

Abstracts

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ON THE BI-DIGITAL O-RING TEST**

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**INTERNATIONAL COLLEGE OF ACUPUNCTURE &
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O-RING TEST LIFE SCIENCE RESEARCH INSTITUTE

- A) Interrelationship between Normal Cell Telomere & Cancer Cell Telomere.**
B) Effects of Increasing Normal Cell Telomere to Optimally High Level on Anti-Cancer, Anti-Aging, Anti-Alzheimer's Disease, Anti-Myocardial Disease, & Anti-Pain.
C) Advantage & Disadvantage of 14 Different Methods of Increasing Normal Cell Telomere Discovered by the Author.

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ABSTRACT

The clinical significance & causes of extremely low normal cell telomere (1 yg = 10^{-24} g BDORT units which is practically zero), must be investigated by first eliminating the following 5 main factor in order of importance: 1) Cancer and other malignancies; 2) Bacterial, viral, and fungal infections; 3) Electromagnetic field exposure; 4) Wearing Bi-Digital O-Ring Test negative undergarments or eyeglasses, watches, necklaces, earrings, metal rings on fingers etc.; 5) Ingestion or inhalation of toxic substance. In the presence of cancer, cancer cell telomere is always very high and normal cell telomere is frequently very low and close to 1 yg or less. However, the author discovered that when normal cell telomere is increased to over 400 or 500 ng BDORT units, cancer cell telomere reduces very significantly and often becomes close to 1 yg. Thus, cell division of the cancer is inhibited. Our study indicated that when normal cell telomere is significantly increased, not only will cancer cell telomere be reduced very significantly, but also it significantly improves general body circulation, including skin, heart, brain, pancreas, kidney & Adrenal gland, and excretes large amounts of excessive undesirable metals (Hg, Pb, Al), Asbestos, bacteria, fungi and viruses continuously into urine while high telomere is maintained. Infection from bacteria (such as Chlamydia Trachomatis) or viruses (such as Cytomegalovirus) can be reduced to 1/10 ~ 1/100 without using antibiotics or anti-viral agent. Asbestos also reduces to 1/10 ~ 1/100 by excretion into urine. Since Asbestos is not water soluble, no blood test was available, but using Bi-Digital O-Ring Test Electro-magnetic field resonance phenomenon between 2 identical molecules, we are able to detect Asbestos of inside of body non-invasively and our study revealed that Asbestos is increased in all kinds of

cancer tissue (often 0.14 mg BDORT unit or higher while in normal tissue, it is less than 0.0005mg BDORT units), not but, Alzheimer's disease, Autism, and many cardiovascular diseases. As a consequence, skin becomes elastic and younger with decreased wrinkles and some change of white hair to dark hair or disappearance of old age spots of skin. As a result, by increasing normal cell telomere over 400 or 500ng BDORT units and maintaining high telomere, one can obtain an anti-cancer, anti-Alzheimer, anti-aging, anti-cardiovascular & anti-pain effects etc. The author also discovered the following 14 different methods for increasing normal cell telomere, and will discuss some of the advantages and disadvantages of these methods: 1) Press-needle stimulation of True ST 36 (Omura's ST 36)(normal cell telomere can be increased any where between 300 ~ 1000 ng BDORT units); 2) One optimal dose of DHEA (one optimal dose increases normal cell telomere 525 BDORT units) ; 3) One optimal dose of Astragalus (increase normal cell telomere 650 ng BDORT units); 4) One optimal dose of Boswellia Serrata (increase normal cell telomere 650 ng BDORT units); 5) Eating raw bitter melon (30 ~ 50g) every 4 hours (increase normal cell telomere 300 ~ 600 ng BDORT units); 6) Eating curry (2g) for each meal (increase normal cell telomere 300 ~ 600 ng BDORT units); 7) Eating certain fruits; 8) Eating certain fishes; 9) External application of "Godanum-like metal (external application of one small piece at each side of body increased normal cell telomere 225 ng BDORT units and increase total 450ng BDORT units with both side application. With special technique, normal cell telomere can be increased up to 900 ng BDORT unit)"; 10) External application of EMF neutralizer; 11) External application of "Carbon Micro-Coils (CMC)" of Prof. Seiji Motojima distributed in small sheet of plastic synthetic fibers. 12) External applications of white powder made from small rectangular shaped white pearls or external application of multiple small rectangular pearls without making powder; 13) External application of (+) Special Solar Energy stored white index card during short time immediately after sun set or immediately before sun rise (Increase of normal cell telomere by application on one side of body is usually 100 ~ 200 ng BDORT units depending on intensities of Far Infra-Red light & exposure time duration & volume, surface area & components of the index card and increase is 200 ~ 400 ng BDORT units by application at right & left side of body. Our recent research indicated that by proper series of external application of additional solar energy stored index cards, normal cell telomere can be increased at least 800 ng BDORT units. Application time on patient's pathological area is less than 1 min. 14) External application of (+) Qigong energy stored paper (increase of normal cell telomere is similar to (+) Solar energy stored paper, but less increase than (+) Solar energy stored paper). Application time of the same (+) Qigong energy stored paper on the pathological part of body is 1 ~ 6 hours.

Significant Beneficial Effects of the External Application of (+) Solar energy Stored Paper Made During Short Time before Sunrise or Short Time After Sunset on Various Intractable Medical Problems Including Circulatory Disturbance Associated with Slow Wound Healing, Chronic Pain, Alzheimer's Disease & Various Cancers, with minimum Medical Expenses & without Side Effects

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ABSTRACT

When sky has very little cloud at horizon, Solar energy was stored in a pile of 100 Sheets of 3 inches × 5 inches white index cards during short time duration of 3 – 5 min immediately after Sun Set or 3 ~ 5 min immediately before Sun Rise while reddish light has Bi-Digital O-Ring Test strong positive response and during radiation count from Geiger Counter is relatively low compared with count before and after this Bi-Digital O-Ring Test strong positive period. Index card facing redish part of sun light has strong Bi-Digital O-Ring Test (+) response and opposite side of the same card has strong negative (-) response. Intensity of 1st index card & 100th index card is almost same; our previous studies on the effects of external application of (+) Solar energy stored index card on various clinical cases with different medical problems indicated followings,

1) Reduce or eliminate intractable pain within 5 ~ 30 min with very significant reduction of the amount of Substance P (which is increased in painful area) and reduction of Thromboxane B2 (which is increased in the painful area with circulatory disturbance).

2) In Alzheimer's patients, β -Amyloid (1-42) in Hippocampus of brain is always increased from normal value of less than 1.5 ng to 7 ng BDORT units or higher

with increased deposit of Al and Asbestos (which we always found increased from normal value of less than 0.005 mg to 0.14 mg BDORT units or higher in Alzheimer's patients brain, particularly at Hippocampus area). By the application of (+) Solar Energy stored 3 inch × 5 inch size of white index card on the skin of head above Hippocampus are (which has round shape of about 25 ¢ US Coin or size of 500 Yen Japanese Coin, where short term memory is formed) of Alzheimer's patients' head and surrounding area of Hippocampus at both side of the patients head, following changes were observed.

2-1. β -Amyloid (1-42) reduced from abnormally increased 7 ng BDORT units or higher value in advanced care to normal value of less than 1 ng BDORT units, within 1 hour.

2-2. Al reduced from abnormally high deposit of 30 mg BDORT units or higher value to less than 0.1 mg BDORT units, within 1 hour.

2-3. Asbestos (often Chrysotile Asbestos known as White Asbestos) reduced from abnormally increased 0.14 mg or higher value to less than 0.005 mg BDORT units, within 1 hour.

2-4. Strong Chlamydia Trachomatis infections of brain & rest of body with abnormally high value of 3000 ng – 5000 ng BDORT units reduces to less than 50 ng BDORT units within 1 hour, without using any effective antibiotics.

2-5. Strong Cytomegalovirus infection of brain & rest of body with 2000 ng – 3000 ng BDORT units reduces to less than 100 ng BDORT units within 1 hour, without using any anti-viral agents.

2-6. Large amount of β -Amyloid (1-42), Al, Asbestos, Chlamydia trachomatis, CMV are excreted continuously in the urine when normal cell telomere is about 400 ng or higher. Application of (+) Solar Energy stored index card at both right & left sides of body, increased normal cell telomere to 400 ng (with 200 ng increase in normal cell telomere by each side of application). The author discovered more than 10 methods of increasing reduced normal cell telomere to over 400 – 900 ng.

2-7. Above highly beneficial 6 phenomena were observed by application of one (+) solar energy stored paper on each side of Hippocampus of Alzheimer's patient, but significant improvement of short term memory was observed only within 1st 3 years after diagnosis was established. In Alzheimer's patient with more than 3 – 5 years has passed, even above 6 beneficial changes were observed very little clinical improvements were observed, due to already established neuron destructions.

3) Effects of External Application of (+) Solar Energy stored white index card on breast cancers, prostate cancers, colon cancers are summarized by the followings:

3-1. When normal cell telomere is increased to 400 ng BDORT units or higher, abnormally increased Oncogene C-fos Ab2 & Integrin $\alpha_5\beta_1$ in cancer tissues of between 1000ng ~ 50 ng became 15 ng ~ near 1 yg(= 10^{-24} g) which is practically zero and cancer cell activity is often inhibited for 1 day ~ 5 weeks, when the paper is exposed to strong redish light for 3 ~ 5 min and beneficial effect often last 4 hours ~ 1 weeks when the paper is exposed to the beneficial redish sun light for less than 2.5 min.

3-2. When normal cell telomere is increased to 400 ng BDORT units or higher, extremely high cancer cell telomere of 1500 ng ~ 300 ng BDORT units reduces to 15 ng ~ near 1 yg(= 10^{-24} g) (which is practically 0) and cancer cell activity is inhibited since cancer cell cannot divide when cancer cell telomere is very low. This effect often last 3 days ~ 5 weeks, when the index card is exposed to this special redish sun light for 4 ~ 5 min. in the absence of obstructing cloud.

Beneficial effect often last 4 hours ~ 1 week, when it is exposed less than 2.5 min. However beneficial effects can be enhanced by applying more than 1 index card at the same time. Depending on various factors, external application of one or small part of solar energy exposed index card on one side of body can increase normal cell telomere to one of 5 possible values among 100 ng, 125 ng, 150 ng, 175 ng or 200 ng BDORT units. By proper combination of a series of external application of (+) Solar energy exposed index card o different parts of human body, normal cell telomere can be increased 800 ng BDORT units. If this high telomere can be maintained long time, it's clinical application will be unlimited.

4-1. Most of commercially available so-called Infra-Red Telescope & cameras are using Near Infra-Red spectra with wave length between 700 nm ~ 3 μ m. Near Infra-Red has no deep penetrating power and therefore, it cannot go through 100 sheets of white index card and store equal energy. Furthermore with several products of so called Infra-Red Telescope & cameras the author evaluated, we could not see or record Far Infra-Red energy generated from commercially available portable therapeutic Far Infra-Red generator which emit about 5 ~ 15 μ m wave length. This wave length of 5 ~ 15 μ m is invisible to our eyes, but can feel very warm or hot when this portable Far Infra-Red generator is directed to our body surface. Similarly we could not see or record near infra-red energy from the Solar

energy stored white index card, because these instrument can only detect near Infra-Red spectra of less than 3 μm , but not far Infra-Red of 5 ~ 15 μm .

4-2. These (+) solar energy stored paper's deep penetrating effects through 100 index cards or through human skin & muscle tissues can be obtained only by Far Infra-Red spectral range of 5 ~ 20 μm wave length.

4-3. Using commercially available portable Far Infra-Red generator with spectral range of about 5 – 15 μm , the author also succeeded in storing its beneficial energy throughout 1 package of 100 sheets of 3 inches \times 5 inches white index cards and they also showed similar but mild beneficial effect, but (+) solar energy stored paper had much stronger clinical beneficial effects. These findings strongly support that beneficial effect of these solar energy stored paper is most likely due to Far Infra-Red spectra of 5 ~ 15 μm + α .

4-4. Since medical expenses for pain medicines with its potential serious side effects & Alzheimer's disease is a significant part of financial burden of patient's family and our government, this simple inexpensive method of using (+) solar energy stored paper with no known side effects may save lot of medical expenses and solves or reduce patient's medical problems. This highly beneficial effects of Far Infra-Red spectral range of 5 ~ 15 μm with strong tissue penetration effect (through thick body tissue as well as through 100 sheets of white index cards) and normal cell telomere increasing effect is often missing factors from current practice of medicine due to lack of understanding of above described phenomena. It should be important supplemental clinical armamentum along with national policy of many nations using efficient solar energy conversion to Electricity as clean economical source of future energy supply.

**Diagnosis using Facial & Other Organ Representation
Localized by Bi-Digital O-Ring Test Resonance Phenomenon
Between 2 Identical Tissues.**

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ABSTRACT

Non-Invasive diagnosis by visual inspection of the face (including nose, eyebrows, and lips), surface & underside of the tongue, head, ears, hands, & feet, localized by using Bi-Digital O-Ring Test utilizing pathogenomonic findings such as deep indentation, crease, or discoloration appearing at the specific organ representation area.

**Diagnosis & Treatment of Intractable Medical Problems using Bi-Digital
O-Ring Test Evaluation of Right & Left Mouth-Writings,
Hand Writings & Foot Writings as One Page Form, and ECGs with Invisible
Changes at “Vulnerable Period” of T-waves**

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ABSTRACT

As non-Invasive, quick diagnosis, & safe, effective treatment of intractable medical problems (including cancers, Alzheimer's disease, autisms & cardiovascular diseases) using Bi-Digital O-Ring Test, our previous approach was using red spectrum-laser beam scanning of 4 points at hands and feet plus additional 4 points at both ears, supra-sternal notch and naval, to detect each disease's specific molecules at any part of the body using specific marker per specific disease. If disease specific marker is positive, whole body surface is scanned by projecting red spectral laser line but this method required too much time & effort of both examiners and patients with their body surface exposed. However, the most recent approach is to use mouth, hand, and foot writings of right and left sides of the body, and evaluating these 6 writings with Bi-Digital O-Ring Test Resonance Phenomenon between 2 identical molecules. With this method it is often possible to detect most of the diseases at any part of the body with minimal time and expenses even when standard laboratory tests (such as X-ray, CT scan, MRI, PET scan, and blood chemistry) fail to detect intractable medical problems including early stage of cancers. The 1-page Right- & Left-Mouth, Hand, & Foot Writing Form serves as a permanent medical record and any additional invisible medical information can be extracted from this same 1-page chart. The chart contains these writings before and after treatment for evaluation of the therapeutic effect of specific treatments. Ideally, every abnormality found by the analysis of the chart should be confirmed by standard laboratory tests, although, standard laboratory tests often fails to detect very early stages of most malignant tumor until size of tumor became 1 or 2mm. With ECG recordings, in the absence of visible abnormal ECG patterns. Early abnormal change and corresponding increase in Cardiac Troponin I can be detected at “Vulnerable Period” of rising part of T-waves of ECG by the Bi-Digital O-Ring Test.

Cancer & Cardiac Troponin I Promoting Effects of Wearing Metal Ring on Fingers & Other Parts of Body and How to Solve These Medical Problems.

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ABSTRACT

Our previous clinical studies suggested that those people wearing metal ring on finger as Wedding Ring or School Ring have high incidence of heart disease & chest pain.

Our recent study using Mouth-Writing, Hand-Writing & Foot-Writing of Right & Left sides of body on same subjects with and without metal Ring clearly demonstrated the following new findings:

1. Wearing Metal Ring on fingers, particularly on 4th & 5th fingers increased Cardiac Troponin I very significantly from normal values of less than 1.0 ~ 1.5 ng BDORT Units to 7 ~ 14 ng which is potentially danger for sudden cardiac death. In addition, reduction of normal cell telomere and significant DHEA reduction with increase in cancer telomere were observed.
2. This increase in Cardiac Troponin I was most significant during “Vulnerable Period” for Ventricular Fibrillation exist during last 1/3 of rising part of ECG with or without visible ECG changes.
3. In patient with various cancers (Including common cancers such as breast cancers, prostate cancer), wearing metal Ring on fingers, particularly 4th & 5th Finger increased Integrin $\alpha 5\beta 1$ or Oncogene C-fos Ab2 to 4 ~ 12 times. Since they increase in the presence of most cancers, it will promote growth of cancer 4 ~ 12 times.
4. Removing these metal ring reversed above abnormality to pre-metal Ring level.
5. When the same Metal Ring is cut and empty space of about 1mm is kept and wearing such cut Metal Ring on 4th or 5th finger, not only all the above described undesirable cardiac toxic effect and cancer promoting effects will be eliminated, but also additional desirable positive responses were also observed.
6. Similar effects was also observed with wearing Wrist Metal Rings without cut &, Earrings & Some Necklaces with continuous one metal.

COMPARATIVE STUDIES OF MUSCLES INVOLVED IN BI-DIGITAL O-RING TEST (BDORT)

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ABSTRACT

The muscles employed in Bi-Digital O-Ring Test involve both the long muscles as well as the short muscles whether it is one person ORT or two person ORT, or whether it is a direct or indirect method, both long and short, muscles are being used in performing BDORT. Nevertheless, in two person BDORT, the long muscles of the doctor-tester plays a major role and as the short muscles play a minor role, whereas the short muscles of the intermediate plays a major role and the long muscles, a minor role. In one person ORT, regardless whether the fingers wrapping around the outside of the O-Ring formed by another hand, or inserted within the O-Ring, the major role is played by the short muscles mostly adjacent to the hand, whereas, the long muscles play a minor role.

My studies showed that:

In two person BDORT some muscles, especially in the shoulder area are needed pull the O-Ring apart while some other muscles are for maintaining the arm below the horizontal plane (45 degree angle). The major muscles used by the tester-doctor are: Anconeus, triceps, biceps, teres major and minor, deltoid, coracobrachialis, pectoris major and minor, latissimus dorsi, brachioradialis, teres major and minor, extensor carpi radialis, extensor carpi ulnaris, trapezius, latissimus dorsi. (Fig. 1 * 2*)

The muscles of the forearm are mostly involved in stabilizing the thumb and index finger used to pull to open the O-ring formed by the intermediate. They are: Abductor pollicis brevis, tendons of flexors superficialis and profundus, abductor pollicis and flexor digiti minimi, adductor pollicis, flexor digitorum superficialis, first dorsal interosseous. (Fig. 3)

The muscles involved in the intermediate person for the indirect method or by the patient in the direct method that form the O Ring are: abductor pollicis, flexor pollicis brevis, and flexors digitorum superficialis and profundus, palmaris brevis, palmar aponeurosis, flexor retinaculum, flexor carpi ulnaris (Fig. 4 **)

For one person BDORT: the short muscles of both hands play a major role whereas, the long muscles of both arms play a minor role just as the intermediate person of the indirect method that keep the arms at the plane of a certain angle.

(1) for those who wrap the fingers outside and around the O-Ring formed by another hand (such as done by many dentists) the muscles involved the outside hand embracing the O-Ring formed by another hand are: Flexor digitorum sublimis and superficialis, lumbricals, interossei adductor pollicis, flexors digitorum superficialis and profundus flexor retinaculum; flexor pollicis longus, opponens pollicis, opponens digiti minimi. The long muscles involved are flexors carpi ulnaris and radialis, flexor digitorum superficialis (Fig. 4) The reason why dentists use a completely different style other than what physicians is that many dentists during many years of practicing dentistry have developed a powerful grasping strength on their fingers during extraction of teeth, and many dentists develop their strong grasping force of the forceps to extract teeth. Therefore their adductor muscles are much stronger than abductor muscles and flexors are stronger than extensors. It can be explained with similar grasping force, such as the masticating force of an alligator or crocodile. The muscles used to close down the jaws are much more powerful than the muscles to open the jaw. Similar is the closing and grasping strength of a dentist's hands.

2. For those (as most physicians) whose fingers inserted within the O-Ring to open it involves: abductors pollicis brevis and longus, extensor tendons, extensor retinaculum, abductor digiti minimi, extensors pollicis longus and brevis, extensor digiti minimi, extensor indicis. The long muscles involved are: supinator, pronator, quadratus, anconeus, extensor carpi ulnaris, flexor carpi radialis and ulnaris. (Fig.5)

For BDORT to be performed correctly, the muscles, with their nerve supply, of shoulders, arms and hands and fingers should be in a relatively normal state, the neck muscles should also be included in the evaluation for BDORT. C4, C5, C6, C7, C8, and T1, T2, and their branches have a lot to do with performing BDORT (Fig. 6), either with one person or two person BDORT. Median nerve or ulnar nerve and radial nerve should be within functional normal range.

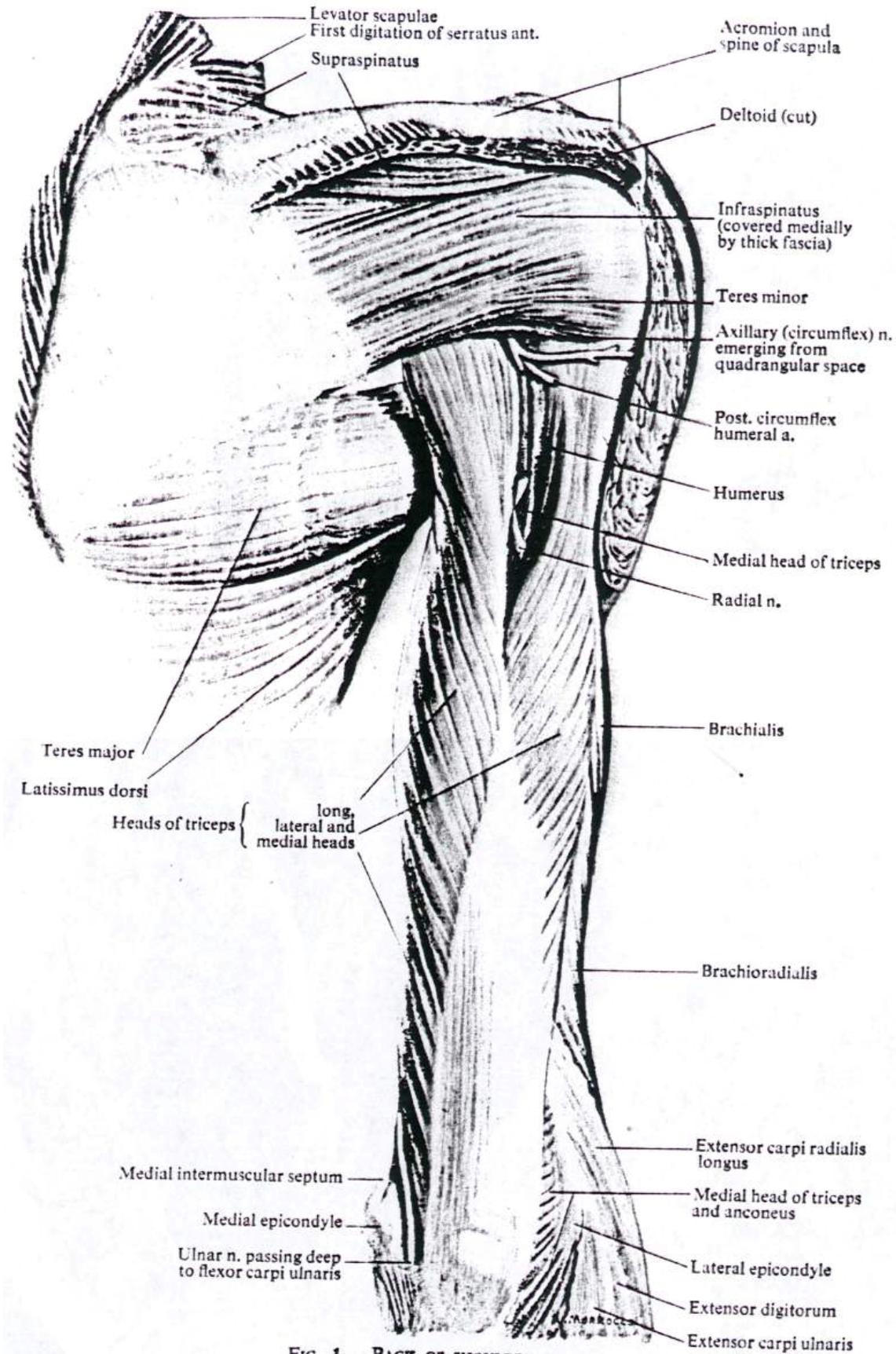
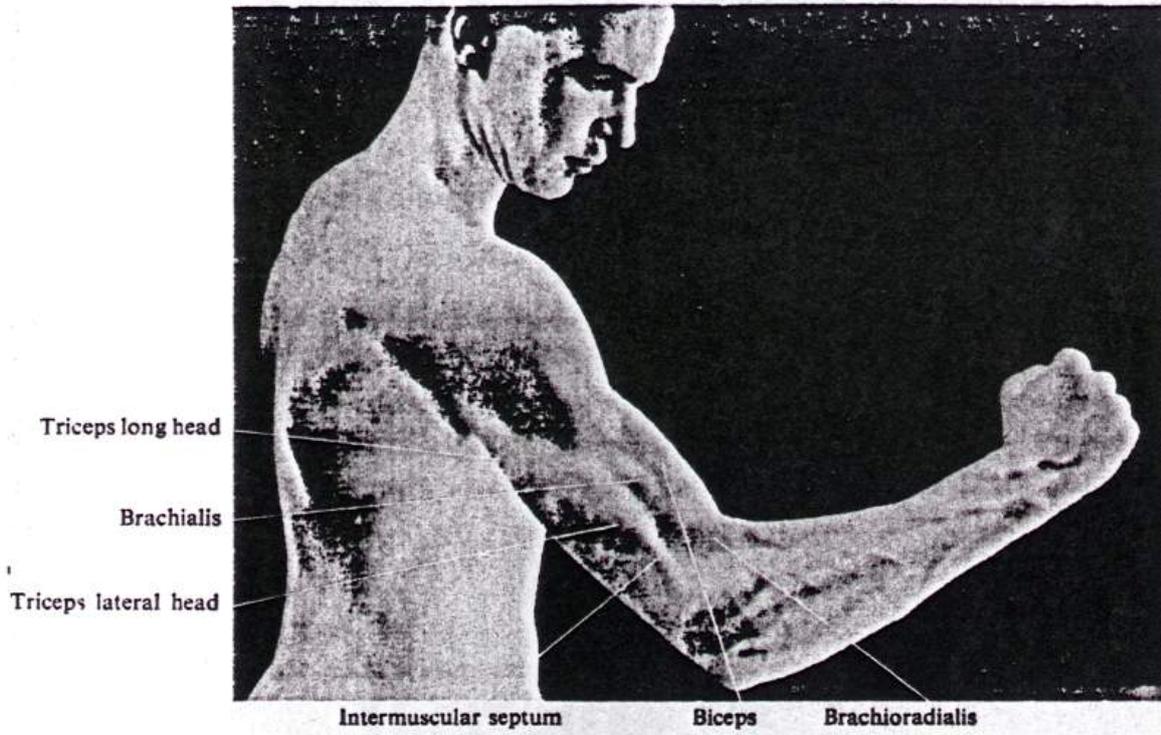


