



Hepatitis A, B and C in Biological Medicine

by Petra Wiechel, M.D.



Nowadays inflammations of the liver are largely the result of infection by hepatitis viruses (A-E), coinciding with a weakening of the body by alcohol, food low in vital nutrients, drug-taking, long-term courses of medication and other assaults on the system.

Hepatitis is a modern-day example of dynamically altered viruses. It is only in a few people that hepatitis finds expression in its most aggressive form. Inflammation of the liver can be cured; however, it may change to become a chronic, benign inflammation, or may later become cirrhosis. Cirrhosis of the liver follows on from inflammations of the liver.

Almost 50% of all inflammations of the liver due to viruses are caused by hepatitis A. However, the prognosis is good. The hepatitis C virus directly destroys the liver cells, whereas it is assumed that, in hepatitis B, the viruses do not directly cause damage to the liver cells but trigger an auto-immune reaction, as a result of which all the cells infected by the hepatitis B virus are destroyed.

Both hepatitis A and B, plus C, are very susceptible to Biological treatment. Overall, as a result of having the pre-stages of viruses and bacteria in their bodies, human beings have good resistance, although these days it is substantially weakened. As an organ, the liver has over 500 human metabolic functions to perform, and if the acid-alkaline balance goes off the rails, if the redox balance is disordered, or if

the energy reserves are exhausted, then increasingly we see the liver subjected to metabolic overburdening.

Biological Medicine is a regulatory medicine. A viral assault on a human being by no means amounts to a viral illness! Given the body's regulatory capability, this by no means indicates the presence of symptoms or illnesses, as we can compensate for these over years.

Nonetheless, toxic burdens, over-acidification, stress, burdening with endobionts, electro-magnetic influences, constitutional weaknesses, food intolerances and more all result in a progressively reduced regulatory ability.

Forget about thinking in a linear, causal way (principle of cause-and-effect). Illnesses cannot be treated by restricting treatment to what is considered to be the cause, but rather by regarding the person as a totality. Prof. Enderlein said: „As we are all aware, medicine knows a great deal about diseases, but it knows nothing of life; the question of vital processes can never be answered via medicine, only via biology.“

Therefore, when hepatitis is suspected, it is most important to allow enough time to take the case properly. The main thing is to establish what the patient's lifestyle is, and thus to discover the burdens to which he is exposed; we must also find out about his eating habits and toxic burden.

Hepatitis A, B and C

- **Hepatitis A** proceeds harmlessly, leaving behind a lifelong immunity. It occurs only as an acute; chronic forms do not occur. Almost 90% of all 10-year-old children in the tropics and sub-tropics are immune to it. People travelling to the tropics or sub-tropics should take care to maintain optimum hygiene: „cook it, boil it, peel it or leave it!“
- By **Hepatitis B** we mean classic serum hepatitis. Patients describe stools which are light-coloured or colourless, dark-coloured urine, and they exhibit strong symptoms similar to those of influenza. This form of hepatitis is particularly widespread among prostitutes and drug-abusers. However, not everyone who is infected becomes ill. The disease only becomes chronic in 1% of those infected with hepatitis B. Acute hepatitis may progress to chronic hepatitis, fatty liver, cirrhosis of the liver and liver cancer.
- **Hepatitis C** occurs principally among heroin-addicts and is transmitted via infected syringes or cutlery. It progresses almost asymptotically, but may possibly be recognised as an infection; the incubation



period lasts from 20 to 60 days. However, in 70% this disease becomes chronic.

Progress, symptoms, diagnosis, orthodox treatment of hepatitis

Signs of an **acute hepatitis** attack are clear palpability of the liver beneath the right ribcage, swollen lymph nodes, and partial greenish-yellow discoloration of the skin.

Signs of **chronic hepatitis**, or of a diseased liver, are so-called spider naevi (star-shaped thread-veins), palmar erythema, café-au-lait patches on the skin and the occurrence of jaundice.

Laboratory analysis of hepatitis consists of an appropriate demonstration of the presence of hepatitis antigens before the onset of the clinical disease, or if there is infectiousness within 6 months. As well as hepatitis serology, laboratory tests are required: blood count, serum, iron, inflammation parameters and also a fatty acid profile.

Orthodox treatment includes Interferon and the virostatic Ribavirin. There is a 50-80% chance of success; the treatment is costly and has numerous side-effects.

Chronic hepatitis - Causes and holistic diagnosis

So what is it that favours progression to chronic hepatitis?

