tissues. An added difficulty is that the liver converts acetaldehyde to the mycotoxin alcohol.

Louis Pasteur Vs Antoine Béchamp and The Germ Theory of Disease Causation - 2

May 14, 2004 5:05 PM | Permalink

DNA may also be damaged when excess acetaldehyde reacts with it, creating the following symptom pictures: pancreatitis, cardiomyopathy, dilated cardiomyopathy, brain atrophy dementia, atrophied brain with large ventricles, jaundice, spider angina, enlarged spleen, stomach ulcers, esophageal varicosity, ascites, cirrhosis, enlarged spleen, tremor, bleeding tendency, bruising, ankle edema, and reddening of the palms, and others. Another example of the damaging effects of the waste products of yeast and fungus is the mycotoxin cyclosporin. This toxin suppresses the immune system so greatly that it's used to prevent the rejection of transplanted organs. The irony is that people rarely get it directly from the fungus, but are dosed with it by doctors doing transplants. Cyclosporin has been shown to cause cancer and atherosclerosis in all humans who have been long-term survivors of transplants. Other mycotoxins, such as uric acid and oxalic acid, provoke symptoms ranging
from gout to kidney stones. Cancer and AIDS are nothing more or less than a cellular disturbance of the electromagnetic balance, disorganization of the cellular microzymas, their morbid evolution to bacteria, yeast, fungus, and mold, and their ensuing production of exotoxins and mycotoxins. Cancer, therefore, is a four-letter word--acid, especially lactic acid, a waste product of yeast and fungus.

The amount of uric acid and acetaldehyde produced by yeast and fungus can be overwhelming to the body. When acetaldehyde is converted into alcohol in the liver, the body is depleted of magnesium, sulfur, hydrogen, and potassium, thus reducing cell energy. The body chelates uric acid and other toxins with fats, raising LDL cholesterol. In a similar balancing act, the body reacts chemically to neutralize uric acid by binding it with minerals such as potassium, magnesium, sodium, zinc, and calcium; this process further reduces mineral supplies and can create deficiencies. Fungal hampering of red blood cells also reduces oxygenation. The less oxygen there is in the body, the more alcohol is produced, which can give the symptoms of being drunk, disoriented, dizzy, or mentally confused. Acetaldehyde further reduces cell energy because it destroys essential enzymes. The immune system is provoked into trying to neutralize it and to retard the yeast and fungus by releasing large amounts of free radicals. If body pollution is constantly generated, then immune response, our amazing house-cleaning process, eventually becomes overloaded and exhausted. Thus, all immunological problems and infectious conditions are caused or worsened by the presence of mycotoxins. Yeast and fungus take advantage of the body's weaker areas by poisoning and overworking them, and by direct penetration of cells. Yeast and fungus have the bizarre ability to change shape--to turn into a hard-edged arrow. Once transformed, they can aggressively plunge into the cells of the body, even penetrating the nucleus.

The fungus can now damage the genetic structure by feeding on it. Eventually, the cell may be converted entirely from normal fermentative metabolism (oxidative metabolism) to abnormal fermentative metabolism (absence of oxygen)--CANCER. Since cancer is primarily a systemic condition that localizes, not a local disease that spreads, it shows up in the body's weakest links. These are like dead zones; they carry a declining electromagnetic charge. All healthy cells carry an electromagnetic negative charge. All fermentative cells and their acids carry an electromagnetic positive charge. These rotting cells and their acids act like glue, which causes healthy cells to attract and stick together. This leads to oxygen deprivation and the disturbance and disorganization of more healthy cells. Simply put, healthy cells begin to rot! Fermented cells can instigate the fermentation of other cells by fungal penetration or by poisoning them and provoking a morbid evolution of their inherent microzymas. Biopsies are a major cause of this by puncturing the capsule (tumor) that the body creates to isolate the morbid mass, but it can happen by itself. The body is spoiling, fermenting, or going bad--molding just like cream cheese.

In all cancer autopsies lactic acid or yeast, fungus and mold is found, and sometimes both. Perhaps the connection is not being made. But medical science is beginning at least to notice, if not recognize the significance of, the presence of lactic acid and yeast in cancer. They are present in cancer, but are also present in the blood before cancer, and without the presence of other symptoms for that matter! Hopefully biologists will approach the question of why and how the yeast gets into someone's blood in the first place, rather than merely pursuing expensive DNA research to see if they can kill it. This is the mental limitation imposed by the germ theory--spend millions to kill a symptom of dietary and nutritional misguidance, without realizing that the human organism itself is the main source of the yeast. The two primary parasites in all infectious and degenerative disease are of the Aspergillus strain and the Mucor strain. These morbid forms can change rapidly when conditions change. They can revert to their original state after completing their recycling work. A pool of lactic acid--the waste product of a cancer microform--surrounds every cancer tumor, but the microform itself may or may not be there.