FIG. 1. BACK OF SHOULDER AND ARM

FIG. 2. MUSCLES OF UPPER ARM



MUSCLES OF FOREARM

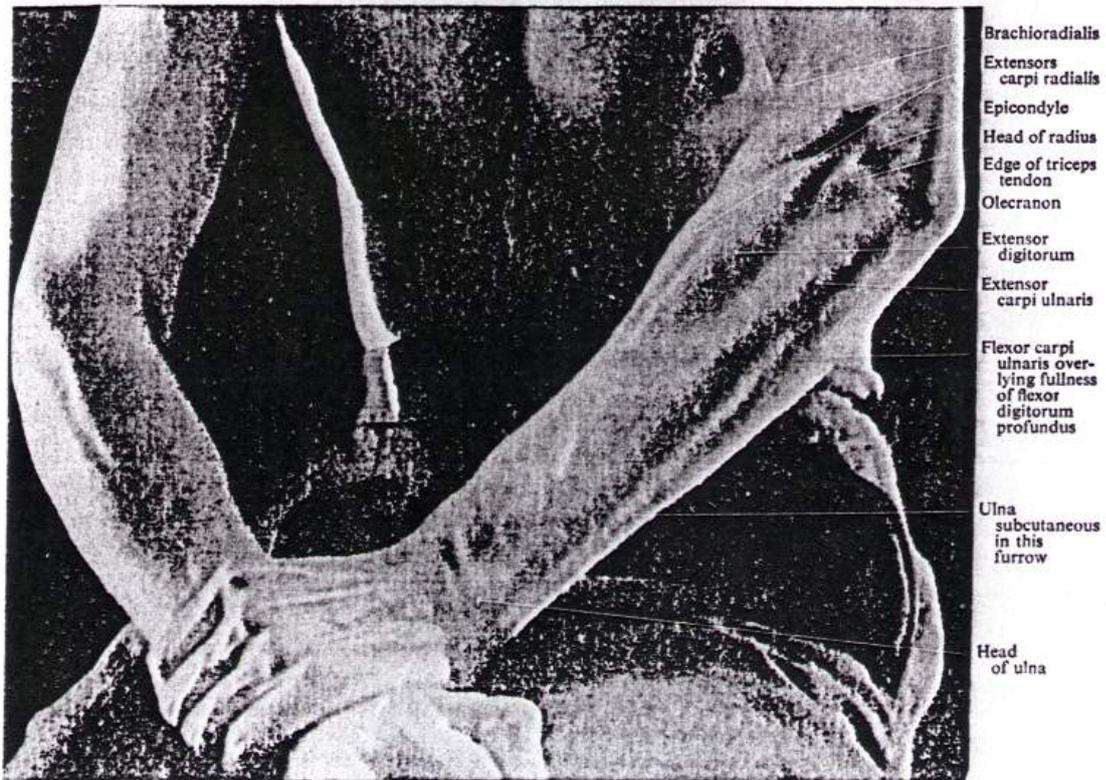


FIG. 3. RELATIONS AT LATERAL SIDE OF ELBOW WITH FOREARM PRONATED (From *Living Anatomy* by R.D.L.)

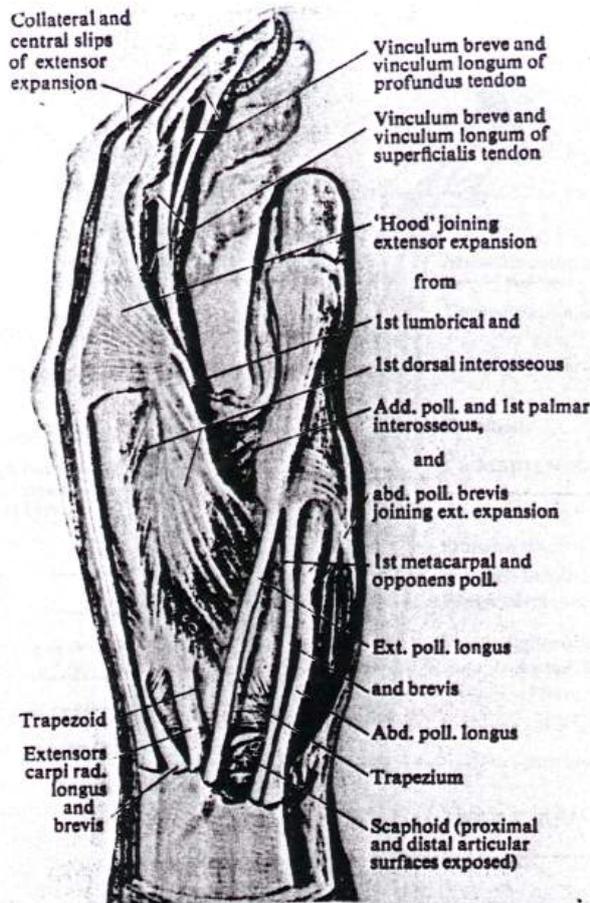
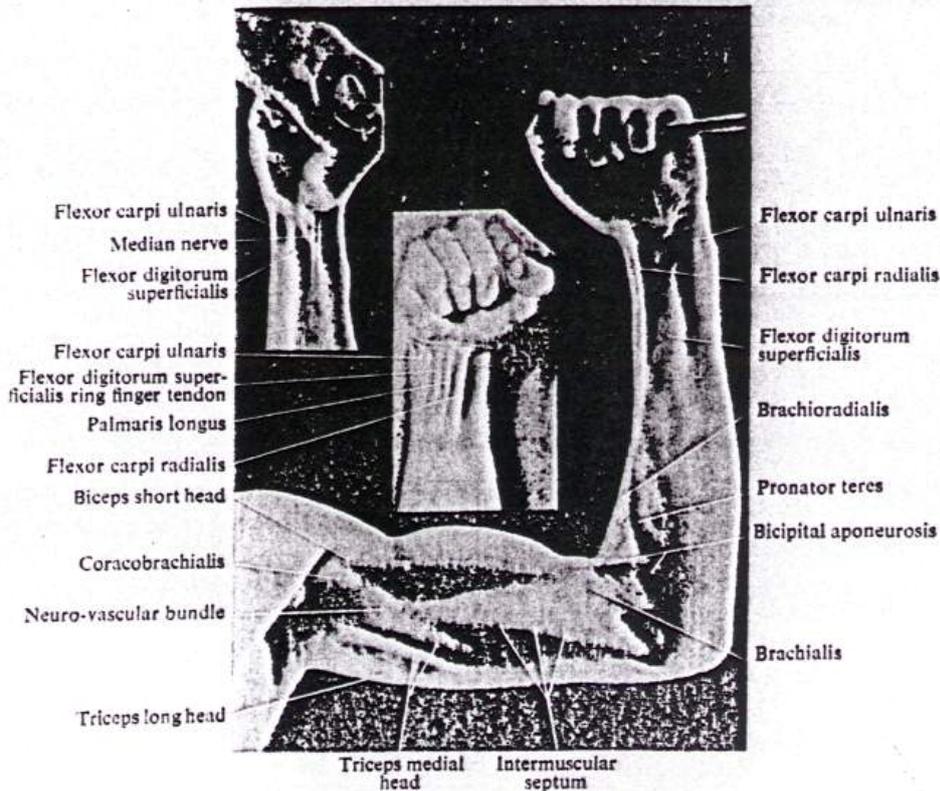
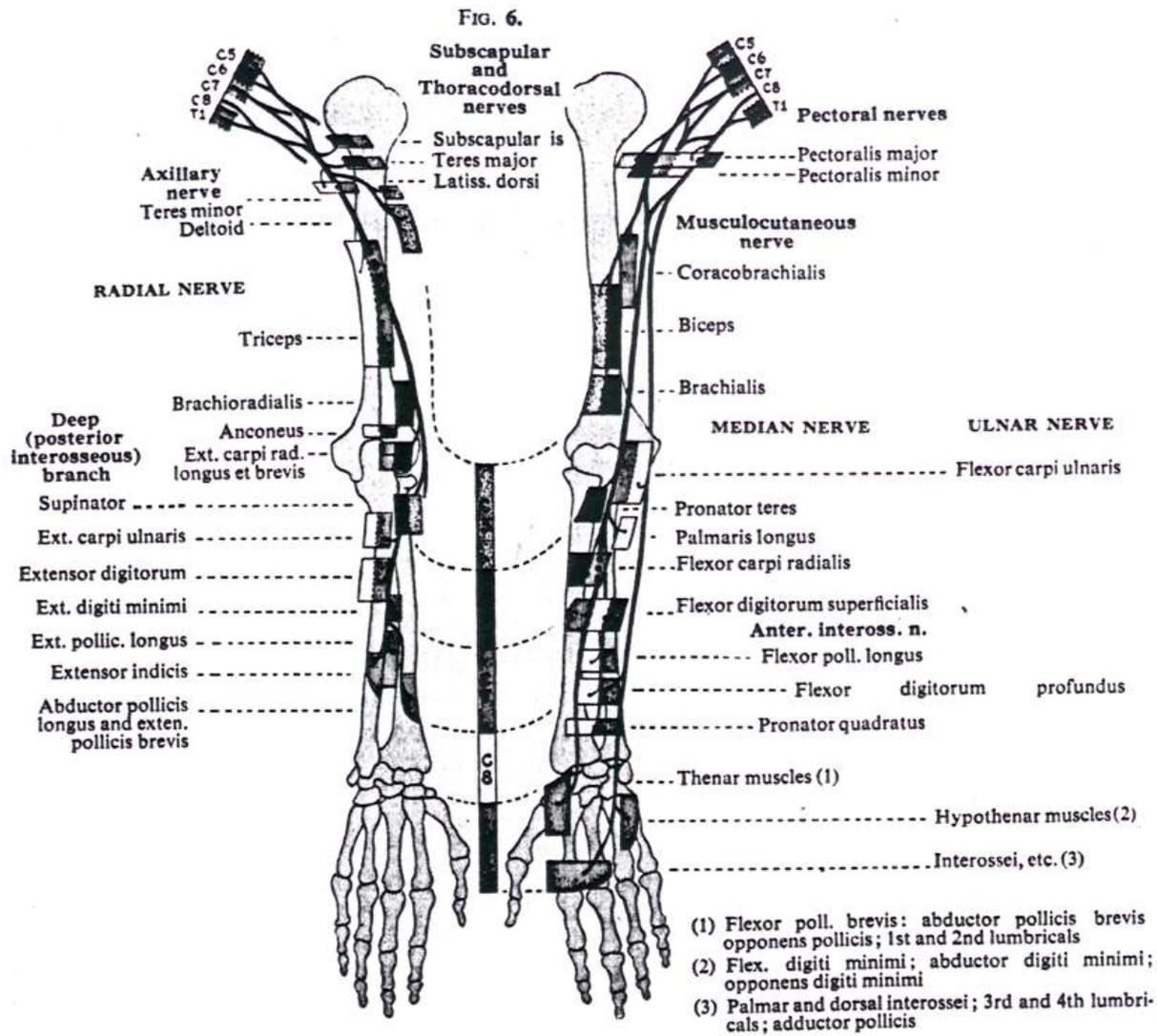


FIG. 4. HAND—LATERAL ASPECT



Figs. 5 and 6. MUSCLES OF ARM AND WRIST



*adopted from: Lockhard R.D. Hamilton, R.F. Fyfe, FW. Anatomy of Human Body J.B. Lippincott Co. 1965

** adopted from Lockhard RD. Living Anatomy, Oxford University Press, NY. 1962.

Using BDORT to Select The Compatible Sedative(s) to Minimize Morbidity And Mortality

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ABSTRACT

The most concerned untoward and adverse reaction in sedation are drug complications due to side effects, overdose and allergic reaction (including anaphylactic shock).

Allergic reaction, though rare, could have deadly consequence if not corrected soon after it occurs. The allergy test for sedatives is tedious and, even after the test, one might still not be sure if the patient is truly allergic. There are some non-invasive methods useful to determine proper dosage for patients based on their history. For instance, oral triazolam (Halcion) has become the most popular benzodiazepine for dental sedation in the U.S. Triazolam, a short-term hypnotic drug used for insomnia, is a powerful and effective oral sedative. It depresses all levels of the CNS, probably through the increased action of gamma-amino butyric acid (GABA). It should not be used in the presence of narrow angle glaucoma, CNS depression, pregnancy, or lactation when breastfeeding.

A suggested guideline for dosage is 0.25 mg for patients with higher tolerance (eg. A person who gets lightheaded after 4 to 5 cans of beer or 2 glasses of wine or who usually drinks at least 2 cups of coffee to stay alert), 0.125 mg for people who are less resistant to drug (eg., a person who gets lightheaded after 1 to 2 beers or 1 glass of wine or who usually stays alert after 1 cup of coffee), and 0.0625 mg for a frail adult or elderly patients (80 to 90 years old).

For practical purpose, if clinician wishes to verify cases in doubt, one can use a simple non-invasive method of BDORT as an adjunct diagnostic aid in addition to the traditional tests. This test, developed in late 1970 by Dr. Omura, has been used for various diagnostic purposes as well as selecting proper medication and dosage. The two testing methods, direct and indirect testing, are based on criteria determining the compatibility of patient and doctor for the purposes of conducting the O-Ring Test. For compatible patients and doctors, the direct method is applied, while the indirect method is used for incompatible doctors and patients such as very young children, or the debilitated, or the handicapped. If the indirect test is used, then a nurse or assistant can serve as an intermediary during the test. The test result can reveal the sensitivity of the patient to the drug in question, as well as, the proper dosage of a drug for the patient. Briefly, the direct method involves the patient making a circle (O-Ring) with the thumb and another finger of one hand, and holding it tightly together. If the indirect method is being used, the

intermediary should form the O-ring. In the other hand would be a vial of the properly selected sedative drug. A compatible clinician would then attempt to separate the patient's finger and thumb with both fingers of his own hands.

The end of a thin brass rod should gently rest on the skin over the trachea area of the patient if testing for potential allergies or anaphylactic reaction. The other hand of the intermediary person or patient not forming the O-Ring would hold the other end of the brass rod. If the patient is allergic to the drug it will be easy for the clinician to separate the patient's fingers. If not, the clinician will not be able to separate the patient's fingers indicating the patient is not allergic to the drug. The strength of the fingers forming the O-Ring can be quantified to evaluate the quality of the drug after satisfying certain testing criteria, based on which a clinical impression is made.

A clinician can select the proper dosage with O-Ring test by pointing brass rod or finger of the person being tested to medulla oblongata and the frontal lobes of both right and left hemisphere of the patient's brain. The dosage of the sedation can be properly adjusted when the fingers of the O-Ring remain closed. Same method is applying to the kidney, liver or heart by pointing to the respective organ individually. For practical purpose, if the drug is compatible with the patient, the recommended manufacturer's dosage can be given and titrated whenever possible. When and if the second dose maybe needed later during the dental procedure, the O-Ring test with finger or brass rod pointing to myocardium is performed to determine the proper second dosage. For medically compromised patient, O-Ring test with the sedative ding pointing to kidney, liver or brain with finger or brass rod can be performed to determine the proper second dose, depending on what medical condition involving that particular organ. Such a practice can even help prevent complications with sleep dentistry that is gaining some popularity. The O-Ring test could be used as a guide to determine the proper dosage, instead of blindly guessing the dosage when patients already being rendered in semi-conscious state. It could potentially reduce complication. It should be noted that 68.2% of the patients respond to the normal dosage of any given drug, 27.2% have either hypo-or hyper- response and 2.1% have little response and 2.1% are extremely sensitive to dosage, and 0.1% have no response and 0.1% allergic to the dosage.

COMPLEMENTARY METHODS IN THE SYSTEM OF MEDICAL REHABILITATION

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ABSTRACT

When the task to save the life and function of affected organs or tissues is solved, in the successive process of diagnosis – treatment – rehabilitation, the patient rehabilitation moves to foreground. The World Health Organization defines rehabilitation as follows:

“The combine and coordinated use of medical, social, educational and vocational measures for the training or retraining of the “disabled” individual to the highest possible level of functional ability”.

The main objective of medical rehabilitation is to prevent or minimize disability resulting from disease, injury or congenital disorder. This objective is best met through an optimal individual program based on sanogenetic approach. Sanogenetic (recovery) processes include restitution, regeneration, compensation, and activities of the immune system and microcirculation.

Based on this concept, medical rehabilitation can be defined as a set of measures which includes methods to speed up restitution, stimulation of reparative processes, identifying and strengthening of the compensatory mechanisms, correction of non-specific resistance and immunity as well as activation of microcirculation. In terms of systematization, it is reasonable to distinguish three circles for stimulation of sanogenetic processes:

1. "Physical" Circle – Kinesiotherapy, Physiotherapy, Acupuncture, Biomechanical Correction.
2. "Chemical" Circle – Diet Therapy, Phytotherapy, Probiotics, Efferent Therapy.
3. “Informational” Circle – Psychosomatic Therapy, Chronotherapy, Bioresonance Therapy, Homeopathy.

Complementary methods comprise approximately a half of this list. These are different types of acupuncture and moxibustion, herbal medicine, nutritiology, manual medicine, homeopathy, psychosomatic therapy, efferent therapy. The scientific bases of these techniques are developing intensively, with particular reference to acupuncture and efferent therapy. However, at this time they are continued to call differently – folk, traditional, nontraditional, and alternative, despite the existence of an established scientific term "complementary methods".

The current list of the rehabilitation methods, in addition to restorative and cosmetic surgery, kinesiotherapy and physiotherapy, psychotherapy and dietetic therapy, also includes complementary methods; especially acupuncture therapy, phytotherapy, biomechanical correction, efferent therapy. In general, sense of application for the latter is in reinforced impact on the complex of rehabilitation interventions. Monotherapy by each of them looks as impractical because the system of medical rehabilitation is always multicomponent.

Our long-term experience of using complementary methods and the accumulated scientific data prove convincingly their efficiency, nature origin, system impact on the body, safety (no side effects, allergic reactions).

Despite some difficulties in mastering complementary methods, modern rehabilitologist should be focused on the fact that any component of rehabilitation interventions which can increase the effectiveness of individual rehabilitation program must be observed and used.

In the system of medical rehabilitation, application of the Bi-Digital O-Ring Test (discovered and developed by Y. Omura from 1977) is expected to be a sensitive diagnostic method for the thorough baseline evaluation as well as monitoring the rehabilitation program progress.

In this direction, a special interest represents our study on correlation between the BDORT and the transcranial magnetic stimulation (TMS) in 30 post-stroke patients. This recently developed method allows to assess objectively the functional state of the motor system. The key indexes of TMS (latency and amplitude of evoked motor response – EMR, and duration of the central motor conduction – DCMC) were registered according to the standard technique on the 3rd, 7th, 14th day since the outbreak of cerebral accident.

The analysis of the results revealed that the cortical localization of ischemic foci is accompanied with the EMR absence in 50% and more cases, while subcortical lesions are more often characterized by the EMR presence with reduced amplitude and increased latency. Cortical-subcortical localization can associate with the same probability associated with a lack of EMR, as well as the advent of the low-amplitude EMR with reduced duration and increased latency. The DCMC increase in stroke mainly observed in subcortical or mixed localization of pathological foci, more often with hemorrhagic stroke and less ischemic. Deterioration of

neurons in the ischemic penumbra zone or their death manifested in the increasing negative neurophysiological changes – raising the threshold of EMR, reducing its amplitude and the DCMC increase. Usually this neurophysiological dynamics correlates with the motor function disorder during clinical examination. Normalization of the brain tissue perfusion and reduction of the brain swelling can improve neurophysiological parameters. Incomplete blockade of conduction and partial reinnervation explain the possibility of recovery (sometimes to normal) the EMR latency in just 1-2 months in some patients with ischemic stroke. On the contrary, a plateau of reached neurophysiological parameters correlated with severity of motor deficits and usually showed little likelihood of the further positive change.

The dynamics of EMR was examined in comparison with the different responses of the BDORT. Statistically significant differences in the testing EMR amplitudes were found for those conditions. The weakening response of the BDORT was accompanied with the EMR-amplitude decrease. The EMR-amplitude increase corresponded to the strengthening response while performing the BDORT.

So, principally results obtained showed the possibility to use the Bi-Digital O-Ring Test in the system of medical rehabilitation. Probably, implementation of the Bi-Digital O-Ring Test into medical practice could be accelerated if affordable O-Ring device (tester) and test-sets of microscope slides (reference control substances) were available. It is important because integration of the Bi-Digital O-Ring Test with conventional and complementary rehabilitation interventions will be able definitely to improve the outcome of the individual rehabilitation program.

BI-DIGITAL O-RING TEST AS A SCIENTIFIC TOOL : MY EXPERIENCES FROM FIFTEEN YEARS OF RESEARCH

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ABSTRACT

OBJECTIVE :

The Bi-Digital O-Ring Test (BDORT) discovered and developed in 1977 by Y.Omura,M.D., as a non-invasive diagnostic tool, may be very useful in various medical condition.

Author has been working for 15 years in sportive performance by using BDORT. Based on his researches, the aims of this presentation were ;

-to evaluate the accuracy of indirect Bi-Digital O-Ring Test in determination of localization acupuncture points,

-to compare the results obtained by BDORT showing various medical condition with some medical test

-to compare the value of skin's electrical characteristics obtained by standart measurement device and by BDORT,

-to discuss the benefit of the indirect BDORT method by comparising with standart method.

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***Director of the Turkish Medical Association of Bi-Digital O-Ring Test**

Bi-Digital O-Ring Test Historical Perspectives. 10th Anniversary International Conference Review of Corroboration of Discoveries Using the Bi-Digital O-ring Test, with Current Research from Western Scientific Journals Part-XII

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In honor of the Tenth Anniversary of the International Conference of the Bi-Digital O-ring Test (BDORT) Society in Tokyo, Japan, a ten year review is presented of corroboration of discoveries using the Bi-Digital O-ring Test, with current research from western scientific journals. The Bi-Digital O-Ring Test (BDORT) was discovered by Dr Yoshiaki Omura M.D. Sc.D. in 1977 while trying to measure brain circulation and temperature differences in an active brain hemispheres, pathological tenderness and grasping force. Dr. Omura found that abnormalities of body with minute force cause weakening of the O-ring formed by the thumb and one of the remaining fingers. If one holds toxic substance in hand over specific organ, the ring opens. Pancreas in diabetic was the first organ mapped. Slides of tissue were used to map out the organ representation area of the corresponding organ. Resonance Phenomenon was tested with 2 LC resonance circuits of identical frequency. One LC circuit on the palm of the hand of the O-Ring hand and one at distance. The O-Ring was found sensitive even at approx. 200 meters--confirming high sensitivity of O-Ring to resonance phenomenon and its electromagnetic nature. Therapeutic effect discovered where ideal medication to infection causes O-Ring to close--due to complimentary resonance. Toxic effect measurement, causing O-Ring to open, also noted.