1. Antibiotics
2. Chronic heavy metal intoxication

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3. Deficiency of micro-nutrients

4. Long-term emotional stress

5. Dental infectious foci

6. Problems of malabsorption and intestinal disorders which weaken the immune system

7. Foodstuffs containing preservatives

8. Disordered fat metabolism: The unfavourable ratio of omega fatty acids involves a risk. Thus, in all chronic illnesses, the omega-3- and omega-6-fatty acid levels should be established and the missing unsaturated fatty acids should be supplied orally. Omega-6-fatty acids, polyunsaturated such as Linoleic acid and Linolenic Arachidonic acid, are found in vegetable oils such as thistle, maize or sunflower oils. Where there is an omega-3 deficiency and an excess of omega-6-fatty acids, the inflammatory tendency in the organism rises drastically. Chemically there is only a slight difference between omega-3- and omega-6-fatty acids; however, in their action they are in competition, for they both require the same enzymes for their conversion. Should one of the two fatty acid groups be predominant, then it displaces the other, thus weakening its spectrum of action. Nowadays, generally speaking, as a result of the change in eating habits, the 1:20 relationship of omega-3- to omega-6-fatty acids is too wide. (1:5 is the norm). This results in inflammatory hormones being formed in the tissues, with chronic inflammatory illnesses as a consequence; there is also an

increased risk of cardiovascular disease. Rapeseed and olive oils contain small concentrations of omega-6-fatty acids. Rapeseed oil contains a great deal of alpha-Linolenic acid. Adequate quantities of omega-3-fatty acids are found in linseed and hemp oils, and also in cold-water fish (mackerel, herring, salmon). A relative deficiency of unsaturated fatty acids may bring about a reduction in membrane-fluidity. As a consequence, hormones such as oestrogen, progesterone and angiotensin cling more strongly to the membrane receptors, whilst the receptor capacity for insulin and serotonin decreases. This may be associated with diseases such as breast cancer, premenstrual syndrome, hypertension, diabetes mellitus and depression. In such cases, unsaturated fatty acids increase the fluidity of the cell membranes, and their functionality, thus guaranteeing an optimum cell metabolism.

Computerised Regulatory Thermography (CRT) is an appropriate part of holistic biological diagnosis.

By means of changes in skin temperature of the rapidly-reacting sensors at multiple prescribed measuring points, and after a corresponding cooling-off period, the test results can be compared with neuronal autonomic reactions.

This results in an optimum picture of the organism's regulatory capability.

Thus Regulatory Thermography covers a further diagnostic area, even though a person may still



be feeling well, both physically and mentally. At the onset of a loss of vitality, functional organic disorders, sleep disturbance, fatigue syndrome, where no organic manifestations of any kind are visible, nor anything becoming chronic, Regulatory Thermography can provide information regarding regional disorders.

The diagnosis of Disturbance Fields is of great importance in the analysis of further causes resulting in chronic hepatitis. So long as disordering factors are not eliminated, then in many cases successful treatment, especially of chronic diseases, is impossible.

Very often it is our experience that dental foci of infection and chronic disease are closely interlinked; therefore in our practice every patient with complex or difficult health problems is given a thorough dental examination. This enables us to detect toxic stress, the presence of dead teeth, and also toxic and galvanic disorders causing systemic irritation via the meridians.

Dead teeth have extremely toxic effects. At the moment when the tooth dies, its pulp decays and necrotises; products of decomposition are formed, causing a reaction of the leucocytes. Decomposed proteins, known as cadaver proteins or siphonospora, from dead teeth are toxic (sulphurous toxins). This makes every root-canal-treated tooth a bacterial focus.

With regard to hepatitis, pay particular attention to the route of the Liver-Gallbladder meridian; in

this respect special attention needs to be paid to the following teeth: upper right 3, upper left 3, lower left 3 and lower right 3.

We should look with particular care at root-canal-treated teeth, since every organism varies in its ability to compensate for disturbance fields which may be present.

Furthermore, in Disturbance Field diagnosis, pay attention to scars; these play an important role and may block the liver meridian.

Toxic metals in the mouth (amalgam, Mercury, Lead, Copper, Tin, Zinc) result in far-reaching damage to the cells in the long term.

Mercury and Lead block the combining sites of Zinc and Selenium, thus giving rise to a Zinc and Selenium deficiency.

