Patient’s Report of a Vaccination against HPV Infection

by Petra Śaśon, Heilpraktiker
History

A female patient, Mrs. J.K., 27 yrs. old, no children; during 2007 she had multiple throat infections - seven times over the course of the year, and these had all been treated with antibiotics by her G.P. During that year Mrs. K. got herself vaccinated with Gardasil® against HPV infection, for fear of developing cervical cancer. She had followed the example of a female friend who had also gotten the vaccination.

Up to the time of her vaccination all her PAP test results from gynecological check-ups had been unremarkable, and she had also tested negative for HPV.

Six months after the Gardasil® vaccination she had a gynecological examination, and the PAP test result had moved from I-II to III; at a follow-up test it had changed to III d. Now her HPV test, which had always been negative, came out positive. The patient was also complaining of recurring cystitis. As well as this, her right inguinal gland had swollen to the size of a pigeon’s egg. The orthodox advice from her gynecologist was to have laser treatment or maybe a cone biopsy.

My Own Investigations and Diagnoses

The patient came to me in November 2008 in this situation and with these gynecological test results. I examined the patient, and included tests with a Bioresonance device. Various disturbance factors showed up: chemical, heavy metal, fungal and vaccinial burdens, plus drug intolerances.

SANUM Treatment

- GRIFOKEHL 5X drops, 6 drops orally twice a day
- NOTAKEHL 5X drops 6 drops orally twice a day

This treatment was carried out over a period of four weeks. The patient also carried out vaginal douches. For this, 10 drops of GRIFOKEHL 5X were mixed with 10ml of 0.9% saline solution in a 10ml or 20ml syringe. The patient’s pelvis was elevated somewhat by placing two pillows beneath it, and the filled syringe (without needle) was introduced into the vagina and emptied. The patient then stayed with her pelvis elevated for at least 20-30 minutes, to allow the fluid to spread well over the mucosa. This douching was carried out every other day for four weeks.

In addition, I prescribed a blend of essential oils, formulated as follows:

- 100ml oil of St. John’s Wort.
- 80 drops ess. oil of Rose Geranium (BIOFRID Co.)
- 20 drops ess. oil of Bay (BIOFRID Co.)
- 30 drops Lymphomyosot® (Heel)

To eliminate the heavy metals I made use of PLEO CHELATE drops. Twice a day the patient was given 5-20 drops depending on the test results on her visits to my practice. The eliminative organs (liver and kidneys) were likewise supported in accordance with the individual Bioresonance test results. Regarding Spagyric medication, the remedies No. 8, 16 and 9 (Solutna Co.) were employed, and the homeopathic single remedies used were Pulsatilla 200C and Gelsemium 200C.

In June 2009 she had a check-up with her gynecologist to decide on the next stage of her treatment - laser, cone biopsy - and the PAP test result was I-II; she tested negative for HPV. The gynecologist’s report read as follows: Nothing abnormal detected, no further intervention required.

On June 24, 2010 she had a further gynecological examination, at which the established state of health was confirmed.

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