Extensive research ensued with eventual U.S. patent in 1992 and suggestions of new etiology of diseases. Viral and bacterial causes for non-infectious disease previously considered to be non-infectious were discovered. Role of heavy metal deposit in infected tissues was discovered. Treatment with new antivirals and chelators e.g. EPA-DHA and Cilantro discovered. In the 1990's and 2000's new studies appear to corroborate the O-Ring discoveries. Western Medical Journals suggest links with Human Papiloma Virus, Cytomegalovirus, Helicobacter Pylori and Cancer, Heavy Metals etiology of Cancer. Chlamydia and Cardiovascular Disease and cancer. Viral infection is linked to diabetes (HHV-5) and Bell's Palsy (HHV-6). Alzheimer's is linked with Human Herpes 1 and heavy metals. In the 2000's new therapeutic substances are discovered such as Astragalus and bitter melon. New enhanced uptake methods such as laser, diode and solar energy paper are developed and new pathogens are found such as asbestos in cancer. BDORT discoveries and continuing Western Journal corroboration are reviewed. The BDORT approach to medical scientific discovery, diagnosis and treatment is reviewed.

Discussion is made regarding the future value of the BDORT as scientific research tool and a medical diagnosis method with suggestions for future continuing research and large scale studies. Great appreciation is bestowed on Dr. Y. Omura for his monumental contribution to mankind as founder and chief scientist in the BDORT field.

Photographic Precancer Detection Evaluation of the Bi-Digital O-Ring Test

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ABSTRACT

Colon Cancer is the second leading cause of cancer deaths in North America. Extensive evidence exists showing that screening of average-risk asymptomatic individuals over 50 years of age can reduce colon cancer mortality and morbidity. However current diagnostic methods are invasive and have relatively low rates of detection and compliance. They do not detect early precancerous aberrant crypt foci.

In 1994 Yoshiaki Omura MD, Sc.D. discovered a new application of the Bi-Digital O-Ring Test (BDORT) for detection of resonance between identical substances from X-ray films, CAT scans and MRI images. This simple noninvasive test uses specific reference control substances and observes the resonance phenomenon between them. This study investigates the ability of the BDORT to detect artificially induced precancerous state from photographs of rat colons.

Objective

Critically evaluate the BDORT for precancer detection from photographs by comparison with confirmed gold standard laboratory tests (i.e. pathology report of number of aberrant crypt foci). The evaluation was done by determining the test's sensitivity, specificity, positive and negative predictive values, false-positive, false-negative rates, likelihood ratio for positive test, likelihood ratio for a negative test and 95% confidence intervals. Receiver operating characteristic curve was also created to evaluate inter-rater reliability.

Study Design and Method

Double blind study of the BDORT using the pathology report as the gold standard for confirmation of cancer detection from photographs of rat colons. Two groups of F344 rats were injected with saline or equal volume of azoxymethane, a known colon carcinogen. They were euthanized and their colons were photographed. The photographs were examined with the indirect O-ring Test procedure using the precancer parameters of Integrin $\alpha 5\beta 1$ and Telomere. The findings were compared with histopathology reports.

Results

Setting the cutoff points at 3+3+ for both parameters revealed that the test had a sensitivity of 79% and specificity of 22%. Raising the cutoff point to 4+4+ resulted in a sensitivity of 36% and specificity of 88%. These findings may not be conclusive and it may be useful to repeat the study

BDORT, BIOLOGICAL EFFECTS OF MICROWAVES IRRADIATIONS AND PROTECTIONS

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ABSTRACT

INTRODUCTION:

Electromagnetic Fields (EMFs) coming from different sources, such are: mobile phones, land line phones, personal computers, TVs, satellite dishes, and so on, became an invisible pollutant of humans' working and living conditions. Today, millions of people around the Globe use mobile phones as a way of communication. Telecommunication terminals and towers are built every day. Since now, a large number of experimental and epidemiological studies have done which analyzed health effects of electromagnetic irradiation on humans and experimental animals when exposed to EMFs. A lot of various outcomes were monitored in the studies. However, researchers were mainly focused on possible carcinogenic effect of EMFs exposure. In that light, the vast majority of studies were done trying to find possible connection between EMFs exposure and onset of, especially, brain tumors, tumors of other parts of human organism, leukemia and so on. In addition, it is well known that exposure of EMFs can cause a tissue warming. This effect is so called "thermal effect" of electromagnetic irradiation. Thermal effect is especially pronounced in tissues/organs with low blood circulation which is responsible for limited local thermoregulation (e.g., testes and eyes). On the other side, there are, so called, "non-thermal" effects which are presented by central and peripheral nervous systems impairment, fertility changes, immune system disruption etc.

Exposure to EMFs can also bring signs and symptoms of Electro Magnetic Stress (EMS). Clinically, EMS is manifested by the decrease of strength of big and small body muscles. The changes of the strength of muscles can be diagnosed and weighted by using muscle strength evaluation tests - Bi-Digital O-ring test (patented by a surgeon, professor dr. Y. Omura; New York; USA).

GUARD PLUS chips have been proven to be effective in protection of Wistar rats against EMFs emitted by cellular phone. For protections apartments from EMFs of Base Station we used Mineral blend from rocks mined Kopaonik (Serbia).

AIM:

Aim of the paper was to show how BDORT can be used to detect pathological EMFs and to

compare that result with the result obtained by instrument for detection and measuring of EMFs. On the other side, the aim was also to detect changes which happen in human body when exposed to EMFs and to reveal the reliability of GUARD PLUS chip as human body protector against harmful effect of EMFs.

MATERIAL AND METHOD:

Indirect BDORT was applied in order to detect presence of microwave irradiation at working and living places. Also, special instruments were used to measure EMFs strength. The values of EMFs where BDORT opens are noted. Thereafter, GUARD PLUS chips were applied to check their ability to diminish effects of EMS exposure. GUARD PLUS chips have been proven to be effective in protection of Wistar rats against EMFs emitted by cellular phone.

RESULTS:

In people exposed to pathological EMFs, by using indirect BDORT, it is noticed that expression of Oncogene C-fos AB2 exists, as well as, expression of Integrin alfa-5 beta-1; also, microcirculation is disordered which reflects in Thromboxane B2 rise and the lowering of telomeres level. By using the special instruments, it was noted that BDORT opens at 10V/m of EMFs strength. When applied to protect body of exposed subjects, GUARD PLUS chips show fast decrease in both Oncogene C-fos AB2 level and Integrin alfa-5 beta-1. Among the other, the following effects should be underlined here: serum lipids and blood glucose level in the group of exposed rats were at the level of control group which was also true for the parameters of oxidative stress in the brain.

CONCLUSION:

BDORT can be used as a very sensitive method for detection of pathological EMFs presence. This correlates with high standards regarding EMFs exposure and living conditions and can be very useful method in detecting and avoiding EMFs exposure. GUARD PLUS chip can significantly reduce harmful biological effects of EMFs exposure.

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LEVEL OF TELOMERES DETERMINED BY USING BI-DIGITAL O-RING TEST (BDORT) AS A PREDICTIVE FACTOR OF OUTCOME OF INFERTILITY TREATMENT; ROLE OF PAU PEREIRA AND RAUWOLFIA VOMITORIA EXTRACTS

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ABSTRACT

INTRODUCTION:

Determine the levels of Telomeres (TTAGGG) by Indirect Bi-Digital O-Ring Test BDORT (by Prof. Dr. Omura, NY) in couples who are treated for infertility, we found that if a male or female have low levels of telomere (<50ng), is likely to end pregnancies in the first half of pregnancy as intrauterine fetal death or spontaneous abortion. Determine the importance of this factor in reproduction we believe that the concept of Telomere levels comparable to the notion of TCM: Kidney Jing, as the essential factor that is required for the production of gamete quality.

AIM:

The aim of our study was to examine the level of telomere, measured with BDORT as an independent factor for the outcome of pregnancy.

MATERIAL AND METHOD:

A few couples who are treated for infertility is examined with indirect BDORT to measure the level of telomere and exclude the existence of infection, hormonal, metabolic changes and the impact of external factors such as pathological form of electromagnetic radiation (EMFs). In

couples who had no other risk factors and had low levels of telomere and there was a pregnancy before treatment to raise the level of telomere, there was early termination of pregnancy compared with couples who had high levels of telomere (> 500ng) and where the pregnancy is presented to the end. Some couples have had three consecutive unsuccessful pregnancies, to only then decide to raise the levels of telomere. For raising the telomere, we used Pau Pereira and Rauwolfia vomitoria extracts (Pao V FM V and Rovol capsulae, by Natural Source, NY, USA), which have been tested and confirmed to have a big impact on the stabilization of the genes (Dr. Mirko Beljanski, PhD, Pasteur Institute, Paris).

RESULTS:

In pregnant women, where even one of a pair (male or female) had low levels of telomere (<50ng), there was an early end of pregnancy. Taking drugs PaoV FM and Rovol V for 30 to 60 days there was a rise Telomere (> 700ng). In all repeated pregnancies were successfully brought to end and all the children were healthy.

CONCLUSION:

Using indirect BDORT can be measured by the level of telomere in couples treated by infertile. The level of telomere may be a parameter which can be explained in TCM Kidney Jing and that a predisposition to create a healthy and potent oocytes and sperms. The level of Indirect measured Telomere by BDORT before pregnancy may be an important factor in predicting the outcome of pregnancy. Pao Pereira and Rauwolfia vomitoria extracts significantly stabilize genes and rise the levels of telomeres in patients and providing prevention, can positively influence on the outcome of infertility treatment and outcome in risk pregnancy.

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DIAGNOSES AND TREATMENTS OF ENDOCRINE DISEASES BY USING BDORT

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ABSTRACT

INTRODUCTION:

Last few years, growing number of cases of endocrine diseases. In particular, the growing diabetes mellitus and thyroid diseases, especially Hashimoto Sy. And more and more diseases with disturbed functions of two or more endocrine glands with increased levels of antibodies in the serum of belonging to Poliendokrine Autoimmune Syndrom. BDORT by Dr. Y. Omura is a noninvasive method that can detect early disorders endocrine gland function. Early diagnosis and treatment can prevent the occurrence or difficult forms of endocrine disease pathology, treatment of infection by the principles of Dr. Omura and autoimmunity using magnetic water for treatment of, which is obtained by using specific MDK chip.

AIM:

The aim of our study was to find early signs of diseases of endocrine gland by using Indirect BDORT and to detect risk factors for the development of diseases as well as criteria that correlate with standard laboratory tests.

MATERIAL AND METHOD:

Patients with chronic non-specific symptoms were inspected by indirect Bi-digital O-ring Test according to Prof. Y. Omura. Endocrine glands were inspected by using different drugs and slides which were used as reference substances. According to findings, infections were treated by selective drug uptake enhancement method (Y. Omura). Autoimmune disorders detected by BDORT and proved by standard lab-tests, were cured by magnetic water which had previous being treated by MDK chips (made by Salubris, Belgrade) according to Theory of Water Memory Transfer by Linus Pauling.

RESULTS:

The largest number of patients had a disorder of endocrine glands and to 2 or more. BDORT indicated gland infection by the mixed infection, the presence of toxins, pathological effects of electromagnetic fields, the existence of chronic emotional stress, but also a lack of iodine. Patients were first protected from pathological EMFs in bedrooms and from cellular phone and computers, and subsequently treated for infection, and then they added the necessary minerals and vitamins, especially iodine source: Kelp or Walnuts cold pressed oil. During 1-2 months long treatment by magnetic water, the levels of different antibodies is decreased on normal level (85-93%), drinking 1-2 liters of water daily.

CONCLUSION:

By using BDORT, physicians are able to gather more information from human body and therefore to obtain more precise and accurate status of one's health. This is especially true when subclinical infections are in question. By performing BDORT and collecting information from all body organs, physician gets more reliable data about possible etiological factors causing certain disease(s). BDORT diagnosis should be followed with standard lab tests and when the results are obtained, possibility to treat etiological factors of diseases is greater. Also, during the diseases treatment, classical therapy should be mixed with Omura's Selective Drug Enhancement Method, detoxication methods, protection from harmful electromagnetic fields exposure (e.g., by using Guard plus – Salubris made), and the treatment of autoimmune diseases, if any (e.g., by using MDK Chip – Salubris made).

BIOCOMPATIBILITY OF DENTAL AMALGAM EVALUATED BY BI-DIGITAL O-RING TEST (BDORT)

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ABSTRACT

INTRODUCTION:

Recent investigations in the development of neurodegenerative, cardiovascular, autoimmune and malignant diseases shows very important role of heavy metals as cumulative factor. Dental amalgam is well known in Integrative Medicine as a responsible factor for these diseases.

SUBJECTS&METHODS:

During the year 2007 were tested 31 patients both sex /18 females and 13 males/ ages 20 to 60 by BDORT and mercury saturation in hard dental plaque/dental calculus.

RESULTS:

Results shows high correlation between among of dental amalgam fillings, mercury level in dental calculus and positive findings BDORT in the brain.

CONCLUSION:

Authors conclusion is that amalgam fillings are VITIUM ARTIS in dental health care.

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DISCOVERIES MADE POSSIBLE BY NON-INVASIVE BI-DIGITAL O-RING TEST

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ABSTRACT

BDORT can be used to detect almost any molecules as long as you have some sample of that particular molecule which will produce electro-magnetic field resonance. Your brain interprets the findings based upon your skill and expertise. BDORT can also detect any pathological areas without having a sample. Virtual drug and supplement testing is also accomplished using BDORT to find what will treat the problem area. BDORT is a diagnostic tool, as well as a treatment selection tool. Selective Drug Uptake Enhancement Method (SDUEM) came about through BDORT and is necessary when the body is not functioning properly.

BDORT can measure substances in the brain that are not possible without a biopsy as well as detect the exact location and size of the abnormality. To detect neurotransmitters, cancer, Alzheimer parameters, infectious agents, asbestos and metals, their reference control substances with known amount can be used as semi-permanent unbreakable slides. Dr Omura's new method of mouth, hand, and foot writing analysis is very accurate and stands as a medical record that can be returned to over and over again to collect more information using the BDORT. The mouth, teeth, jawbone, and soft tissue have only had traditional methods of visual inspection, X-Ray, palpation, test with hot, cold, biting. Now we have BDORT to determine if an infection is present, the location, and kinds of infection and amount of the infection if applicable. In the dental field without BDORT, often infections in root canal teeth are difficult to recognize. With the BDORT before the completion of sealing the canals of the root canal tooth, the dentist can find and rid the tooth of serious infections making the prognosis of the tooth very favorable. The tooth can then be monitored for recurring infection and retreated if necessary. If the person has periodontal disease, is it localized or generalized? Then the appropriate most efficient medication can be given. Antibiotics do not treat a viral infection in the mouth. The patient can be tested directly, or the X-Ray films can be tested, a photo can be tested, as well as mouth, hand and foot writing can be tested. Not only can the appropriate medicine and dosage can be found, but also any incompatible medicines can be detected so that they do not cancel each other out. Before the BDORT, many infections in the teeth, gums and bone were missed using only visual inspection of an X-Ray. These improvements could not be accomplished without the BDORT.

Sometimes a TMJ Dysfunction is treated structurally and will not resolve until the infectious part is treated. Dr Omura has developed a new technique to obtain additional information from the TMJ using the mouth, hand, and foot writing. This testing can be performed in the open and closed mouth positions. When the front teeth are mechanically stimulated, the cancer parameters are reduced and the pain is decreased. If the patient is tested by BDORT immediately after stimulating the front teeth, a false negative may be obtained. When having the patient do the mouth writing, the pen cannot touch the front teeth and it has to have ink all the way to the area of the pen that the

patient's teeth are biting on.

Asbestos containing dental materials are a problem in dentistry. Detecting asbestos in dental materials as well as in the patient's body is important and possible using BDORT. Asbestos has been shown by Professor Omura to often cause cancers and it is present in every cancer. Asbestos greater than 0.14 mg BDORT units is often the cause of cancers and other malignancies may develop or the incidence of Alzheimer's disease increases. This makes it very important to examine the use of dental materials and to check for high asbestos. Several patients have been examined and found to have Anaplastic Astrocytoma only to then learn that they have plastic dental appliances in their mouth containing high amount of asbestos. Once their asbestos containing appliance is removed from their mouth and an adequate distance from their body is maintained, all the cancer parameters disappear. One patient said her appliance is two and a half years old. That is how long it took for symptoms to appear sending her to the hospital.

Determining a safe distance from harmful substances using BDORT is very useful. Dental appliances with asbestos can still cause the Anaplastic Astrocytoma response to persist if the appliance is in close proximity to the body. Also cell phones, computer monitors, and television screens can influence our health if we continually stay too close to these electrical devices which generate undesirable EMF. Negative people can also influence us.

When we take a panoramic x-ray of a patient, there is a decrease in their telomeres in the hippocampus. If they are healthy, they will recover from this exposure on their own. If not we can use one or more of Dr Omura's telomere raising techniques.

Telomeres can be measured in the normal cell and the cancer cells within several minutes using BDORT. Normal laboratory testing of telomeres would take at least a week and would be very expensive. This limits the use of laboratory testing to detect telomeres. Also it isn't practical to do biopsy or surgery to detect telomeres. When testing isn't convenient, or not reasonably priced, not receiving the results in a reasonable time frame, and not readily accessible, doctors hesitate to use it.

It is very important to screen our dental patients for oral cancer. We do this by visual inspection, palpation, and perhaps light assisted visual inspection such as the Velscope or the Identify using BDORT over the mouth and measuring Integrin $\alpha 5\beta 1$ using BDORT with the control substance. Also Dr Omura's new device could be directed to the foil and the patient could write with the right and left hand. We have so much more available to us as doctors by using the BDORT.

**MANAGEMENT OF TUMORS AND DEGENERATIVE DISEASES.
LOCATION OF THERAPEUTIC POINTS ON SKULL
AND PRE-STERNAL REGION**

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ABSTRACT

Purpose of presentation: Mapping the pre-sternal region and the skull and the contribution of the stimulus of these points in chronic degenerative diseases and tumors management.

Introduction - BDORT, developed by Prof. Omura provides us with unique approach in guiding the diagnosis, treatment of disease through drug selection and the assurance that the drug will function in the diseased organs through the method of selective drug uptake. However, there are many difficulties that arise in the control of chronic disease and that are difficult to solve. Culture and emotional condition are the major factors that corroborate the numerous relapses or

recurrences of symptoms and aggravation of diseases, because instituting changes in daily habits is extremely complex because of the current lifestyle. This presentation is the result of many mistakes and successes in the attempt to understanding the reasons for the lack of progress in a lot of studied cases.

Methods - The management of chronic degenerative diseases, pain and cancer is conducted using various resources developed from BDORT, alone or together. Thus, we treat the diseases as follows: **A.** Location of dysfunction areas or pathologies and tests with RCS to measure in BDORT units substances such as Telomere, Asbestos, Integrin $\alpha 5\beta 1$, Thromboxane B2, Acetylcholine among others **B.** Basic medical treatment through the administration of nutritional supplements, herbal and homeopathic drugs, such as Omega-3 Fatty Acids 1000mg (EPA 180mg, DHA 120 mg), DHEA, Astragalus, Folic Acid, Glycolic Extract of Coriandrum Sativum, Glycolic Extract of Propolis 20% among others. **C.** Location of the points for stimulation, acupuncture, or infiltration with use of histological slides of human tissue or with the use of cable diode: C1.) Location of the acupuncture point St 36 by the Dr. Omura method; C2.) Location of the Thymus gland at the top of the sternum; C3.) Examination of the presternal area with histological slides from 12 organs of Traditional Chinese Medicine – TCM: Stomach, Pancreas/Spleen, Lung, Heart, Lung, Gall Bladder, Small Intestine, Colon, Liver, Kidney, Bladder, Ovary/Testis and Adrenal Gland. Location of other points in the presternal area using pathological and normal human histological slides; C4.) Location of points on the skull with the use of pathological and normal human histological slides (Pons, Pineal body, Basal Ganglia, 12 Organs of TCM). The investigation of Scalp Acupuncture (Y. Yamamoto) through BDORT enabled the location of numerous therapeutic cranial points. **D.** Patients are instructed to practice the Drug Uptake Enhancement Method according to the hand map with shiatsu or red laser (Omura 1995). **E.** Stimuli with acupuncture, scalp acupuncture and infiltration of points previously located, use of Qi Gong paper, dermal patch for the relief of painful spots. The measurement of the neurotransmitter Acetylcholine in BDORT units guides us the intensity or timing of stimuli. Often a lot of points previously marked "disappear" after the stimulation of acupuncture point St 36 and Thymus, i.e., the O-Ring strengthens the area under treatment. Treatment of Pons is important in the evolution of any disease since it re-establishes the communication of brain/body. Thus stimuli are intended to achieve maximum acetylcholine, in BDORT units, in the posterior region of the skull, in the Nucleus of the Basal Ganglia and at the Pons itself - ideally at levels greater than 3000 μg in BDORT units. Presentation of cases.

ASSOCIATION BETWEEN DR. Y. MANAKA'S ION-PUMPING AND DR. S. AUNG'S ENERGETIC ALIGNMENT TECHNIQUE IN POST-TRAUMATIC SYNDROMES. EVALUATION THROUGH THE BI-DIGITAL O-RING TEST AND RESEARCH OF THE PHYSICAL AND PSYCHOLOGICAL SYMPTOMS BEFORE AND AFTER TREATMENT

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INTRODUCTION

This study seeks to evaluate the effectiveness of the association of two different acupuncture techniques, Manaka's Ion-Pumping and the Aung's Energetic Alignment Technique in Post-Traumatic Syndromes using BDORT control substances to verify the results.

Energetic Alignment – Energetic alignment is an acupuncture technique which seeks to improve the energetic flow between the body's anterior and posterior meridians.

Ion-Pumping – The ion-pumping technique consists in the use of the diode cable, allowing for the unidirectional flow of electrons. Its use is widely known in the Curious Meridians of the Traditional Chinese Medicine (MTC).

Bi-Digital O-Ring Test (BDORT) – BDORT is a propedeutical resource discovered by Dr. Yoshiaki Omura³, Sc.D.,

in which digital muscular weakening is caused by the electromagnetic waves of two identical substances in resonance. By using BDORT, it is possible to virtually measure biochemical substances in BDORT units.

MATERIAL AND METHOD

The study comprised 19 (nineteen) individuals with clinical history of: (i) craneo-encephalic trauma; (ii) surgery in which general anesthetics was employed; and (iii) recent or chronic psychological trauma. Six physical and psychological symptoms were analyzed: (S1) visual alteration; (S2) insomnia; (S3) anxiety; (S4) difficulty to concentrate; (S5) depression; (S6) back or articulations pain.

The Visual Analog Scale and the Beck Depression Inventory were applied before the first and after the programmed acupuncture sessions.

The program consisted in three sessions of acupuncture carried out with a 7-day interval between each. Only four acupuncture points prescribed for energetic alignment were used in each patient, in combinations that varied according to the clinical history of each patient. The points were the following: YINTANG (EX HN3) in all of them, VG4, VG20, VG14, VC17, ID3, PC6, and TA5.

Each session comprised the following steps: a) performance of the initial Visual Acuity Test (VA); b) tests through BDORT on the brainstem for the evaluation of the following variables: (V1) telomere; (V2) asbestos; (V3) Integrin $\alpha 5\beta 1$; (V4) Thromboxane B2; (V5) Acetylcholine; (V6) PCR; (V7) β Amyloid (1-42); c) insertion of needles in the selected points, according to clinical history; d) connection of the diode cable; e) withdrawal of the needles when the acetylcholine in the brainstem hits 3000 μg (in BDORT units), or approximately 20 minutes of application; f) new AV and RCS measures in BDORT units.

Patients were submitted to a new clinical interview at the end of the third session.

RESULTS

Nineteen patients were evaluated, being fourteen women and five men, all aged 46-80 (average age: 59.5), with a history of: (i) craneo-encephalic trauma; (ii) surgery in which general anesthetics was employed; and (iii) recent or chronic psychological trauma.