All over the body Zinc plays a part in numerous functions, and there is hardly a significant disease picture in which a disordered Zinc economy does not play an important part. Thus it is a multi-talented player, as well as an important anti-oxidant. Zinc is an important antagonist as far as heavy metal stress is concerned, and plays a major role especially where inflammatory tendencies are involved.

Selenium is an indispensable component of the enzyme Glutathione peroxidase, thus acting as a cell-protection factor in the face of aggressive, activated forms of oxygen which form under external influences: environmental toxins, radiation and smoking. It

stimulates the production of antibodies in general, and particularly of the IgG immunoglobulins. It stimulates the formation of gamma interferons and of tumour necrosis factor.

As part of Heavy Metal diagnosis we use the intravenous DMPS Test (Dimaval test). By injecting intravenously 3 mg DMPS per kg of body weight, a reproducible test result can be obtained which provides an optimum diagnosis of compounds of both Lead and Mercury.

Further investigations in the area of Heavy Metal diagnostics can be achieved by means of Hair Mineral Analysis.

Darkfield Microscopy provides a very good indication of the milieu situation in the blood; as part of liver disease the dark-field image shows, among other things, a so-called honeycomb phenomenon, i.e. on account of the very slight surface potentials the erythrocytes appear in a honeycomb-like formation.

Stool analysis forms part of the diagnosis, with the following being of critical importance: investigation of the intestinal flora status, alpha-antitrypsin, secretory IgA, elastase in the stool, investigation of candida infestation and of delayed digestion.

Intestinal diagnosis occupies a pivotal position in holistic biological practice.

The gut, as the seat of the greater part of the immune system, supports a significant part of the human being's health stability. It follows



that, if the intestinal milieu goes off the rails, a food allergy will result. Failure to pay attention to a food intolerance, an intestinal flora that is weak or developing in a wrong direction, dietary errors and toxic burdens - all these result in augmented over-acidification of the organism, thus placing tissue metabolism under strain.

Bio-terrain analysis (BTA) is a diagnostic tool for the milieu, in which the blood investigation serves as an immunity factor, the saliva as a reflection of metabolism, and the urine as a measurement of the acid-alkaline balance. By means of the BTA, pronouncements can be made regarding the electrical

resistance, the pH level and the redox potential.

Changes in the milieu offer an optimum breeding ground for territorial derailment and thus a tendency for illness to become chronic. For example, if the blood departs from its normal pH level of 7.3-7.43, the result will be an increased agglutination of the

Week 1	Week 2	Week 3	Week 4	Week 5	Week 6
Daily dosage NOTAKEHL 5X tablets, 1 tablet 3 times a day or NOTAKEHL 5X drops, 10 drops 3 times a day	Daily dosage NOTAKEHL 5X tablets, 1 tablet 3 times a day or NOTAKEHL 5X drops, 10 drops 3 times a day	Daily dosage NOTAKEHL 5X tablets, 1 tablet 3 times a day or NOTAKEHL 5X drops, 10 drops 3 times a day			
	Daily dosage Pefrakehl 4X capsules 1 capsule once a day or Pefrakehl 5X drops, 10 drops 3 times a day	Daily dosage Pefrakehl 4X capsules 1 capsule once a day or Pefrakehl 5X drops, 10 drops 3 times a day Daily dosage Sankombi 5X drops, 10 drops 3 times a day	Daily dosage Pefrakehl 4X capsules 1 capsule once a day or Pefrakehl 5X drops, 10 drops 3 times a day Daily dosage Sankombi 5X drops, 10 drops 3 times a day	Daily dosage Sankombi 5X drops, 10 drops 3 times a day	Over several months: Sankombi, 10 drops 3 times a day
Weekly dosage Utilin 6X capsules Recarcin 6X capsules 1 capsule of each Daily dosage Rebas 4X capsules, 1 capsule 3 times a day Daily dosage Glutamin Burgerstein 2 grams twice a day	Weekly dosage Utilin 6X capsules Recarcin 6X capsules 1 capsule of each Daily dosage Rebas 4X capsules, 1 capsule 3 times a day Daily dosage Glutamin Burgerstein 2 grams twice a day	Weekly dosage Utilin 6X capsules Recarcin 6X capsules 1 capsule of each Daily dosage Rebas 4X capsules, 1 capsule 3 times a day Daily dosage Glutamin Burgerstein 2 grams twice a day	Weekly dosage Utilin 6X capsules Recarcin 6X capsules 1 capsule of each Repeat after a break of 2 months Repeat after a break of 6 weeks	Weekly dosage Utilin 6X capsules Recarcin 6X capsules 1 capsule of each	Over several months: Utilin 6X capsules Recarcin 6X capsules, 1 capsule of each

Table 1: Building up the Intestinal Flora and Mucosa; from Dr. Rau: „Biological Medicine: the Future of Natural Healing“; Pg. 528 (1st ed. 2011; Semmelweis Institut; D-27318 Hoya. ISBN 978-3-925524-64-6)



erythrocytes, resulting in turn in cellular hypoxia.

