The Application of SANUKEHL Serra in the Treatment of Restless Legs Syndrome and Multiple Sclerosos

by

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The SANUKEHL preparations manufactured by SANUM-Kehlbeck contain specific polysaccharides from the cell membrane of microbes (Schneider P.; 2001).

Due to their small molecule size they act as haptens or antigen absorbers in the organism (Cornelius, P.; 2001). In many cases the pathogenic toxins remain in the body even after the abatement of the infection and strongly compromise the function of the immune system. Conjugated antigens develop by their bonding with the toxins of the haptens contained in the SANUKEHL preparations. By activating the T-lymphocytes they can trigger an immune response. Thus the organism eliminates bacterial or fungal toxins.

The active agent of SANUKEHL Serra consists of cell membrane components of the bacteria type Serratia marcescens, an opportunistic pathogen with hospitalised patients (Hartmann, J.; 1998). During the last few years this Serratia type was diagnosed more and more frequently as trigger of nosocomial infections, i.e. infections acquired in the hospital, and isolated mostly in infections of the urinary tract, the respiratory tract or wounds, as well as in sepsis. Practice experience lets us assume that serratia toxins play a very significant role in different affections of the nervous system. Therapeutical success with SANUKEHL Serra in patients with restless legs syndrome, multiple sclerosis or polyneuropathy confirms this. A holistic therapy using different SANUM preparations, however, is the prerequisite for the healing process. This includes the restoration of the impaired intestinal flora and the acid-base balance (see below).

**Restless Legs Syndrome**

Restless Legs Syndrome mostly affects middle-aged women. Among the symptoms are dysaesthesia or paraesthesia mostly at rest or at night, affecting both upper and lower legs, as well as the need to move the legs. When occurring ideopathically, a neurologic examination may not show anything or point towards a polyneuropathic affection (Pschyrembel, 1998).

Restless legs syndrome is treated with the following i.m. injection cocktail, administered once or twice a week:

1 ampoule MUCOKEHL +
1 ampoule SANUKEHL Serra +
1 ampoule SANUVIS +
1 ampoule Cimicifuga comp. (Steigerwald), or
1 ampule Lycoaktin for patients with an inclination to hyperthyreosis.

MUCOKEHL is administered in changing potencies, depending on the reactivity. We frequently observe an initial improvement or deterioration within the first two to three days after the injection.

If the dark-field shows a paratuberculous trait, NIGERSAN may be added to the cocktail. The patient’s blood must be checked regularly, to initiate possibly necessary excretion procedures, or to vary the injection cocktail.

The following medicaments supplement the SANUM therapy of Restless Legs Syndrome:

*1 tablet Magnerot Classic Tbl. (Wörwag), mornings and nights,*
*1 dragée Milagamma 100 dragées (Wörwag), 1 – 2 times a day,*
*SANUVIS drops or tablets.*

The medicaments administered allopathically for Restless Legs Syndrome (Levodopa, Carbamazepin, Clonidine, Clonazepam, etc.) very frequently act as therapeutic blocks. These medicaments must be gradually and slowly discontinued to ensure the success of the therapy.

Patients who have not previously undergone allopathic treatment usually require a remarkably smaller number of injections.

**Polyneuropathy**

An affection of the peripheral nerves may be caused genetically. Polyneuropathies may also be caused by metabolic disturbances (diabetes mellitus, uraemia), malabsorption (celiac disease) or endocrine disorders (hyperthyreosis, acromegaly), or by infections like borreliosis or leprosy. Poisoning (mercury, lead, thallium), alcohol and medicaments also bring on the disorder. The most frequent type of the disorder is the diabetic and the alcoholic polyneuropathy (Pschyrembel, 1998). A therapy of polyneuropathy with SANUM preparations depends on the respective primary disease. It is
therefore mandatory for example with diabetes patients that the blood glucose value is optimally stabilized with insulin injections, oral antidiabetica or an appropriate diet. A thorough excretion therapy to rid the body of the reason for the polyneuropathy is required with toxic strains. The following injection cocktail is administered i. m. once a week as a supplement to the therapy of the respective primary disease:

1 ampoule MUCOKEHL 6X or 5X +
1 ampoule SANUKEHL Serra 5X +
1 ampoule SANUVIS.

**Multiple Sclerosis**

The cause of this primarily inflammatory disease of the CNS with focalised demyelization probably is an autoimmune process against myelin sheath antigens. Viral influences may possibly also take part in triggering the development of multiple sclerosis. The disease occurs in increased numbers with women between the ages of 20 and 40 (Pschyrembel, 1998).

The administration of SANUKEHL Serra to MS patients greatly contributes to improve the respective symptoms.

A combination with other SANUM preparations frequently leads to a shortening of the duration of the episodes as well as a partial or complete remission of the symptoms.

This requires a good reactivity of the patient, which means that the organism’s ability to regulate must be intact, as well as a strong and stable immune system.

The treatment of multiple sclerosis requires a particularly holistic approach, including the following:

Restoration of the acid-base balance with SANUVIS, CITROKEHL or ALKALA, immune modulation with UTILIN or UTILIN „S“, hapten therapy with SANUKEHL Serra, isopathic therapy with NOTAKEHL, QUENTAKEHL, etc., regulation of the symbiosis with FORTAKEHL or ALBICANSAN and PEFRAKEHL for intestinal fungi, excretion therapy.

The respective medicaments were administered according to the dark-field results. Regular examinations of the native blood by dark-field microscopy are mandatory for a successful treatment of multiple sclerosis.

The above-mentioned medicaments can be combined or supplemented as follows:

1 ampoule NOTAKEHL 7X, 6X or 5X +
1 ampoule QUENTAKEHL 6X or 5X or GRIFOKEHL 5X +
1 ampoule Engystol +
1 ampoule SANUKEHL Serra 5X i. m., once a week.

After the 3rd or 4th injection 1 ampoule UTILIN 6X or UTILIN „S“ 6X is added, which is injected separately. QUENTAKEHL can be replaced by GRIFOKEHL.

An initial improvement or deterioration within the first couple of days after the injections may occur as in the treatment of restless legs syndrome.

The therapeutic scheme above should - due to possible interaction - not be combined with an interferon therapy.

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