The results can be divided in two parts. First, the clinical symptoms tracking and then the BDORT control substances. As for the symptoms, the results are the following:

S1 – visual acuity was assessed through the vision tests, patients have materially improved at each evaluation and this was statistically relevant ($p < 0.0001$). The same occurred with the clinical interview: while comparing the initial and final interviews, there was also significant visual (VAS) improvement ($p = 0.025$); **S2 – As for insomnia**, while comparing the VAS evaluation before the first and after the third session, there was also statistically significant

We understand that this level of acetylcholine in the brain means the normalization of the microcirculation and the reestablishment of the brain/body communication.

improvement ($p = 0,018$); **S3 – anxiety** was evaluated through an interview with a doctor from the team and decreased during the study ($p = 0.005$); **S4 – difficulty to concentrate** showed no statistically relevant decrease along the study ($p = 0,124$); **S5 – depression** suffered a significant reduction ($p = 0.026$); **S6 – Pain in the back and articulations** did not materially change ($p = 0.244$).

BDORT Results

V1 – the Telomere increase was significant before and after each session ($p < 0.0001$), but was not significant between sessions; **V2 – the reduction of Asbestos** was significant throughout sessions, before and after ($p < 0.0001$), and at every session ($p = 0.0001$); **V3 – the reduction of Integrin (alpha) 5 (beta) 1** was significant before and after each session ($p < 0.0001$), as well as among the interactions of each session; **V4 – the reduction of Thromboxane B2** was significant before and after each session, ($p < 0.0001$), but not between the initial and the final sessions ($p = 0.1031$); **V5 – Acetylcholine** was the variable which showed the greatest increase before and after each session ($p = 0.0001$). There was no change between sessions; **V6 – the reduction of PCR** was significant throughout the sessions ($p = 0.0001$) and before and after each session ($p < 0.0094$); **V7 – β Amyloid (1-42)** levels presented a significant change between sessions and for interaction purposes. There was a difference before and after, corresponding to higher responses at the posterior moment ($p < 0.0001$).

DISCUSSION AND CONCLUSION

Due to the reduced number of patients involved in the work (n), the statistical analysis was compromised. However, the partial results attained through BDORT allowed the verification of an increasing benefit in the three acupuncture sessions, which denotes a tendency to normalize the tested RCS (control substance) parameters.

We consider this work as a sketch, so that we may, in the near future, increase the number of subjects, possibly including a group submitted to the energetic realignment technique without the diode cable, as well as another group in which we could invert the Manaka's cable poles.

Food Conservative Assessment by Bi-Digital O-Ring Test in Patients with Diverse Pathologies, and Detoxification with Herbal Therapy

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ABSTRACT

INTRODUCTION: Urbanization and industrialization processes lead to food conservative development all over the world. Conservatives are substances enabling to block or retard food decrease from microorganism or enzyme action, bearing substantial economic issues both to manufacturers, dealers, and to end consumers. It has not yet been made clear how these substances impact the human organic systems, so there can be no warranties as to their usage safety. Whereas usage limit regulations are met, industrialized food daily consumption and, even more relevant, their enormous variety – being a consumer free choice – is far from any kind of control.

GOALS: This paper aims to check the presence of food conservatives – Potassium Sorbate, Sodium Benzoate, CaNa EDTA, and Buthil-Hidroxy-Tholuene (BHT) – through Bi-Digital O-Ring Tests (BDORT): 1. Comparing respective quantities in healthy and damaged tissues from patients under a number of pathologies. 2. Researching the herbal agent able to remove conservatives from tissues, using Bi-Digital O-Ring Virtual Test. 3. Checking if proposed treatment actually removed conservatives from healthy and diseased tissues.

MATERIALS & METHODS: 20 patients were evaluated using the food conservatives dilutions as References Control Substances, in normal and diseased sites. Treatment choice was based on Virtual BDORT: Searching which herbal may have detoxifying effect for each conservative under study ; it's tolerance in thymus representative region and disease site, patient to patient; and election of two or three herbal substances with satisfactory detoxifying effects for all four conservatives under study for each patient. Prescription was made for MT [mother tincture], 20 ml, for each herbal substance, 10 drops orally 3 x / day. At the end of the treatment new measurements were performed.

RESULTS: 1. Diseased region presented 10^3 to 10^5 times more conservatives than healthy region, over the diverse tested pathologies. 2. Virtually selected herbals' combinations were efficacious in detoxifying tested conservatives.

CONCLUSIONS: 1.Virtual BDORT is able to predict which herbal substance is able to detoxify the body from food conservatives. 2. Virtual BDORT is also able to accurately predict the herbal substances actual quantitative effect on tested conservatives' tissue concentrations. 3. Food conservatives presence and removal impact over patient's health and disease status has yet to be determined.

BDORT AND AGE RELATED MACULAR DEGENERATION

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ABSTRACT: Age-related macular degeneration is a multiform disease of the macula and is the leading cause of blindness in the United States and most Western countries. In recent years, a great deal of new knowledge on the pathogenesis of this disease has been obtained, and the treatment of exudative macular degeneration has greatly progressed. The number of patients with age-related macular degeneration will multiply in the following decades, because knowledge of mechanisms of development of macular degeneration that could be subject to therapeutic measures is insufficient. Several underlying factors are genetic inheritance, exposure of the retina to chronic oxidative stress and accumulation of inflammation-inducing harmful proteins into or outside of retinal cells.

Our study was to perform Bi-Digital Oring Test at the retinography photograph taken of 76 eyes of 38 patients diagnosed with Age Related Macular Degeneration. The mean age was 77 years old (52-91), 27 female and 11 male. Five patients had the atrophic stage in both eyes, 9 patients had drusen stage in both eyes, 2 patients with choroidal neovascularization in both eyes, 12

patients with drusen in one eye and choroidal neovascularization in the other, 6 patients with drusen in one eye and atrophy in the other, and 4 patients with atrophy in one eye and choroidal neovascularization in the other. BDORT was performed at 3 different parts of each photograph: at the optic nerve, at the lesion and at the very periphery of the retina. Mercury (Hg), Lead (Pb), Aluminium (Al), Telomere, β -Amyloid(1-42), ThromboxaneB2, Integrin α 5 β 1, Acetylcholine chloride, *Borrelia burgdorferi*, *Chlamydia trachomatis*, *Chlamydia pneumonia*, *Mycobacterium tuberculosis*, *Mycobacterium avium*, Herpes simplex virus type1, Cytomegalo virus, Asbestos, DHEA, and *Candida albicans* were tested. The fact that some patients had different stages of the disease in each eye and some had the same stage in both eyes helped us understand the data obtained. Hg, Pb and Al had very high parameters at all sites tested. Telomere, Ach, and DHEA had reduced values at the lesion site in comparison to the optic nerve and periphery. In regard to microorganisms mentioned above they all showed higher values at the lesion independent of the severity of the disease when compared to those values obtained at periphery and optic nerve. Special attention must be given to *Candida albicans* where the medium value at periphery and optic nerve was 5.964ng (1500-11000ng) and at the lesion much, much higher than 12.000ng. As Dr Omura has shown us the important role of all the parameters above mentioned in chronic diseases we believe that proper treatment especially for *Candida albicans* will help if not cure at least slow down the progression of the disease. Further studies must be done in order to establish the exact role of *Candida albicans* in Age Related Macular Degeneration.

**INTERVENTION RADIOLOGY ANESTHESIA UNDER
ELECTROACUPUNCTURE FOR UTERINE ARTERY EMBOLIZATION
(U.A.E.) AT ST. LOUIS HOSPITAL IN LISBON - PORTUGAL**

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ABSTRACT

AIM: To evaluate whether acupuncture is a safe and effective method in alternative to the use of pharmacologic sedation/ analgesia on uterine artery embolization (UAE) for uterine fibroids.

METHODS AND MATERIAL: Non-randomized prospective study in 70 consecutive patients (27 – 56 years; mean 39.5 years) undergoing UAE with PVA particles, between August 2006 and January 2007. In 33 patients UAE was performed successfully under acupuncture (Group A) and in 37 patients under local anesthesia (Group B). The decision to include patients in group A or B was based only on patient preference.

For **acupuncture**, according Dr. Omura's O-ring Test, needles were placed on the legs at the acupoints Omura's ST 36 (upper third of external leg) and Omura's SP 6 (lower third of internal leg) and also on the right inguinal zone and on the abdomen.

First time in the world to do Anesthesia through electroacupuncture using only 2 acupoints.

Needles were connected through wires to an electrostimulator that sent an electrical pulse (15-20 hz, 6 volts). For analgesia the procedure was started 20 – 30 min after insertion of the needles and the acupuncture was continued for 30 min after UAE. During the procedure, Shiatsu massage was given on the patient's head.

During embolization the patients treated under acupuncture (Group A) took only Midazolan 0.5 mg SOS, if necessary, and the patients under local anesthesia (Group B) took ketorolac trometamine 30 mg i.v. 2x before embolization of each uterine artery and midazolan 1 mg SOS.

ADVANTAGES:

FEWER MEDICATIONS

FEWER POST EMBOLIZATION SYMPTOMS

FEWER HOSPITALIZATION HOURS

FASTER RECOVERY

CONCLUSION:

Electroacupuncture is an alternative to the use of pharmacologic sedation / analgesia during UAE.

Safe, Effective and Inexpensive Diagnosis and Treatment of Lung Cancer by Using the Bi-Digital O-Ring Test

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ABSTRACT

The patient was a 74 years old lady of oriental descent. Since February 2010 she was complaining about dyspnoea, coughing, tiredness and pain in the back. The cough came with thick clear mucus. She consulted her general practitioner (GP) who couldn't find any abnormalities in clinical examination, routine laboratory testing and in a chest x-ray. He prescribed codein, which just gave a slight temporary relief. Due to persistence of the symptoms she was later referred to a doctor specializing in allergology, who, by doing allergy-testing, (as well) couldn't discover the reason for her symptoms. Since she was presenting the above mentioned difficulties already for three months by now, her GP arranged a CT scan in which no pathology of the chest could be found. However, shortly afterwards an MRI of the chest was done and it showed a faint tumor of the lung in the beginning of April 2010: In the left lung a suspicious formation of 3 x 3 x 3 cm was discovered. Now her GP wanted to refer her to a hospital so that further diagnostic could be executed. A biopsy was to be taken in order to identify by the pathology the kind of lung tumor she had and to decide about the proceedings of the treatment. There was the possibility for chemotherapy, radiation and/or operation. The woman knew about the chance of spreading the tumor by doing a biopsy and was well aware of the prognostic ally relatively poor outcome of the different lung cancers. So she preferred to consult with Dr. Omura to see if there were any better options. When she presented herself during a teaching seminar in May 2010, Dr. Omura first noted her unusually deep crease in the naso-labial region of her face (see picture XX).

Due to his facial representation chart on which he published in this Journal before, (see publication



in Acupuncture & Electro-Therapeutics Research: The International Journal Volume 19, No. 2 & 3, pp 153-190, 1994), he suspected the patient might have a lung problem before she even talked to him. The woman explained her situation, then showed her MRI. A faint tumor was seen on the image and found to be highly O-Ring Test "-"negative.

We used Integrin $\alpha 5\beta 1$ (which was highly elevated to 100 ng BDORT units) and Telomere (which was moderately increased) to ascertain that it was a cancer of the lung. With pathological slides (from Life Science Research Institute in Kurume city, Japan) of the various lung cancers existing with Dr. Omura we determined it to be an adenocarcinoma of the lung. By using this method, there is no need to perform biopsies and therefore the risk of spread can be prevented as can be the complications of the procedure.

For further diagnostic the patient was then asked to do hand-, mouth- and foot-writing on both sides of the body on a specially prepared and standardized sheet of paper (see table YY).

It was then decided to raise the Telomere in the non-tumorous areas of her body to at least 200 to 300 ng BDORT units. By doing so it was previously often demonstrated that the tumor cells could not divide any more. In this state, the cancer was "inactivated" because the Integrin $\alpha 5\beta 1$ was reduced to 2.5 ng BDORT units which is considered to be within normal limits. If this condition could be maintained over a long period, the cancer cells might eventually reduce.

The measurements for certain parameters were taken before and after the treatment. The treatment consisted of attaching two small pieces of "Godanum-like metal" to her chest, one on the right side, one on the left side of the body middle line; as well as testing out the optimal dose of cilantro, EPA/DHA and folic acid by using the BDORT. Astragalus and Boswellia Serrata would have been beneficial as well. But since their effect could easily be cancelled by vitamin c, by orange juice and many other food ingredients such as garlic and onions, they were not chosen. The lady was then asked to execute the Selective Drug Uptake Enhancement Method (see Volume 15 (2), pp 137-158, 1990 of this Journal) by, in this case stimulating the proximal phalanx of her third finger of the left hand (lung-representation area of the hand) for 5 to 10 minutes. For the results please see the copy of the patients' standardized hand-, mouth- and foot-writing sheet (table YY). It can be noted that the telomere in the malignant area of the left chest went down to practically 0, whereas the Telomere in the rest of the body was raised to 450 ng. The Integrin $\alpha 5\beta 1$ in the malignant area went from 80 ng down to 2 ng and the handwriting didn't show any more resonance phenomenon with a slide of an adenocarcinoma of the lung. On a check up the following day the patient mentioned that she felt a lot better, had no more pain in her back and wasn't feeling tired any more. She was still complaining of cough though. For the changes in the above-mentioned parameters please see (table YY). During the three consecutive days of treatment her condition clearly improved. Dr. Omura also stressed that it was very important to keep the normal cell Telomere up and mentioned that by using BDORT-"-" testing clothes or jewelry the beneficial effect of the treatment could be compromised.

Table YY

MOUTH, HAND, & FOOT WRITING FORM

by Yoshiaki Omura, M.D., Sc.D., © 2010

Name: _____ Age: _____ Sex: _____ Weight: _____ Height: _____
 Address: _____ Date: _____ Time completed: _____ am pm
 Profession: _____ Questions? Call 212-781-6262
 Phone #: _____ Cellular Phone #: _____ Fax #: _____ E-mail: _____
 Chief Complaint: _____

FAX TO DR. OMURA: 212-923-2279

Before Treatment: BP: _____ / _____ Pulse: _____ Resp. Rate: _____ Body Temp: _____

<p>Left Mouth write L-M</p> <p>before treatment</p> <p>BDORT Grading: _____</p> <p>after treatment</p> <p>BDORT Grading: _____</p> <p>BDORT Grading: _____</p>	<p>: Telomere : : Integrin $\alpha_5\beta_1$ (or Oncogene C-fos Ab2): : Acetylcholine : : β-Amyloid (1-42) : : L- Homocysteine or CRP: : Chrysotile Asbestos : : Tremolite Asbestos : : Al; Hg : : Chlamydia Trachomatis : : Mycobacterium TB : : Cytomegalovirus : : Substance P : : 8-OH-dG : : DHEA :</p>	<p>Right Mouth write R-M</p> <p>before treatment</p> <p>BDORT Grading: _____</p> <p>after treatment</p> <p>BDORT Grading: _____</p> <p>BDORT Grading: _____</p>
<p>Left Hand write L-H</p> <p>before treatment</p> <p>BDORT Grading: _____</p> <p>after treatment</p> <p>BDORT Grading: _____</p> <p>BDORT Grading: _____</p>	<p>: Telomere : : Integrin $\alpha_5\beta_1$ (or Oncogene C-fos Ab2): : Acetylcholine : : β-Amyloid (1-42) : : Cardiac Troponin I : : Chrysotile Asbestos : : Tremolite Asbestos : : Al; Hg : : Glucose : : Chlamydia Trachomatis : : Mycobacterium TB : : Cytomegalovirus : : Substance P : : CEA; CA-125; DUPAN-2: : 8-OH-dG : : DHEA :</p>	<p>Right Hand write R-H</p> <p>before treatment</p> <p>BDORT Grading: _____</p> <p>after treatment</p> <p>BDORT Grading: _____</p> <p>BDORT Grading: _____</p>
<p>Left Foot write L-F</p> <p>before treatment</p> <p>BDORT Grading: _____</p> <p>after treatment</p> <p>BDORT Grading: _____</p> <p>BDORT Grading: _____</p>	<p>: Telomere : : Integrin $\alpha_5\beta_1$ (or Oncogene C-fos Ab2): : Acetylcholine : : Chrysotile Asbestos : : Tremolite Asbestos : : Al; Hg : : Chlamydia Trachomatis : : Mycobacterium TB : : Cytomegalovirus : : Substance P : : PSA; CA-125 : : 8-OH-dG : : DHEA :</p>	<p>Right Foot write R-F</p> <p>before treatment</p> <p>BDORT Grading: _____</p> <p>after treatment</p> <p>BDORT Grading: _____</p> <p>BDORT Grading: _____</p>

After Treatment: BP: _____ / _____ Pulse: _____ Resp. Rate: _____ Body Temp: _____

(All the measurement units used here are BDORT Units)

Safe Non-Invasive and Non-Costly Diagnosis and Treatment of a Brain Tumor by Using Mouth-, Hand- and Foot-writings as well as BDORT and Selective-Drug-Uptake and Enhancement Method

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ABSTRACT

The patient was a 66 years old Caucasian woman who suffered from weight-loss (non-intentionally, 15 kg in 6 weeks), night-sweats (two times changing of bed-sheets per night), and fever of around 38-39°C as well as an strong tiredness and a general lack of energy (even moving around short distances in her house was so tiring that she had to lie down and rest for a while). She consulted a physician who admitted her into a hospital where she was thoroughly examined for three weeks. (Chest X-ray, routine laboratory tests, specialized laboratory tests for rheuma-factors, borrelia, tropical diseases, HIV, TBC, listeriosis, mononucleosis, cytomegalo-virus, typhoid, paratyphoid, brucella; an abdominal sonography, echocardiography, gastroscopy, coloscopy, serum electrophoresis, Immunoelectrophoresis, various tumor-markers, CT-scan of the brain and a whole body MRI as well as bone-marrow samples and blood samples were taken and analyzed.)

All these examine didn't lead to a diagnosis. The only distinctions were an elevated blood sedimentation rate (120 mm after one hour) and an elevated C-reactive protein (110 mg/ dl; normal is smaller than 5 mg/ dl) both indicating towards an inflammation. Together with the above mentioned symptoms the doctors suspected a malignancy (every malignancy goes together with an inflammation) or a chronic inflammatory disease of some kind.

So after three weeks the hospital doctors recommended the taking of 40 mg of Cortisone per day on a probationary level which is a common thing when they don't know what the reason for the inflammation is. By then the patient had lost trust in her treating hospital-physicians. She called Dr. Omura and asked for help. He recommended not taking the steroids as they might mask the symptoms or might even worsen the disease. She faxed him a paper with her mouth- hand- and foot writing from each side of her body, which he analyzed using the BDORT: Within some minutes he was able to diagnose an Anaplastic Astrocytoma on the left side of the brain. Above this she had a strong heart infection with bacteria and virus. For the heart-condition he

recommended the taking of Amoxicillin and EPA/DHA and applying the Selective Drug Uptake and Enhancement Method. For the brain cancer the patient took on a regular basis Folic acid, EPA/DHA (as well) and Cilantro according to Dr. Omura's anti-cancer-program. After each medication she stimulated the true stomach 36 with a permanent acupuncture needle for 200 times as well as the proximal phalanx of her third finger which was stimulated with a red LED light for about 5 minutes. Due to this treatment her condition improved slightly so that she could leave the hospital, where the doctors wanted to give her Cortisone and the drinking water was strongly BDORT --"-testing. In the following weeks she drank BDORT--"-testing water and didn't use her BDORT--"-testing glasses any more. She still felt weak had night-sweats but didn't have any more fever and her weight was stable. Three Weeks later the patient came to New York, to be examined by Dr. Omura in person. She was asked to do the mouth-, hand- and foot-writing again and as she mentioned that she was wearing a denture on her upper jaw, Dr. Omura asked her to do the mouth-writing on each side twice, one time with denture, one time without it. As depicted in the table #1, her Integrin α 5 β 1 with dentures was tested on the mouth-writing with the left side 82.5 ng BDORT, in the rest of the body 2.5 ng BDORT and the EMF gave resonance with an Anaplastic Astrocytoma; whereas without the dentures it came down to 2.5 ng BDORT on all parts of the body and no resonance with EMF of an Anaplastic Astrocytoma could be demonstrated. So we became aware that the denture might be the source of the problem therefore it was to be examined further (see table #2). It consisted of three different synthetic materials: The Teeth and two differently colored (one pink and one transparent) sorts of plastic out of which the basis was made. While the teeth- and the transparent material tested BDORT--"+", the pink part tested strongly BDORT--"-". 0.025 mg BDORT of Asbestos could be measured in this part. For the other measurements please refer to the table #1. As a consequence the patient didn't wear her dentures anymore and is to this date trying to get new-ones prepared with BDORT--"+"-testing material.

One more aspect to this shall be mentioned: Since the Asbestos was so significantly elevated in the malignant area further possible sources were investigated. It was found out by BDORT-testing and afterwards by speaking with the neighbors, that the neighbor-house of the patient's house has an Ethernet roof made partly out of Asbestos.

Experts estimate that alone in Germany annually between 100 to 900 tons of Asbestos are emitted in the air by Asbestos-containing roofs. The process (<http://www.schiefer.de/pressrelease.php?mitid=124>) is increasing over time since the concerned roofs are decomposing in wind and rain.

Table #1

MOUTH, HAND, & FOOT WRITING FORM

by Yoshiaki Omura, M.D., Sc.D., © 2010

Name: _____ Age: _____ Sex: _____ Weight: _____ Height: _____
 Address: _____ Date: _____ Time completed: _____ am pm
 Profession _____ Questions? Call 212-781-6262
 Phone #: _____ Cellular Phone #: _____ Fax #: _____ E-mail: _____
 Chief Complaint: _____

FAX TO DR. OMURA: 212-923-2279

Before Treatment: BP: _____ / _____ Pulse: _____ Resp. Rate: _____ Body Temp: _____		
Left Mouth write L-M before treatment BDORT Grading: _____ after treatment BDORT Grading: _____ BDORT Grading: _____	: Telomere : : Integrin $\alpha_5\beta_1$ (or Oncogene C-fos Ab2): : Acetylcholine : : β -Amyloid (1-42) : : L- Homocysteine or CRP: : Chrysotile Asbestos : : Tremolite Asbestos : : Al; Hg : : Chlamydia Trachomatis : : Mycobacterium TB : : Cytomegalovirus : : Substance P : : 8-OH-dG : : DHEA :	Right Mouth write R-M before treatment BDORT Grading: _____ after treatment BDORT Grading: _____ BDORT Grading: _____
Left Hand write L-H before treatment BDORT Grading: _____ after treatment BDORT Grading: _____ BDORT Grading: _____	: Telomere : : Integrin $\alpha_5\beta_1$ (or Oncogene C-fos Ab2): : Acetylcholine : : β -Amyloid (1-42) : : Cardiac Troponin I : : Chrysotile Asbestos : : Tremolite Asbestos : : Al; Hg : : Glucose : : Chlamydia Trachomatis : : Mycobacterium TB : : Cytomegalovirus : : Substance P : : CEA; CA-125; DUPAN-2: : 8-OH-dG : : DHEA :	Right Hand write R-H before treatment BDORT Grading: _____ after treatment BDORT Grading: _____ BDORT Grading: _____
Left Foot write L-F before treatment BDORT Grading: _____ after treatment BDORT Grading: _____ BDORT Grading: _____	: Telomere : : Integrin $\alpha_5\beta_1$ (or Oncogene C-fos Ab2): : Acetylcholine : : Chrysotile Asbestos : : Tremolite Asbestos : : Al; Hg : : Chlamydia Trachomatis : : Mycobacterium TB : : Cytomegalovirus : : Substance P : : PSA; CA-125 : : 8-OH-dG : : DHEA :	Right Foot write R-F before treatment BDORT Grading: _____ after treatment BDORT Grading: _____ BDORT Grading: _____

After Treatment: BP: _____ / _____ Pulse: _____ Resp. Rate: _____ Body Temp: _____
 (All the measurement units used here are BDORT Units)

Table #2



DETECTION OF HELICOBACTER PYLORI BY RAPID OMURA TEST

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Keywords: Bi-Digital O-Ring Test /BDORT/, Reference Control Substance /RCS/, Helicobacter pylori

ABSTRACT

Background:

There is a variety of oriental medical traditional diagnostic and therapeutic methods. Currently, scientifically based diagnostic and therapeutic methods based on bioenergetics, quantum-biology and string theories are being intensively developed. One of them is Japanese scientist Yoshiaki Omura's test (Bi-Digital O-Ring Test, BDORT) or O-ring test.