Biological Treatment of Hepatitis

Having completed our diagnosis of chronic hepatitis we come to its treatment. Hepatitis A proceeds harmlessly as an acute illness, although the symptoms persist a relatively long time. We recommend bed rest, liver compresses and mineral laxatives to aid elimination, thus combatting the secondary stress on the liver.

For those undertaking long journeys overseas, we recommend inclusion of the following in their medicine kit: OKOUBASAN 2X, 10 drops 3 times a day, NOTAKEHL 5X, 1 tablet 3-6 times a day; for any infectious illness, whether viral or bacterial, REBAS 4X, 1 capsule 3 times a day.

Any treatment of hepatitis commences by improving the metabolism of the liver cells. Neural Therapy once or twice a week in the liver segment below the right rib-cage. The following is a selection of possible ampoules:

- Heparheel (after 4 weeks: Hepar suis compositum) (Heel)
- Coenzyme compositum (Heel)
- MUCOKEHL Atox 6X
- Vitamin B complex Sanum N
- Folsäure-Injektions (Pascoe) [= Folic acid]
- Procaine 1%

As medication to be taken orally, we recommend:

- Liv 52 (Himalaya Herbal Healthcare) 2 tablets 3 times a day
- Carduus marianus Ceres 5 drops 3 times a day
- MUSCARSAN 6X tablets, 1 twice a day, or MUSCARSAN 6X drops, 10 twice a day
- PINIKEHL 4X capsules, 1 twice a day
- Selenium 100mcg, 1 a day
- Antiox (Burgerstein), 1 once a day.

The cell metabolism is supported by Glutamin 500 mg, for detoxification and excretion of ammonia.

For further improvement of the cell metabolism we recommend infusions twice a week, consisting of:

- Ringer's lactate solution, plus 7.5 g Vitamin C,
- Hepar suis compositum (Heel) to detoxify the liver
- Ubiquinone comp. (Heel) to supply energy
- Taraxacum comp. (Heel) and
- Magnesium

In all cases of intracellular damage during the Impregnation, Degeneration and Neoplasia phases, once a month an

intravenous infusion is carried out with all the substances of the Citric acid Cycle A in 250 ml Ringer's lactate solution and its derivatives.

The constituents of the Citric acid Cycle A can also be administered intramuscularly (see the Heel Company's compendium).

Good results in the treatment of hepatitis can also be achieved using the auto-isopathic blood treatment in stages, with:

1. Engystol
2. Heparheel and Carduus marianus
3. Hepar suis comp.
4. Ubiquinone comp. (all from Heel)

As well as this, the intestinal flora and mucosa must be built up, following the plan set out in Table 1.

Colon Hydrotherapy (Colonic Irrigation) should be administered over 8-10 times, twice a week; this activates the parasympathetic nervous system, stimulates the regeneration of the organs, and also stimulates hormone production (especially testosterone, progesterone, melatonin) and also de-stresses the gut.

Following the motto: „The way to health is via the kitchen, not the pharmacy“, the following treatment plan has proved its worth: these nutritional recommendations should be adhered to during a long-term hepatitis treatment:



- total abstinence from alcohol
- avoidance of cow's milk products
- nothing made from wheat flour
- no proprietary fats
- drastic reduction of carbohydrate intake
- plenty of energy-rich foods

Ozone therapy and Hæmatogenous Oxidation Therapy (HOT) result in a significant improvement in the micro-circulation, thus contributing to an improved regenerative tendency.

Finally I will mention Mistletoe therapy, which we integrate into the treatment. Liver compresses are also important as an adjunctive measure. The symptom picture of hepatitis, with its complexity of diagnostic and therapeutic procedures, makes great demands on the doctor or therapist who is treating it.

Nonetheless the same is true here as in the case of cancer: the pathway of prevention is the most honorable one; timely care and awareness in one's lifestyle are the guarantors of prevention.

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