

PC1 - Complementary HIV Therapy by Immune Enhancement and Repair

Harry van der Zee MD & Peter Chappell RS Hom – Amma Resonance Healing Foundation

PC1 is a complementary approach to HIV/AIDS in Africa and other developing countries based on the repair and enhancement of the immune system by the use of resonance.

History of Resonance in Epidemics

Long before antibiotics and improved hygiene started to change the impact of epidemics in the western world, resonance in the specific form of homeopathic medicine, was used with great success in many epidemics like cholera, yellow fever and the Spanish flu. Homeopaths working in private practices and hospitals in Europe and the USA were losing around ten times less patients in those days compared to conventional medicine; these facts are supported by a wide variety of sources including hospital records, and suggest the immune system can be modulated using ultra-low-dose medicine.

The success of antibiotics and many other pharmaceutical developments caused homeopathy to become out of fashion and to be considered ‘unscientific’. Recent developments in quantum physics and materials sciences are starting to provide a significant theoretical and measurable body of evidence to support the observation that ultra high dilutions can invoke a healing response in the human organism; clinical research supports the observation.

Treatment with PC1 is resonance-based and the design of PC1 is based on new technology. Resonance instead of aiming to kill the diseasing agents by chemical substances stimulates the immune system to fight the disease. Using the like-cures-like rule is based on a fundamentally different paradigm than the one underlying contemporary medicine, yet was already known and discussed by Hippocrates. In this present time humanity is facing the limitations of the current paradigm based on the use of chemicals to kill viruses and bacteria as well as the complications caused by it in the form of induced therapy resistance and the creation of increasingly virulent strains of diseasing agents.

The advantages of resonance for epidemics, PC1 for HIV/AIDS in particular, are:

- No side effects
- No induction of therapy resistance
- No chemical interference with other medication - but complementary action to drug therapy
- Very cheap production process (1-2 US dollars per month for PC1)
- Easy distribution - no cooling or special storage and long keeping qualities
- PC1 in liquid form can be locally produced with low-tech equipment from small stock of granules
- Safe for all ages including babies and pregnant women
- PC1 is a general remedy, based on the principles of resonance, specifically geared towards AIDS but without the need of lengthy, individualized case-taking, as in normal homeopathy.
- Easy to understand and teach the use (no highly trained staff necessary to monitor proper intake)
- Doesn't contradict local traditions / taboos (one reason why many treatment programs don't work)

Resonance for HIV/AIDS

In 2001 Peter Chappell, an English homeopath, travelled to Ethiopia to see whether resonance would have anything to offer for the AIDS pandemic in Africa. He took 70 cases of AIDS, analysed the totality of their symptoms and looked for a known homeopathic remedy (one based on a substance that in crude form would induce a symptom picture similar to AIDS), which could be used for treating AIDS. Within the homeopathic literature he could not find a suitable remedy. He then figured out a new technology to reverse engineer the information of the totality of the symptom picture of HIV/AIDS into a resonance called PC1. In this new technology the specification of the information concerning the disease is carried within water that the patient receives and is based upon the information needed to stimulate a very specific immune response, exactly appropriate to the disease.

That information can be stored in water was long refuted, but is today supported by research from many scientific angles, e.g. the work of Amit Goswami, theoretical nuclear physicist and member of The University of Oregon Institute for Theoretical Physics, and the Material Scientist Rustum Roy of Penn State and Arizona Universities.

Since 2002 PC1 has been used in many African countries and India with good results, both as a complement to ARVs or instead of ARVs when these were not available or not yet indicated. Depending on the stage of AIDS the results will be visible within days or weeks. Articles documenting this work have been published within complementary medicine literature.

The clinical observation is that people get well from all AIDS-related symptoms including opportunistic infections and can work again, take care of their children, or go back to school soon. They

normally feel very well in weeks. Their appetite returns and they gain weight. Their pains disappear and their energy returns. Where lab equipment was available to test CD4 counts these show a significant rise of usually 40% within a few months to restoring back to normal levels with a longer follow-up even in cases where treatment was completed and therefore stopped. This indicates that the immune system can be stimulated to restore itself, and suggests that the disease progression in HIV infected patients is possibly related to the over-activation of the immune system by poorly administration of antibiotics for other diseases, as recent immunological studies suggest.

The results though are mainly anecdotal. Although they come from several African countries and India and from various doctors applying PC1 systematized proof of the efficacy of PC1 is still lacking.

In 2004 a retrospective study was done in Malawi involving 57 patients that on average had started using PC1 20 weeks earlier. They showed significant improvement of all AIDS-related symptoms, including a much lower incidence of Malaria signifying the restoration of the immune system.

In 2006 a small pilot study was performed with permission of the prime minister and the minister of health in Bangui, Central African Republic. 27 patients were included and the results were similar to those observed in Malawi in 2004.

In 2007 the Amma Resonance Healing Foundation (ARHF) was established in the Netherlands. The ARHF focuses on research into the efficacy of PC1 and on making PC1 available to those that need it. The ARHF is a not-for-profit organization and makes PC1 available at the lowest possible price and for free in many situations. Peter Chappell has donated the rights of PC1 to the ARHF.

Studying PC1 Further

The ARHF has designed an epidemiological outcomes study to further investigate the efficacy of PC1 in HIV/AIDS. A multi-centre pilot is intended in Kenya and India, each including 30-50 patients. Dependent clinical variables will be appetite, weight gain/loss, fatigue, weakness/strength, general body pains and the Karnofsky Score (a measure of the patients overall physical health, judged by their level of activity) and will be followed up on a monthly basis. Dependent blood sample based variables will be CD4-8, CBC and Viral Load and will be measured at intake and after 1, 3 and 6 months. A follow-up epidemiological outcomes study including 300 patients and lasting 12 months is planned, to be followed by a comparative trial.

The exact way in which PC1 influences the immune system is subject of another study which the ARHF is preparing involving a leading immunologist.

PC1 and ARVs

PC1 before ARVs: Since PC1 has no side-effects it can be taken before the CD4 count drops that low that antiretroviral drugs would be indicated. If PC1 indeed increases CD4 counts it will postpone the time patients will need ARVs, thus adding to both the quality and quantity of life.

PC1 besides ARVs: Some patients already on ARVs only recover very slowly. Where ARVs reduce the amount of viruses in the blood quickly the CD4 count initially even drops down further and then restores very slowly. With PC1 the immune system is restored much quicker, making a combination of ARVs plus PC1 a win-win situation (subject of a future other study).

How to use PC1

PC1AF (for females) and PC1AM (for males) are provided by the ARHF as granules from which a dropper bottle or water bottle can be prepared for the patient.

For dropper bottles (made from 2 granules) - 555 (5 bangs, 5 drops, 5 seconds)

- Take once daily. Bang the bottle on a book or a wooden surface 5 times daily to activate and then immediately put 5 drops into a teaspoon, then into the mouth.

For water bottles (made from 2 granules) - 515 (5 bangs, 1 spoon, 5 seconds)

- Take once daily. Before taking the remedy bang the bottle on a book or a wooden surface 5 times. Take a teaspoonful directly from the bottle likewise into the mouth.

In both the above

- Keep it in the mouth, under the tongue, for at least 5 seconds before swallowing. Do not eat or drink just before and after taking it for 5 minutes.

Complete instructions for how to prepare and how to take PC1 can be downloaded at:
http://www.arhf.nl/docs/Instructions_for_PC1.pdf

More information at www.ARHF.nl - Request for free samples to info@ARHF.nl

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