Purpose:

This study aimed at evaluating the HP detection rate through O-ring test which is a rapid non-invasive method for pathophysiological changes, investigating the sensitivity and specificity of this test in comparison with other diagnostic tests such as Urease test for HP detection, histological test, ELISA test and determining it as the rapid O-ring test.

Method:

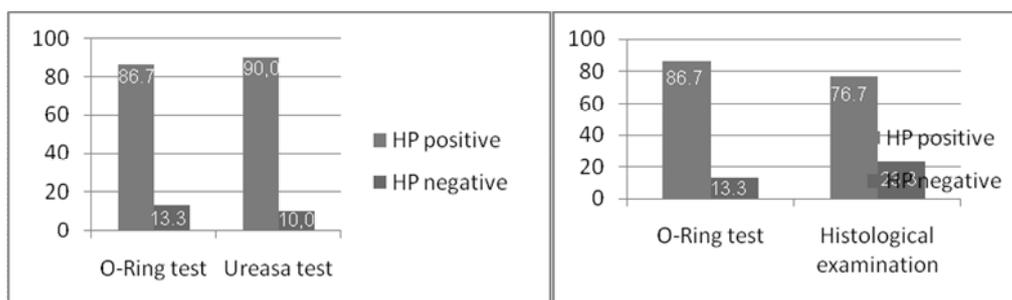
A total number of 150 individuals aged between 22 and 77 years old from both urban and rural areas with syndromes of gastric dyspepsia, were involved in the study 2008. O-ring test was taken by using HP100 ng /RCS;BDORT,Jpn/, control preparation, pathohistological preparation made from stomach tissue HP/+, HP/++/ and HP/+++ activity of HP in the Center of Pathology, Mongolia, control preparation of HP/-, non-magnetic conductive metal rod capable of irritating biologically active points /BDORT; Jpn/, and device for measuring finger pinch strength "Baseline" /USA NY 10602/ according to methodology of Omura /Omura, Y. 1977-2008; BDORT/. The study was performed by using cross-sectional study design and compared the diagnostic methods. All individuals involved in the study were examined by O-ring test for detection of HP as described by Omura /Omura, Y. 1977-2009; BDORT/ to trace momental distribution, and they were divided into 3 groups with 30, 30 and 90 individuals according to research methodology, the first group people /n=30/ of which were tested by simultaneous Urease and Histological tests during endoscopy of esophagus-stomach-duodenum, second group /n=30/ by ELISA test /H.pylori EIA Kit, USA/ to detect HP antibody IgG, the obtained results were compared with that of O-ring test, and experimental comparisons among the groups were evaluated and concluded.

Results:

HP detection by rapid O-ring test demonstrates 75.3% of all patients involved in the study were positive.

Comparisons of O-ring test and Urease tests

		Urease test					
		positive		negative			
O-Ring test	positive	26	0	26			
				86.7%			
	negative	1	3	4			
			13.3%				
total		27	90%	3	10%	30	100%



Comparisons of O-ring test and Histological examinations

		Histological examinations				
		positive	negative	total		
O-Ring test	positive	23	3	26 86.7%		
	negative	0	4	4 13.3%		
	total	23	7	76.7%	23.3%	30

Comparison of O-ring test with urease test demonstrated that the sensitivity of O-ring test was 96.3%, specificity was 75.0%, and kappa coefficient had good compatibility /k=0.84/ and comparison with histological test revealed that both sensitivity of and specificity was 100.0%, and kappa coefficient had above moderate compatibility /k=0.67/.

Comparisons of results of O-ring test and ELISA test

		ELISA test		
		positive	negative	total
O-Ring test	positive	16	2	18 60.0%
	negative	1	11	12 40.0%
	total	17	13	30

Comparison of O-ring test with ELISA test demonstrated that the sensitivity of O-ring test was 94.1%, specificity was 91.7%, and kappa coefficient had above moderate compatibility /k=0.79/.

HP methods	HP+/+		HP/-/		Total	
	n	%	n	%	N	%
Urease test	27	90.0	3	10.0		
Histological examinations	23	76.7	7	23.3	30	100.0
O-Ring test	26	86.7	4	13.3		
ELISA test	17	56.7	13	43.3		
O-Ring test	18	60.0	12	40.0	30	100.0

		Urease test	Histological examinations	ELISA test
O-Ring test	sensitivity	96.3	100.0	94.1
	specificity	75.0	100.0	91.7
	kappa coefficient	K=0.84	K=0.67	K=0.79

Conclusion:

Therefore, detection of HP by rapid O-ring test can be inferred to be very sensitive, specific screening method with good compatibility, which could be used extensively as screening test among the pop

How To Awaken Your Genes and Discover Hidden Talents

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ABSTRACT

Recent studies have shown that environment and other external factors change the way our genes work.

Physical and chemical factors are well known, but I offer a new perspective: how we think can activate good dormant genes and switch off negative genes.

1) I give an example in which laughter can turn on and off our genes and decrease high blood glucose level of diabetic patient.

2) Since the genetic code is clearly too complex to be created randomly, it offers evidences that greater power exists in the universe. I call this power “Something Great”.

Finally I speak Something Great and the wonder of the blue print of Life.

Characteristics and Applications of CMC Sensors in Robotic Medical and Autonomous Systems

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ABSTRACT

1) Introduction:

Carbon micro-coils (CMCs) are a kind of the novel functional materials with 3D-helical/spiral structures and coil diameters in μm orders, and has been the first prepared by Motojima et al. at 1990¹⁾. The CMCs are possible candidates for electromagnetic wave absorbers, remote heating materials, visualization elements of microwaves, tactile/proximity sensor elements, bio-activators or bio-deactivators, etc.



Fig. 1 Representative CMCs.

2) Preparation, morphologies and microstructures

2.1) Preparation process: CMCs are synthesized by the metal catalyzed pyrolysis of acetylene containing small amounts of sulfur impurity at 700-800°C. While the coils axis rotating by 60 rpm, the CMC grew vertically on the graphite substrate with their growth tips pointing to the source gas inlets.

2.2) Morphology: Fig. 1 shows a SEM image of the representative CMC with a double-helix form. The CMCs are formed by entwining two carbon fibers with a constant coil diameter and a constant coil pitch through the coil length. The coil diameter is generally 1-10 μm , fiber diameter is 0.1~1 μm , and the coil length is 0.1~10mm depending on the reaction conditions. The CMC with a single-helix form similar to proteins can be obtained by controlling the reaction conditions, especially catalysts.

2.3) Microstructure: The CMCs have a 3D-helical/spiral structure, and have no cavity but packed densely with the fine carbon grains in the central part of the fiber axis. As-grown CMC is almost amorphous, but they can be graphitized by heat treatment at high temperatures (especially at above 2500°C).

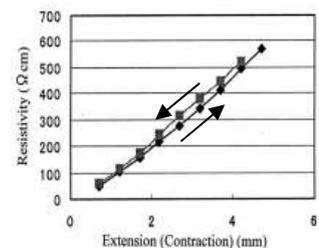


Fig. 2 Change in electrical resistivity of a piece of CMC.

3) Physical properties

The CMC shows excellent elasticity, and the electrical resistivity sensitively changes under the extension or contraction (Fig. 2). Furthermore, the CMC have electromagnetic (EM) solenoid-like forms and efficiently absorbs the irradiated EM wave according to the Faraday's Law, thus the inductive electromotive force is generated. For higher EM wave frequency and for CMCs with longer coil length, larger electromotive force is obtained. Weak magnetic field was generated when weak electric current was applied to the CMC.

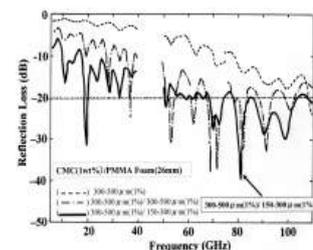


Fig. 3. Reflection loss of CMC/PMMA sheet.

4) Application of CMC

4.1) EM wave absorbers²⁾: CMCs(1-2%)/PMMA composite beads and foam sheets absorb EM waves in specific band regions by above -20dB (absorption: >99%).

Fig. 3 shows the EM wave absorption ability of CMC/PMMA foam sheet (total thickness:26mm) It can be seen that two sheet samples (300~500 μm(1%)/150~300μm(1%)) absorbs the EM waves in 50~110 GHz by more than -20dB, while a single sheet sample shows poor absorption ability.

4.2) Microwave heaters: The CMC can effectively absorb microwave and generates electric current which turns to become heat.

For example, within a microwave oven, CMC samples of mg weight can absorb 2.45GHz microwave and be heated, oxidized, and burned down within seconds. When silicone oil among which 1wt%CMCs are uniformly dispersed is heated in a microwave oven, the temperature increased by 3-5 times higher than that of carbon powder, (Mn, Zn) ferrite and water, showing an excellent microwave absorption ability.

4.3) EM wave visualizers³⁾: The emission pattern, site or strength of radio wave or microwave cannot recognize by naked eyes. Because CMC can effectively absorb microwaves resulting in the sensitive temperature increase, the temperature increase can be easily visualized by an IR thermograph, and thus microwaves are easily visualized. Fig. 4 shows an IR thermograph of an EM wave visualization screen which was made of CMC/PMMA beads and heated for 5 sec in a microwave oven. Higher temperature region, in which strong microwave is distributed, can be seen every 6 cm corresponding to a half of the wave length of microwave (2.45GHz). That is, the distribution pattern and strength of microwave within a microwave oven can be easily visualized using the CMC microwave visualization screen.

4.4) Breeding or anti-breeding agent for living cells: It was found that an addition of CMC to skin cell or collagen fibrils resulted in the increase in the number of skin cells by 60% or collagen fibrils by 15% against control sample. Using these effects, cosmetics containing small amount of CMC is now commercialized⁴⁾. Fig. 5 shows the effect of CMCs (0.04wt%) for anti-breeding of Hela cell (human-uterus-neck-cancer-cell). It can be seen that the number of cancer cell after breeding for 7 days was 17% for CMCs and 76% for the pulverized CMC which has no coiling forms, against control sample, suggesting strong anti-breeding effect of CMCs against the cancer cells. The similar anti-breeding effects of CMCs were observed against the breast cancer cells, liver cancer cells, skin cancer cells, etc. while the mechanism of anti-breeding effect of CMC against cancer cells are not known. However, because the pulverized CMC without coiling patterns does not show the anti-breeding effect, accordingly, some affects caused by the coiling patterns of CMCs may strongly bring to the anti-breeding effects.

4.5) Tactile/proximity sensors⁵⁾: It was observed that the CMC/elastic resin composites showed the excellent tactile and proximity sensing properties. The

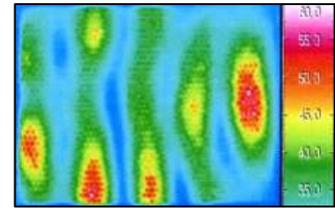


Fig. 4. IR thermograph within a microwave oven.

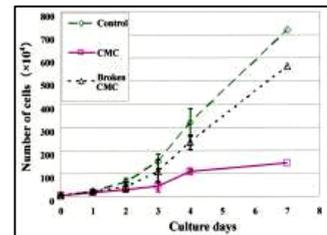


Fig. 5. Anti breeding effect of CMC for uterus-neck cancer

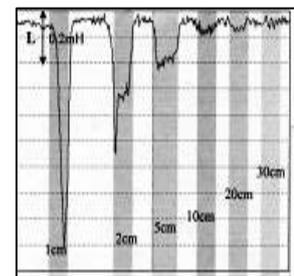


Fig. 6. Change in inductance, when a hand is accessed to a CMC sensor element



Fig. 7. Tactile sensor element for an endoscope assist robotic apparatus.

characteristics of CMC sensors elements are very simple structure, high tactile/proximity sensibility, high space resolving power, □possibility of preparing very thin, small, large, fibrous, complex-forms, the same sensing ability for all parts of the element, multi-functional properties, etc.

4.6) Application of CMC tactile/proximity sensor elements to advanced robotic medical instruments, etc.

The CMC tactile/proximity sensor elements have many excellent properties, and are potential candidates of sensing materials for advanced medical instruments such as catheter, endoscope, forceps, large diagnostic instruments, care-robots, as well as for safety systems of elevator doors, car slide door, etc.

5) Conclusions

The CMC has unique 3D-helical/spiral structure with the coil diameters of micrometer orders, and thus can strongly resonance with (micro)waves. The CMC has many excellent properties and many applications. Concerning on the details of CMCs, please refer the recent reviews.⁶⁻⁹⁾

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Establishment of Stomato-facial and Neuro-cranial Medicine : Disclosure of Major Causes of Intractable Immune Diseases, Including Psychiatry, by Means of Diagnosis Ex-juvantibus via the Bi-Digital O-Ring Test.

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The author has already reported on the new revolutionizing therapeutic method for immune diseases applying the Bi-Digital O-Ring Test (Ohmura, Y. 1997-2010; a.k.a. BDORT) and reported in several papers. Following that, the author established Stomato-facial and Neuro-cranial Medicine to develop effective therapeutic methods for intractable immune diseases, including psychiatry and carcinoma, from following the characteristics of man, the vertebrate: Man is a mammal of evolving vertebrates constructed with multiple visceral organs and multiple sensory organs concomitant with visceral and skeletal muscles, all of which are constructed by 60 trillion multiple cells and are controlled by the unified system as an integrated whole. Each cell has thousands of mitochondria which were parasites derived from archetype prokaryote aerobic bacteria with genes some two billion years ago. The life system of higher multicellular mammals is that 1) at the cellular level life is the remodelling system of a part of or all cell components of a high molecular organic substance concomitant with a turnover of energy metabolism which is supplied by mitochondria and controlled by the gene information system, and 2) at the animal body level, all of the multiple organs and tissues constructed by 60 trillion cells are controlled by the unified system via not only the cardiovascular system and the neuro-muscular system but also by the following five kinds of energy systems, namely: a) The environmental energy system including gravitation of the earth and moderate thermal temperatures and atmospheric energy; b) The visceral digestive tract and somato locomotive system moving under mitochondrial energy are primarily supplied by the cardiovascular medium system and controlled by stimuli via the neural system; c) Each cell has a nucleus and many mitochondria both of which have genes. Mitochondrial energy metabolism is inevitable for life activity, i.e., cellular remodelling. Without mitochondrial activity no turnover of life activity occurs. Mitochondria generate cytokines by which cellular communications are carried out; d) Biomechanical stimuli are converted in an organism by hydrodynamics with streaming potential. This streaming potential triggers the gene expression of stem cells. By this mechanism morphological transformation in ontogeny as well as phylogeny, namely evolution, takes place; e) The immune system in animals is the cytological digestive system. Immunity at the cytological level is the life activity of cells which depend upon mitochondrial activity to run perfectly. The Stomato-facial and neurocranium system is, for humans, the individual life system itself. The face represents individual features and there also exist the five sensory organs. The face, namely viscerocranium, is a branchial gut which

represents all of the gut. In the face 10 cranial nerves in 12 are distributed out of viscerocranium. The gut system and the cerebral neural system are united by the pituitary gland, namely the hypophysis, of which the anterior lobe arises from the oral epithelium in the embryo, and the posterior lobe from the floor of the diencephalon. The hypophysis, pineal gland and choroid plexus have no blood-brain barrier. Therefore, granulocytes containing tremendous numbers of viruses or bacteria enter into the liquor of the cerebrum, and they then disseminate microbes into neurons or glia cells. The author disclosed that intractable immune diseases are not auto-immune diseases but opportunistic infections or autotoxic diseases which are caused by their own non-pathogenic common enteromicrobes. The concept of “auto immunity” and “rebellion of leukocytes” as well as “self- not-self immunology” is a misunderstanding of science. Leukocytes never rebel but are contaminated by enteromicrobes. The author has disclosed that intractable immune diseases, including psychiatry and carcinoma, are severe cases of maladies which have been known since 50 years ago as opportunistic infections or autotoxic diseases, histiocytosis, granulomatosis, or sarcoidosis, which have been brought about by non-pathogenic common enteromicrobes. These diseases are caused by intracellular infections in various tissues or organs by means of infected granulocytes through Waldeyer’s lymphadenoid tissue by mouth breathing and through GALT by cooling the gut with cold drinks. Due to intracellular infection, deterioration of mitochondria in infected organ cells occurs, resulting in a disturbance of the specific function of the cells. Therefore, at the cellular level, immune diseases take place due to the deterioration of mitochondria by various causes. Surveying by BDORT not only in the patient directly, but also in CT scanning film, intracellularly infected organs or tissues can thereby be detected and known as to what kinds of medicines or bifidus factors are most effective to cure the infection. The author has established Stomato-facial and Neuro-cranial Medicine to apply effective, new therapeutic methods for treating not only immune-diseases but also mental illness and carcinoma by means of controlling environmental energy and biomechanical habitual behavior, preventing intracellular infection as well as activating mitochondria, and administered effective antibiotics, antiviral agents, and bifidus factors to various patients. All intractable immune diseases occur from the same causes and mechanisms for patients by inadequate energy absorption and by biomechanical energy evoked by habitual behavior and by intracellularly disseminated common enteromicrobes via granulocytes, Therefore, all kinds of intractable immune diseases, including psychiatry and carcinoma, can be prevented, treated, and cured by a proficient Stomato-facial and Neuro-cranial practitioner when the case is not too late.

References:

K Nishihara : Development of Therapeutics for Human-specific Intractable Immune Diseases by Means of Bio-energy Resonance - Remedy of Mitochondrial Deterioration Due to Intracellular Infections Using Bi-Digital O-Ring Test – Biogenic Amines, 22, (1,2) : pp. 75–84, 2008

**For the Further Development of Cancer Treatments,
Bi-Digital O-Ring Test must be Essential.**

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ABSTRACT

The cure rate of cancer is hovering and hard to progress in the global points of view.

There are 2 important unsolved factors. One is invisible cancer energy, another one is insufficient and inadequate treatment for cancer in association with disagreeable side effects.

To find out the invisible cancer energy and destroy them are the most important to avoid the recurrence and metastasis of cancer.

The only method to find invisible cancer energy is Bi-Digital O-Ring Test (OMURA, Y. 1977-2010; following BDORT), which could not only be helpful to find them handy, speedy, accurately, and economically that is.

I would like to inform you the most effective method to kill cancer energy without any side effects which I have studied basically and clinically for 10 years concerning new type of microwave generator.

The Role of BDORT in the Acupuncture Treatment

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ABSTRACT

Acupuncture is one of the most powerful treatment strategies in the field of complimentary and alternative medicine. There are an increasing number of studies regarding the efficacy of acupuncture, but it is yet to be established whether or not the treatment is more than merely a placebo effect, which is quite contrary to what has been observed in the clinical practice for more than 2,000 years.

There seems to be several reasons why the efficacy of acupuncture is still debated without strong scientific evidence:

- 1) Acupuncture manipulates and corrects the balance of Qi, blood, fluid which compose the function of body.
- 2) Needles are piquered to stimulate acupoints along the meridians.
- 3) Diagnosis and treatments are designed and performed using various reflex systems including tongue, radial pulse, abdomen, scalp, ear, etc.

As above described “traditions of acupuncture” have not been proved scientifically, it may be important to verify the existence of specific points, routes, and zones which are beneficial to oriental diagnosis and treatment, regardless of the similarity to the traditional acupoints, meridians, and their sphere of influence.

Bi-Digital O-Ring Test (OMURA.Y. 1997-2010; BDORT) uses the electro-magnetic resonance phenomenon between 2 identical substances. It has been applied to associate specific points, routes and zones to various organs, which are quite similar, but not identical to traditional concept of acupuncture medicine. These can be utilized for more accurate oriental diagnosis and more sophisticated acupuncture treatments with better results.

In this symposium, the author will review the diagnosis and treatment of acupuncture modified by BDORT and discuss about its usefulness and future insight in this field.

Field Medicine and the Creation of Healing Power

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Abstract

Life is invisible. Only we can see is living thing. We can not analyze life itself, although analysis is a fundamental method of science. It is only phenomenon which can be analyzed. Disease is also invisible. We detect a lesion radiographically and pathohistologically, but never find the function which makes the normal cell malignant. Also invisible is health. We have been defined many immunological cells and substances, but we have not come to understanding yet how those work orderly in organism.

Life can be considered as a field. Organism is likely to be condensed phase in it. It means that organisms are connected to each other through the field. Life field involves the natural healing power, thus the healing power is outside of the body rather than inside. Exactly speaking, it is interaction between inside and outside of the body, that is communication. Life field not only exists a priori, but also changes incessantly through our living. Therefore we can originate therapeutic function through the communication between humans and/or human and nature. I would like to propose a term "Field medicine" to describe it.

Many complementary medicines can be regarded as this type of medicine. These are not objective methods because the examiner is involving in the communication; however, this interaction itself leads the patient to healing.

The Effectiveness of the Bi-Digital O-Ring Test in Integrated Medicine

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ABSTRACT

ORT is an extensive reaction measuring method, covering not only materials (molecular and atomic) but also life energy (quantum) areas. Especially in the area of medicine, it is a diagnostic method and a medical treatment in which a resonance phenomenon of a life form is used. Its clinical effectiveness is expanding in areas of use, year after year. I would like to give a general overview of various aspects of the effectiveness of the ORT in integrated medicine used in my daily practice.

- 1) The solution of legal compensation of Minamata disease and in the difficult cases of medical diagnoses of diseases which occurred in the past-
The case of a girl who died at the age of six: medical information collected by ORT measurement in the picture
- 2) The diagnosis and treatment of influenza virus (A, B, new type)
 - ① Current virus measuring method is less accurate compared to the ORT diagnosis.
 - ② According to the ORT, Tamiflu was considered to be invalid some time ago, however it has been unthinkingly continued to be dispensed.
 - ③ The effectiveness of Chinese medicine and meridian treatment can be confirmed through objective assessment of ORT.
- 3) The needs for super early / early diagnosis within the incubation period for foot-and-mouth disease viral infection
 - ① A diagnosis of sick cows within an incubation period had not been sufficiently obtained.
 - ② Therefore sick cows could not be completely isolated.
 - ③ The spread of the infection had already been predicted in the early stage.
- 4) Environmental(material) pollution syndrome (sick house syndrome)
 - ① Diagnosis from pollutants and treatment by ORT (dioxin, methyl mercury, cadmium, asbestos, mercury, etc.)
 - ② Problems with dialysis patients: pollutants cannot be discharged in the dialysis fluid in regular ways. Meridian treatment is effective.
- 5) Super early/ early diagnosis of carcinogenesis
 - (1) Carcinogenesis starts from 15~20(over) years to 30 years prior (skin cancer and Bowen disease). Carcinogenesis may start earlier depending on the correlation between an initiator and a promoter.
 - (2) Diagnosis of carcinogenesis: conduct stress test of cancer DNA by placing multiple carcinogens on the patient's palm.
 - ① Reaction on the palm (with no stress -)
 - ② Reaction on the palm (with stress +)
 - ③ Reaction at the suspected organ (with stress +)Carcinogenic factors are determined negative in the case where these three conditions are all negative (super early/ early diagnosis of carcinogenesis

and diagnosis of healing after treatments)

Analysis of Solar energy paper (Dr. Omura) and the effectiveness of its usage for cancer treatment.

(3) The needs for super early/ early diagnosis of carcinogenesis and its treatment

Degree of malignancy of cancer: Depending on if the cell membrane is adhesive or not (characteristics of epithelial cells), problems occur, of which cancer cells grow into nodules or in a free state. This largely determines the prognosis of the cancer. Therefore multiple tests in many areas, rather than biopsy tests, are necessary for tissue diagnosis.

< Carcinogenic prognosis tests > . . . Multiple carcinogens are stressed to check risks in the super early/ early stages in daily practice and are used to measure the degree of resonance with the cancer DNA. (Negative / Positive)

6) Psychiatric disorders (schizophrenic disorders, dementia, depression, Alzheimer's, etc.)

① Select proper medicine, using resonance techniques and reversely diagnose the disease. (Schizophrenic disorders and Haloperidol test)

② Proper doses of medicines can be determined before prescription is made

③ Effectiveness of Haloperidol treatment: very few recurrent cases were found.

④ Schizophrenic constitution (temperament) , pre-morbid symptoms, are often seen clinically by using the ORT diagnosis.

⑤ In general an increase in dopamine is seen.

7) Diagnosis and treatment of an abnormal meridian (New meridian treatment method)

New, six separate locations/ five elements of the body color (color theory- Kashima)

The effectiveness of meridian treatment for cancer or pain can be strengthened by patching medicine, solar paper (Dr. Omura) or other treatment information on the meridian flow (S->N meridian)

8) ORT diagnosis regarding effectiveness or harmful effects of medicine before dosing

The effectiveness (whether it is effective or harmful) of medicine can be determined before dosing.

Problems of multiple dosing: ① In the case of co-prescribing of effective medicine and harmful medicine, effectiveness of the active medicine significantly decreases. ② In the case of using harmful medicine, the value of β -Amyloid(1-42), the causative agent of dementia, drastically increases.

9) Analysis of the effectiveness of food: ORT makes it possible to analyze the effectiveness of food or supplements on a living body. (the effectiveness of curry, seaweed, bitter gourds)

ORT can detect many items of multi-purpose allergy factors in foods within a short time.

In conclusion, the effective clinical information through BDORT (Dr. Omura) I have talked about is the scientific information that secures its objectiveness and repeatability by certain measures. I also regard it as an effective method that is greatly useful to the development of the integrated medicine whose needs are currently emphasized. Moreover it does not deny the valid use of ever-improving modern medicine. Instead, by docking with modern medicine, it not only promotes medical practice, research and development but also reduces the waste of medical expenses caused by multiple dosing and duplicated testing and examination. Therefore I believe it can be a very effective measure in reducing medical expenditures.

Trial Test Between Positive Response of Bi-Digital O-Ring Test & Standard Laboratory Test - High Concordance Rate -

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ABSTRACT

Introduction By evaluating the abnormalities found by Bi-Digital O-Ring Test (Omura Y. 1977-2010;BDORT) with another Medical doctor in other affiliation, double blind check between BDORT and Standard Laboratory Test are performed.

Subjects 168 patients of adult diseases by checked by BDORT from 2003 until 2004, 57 patients (male: 22 cases, female: 35 cases) with the results of medical checkup were analyzed.

Mean age: 56.8 ± 22.2 years (male: 59.0 ± 22.2 years and for women: 55.4 ± 21.8 years)

Materials & Methods

1. Evaluation of BDORT

By using X-, Y- axis laser scanning with line laser, BDORT grading -4 areas were specified as BDORT abnormal organs.

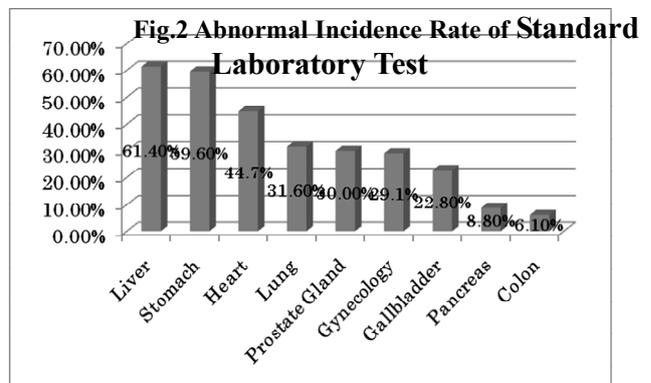
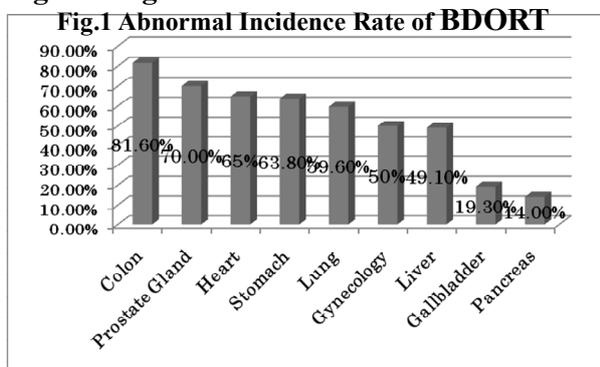
2. Items of Standard Laboratory Test

The following items were examined as whole body organs.

- 1) Lung: Chest X-ray
- 2) Heart: Chest X-ray, E.K.G, Blood Pressure
- 3) Liver : Abdominal Ultra Sonic, Liver Function (Blood Test)
- 4) Gallbladder : Abdominal Ultra Sonic
- 5) Stomach: MDL, HP
- 6) Pancreas : Abdominal Ultra Sonic, HbA1c(%), Pancreatic function (Blood test)
- 7) Colon : Stool Hemocult
- 8) Gynecology: Echo, Pelvic examination findings
- 9) Prostate Gland: Echo, PSA

Findings of standard medical tests : A) Heart - high blood pressure or EKG B) Lung - Chest X-ray C) Liver - Abdominal Ultra Sonic, or Liver Function (Blood Test) D) Gallbladder : Abdominal Ultra Sonic E) Pancreas - Abdominal Ultra Sonic or HbA1C or Pancreatic function (Blood test) F) Stomach – MDL or Helicobacter Pylori G) Colon : Stool Hemocult H) Gynecology –Echo or Pelvic examination findings I) Prostate Gland - Prostate Echo or PSA If either one or more abnormalities in various organs by standard medical examination, determined as abnormal organ.

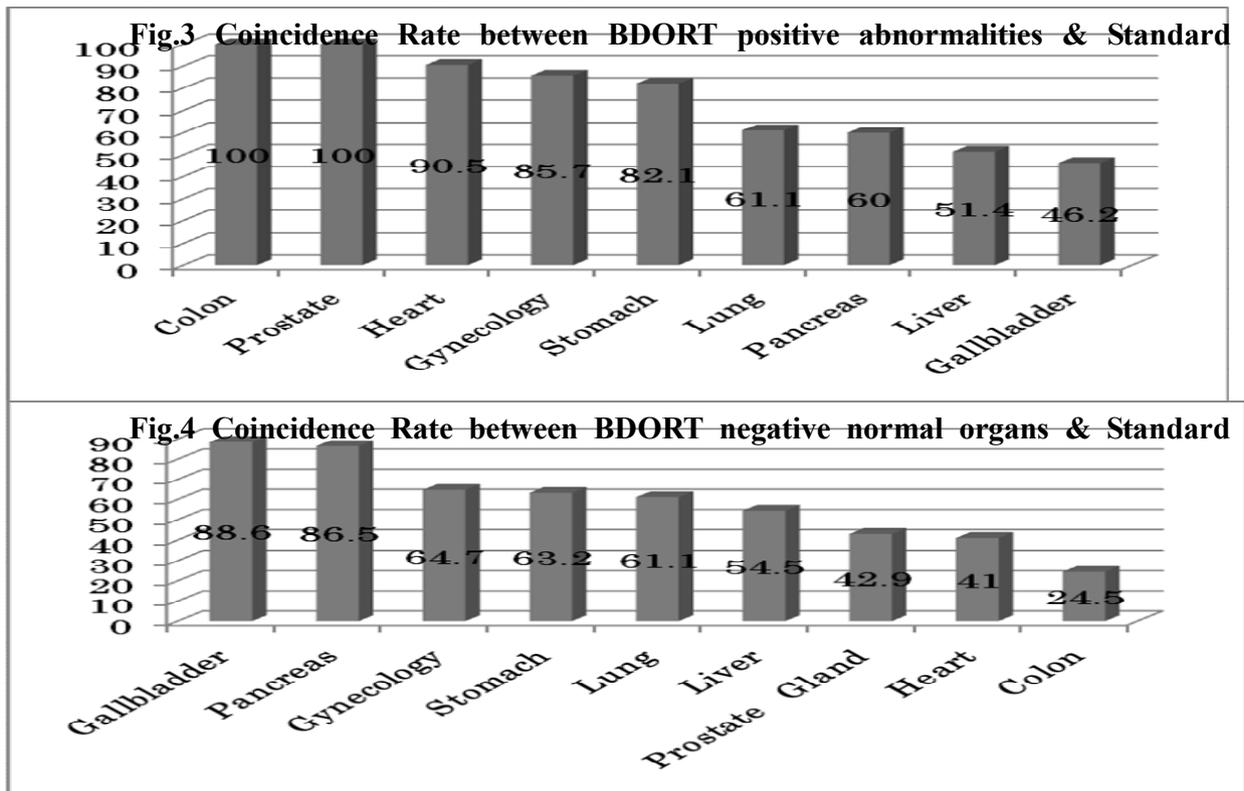
Results 1 . Abnormal Incidence Rate of BDORT & Standard Laboratory Test are shown in Fig.1 & Fig. 2.



Colon (82%), Prostate (70%),Heart (65%)and Stomach were abnormally high rate

detected by using BDORT and Gallbladder (19%) and Pancreas (14%) were low. Liver (61%), Stomach (55%), Heart (45%) ere abnormally high rate detected by standard laboratory test and Pancreas (8.8%) and Colon (6.1%) were very low.

2. Relation between of BDORT Positive Abnormality Detection Rate & result of Standard Laboratory Test are shown in Fig.3 and Fig. 4.



Comparing the results of standard laboratory test and BDORT, particularly Gallbladder, Pancreas and Gynecology were shown high specificity.

Discussion

The people with no abnormalities by checking BDORT tend to be very low percentage of abnormalities in medical checkup. In addition, BDORT checks abnormality very early, it takes 5 ~ 10 years until cancer diagnosis after the prediction of the cancer by BDORT. In early people 1 ~ 2 years until cancer diagnosis from cancer prediction of BDORT, but some people takes more than 10 years. From the result of in this research, if there is no abnormalities by regularly BDORT check, low probability of disease incidence is predicted.

To Know the Good Things for the Health by Reverse Using of Bi-Digital O-Ring Test (O-Ring Test (+) Detection Method and its Evaluation) – Grading Applied Evaluation System of Opening Degree of ORT Tester -

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ABSTRACT

Introduction The author diagnoses of the abnormalities by using Bi-Digital O-Ring Test (Omura Y. 1977-2010; below BDORT) and applying to the phenomenon of muscle weakness and abnormal location is somewhere in the body. However, for patients, BDORT for searching the healthy goods, foods and drinks etc., and protecting from harmful environments become necessary. So, we want to introduce a heuristic plus O-Ring Test. Also plus O-Ring Test was checked by using evaluation system by using ORT tester.**Methods**

1. Selection of the Fundamental Fingers

To select the fundamental fingers for BDORT, there are three conditions by the guidance from Prof. Yoshiaki Omura.

Condition 1. When the examiner pull the O-Ring formed by the examinee with his O-Ring made with his thumb and index finger right and left direction, examinees O-Ring will not be opened.

Condition 2. When the examiner made 2 O-Rings (one O-Ring made by thumb and index finger and another O-Ring made by thumb and the middle finger) and pull the O-Ring made by examinee right & left direction, the O-Ring will be opened more than 70%.

Condition 3. Even by changing the neck of the examinee vertically and horizontally, no difference in test results

When fulfilled the above 3 conditions, the fundamental O-ring of the examinee was determined.

Until this process is same between normal O-Ring Test and plus O-Ring Test.

2. Method of finding healthy goods

In case of finding healthy goods, examiner pulls the O-Ring formed by the examinee with 2 O-Rings (one O-Ring made by thumb and index finger and another O-Ring made by thumb and the middle finger) and pull the O-Ring made by examinee right & left direction, and test starts from the state of the O-Ring formed by the examinee opened. Start from the beginning of open condition of the O-Ring, O-Ring does not open when choosing the selection of healthy goods. Something good health when you choose something good to the body of the O-ring search does not open. Namely searching the good things with searching the things O-Ring does not open. Normally starting from the condition 1, minus decision will be made when O-ring open. From the viewpoint of the medical doctor, this minus discovering method is highly evaluated as the method of finding abnormalities of the human body. On the other hand, starting from the second condition, plus decision is made when he O-ring fingers are closed. This is a method of searching the healthy goods for treating good thing. Specially for the patients, this methods leads a patient to healthy way.

3. Evaluation by using ORT Tester

So far, the authors used ORT tester that can diagnose abnormalities, and has been reported that the muscles become stronger and hold a suitable drug. Even though by using ORT tester, at first control muscle strength should be determined. By determining the state of sharply detecting the change of muscles (weakened and strengthened), BDORT test will start.

ORT tester can be measured with the muscle strength and opening degree at the O-Ring opening.

Opening less than 20%, 20-40%, 40-60%, 60-80%, by setting more than 80%, -1, -2, -3, -4, +1, +2, +3 and simple by performing the grading and conducted a brief assessment.

Plus grading by using ORT tester

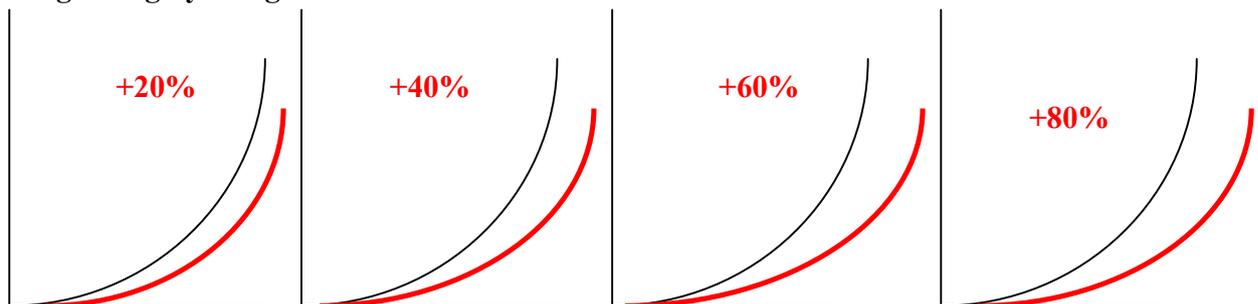


Fig.1 BDORT by using human



Fig. 2 BDORT by using BDORT

Results & Discussion

1. Normal BDORT starts from the O-Ring made by the control fingers closed. So a method of negative attention for searching the finding unhealthy goods for skipping.
2. (+) O-Ring Test is a method of finding goods of O-Ring closed by pulling 2 O-Rings. Since the beginning starting from O-ring is open, it is suitable for finding good things.
3. Normally BDORT is performed with 2 persons (examiner and examinee). Even using ORT tester, plus O-Ring Test was checked.
4. It is important to find healthy goods by using plus O-Ring test.

Evaluation of 8-OH-dG as an Indicator of Oxidative Stress Marker in Various

Diseases and Clinical Effects of Bitter Melon and Hydroxy Ion Water (H₃O₂-) Expecting Removal Effect of Oxidative Stress

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ABSTRACT

Introduction

8-hydroxy-2'-deoxyguanosine (8-OHdG) is one of the major forms of DNA damage induced by ROS, and has received increasing attention in recent years. One of the DNA bases to configure deoxyguanosine (dG) hydroxylation have been the eighth structure of DNA markers dG in DNA

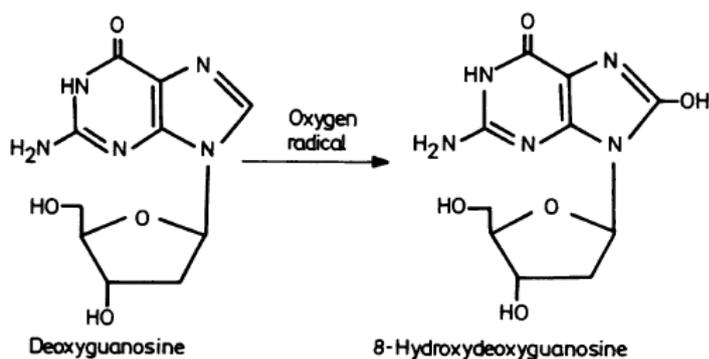


Fig 1 Formation of 8-OH-dG by hydroxylation of dG.

oxidative damage because of the low redox potential of most of the four types of bases, reactive oxygen species known to be susceptible to oxidation. Thus the oxidation products of 8-OHdG is considered a major and sensitive to reflect the impact of reactive oxygen species in biological. (Fig.1) The number

of diseases that are related to the onset of reactive oxygen species. Alzheimer's disease, cancer, ulcerative colitis, shoulders, hepatitis, acute pancreatitis, ischemic heart disease, ischemic enteritis, Crohn's disease, hypertension, autoimmune disease (atopic dermatitis, rheumatoid arthritis, myasthenia gravis, asthma, polymyositis, Hashimoto's disease and rheumatoid arthritis), acute circulatory failure (the shock), nephritis, myocardial infarction, diabetes, arteriosclerosis, stroke, Parkinson's disease, emphysema, leukemia, cataracts, anemia, edema, etc. is said to be high value of 8-OH-dG. Last year the author has reported about the increase of 8-OH-dG according to the influence of Electro-Magnetic Wave circumstances. According to the prospective study of breast cancer patients, cancer initiation with Oncogene C-fos Ab2, Integrin $\alpha_5\beta_1$ occurs. Several years before cancer initiation, 8-OH-dG increases (82% of breast cancer patients had television in their bedrooms). As experiences of the author, increases of 8-OH-dG and Integrin $\alpha_5\beta_1$ are observed in thyroid, breast and gynecological area in women and thyroid

and prostate gland in men after influence of the Electro-magnetic wave. Because a high correlation between electromagnetic radiation, patients are instructed to appliances away from the bedroom. As reported, 8-OH-dG increases in cancer, Alzheimer's disease, Cardiovascular disease, diabetes. But the author has found that 8-OH-dG increases in intractable pain and mental illness.

Foods & Drinks decreasing 8-OH-dG

As 8-OH-dG shows high value at various diseases, foods & drinks decreasing 8-OH-dG is necessary. In this time the author introduces the effects of Bitter Melon and Hydroxyl (H_3O_2^-) water.

1. Therapeutic Effects of Bitter Melon

By eating raw Bitter Melon or drinking juice, Blood Glucose and HbA1c(%) decrease in the patients of Diabetes and normalize high blood pressure. By using the increasing effect of normal cell telomere, Prof. Yoshiaki Omura (founder of BDORT) apply Bitter Melon for the treatment of cancer and Alzheimer's Disease.

2. Hydroxyl Ion (H_3O_2^-) Water

By using -840mV (Redox potential (Oxidation-reduction Potential; ORP)), the increase of normal cell telomere and the decrease of 8-OH-dG was observed. By drinking Hydroxyl ion water, tumor marker values of cancer patients and values of Diabetes were decreased. In addition patients with intractable pain reduces their pain by drinking only 2 or 3 cups of water and raise shoulder without pain. The wobble effect and incurable nerve is also observed.

Discussion

1. 8-OH-dG is high frequency positive at BDORT abnormalities.
 2. Diseases with high value of 8-OH-dG were cancer, ischemic heart disease and pain.
 3. By using Bitter Melon 8-OH-dG decreases and Bitter Melon is effective for the patients of Diabetes, hypertension, fatty liver and obesity
 4. By drinking hydroxyl ion water 8-OH-dG decreases, and hydroxyl ion water is effective for Cancer, diabetes, cardiovascular disorders, pain and neurological disorders.
 5. Acute phase of shingles, with the chronic phase, with the improvement of pain, increase of β -endorphin and decrease of 8-OHdG is reported. Oxidative stress and reduced drinking water in hydrogen to reduce the pain lasted a few years, further research may be needed
- Oxidative stress is the basis for the cause of various diseases. So 8-OH-dG was considered significant. Moreover, the future of a treatment for oxidative stress, hydroxyl ion water and Bitter Melon were considered to be useful hydrogen.

Diagnosing Various Symptoms of Pollinosis Using the Bi-Digital O-Ring Test

and Contribution to Treatment

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ABSTRAT

Introduction

Symptoms of pollinosis are generally nasal symptoms, including nasal discharge and sneezing, as well as eye symptoms, including tearing and itchy eyes, caused by airborne pollen.

However, use of the bi-digital O-ring test (OMURA, Y. 1997-2010) (BDORT) to investigate the cause of various clinical symptoms that occur in early spring has suggested the involvement of pollen in many such symptoms.

These symptoms include gastrointestinal symptoms, such as heartburn, nausea, constipation, diarrhea and abdominal pain; cardiovascular symptoms, including palpitations and chest tightness; respiratory symptoms, such as a cough, shortness of breath and asthma; mental or nervous symptoms, including headache, depressed mood, insomnia and hand tremor; and ear symptoms, such as tinnitus and dizziness/vertigo.

While treating patients, we discovered that pollen was extensively involved in various general symptoms that occur in early spring. We report our experience with patients who responded favorably to treatment based on BDORT.

Case 1: Patient initials: H. H.; female; born June 29, 1933. The patient visited our clinic because she had had no bowel movement for a duration of 1 week.



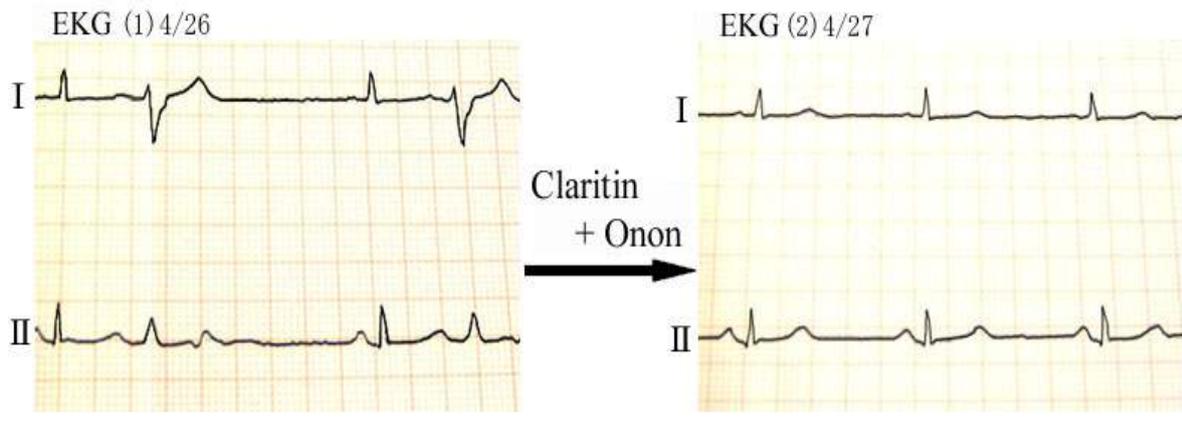
Abdominal radiographs (Posteroanterior and lateral projections in the upright position)

The cause of failure to pass feces was investigated at a national hospital, but no clue was found.

On the BDORT, she was positive for yellow sand, Japanese cedar and Japanese cypress.

Case 2: Patient initials: T.M.; male, born August 8, 1930; February 23, 2008, AMI

First ECG on April 26, 2010	Pulse rate, 32-34/min; bigeminal pulse; positive for Japanese cypress and yellow sand on BDORT. Completed therapy with oral loratadine (Claritin). Started treatment with oral pranlukast (Onon).
Second ECG on April 27, 2010	Regular pulse, 55/min



Discussion

Review of these patients suggests that pollen affects symptoms in both men and women of all ages, irrespective of gender or age.

General symptoms seem to develop via the following mechanisms: pollen inhaled during respiration through the nose or mouth is swallowed, causing reflux esophagitis in the lower part of the esophagus while passing through the gastrointestinal tract, and producing intestinal obstruction-like symptoms while passing through the small and large intestines.

It seems that a portion of the inhaled pollen is absorbed via the gastrointestinal tract and dispersed by circulatory organs throughout the body while maintaining antigenicity, causing general symptoms.

From around February, when Japanese cedar pollen begins to circulate, yellow sand also begins to exert its influence. Thus, a combination of pollen and yellow sand may result. We should therefore also consider the influence of chemical substances in yellow sand.

Given that yellow sand in combination with chemical substances acts as a promoter of pollinosis (adjuvant effects), as in the relationship between diesel particulate matter and pollinosis, various symptoms caused by pollinosis may be explained.

In the treatment of pollinosis, the use of drugs with mainly antihistaminic effects and the concomitant use of drugs with mainly leukotriene-antagonistic effects are both likely to promptly improve symptoms.

Conclusions

- 1) Results of the present study suggest that pollen is extensively involved in various symptoms that occur in spring.
- 2) It seems clinically useful to examine via BDORT whether pollen of Japanese cedar or Japanese cypress, and that of grass weeds (orchard grass, sweet vernal grass, timothy, wheat and perennial ryegrass), can cause symptoms.
- 3) The present study investigated the possible action of yellow sand as an adjuvant in pollinosis.
- 4) The use of antihistamines and the concomitant use of leukotriene antagonists promptly improved symptoms in many cases.

An Attempt at a Scientific Approach to "the Mind" using BDORT -Integrating Concepts of Homeostasis, Stress Theory, and Holistic Medicine-

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ABSTRACT

Applying the method of Bi-Digital O-Ring Test (OMURA, Y., 1997-2010; BDORT), the speaker has attempted to scientifically approach "the minds" of patients as a background to stress theory with the aim of contributing to medical treatments that assist patients to "know themselves." Here, the speaker reports on one part of his findings.

As a medical doctor, my primary interest has been in the clinical setting knowing that humans are "living"--continuously changing ill the balance of life maintenance. Keeping in mind the principles that "each individual is unique" and "it is not just one part but the whole body that gets sick," I try to understand the condition of the whole body.

A muscle flex test is given to a patient with his/her consent after listening to the patient's major complaints, symptoms, and course of illness, and any other necessary information.

First, I check the whole body, not just the affected area. In other words, I perform a body scan. When an O-ring opens, I view this as abnormal, and then move on.

I also test in the same manner placing a sample of Noradrenaline liquid between fingers of the diagnostic hand of an assistant. If an O-ring opens, it suggests that Noradrenaline energy is being emitted from the body. I categorize this as "alarm reaction," the stressed condition of the body expressing its "frustrated, impatient, and angry" state.

Another O-ring test is given using Adrenaline liquid. If an O-ring opens, it is assumed that the body is experiencing stress. The state is categorized as "resistance reaction," showing a "heavy, tired, strained" state.

Similarly, if an O-ring opens while using Serotonin, it is considered "exhausted reaction," the body going through a "Blocked, desperate, frustrated" state.

When an O-ring opens testing Endorphins, it is "blissful, pleasurable, enlightened, and just right." Equally, "love" for Oxytocin, "addicted, paranoid, stuck" for Dopamine, "allergic, confused, complicated" for Histamine, and "pain" for Substance P.

In other words I try to assess the state of mind scientifically by the use of chemical substances. The next stage is to evaluate self-esteem, the self esteem of each individual's social role--as a man (woman), as a husband, as a parent, as a son, as a family member, as a holder of an administrative office, as a member of society, and as a human being. Then, evaluation of relationships: whether there is any stress between the relationship to one's self, (each) family member, to (a specific) friend, to his office, and others. The state of mind at a particular place is also examined by asking questions such as "How about at home?", "How about at your office?", "How about at school?"

Capture the state of the patient's body as a whole in real time by screening (according to stress theory) the condition using BDORT method, and help the patient to gain an "understanding of his or her self," while at the same time giving the patient proper care.

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Effect of Occlusal Conditions During Swallowing on Electroencephalogram

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[Introduction]

There have been a large number of reports pointing out the relationship between dentistry and the entire body in recent years. With this in mind, investigating what types of effects occlusal conditions have on electroencephalogram (E.E.G.) during swallowing is considered to be important in terms of discussing desirable forms of occlusion.

[Purpose]

This study was conducted for the purpose of investigating what types of effects on E.E.G. were caused by differences in occlusal conditions during swallowing between subjects in which occlusion was adapted to the Bi-Digital O-Ring Test [BDORT (Omura, Y., 1977-2010)] and subjects in which occlusion was not adapted to BDORT when observing occlusion in terms of BDORT. In addition, phantom effects¹⁾ (P.E.) on E.E.G. during swallowing were also investigated.

[Methods]

1. Occlusion using BDORT was examined in the manner described below²⁾.

(1) Assessment in habitual occlusal position

(2) Assessment by displacing head and trunk in the state of (1)

(3) Assessment while following path of lower jaw movement

Those subjects, in which the O-ring formed by the weakest fingers closed at the maximum strength by the strongest finger group of the examiner in all the conditions of (1) to (3), were classified as adapted candidate subjects, while those subjects that did not satisfy the three conditions were classified as non-adapted candidate subjects.

(4) The subjects were diagnosed as BDORT adapted subjects (Group A) or BDORT non-adapted subjects (Group B) by confirming the conditions of (1) to (3) during exceptional application of BDORT in the thymus (decreased muscle strength).

2. i. Preoperative E.E.G. were measured using an emotional spectrum analyzer (developed by Brain Functions Laboratory Inc.) for subjects of both Groups A and B while in the sitting position at rest, to establish control groups.

ii. The subjects were then made to swallow followed immediately by measuring E.E.G. for 1 minute.

iii. An ORT-PSF oral device³⁾ manufactured so as to induce BDORT physiological occlusion was attached to the subjects followed by measuring E.E.G. for 1 minute immediately after

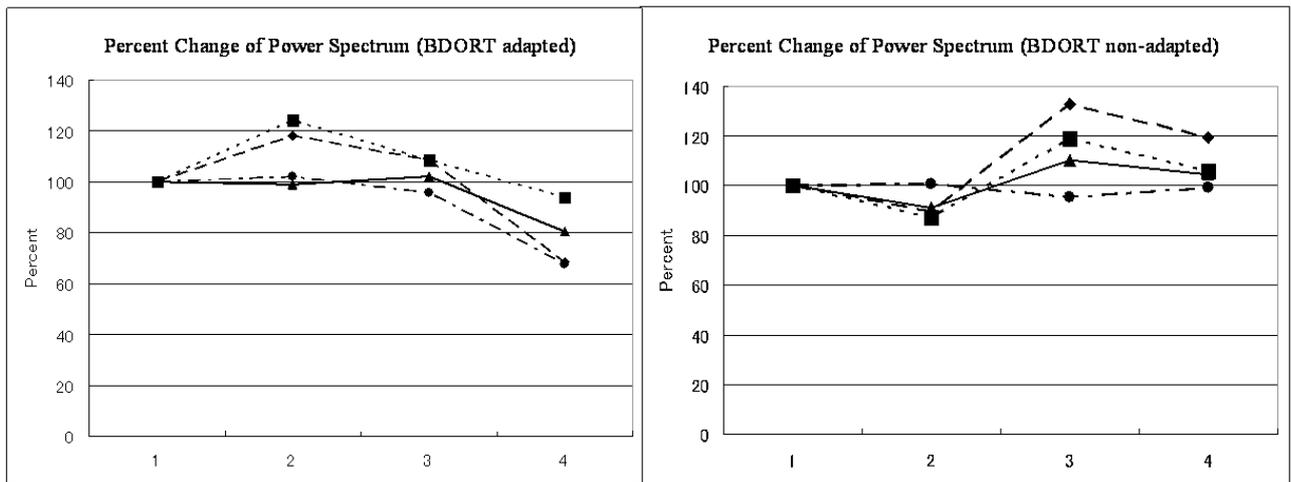
swallowing.

- iv. E.E.G. were then measured for 1 minute from 2 minutes to 3 minutes after the measurement after swallowing of iii above with the ORT-PSF oral device still in place to investigate P.E..

[Results]

Changes in E.E.G. power spectrum for each frequency band according to occlusal conditions (μV^2) are as shown in the table. In addition, percent changes (%) in occlusal conditions relative to each control group are shown in the figure.

Frequency band	Group A: BDORT Adapted Subjects (n=4)				Group B: BDORT Non-adapted Subjects (n=6)			
	Control group	0 to 1 min after swallowing	Oral device + 0 to 1 min after swallowing	Oral device + 2 to 3 min after swallowing	Control group	0 to 1 min after swallowing	Oral device + 0 to 1 min after swallowing	Oral device + 2 to 3 min after swallowing
Delta	1.401 ±0.314	1.657 ±0.815	1.522 ±0.722	0.957 ±0.301	0.933 ±0.183	0.835 ±0.078	1.239 ±0.254	1.114 ±0.19
Theta	0.836 ±0.064	1.041 ±0.169	0.907 ±0.225	0.785 ±0.161	0.776 ±0.115	0.676 ±0.109	0.922 ±0.167	0.822 ±0.124
Alpha	2.248 ±0.868	2.226 ±0.726	2.297 ±0.961	1.808 ±0.682	1.010 ±0.208	0.922 ±0.173	1.115 ±0.3	1.057 ±0.326
Beta	0.485 ±0.097	0.495 ±0.111	0.465 ±0.166	0.329 ±0.109	0.347 ±0.038	0.349 ±0.062	0.334 ±0.048	0.344 ±0.047



—◆— Delta ■..... Theta —▲— Alpha —●— Beta

- 1. Control group
- 2. 0 to 1 min after swallowing
- 3. Oral device + 0 to 1 min after swallowing
- 4. Oral device + 2 to 3 min after swallowing

[Discussion]

E.E.G. beta waves represent the state of brain excitation, alpha waves represent brain stability and relaxation, theta waves represent drowsiness or brain sedation, and delta waves represent a deeper sedated state.

In Group A, although there were no large changes observed in alpha waves or beta waves throughout the entire process, since delta waves and theta waves, which are thought to represent a deep sedated state, were observed to appear more often than beta waves as a result of swallowing, it was indicated that swallowing in BDORT adapted subjects tended, on the contrary, to relax the brain. In the case of swallowing after subsequently attaching the oral device used for acquiring physiological occlusion as well, it was suggested that the brain sedated state would be more stabilized, probably due to physiological occlusion being already established.

In Group B, on the other hand, although there were hardly any changes in beta waves throughout the entire process, since delta waves and theta waves, including alpha waves, were observed to decrease in comparison with beta waves as a result of swallowing, it was indicated that swallowing tended to cause the brain to be excited in BDORT non-adapted subjects. In the case of swallowing after subsequently attaching the oral device used for acquiring physiological occlusion, it was suggested that the brain would be stabilized from the excited state and then enter a sedated state as a result of acquisition of physiological occlusion. In subsequent measurement of P.E., alpha, delta and theta waves appeared at a higher frequency than beta waves in nearly the same manner as that in which the subjects of Group A progressed.

Occlusion between the upper and lower dentition occurs during chewing and swallowing, and contact between them is made momentarily. Swallowing is said to take place approximately 1000 times per day, and saliva is always swallowed when at rest at intervals of 30 seconds to 2 minutes when awake and at intervals of 6 minutes to 10 minutes when asleep. The effects on E.E.G. attributable to occlusal tooth contact during swallowing are made continuous due to PE., and the status of E.E.G. at that time ends up being sustained. On the basis of this study, conditions causing the brain to become excited or become sedated were suggested to be dependent on occlusal tooth contact, in other words, occlusion, resulting from swallowing. Namely, subconscious swallowing was suggested to be involved in not only neurophysiology, but in general physiology as well.

[Conclusion]

Swallowing in BDORT adapted subjects tended to sedate the brain, while swallowing in BDORT non-adapted subjects tended to excite the brain. In addition, in consideration of P.E. during swallowing, it is important that occlusion be physiological occlusion as determined by BDORT in order to restore physical and mental health, and to maintain and promote health on a daily basis.

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BDORT Medicine Reflects to Classical Knowledge and Opens a Future Medicine

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Corresponding to the patient's mind and doctor, I want to heal your troubles, there is a sincere hope and pray silently. Confucius (551 - 479 BC) had continued with the "Sympathy" philosophy leading to a feeling of doctors who must work together to a concrete condition and perspective of the patient first in mind. In the medical field recently, a big complex system for a single patient, in which the medical cases are surrounded by inspection, questionnaire, and touch at the start of a number of factors and forward medical doctor in the examination process, must come under a unified concept between patient and doctor minds sensitivity. The unifying idea will require a common element of perspective which is born between the patient and the doctor in the topics. Building on the human brain activity, will require multilateral, with elements of quantitative information. In the medical field has always involves a dynamic element, the reality is elusive and unified views of patients and to present information on those elements which are physical sensibility and metaphysical elements, especially the latter "The look, but invisible moments." The information could become large, more accurate, reproducible and quantitative rich in what is required. So now, the information meta physical sense "Qi" is how to measure other than BDORT not been established. Current molecular imaging BDORT f MRI is superior to those of the present medical act to learn more, learn how their theory, which seems to dramatically improve the current medical capabilities. By the way, "Qi" as information about subcutaneous physical information important to build on the human capability runs a 1mm deep from the skin surface (BDORT measure), which meridian route based on volume information transmission mechanism is fulfilled by the volume transmission theory, the rate of about 12cm per second to convey the information's with a number of capacity units. We have the study for the purpose of measuring the electrical properties of meridian flow to develop a measurement system-level potential with an integrated mechanism indifferent electrode, for the patient complained of indefinite complaints and pain, so that were the results satisfactory, we introduced "Qi" the way it was developed for each of the modern medical knowledge dates back to report. Information of Eastern medicine, the energy of "Qi" and "blood", "ei", "e" which are the fundamental elements of human life activities are circulating along meridian routes. After such a context is a living energy transfer routes, capacity to communicate information by a tubular meridian neuroendocrine signaling of various cytokines, such as not signaling mechanisms of nerve fibers, the transmission mechanism in the brain to the body volume physical picture as background information to expand the picture after the meridian flow information. To extract the visual information of meridian flow activities as pathogenic features in Oriental medicine, impedance values of the original acupuncture true points, were measured to deploy the radar on the chart.

10 μ A (JIS tolerance) load current generation IC device which is developed impedance measurement system with built-in mechanism for sample hold circuit and a reference potential mechanisms, was used to measure the impedance values as 12 true acupoints in patients, age 8-87 years old, 156 men, 195 women, and aged over 50 "Qi emptiness" showed a high impedance in all women.

Circadian rhythm of the normal cell telomere

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ABSTRACT

Preface

Normal cell telomere changes by various factors ¹⁾. Most were evaluated in the daytime when patient was awake. Human being has a circadian rhythm in the blood pressure, hormonal secretion, cell regeneration, etc. Does normal cell telomere have a circadian rhythm? Does normal cell telomere in the nighttime while sleeping change similarly as in the daytime?

Subjects and methods

Normal cell telomere in the 6 normal volunteers was checked all day long including nighttime. The number of males and females were both 3. The average \pm standard deviation (SD) of the age was 43.2 ± 23.6 ; the youngest was 15 and the eldest was 70.

Volunteers had taken photo at an interval of within 1 hour and normal cell telomere was checked by Bi-Digital O-Ring Test (OMURA Y. 1997-2010; BDORT). (+) Qigong energy was applied both in the daytime and in the nighttime. Their effect was compared.

Results

Circadian rhythm was recognized in the normal cell telomere. There is a tendency that normal cell telomere is high when volunteers waked up in the morning, but went down gradually, receiving much influence of electro-magnetic field, food, water, and other various factors. While sleeping, normal cell telomere went down more, and stable in lower value than while awake (night dip). Before waking up, normal cell telomere starts increasing rapidly (morning surge) (Table. 1, 2, 3).

After applying (+) Qigong energy, increase of normal cell telomere was 112.5 ± 26.2 (SD) ng in the daytime. That in the nighttime was 50 ng (Table. 4).

There is a time zone when normal cell telomere is physiologically low and less responsive to (+) Qigong energy in the nighttime than daytime.

Discussion

Normal cells include various organ cells. Each cell may have its own circadian rhythm, but grossly normal cell telomere is relatively high in the daytime and relatively low in the nighttime. Telomere is thought to express cell activities. Many normal cells were thought to have a rest in the nighttime and prepare for activity in the daytime till waking up. So it was thought to be difficult to increase normal cell telomere in the nighttime as in the daytime after applying (+) Qigong energy.

Human being sleeps about 1/4 - 1/3 of a day. In various diseases, target value of normal cell telomere in the nighttime may differ from that in the daytime. Especially in malignancy, does malignant tumor cell have a circadian rhythm? How does malignant cell telomere change when normal cell telomere decrease in the nighttime? The study of tumor cell telomere and normal cell telomere change in the nighttime is necessary and important.

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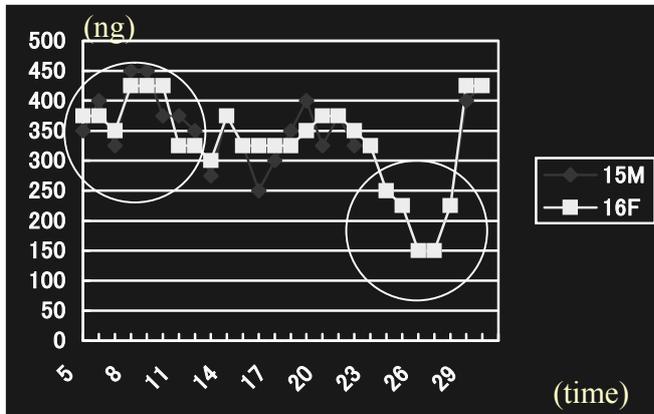


Table. 1
Circadian rhythm of normal cell telomere (young)

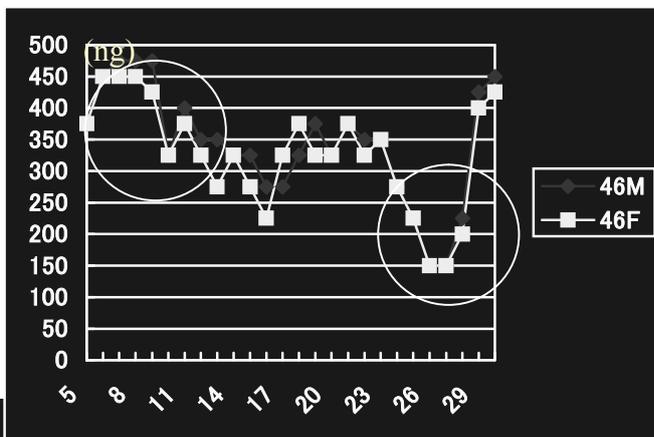


Table. 2
Circadian rhythm of normal cell telomere (middle)

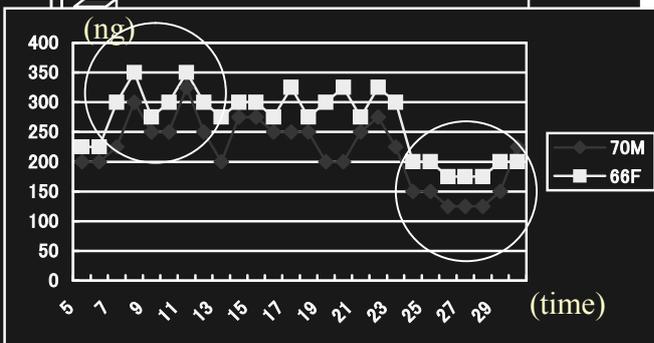


Table. 3
Circadian rhythm of normal cell telomere (old)

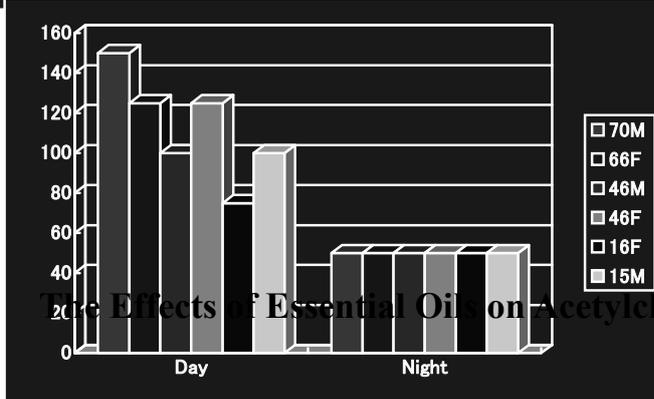


Table. 4
The increase of normal cell telomere after applying (+) Qigong energy in the daytime and the nighttime

The Effects of Essential Oils on Acetylcholine Levels in the Hippocampus

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ABSTRACT

(Purpose) The Purpose of this study is to evaluate the effects of essential oils by Bi-Digital O-Ring Test Method. Many drugs are used to control symptoms such as headache, insomnia, neurosis and gastric problems. However, if drugs are used for a long period, acetylcholine levels in the hippocampus will reduce to an undesirable level. This potentially contributes to the development of senility or dementia. The purpose of this study is to evaluate the effects of essential oils on acetylcholine levels, and utilize them to overcome these problems associated with drug use.

(Results) Among foods and herbs tested, coriander, hawthorn berry, peppermint, spearmint, ipe, kawakawa, Kiwi fruit, mango, Italian parsley were found to prevent acetylcholine reduction in the hippocampus. However, smelling some essential oils was more effective for this purpose. The effects of some drugs on acetylcholine levels in the hippocampus and telomere levels (body) are shown in the Table below.

RCS	Acetylcholine		Telomere	
Pre-treatment	3500µg	940µg	211ng	90ng
Ibuprofen (Brufen)	1pg	1pg	1fg	1fg
Diclofenac sodium (Voltaren)	1pg	1pg	1fg	0.1fg
Sopropfen sodium (Loxonin)	10fg	1fg	1fg	1fg
Aspirin+dialminate (Bufferin)	1pg	1fg	1fg	1fg
Famotidin (Gaster10)	10fg	10fg	Less than 1fg	Less than 1fg
Famotidin (Gaster20)	1fg	1fg	Less than 1fg	Less than 1fg
Sodium rabeprazole (Pariet10)	1fg	Less than 1fg	1fg	Less than 1fg
Cimetidine (Tagamet)200mg	1fg	10fg	1fg	Less than 1fg
RCS	Acetylcholine g			
	Person A	Person B	Person C	Person D
Pre-treatment µg	60	1200	1300	3100
Diazepam (Cercine)	10 ⁻³⁶	10 ⁻¹³	10 ⁻¹³	
Zopiclone (Amoban)	10 ⁻²¹	10 ⁻¹³	10 ⁻¹³	10 ⁻¹³
Brotizolam (Lendormin)	10 ⁻¹⁸	10 ⁻¹³	10 ⁻¹³	10 ⁻¹⁴
Quazepam (Doral)	10 ⁻¹⁵	10 ⁻¹⁵	10 ⁻¹⁵	10 ⁻¹³
Zolpidem tartrate (Myslee)	10 ⁻¹⁵	10 ⁻¹⁵	10 ⁻¹⁵	10 ⁻¹⁴
Paroxetine hydrochrolide (Paxil)	10 ⁻²¹	10 ⁻¹⁵	10 ⁻¹³	10 ⁻¹³
RCS	Telomere			
	Person A	Person B	Person C	Person D
Pre-treatment ng	80	110	130	200
Diazepam (Cercine)	1pg	1fg	1pg	100fg
Zopiclone (Amoban)	Less than 1fg	1fg	1fg	1fg
Brotizolam (Lendormin)	Less than 1fg		1fg	10fg
Quazepam (Doral)	Less than 1fg		Less than 1fg	10pg
Zolpidem tartrate (Myslee)	1fg		Less than 1fg	10fg
Paroxetine hydrochrolide(Paxil)	Less than 1fg		Less than 1fg	10pg

The useful essential oils to increase an amount of acetylcholine as well as melatonin, dopamine,

GABA and serotonin are as follows:

	Acetylcholine	Melatonin	Dopamin	GABA	Serotonin
Pre-treatment	1p→ μ g	1p→ μ g	0.1p→ng	480 μ g	250 μ g
Cardamon	1800	580	100	490	600
Garbanum	1900	690	160	750	750
Clarly sage	1900	690	160	820	680
Clove	2000	620	170	670	680
Sage	1900	680	260	670	760
Tea tree lemon	1800	600	180	670	600
Dill	2300	740	190	670	670
Narde	400	740	170	660	740
Vanilla	2500	700	270	770	740
Fennel	1800	600	260	600	600
Peppermint	1900	700	120	740	660
Helichrysam	3000	700	230	700	740
Majoram	3000	620	260	600	660
Mandarin green	2600	680	270	610	700
Lime	1900	660	55	500	600
Eucalyctriodora	2600	700	160	700	670
Lemon myrtle	1700	600	100	500	670
Rosemary	1800	580	50	500	660
Rosegeranium	2500	750		500	660

(Conclusion) Many drugs reduce acetylcholine levels in the hippocampus.

To reduce these negative effects of drugs and increase acetylcholine levels, smelling some essential oils is recommended in addition to taking optimal foods and herbs. These essential oils include helichrysam, majoram, mandarin green and eucalyctriodora

Reference: Regarding BDORT, refer to publications by Dr Omura .

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A Comparison of the Number of Remaining Teeth and Mercury and

Acetylcholine Content between Alzheimer's Patients and the Healthy Elderly

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ABSTRACT

According to the relative risk survey by Miyazaki (Niigata University, Department of Dentistry) on the adverse effect of the loss of masticatory function (occlusal collapse) on health (Fig. 1), the general health of edentulous patients who wear dentures with a favorable occlusal relationship can be maintained, but the health of those who have few remaining teeth and wear poor occlusal dentures, or do not wear dentures, is severely affected. This suggests the relationship between improvement of the oral function and general health. The present study compared the number of remaining teeth and mercury (Hg) and acetylcholine (Ach) content measured using the Bi-Digital O-ring Test (Omura, Y. 1977-2010: BDORT) between Alzheimer's patients and the healthy elderly. The results showed a significant difference between them.

Methods

The subjects were 6 patients including one male (85 years old) and 5 females (94, 89, 85, 79, and 72 years old) with Alzheimer's disease living in a special nursing home, and 7 healthy patients including 3 males (86, 81, and 78 years old) and 4 females (84, 81, 80, and 79 years old).

Results

Alzheimer's patients did not wear dentures despite no or few remaining teeth, resulting in significant occlusal collapse. The Hg content was close to 350 μm , and a significant decrease in Acetylcholine (Ach) was observed. In contrast, healthy patients had 20 or more remaining teeth, or, in those who had no or less than 12 remaining teeth, a favorable occlusal relationship was maintained by wearing dentures. The Hg content was low, and most patients had an Ach level $> 3,000 \mu\text{g}$ (Fig. 2).

Discussion

ACh is a neurotransmitter substance in the brain, exhibiting a vasolidatory effect. A lack of ACh causes cognitive impairment, and this situation has been confirmed in the brains of Alzheimer's patients. Omura pointed out that a decrease in ACh is caused by an increase of Hg accumulation in the body. A study on the relationship between the number of teeth and dementia by the Department of Oral Surgery, Nagoya University School of Medicine showed that the numbers of remaining teeth were 9.01 in a healthy group, 5.92 in a group of dementia due to cerebrovascular problems, and 3.11 in a group with dementia due to Alzheimer's disease,

suggesting a significant difference between the groups (Fig. 3).

The present study revealed a significant difference in the number of remaining teeth between the Alzheimer's patients and healthy elderly. It has been reported that the ACh level is increased by masticatory stimulation, and cerebral blood flow doubles. The results suggested a significant influence of tooth loss on the general health.

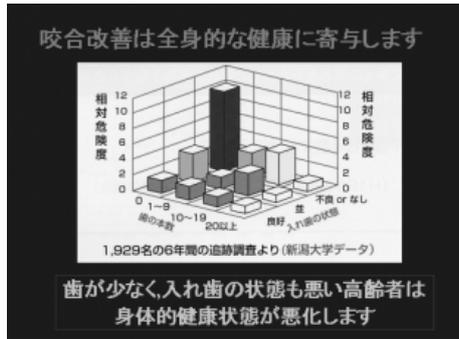


Fig.1

アルツハイマー病患者と健康高齢者との HgおよびAchの比較

A. アルツハイマー病				B. 健康高齢者					
年齢	性別	Hg値	Ach値	残存歯数	年齢	性別	Hg値	Ach値	残存歯数
94歳	女	330mg	30μg	0本	81歳	男	30mg	4000μg	29本
85歳	男	350mg	2μg	8本	86歳	男	30mg	3000μg	22本
89歳	女	350mg	1μg	3本	78歳	男	30mg	4000μg	12本
85歳	女	350mg	1μg	0本	84歳	女	160mg	1500μg	0本
72歳	女	340mg	1μg	12本	81歳	女	30mg	3000μg	12本
79歳	女	350mg	20μg	0本	80歳	女	30mg	5000μg	26本
					79歳	女	30mg	5000μg	23本

脳内血流量が減少→水腫量の増加 →アセチルコリン (ACh) の減少
 脳内血流量が正常→水腫量が減少 →アセチルコリン (ACh) の増加

Fig.2

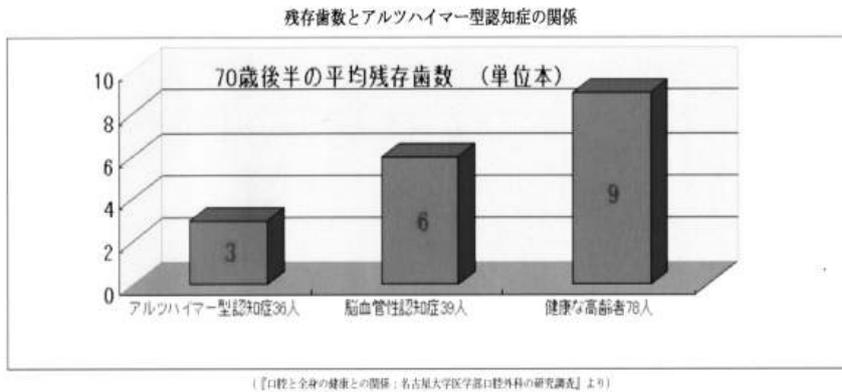


Fig.3

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The Dental Treatment for Systemic Diseases, which After Using the Two

Point's Time Lag Stimulation Method, Applied by the Bi-Digital O-Ring Test, Has Shown the Priority Treatment Area to be in the Oral Area

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ABSTRACT

(Introduction) In Oriental Medicine, there are many acupunctural path-ways where Qi gong flows. So Oriental doctors do not always treat the area where symptoms occur. In Western Medicine, it is also recognized that the cause of the issue and the part with the symptom, can sometimes be different for example referred pain. If the two point's time lag stimulation method with Bi-Digital O-Ring Test (BDORT) was applied, more fundamental treatment (not symptomatic treatment) would be performed. If the priority issue exists in the oral area, it is difficult to cure the sickness without dental treatment. I'd like to give some examples in terms of case reports from dental treatments that were very effective in treating the primary issues. And to consider the importance of Medical and Dental cooperation.

(Method) The body parts causing the problems are searched for in the BDORT and the order of priority for the treatment is decided. For example when treating the primary area first if there is a relationship between 2 points-an A point and a B point there is a possibility that I need not to treat the second area at all.

If an abnormal part (an A point) is found and it's made ORT -4 and next the time a different abnormal part (a B point) is stimulated physically, an A point will show -5 or -6. On the other hand, an A point stimulation does not increase a B point's abnormality. It's said that a B point has priority for treatment over an A point. To simplify these, phantom effect is being used at present i.e. if a B point is stimulated just after stimulation of an A point, ORT shows - and if an A point is stimulated just after the stimulation of a B point, ORT shows \pm or +, the A point is judged as the priority.

(Consideration) When treated with this method, only a small amount of time and effort is needed and a patient's temporally physical load is little, and the recurrence potential will be minimal. There are also some unclear issues but I think this phenomenon is related to the flow of Qi like in Oriental Medicine. To simplify this method it may be convenient to use the Phantom Effect. A few years ago, it would have been impossible to diagnose problems using a photograph by BDORT, but now it is possible and its popularity is spreading widely. Therefore, such a method that is not currently admitted would be very useful diagnosing method in suitable conditions. In addition, as for dental treatment, even if a main symptom is outside of the oral area, if there is a priority treatment part in the oral area, dental treatment would be useful, so medical and dental cooperation would become very important.

(Conclusion) Before recognizing this method as useful, more trials will be needed, but I think the two point's time lag stimulation method is a very remarkable way to perform fundamental treatments instead of symptomatic treatments. Moreover, it is very important to improve medical and dental cooperation, as this will help both patients and the medical/dental field.

The Dental Treatment Which Applied Bi-Digital O-Ring Test to the Senior

Citizen

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ABSTRACT

(Introduction) The declining birthrate and a growing proportion of elderly people are increased especially in developed countries. So characteristic disease for old such as dementia or bedridden is increasing. I tried to perform the dental treatment with the artificial teeth using Bi-Digital O-Ring Test (OMURA, Y. 1997-2010; BDORT) to elderly persons who was suffered from such diseases.

(Method) I made the artificial teeth (denture) using BDORT to disappear the abnormal reflections of BDORT in the body. I decided the shape and biting position concerning BDORT.

(Result) I found out that serious dementia or the long bedridden situation are sometimes improved.

(Consideration) I found out that it's effective in dementia or bedridden to make denture consulting BDORT. Many patients often show BDORT abnormal reactions on a head. When these reactions disappeared, it seemed that improvement of the symptom was often seen. Because resonance phenomenon of Thromboxane B2 which is indicator of decreasing brain blood flow was disappeared on the head after the denture set, blood flow might be improved. Improvement of sense of balance as well as muscle strength increase would just be able to give the improvement reason that they're bedridden. I can think the social declining birthrate and a growing proportion of elderly people will be increasingly especially in developed countries in particular from now on. The dentistry performed in this law will be more important from the angle of the anti-aging. The cooperation between medicine and dentistry seems to become indispensable about establishment of the treatment system.

(Conclusion) To improve the specific symptom for aged people i.e. dementia or bedridden, the dentistry with the denture made by concerning BDORT sometimes may be very effective. This dental treatment seems to become increasingly important to the social declining birthrate and a growing proportion of elderly people which would be developed especially in advanced nations from now on.

July 16, PM at Bi-digital O-Ring Test Conference Waseda University, Tokyo

Application of ORT Technique Together with ONNETSU Far Infrared Therapy in Combating the Tuberculosis of Tibetan Children in Himalaya

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ABSTRACT

Introduction:

“Tawang District” of Arunachal Pradesh, India, is located at the foot of the Himalayas, at the most North-eastern region of India and sharing the border with Bhutan on its west, Myanmar on the east and China on the north. When China invaded Tibet, this village of Tawang would have been a part of occupied Tibet. But Indian army created the border north of this village, making the village being a part of India. Tibetan children there are often sent from other part of Tibet by parents seeking for their children Tibetan education which are not found anymore in Chinese occupied Tibet. Tawang’s elevation is over 10,000 feet above sea level and its winter is long and severe while the summer has a long rainy season of three months. However, the nature is very beautiful, full of deep forests and high mountains with snow and a great river runs through it. It is very rich in culture of Tibetan Buddhism, of special significance as the birthplace of His Holiness the 6th Dalai Lama, and is home to one of the largest Tibetan Buddhist monasteries in the world. It is also the place where His Holiness the 14th Dalai Lama first found refuge after fleeing Tibet in 1959. The Tibetan residents there are very poor and their health conditions are also very poor. Many suffer from tuberculosis and other contagious diseases. His Holiness the Dalai Lama is very much concerned about the region and has personally helped to build a small hospital there. It is said there are 9,000,000 tuberculosis cases in India alone and some cases do not respond to our medicines.

Subject and Method

I took a long journey (3 full days) in March 2009 to Manjushree Orphanage for two reasons;

A) Help build a new school building. The orphanage started with 17 children in 1998 but it now houses 180.

B) To try to help Tuberculosis (TB) infected children there in a holistic way.

For **B)**, Out of 150 children, 11 were infected by TB. As of the day I left, after 12 days of daily treatments, they all became TB FREE!! Peoples there said that this was a miracle

I administered this in three ways,

1) Using Dr. Omura’s O-Ring Test in measuring conditions of children daily for optimal dose of Cactus Honey Powder from ARIZONA, (used centuries by the Native Americans), and of Tsumura 10,

2) Raising TELOMERE by optimal dose of Astragalus, based on Dr. Omura’s discovery and research.

Telomere count is directly relates to Immunity and self healing.

3) In 1920 – 30, a Japanese doctor, Dr. Shimetaro Hara successfully used Moxibustion for TB cure. My FAR-INFRARED-ONNETS THERAPY is, so to speak, a modern version of

Moxibustion. I administered the therapy to children daily, often referring to Dr. Hara's technique. ORT negative spots were also coincided with diagnoses of Onnetsu method cold points

Future Application of Far-Infrared Onnetsu Therapy with O-Ring Test diagnosis

ORT finding of unhealthy area in the body is surprisingly similar to finding of that of Onnetsu therapy, therefore, in the future, this therapy can help to treat these negative, degenerated areas found by ORT.

About Onnetsu therapy

The Onnetsu therapy is a combination of thousand-year-old traditional Japanese theory and the newest technology of Far Infra-Red. The traditional Japanese therapy of MOXA and other heat therapies are replaced here by Far Infra-Red and heat. The Onnetsu therapy is used successfully for the treatment of all kinds of pains, chronic diseases, such as cancer, diabetes, rheumatism, high blood pressure, high cholesterol, fibroid, problems of thyroid, prostate, heart, kidneys, liver, and lung, and other degenerative "difficult to heal" diseases.

Our body temperature determines our health and it has become a big problem in today's society. Our body temperature is supposed to be 98.6°F. Amazing fact is, in recent years, our average body temperature is dropping, even for some people down to 96°F!! In Japan it has been discovered that if body temperature drops down one degree, our immune capacity goes down 30% which could result in various chronic problems and difficult diseases. It is a known fact that cancer thrives and multiplies at 96°F, and dies at over 103°F. If our body temperature goes up one degree, immunity power rises 5 times. Why our body temperature is dropping and what can we do about it? The new and very effective Onnetsu therapy by using Far Infra-Red wave-length and heat raises our inner body temperature, balance the autonomic nervous system and improves our immunity.

Traditionally, the Japanese believed that unhealthy cells or parts of the body lack energy and therefore they are low in temperature. The Japanese therefore have had methods to keep the inner body warm; by taking a long bath, going to hot spring, various Onnetsu (heating) therapies, heat raps, *moxibustion*, etc. However, until recently, we had no method to successfully heat up the inner body temperature with a more scientific way. We think of Hyperthermia but this method is somewhat dangerous and is not allowed in USA. Now it has been revolutionized by one of the latest and most extraordinary discoveries in the today's holistic medicine field, which is utilizing Far Infra-Red (FIR) technology and heat

The study and application of FIR technology in healthcare is much advanced in Japan, although FIR was originally discovered by NASA in 1960's. NASA found FIR to be indispensable for every living organism and helps activate cells and rejuvenate damaged cells. FIR is a part of the sun's infrared spectrum of 0.75-1,000 microns of wave length but FIR encompasses only 5-25 microns (or even 8-14). In early 1980, the Japanese scientists succeeded to create tangible objects which emit this energy wave length even without sunlight in existent. Amazing subsequent discovery is that our healthy human KI (CHI) energy, great hand healers' or Qi Gong Masters' hands all emits the range of wave length similar to FIR.

Most interesting is the Doctor in Edo period named GONZAN GOTO (1659-1733) has commented that Moxa has the property of the Sun Ray, way before NASA's discovery of Far Infrared. Hence, it is not strange that Japanese has become to be the leader of this theory and method of healing.

“Moxa has the ability to reach to the stagnation of coldness in the earth immediately because it has the active **Ki** of the sun. It is good for curing 7 or 8 out of 10 cold stagnation diseases that affect the abdominal region.” - Dr. Gonzan Goto. Edo Period (1600-1853)

In mid 1980s Dr. Tomeko Mitusi, who was an oriental medicine practitioner, invented a device that can emit 8-14 microns of FIR wave length with a heating mechanism. With this device, she created FIR Onnetsu Therapy which is a fusion of traditional Japanese healing concept and cutting-edge of FIR technology. FIR Onnetsu Therapy balances between sympathetic and parasympathetic nerves in the autonomic nervous system which in turn raises one's immunity. This therapy also finds the cold spots on the body, which we call “nests of disease” and by treating this area, we can repair unhealthy damaged cold cells in the deep inner body (up to 10 inches deep). It has been very successful in treating from simple maladies such as common cold and all kinds of pains (back ache, headache, muscle ache, tooth ache etc.) to more serious diseases such as cancers, diabetes, and other intractable diseases.

Dr. Kazuko (Tatsumura Hillyer, based in New York City USA) has further developed this therapy in conjunction with **Ki** energy healing, traditional acupuncture therapy, Yin and Yang concept, and 5 meridian theories, and other oriental medicine knowledge to further improve blood, **Ki** and fluid stagnations.

Over 18,000 therapies in last 15 years all of the world, almost always resulted in improvements by this simple but most remarkably effective method for ultimate natural healing.

In 2009, Dr. Kazuko developed and invented a new Onnetsuki. This new device is FDA registered as Medical device. Her courses are also recognized by NCCAOM (National Certification Commission Acupuncture & Oriental Medicine) and allowed total of 67 points for certification.

Bi-Digital O-Ring Test applied Veterinary Small Animal Clinic

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ABSTRACT

(Introduction)

Clinical dogs and cats to Bi-Digital O-Ring Test (Omura.Y 1977-2010 BDORT) incorporating 7 years. Diseases of them over recent years visiting my clinic changed greatly. For example various diseases common to people, such as tumors, heart disease, Obesity, Atopic dermatitis, Neurosis, Self immune disorders, to meet encounters many. This is considered one of the factors is that their living environment and the human came close. Also, pet shop or drugstore many pet foods are on sale and examine in BDORT, it is difficult to say what is safe and just. They cannot eat only given to people that their owners. I think that contribute to increases in these disease also without all determine if really safe food to eat pet who is not or. Consider these is treated in my clinic from examination as well as to improve the diet advice, living environment ranging from BDORT, taking advantage.

<Dogs and Cats BDORT medical fact>

Examination after necessary, Blood test Urinalysis, Echo, X-Ray, ECG and other standard medical examination and BDORT to diagnosing combination.

As a common treatment item Acupuncture, Moxa cattery, Hyperthermia, Light therapy Far-infrared oily cream, Ozone gas therapy, Special Solar Energy Paper, these measures alone or in combination,

Also Amoxicillin, Clindamycin, Cilantro, Substance Z, Indigo, AHCC, DHEA

Raffinose, Internatural, Nano Fucose, Concentrated hydrogen water, Immidapeptide

Placental extracts, Astragalus, and to BDORT in combination of prescription.

<Conclusion>

The maximum merit of utilizing BDORT for standard veterinary medical is that the diagnosis and the treatment become extremely simple and effective.

I think the most important thing is choice the treatment methods for increase and keep the normal cell Telomere to 550ng (BDORT-Unit) than higher.

And sometimes appears amazing good clinical passage.

Examination landscape

(Fig. left) BDORT diagnosis by using RCS

(Fig. right) Check of X-Ray film and ECG by using BDORT.



(Fig. left) Far-infrared oily cream applied to Omura-St36 and Red LED Light irradiation for 60-90 seconds.

<This method is most effective to raise normal cell telomere of dogs and cats>

(Fig. right) Safety assessment of pet food by using BDORT



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Bi-Digital O-Ring Test Seminar Text <Advanced Course >; 2006-2009

Yosiaki Omura; Lecture of the latest advances cases and treatment in BDORT.

Kazuhiro Nomoto; The Efficacy of Far-infrared Oily Cream, Presentation in N.Y 25th Annual International Symposium on Acupuncture and Electro-Therapeutics.

**Improved Cases of Decreasing Tumor Markers by Following Guidance
by using Bi-Digital O-Ring Test**

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(Introduction) By using Bi-Digital O-Ring Test(Omura, Y. 1977-2010; BDORT), patients were diagnosed and for the patients with high tumor markers value, guidance of eliminating Electro-Magnetic Fields and optimal dose of supplements. The authors would like to show three of typical cases.

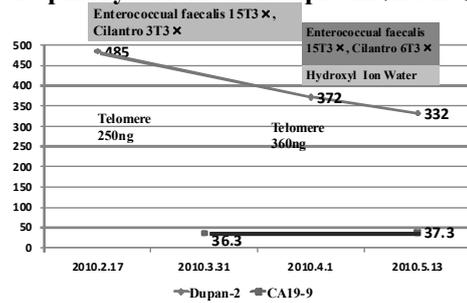
(Subjects & Methods) Cancer or Pre-cancer patients of Shimotsuura Clinic were subjected. Integrin $\alpha 5\beta 1$, Telomere, 8-OH-dG were measured as the Reference Control Substances (RCS). Optimal dose of supplements were measured and guided.

(Cases & Results)

Case No.1 69-year-old woman Suspected Pancreatic Cancer, Chronic Hepatitis C



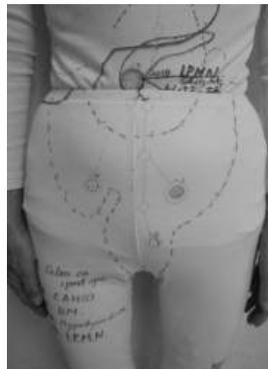
Diabetes • Colon ca post ope • Intraductal Papillary Mucinous Neoplasm (IPMN)



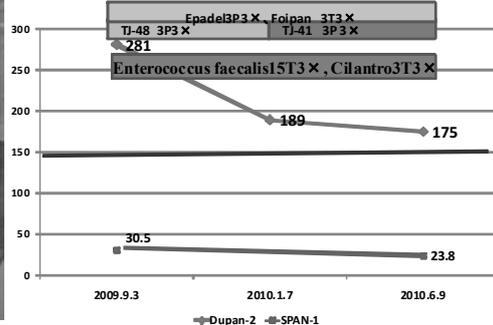
Strong positive response of Integrin $\alpha 5\beta 1$ were observed at pancreas area. As a result of drug compatibility test, TJ48 (Jyuzen taiho-to)7.5g x, Epadel 3P3 x, Foipan 3P3 x, and Tablets of Enterococcus faecalis 15T3 x and Cilantro 3T3 x were guided. As tumor markers, Dupan-2 was 281U/ml, and Span-1 was 30.5U/ml. After four months Dupan-2 was decreased to

189U/ml, besides 175U/ml after five months were passed.

Case No.2 76 year old woman Diabetes • Colon ca post ope • Intraductal Papillary Mucinous Neoplasm (IPMN)



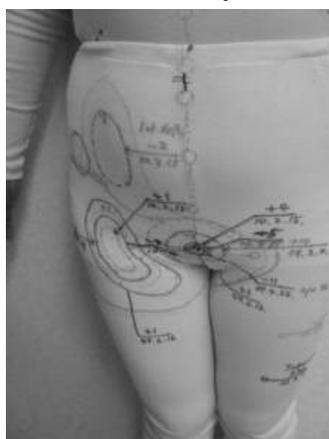
Case of Decreasing Dupan-2 & Span-1 by using Enterococcus faecalis and Cilantro



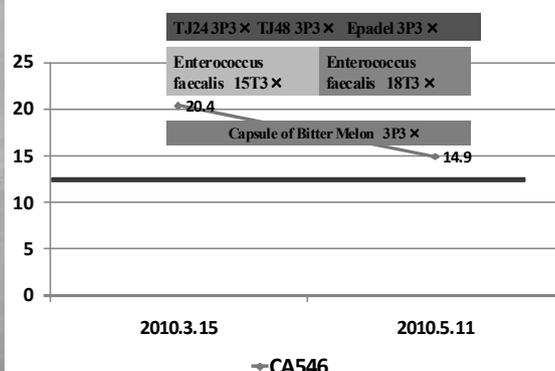
Strong Positive Reaction of Integrin $\alpha 5\beta 1$ was observed at Pancreas and Colon area. Dupan-2 was quite high value at 485U/ml and Enterococcus faecalis 15T3 x, Cilantro 3T3 x was instructed. Then decreased to 372U/ml. At first normal cell Telomere was 250ng (BDORT unit) and increased to 360 ng after 2

months. 8-OH-dG (Oxygen index) was high value, and Hydroxyl Ion Water ($H_3O_2^-$) was recommended and Dupan-2 was decreased to 332U/ml. Also about Diabetes, HbA1C (%) was 8.1(%) and declined to 6.2(%) by drinking herbal tea called "San-gen-cya".

Case No. 3 44 years-old woman Post operative of Uterus Cancer



Improved Cases of Uterus Cancer



CA546 was quite high value as 20.4U/ml. TJ-24 (Kami-syoyo-san) 7.5g3x, TJ-48 (Jyuzen-taiho-to) 7.5g3x, Epadel 3P3x were described. Same time Enterococcus faecalis15T3x and Capsule of Bitter Melon 3P3x were guided. After 2 months, CA546 was declined to 14.9

U/ml.

(Conclusion & Discussion)

- 1) As shown in Case No. 1 to Case No.3, supplements have been prescribed to reduce Integrin $\alpha 5\beta 1$ and 8-OH-dG.
- 2) Severe patients take supplements 4 times a day; bur normal patients take supplements 3 times a day.
- 3) When tumor markers decreased, patients feel safely. But if patients change to take supplements once or twice a day, tumor markers should be increased and worsen. So instruction for the patients is very important.
- 4) After determine the optimal dosage of supplements by using BDORT, normal cell Telomere was increased and 8-OH-dG decreased.
- 5) Not only cancer or precancerous patients, but also the patients of mental illness, intractable pain, Diabetes and Alzheimer's diseases, 8-OH-dG are elevated to high value. By drinking hydroxyl ion water ($H_3O_2^-$), active oxygen was removed and 8-OH-dG is decreased to normal level. In particular, patients who had complained of sharp pain for several years, pain has immediately reduced by taking hydroxyl ion water ($H_3O_2^-$).

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Analysis of Central Effects of Acupuncture and Moxibustion using fMRI

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Purpose: Recent years, some papers have investigated the central effect of acupuncture using fMRI (functional magnetic resonance imaging). However, virtually no acupuncture and moxibustion study has focused on the somatosensory cortex. Now, basically, the purpose of this study is to investigate the central effects of acupuncture and moxibustion comparing with heat pain and rubbing stimulation using fMRI. Furthermore, we present a new method to investigate the continued brain activity component after acupuncture stimulation. We selected the component that shows the highest correlation coefficient in the set of both hypothesized GLM (General Linear model) equations and ICA (Independent Component Analysis), and made correlation map. This method may apply to analyze the data of continued brain activity by other sensory stimulation.

Material and method: Stimulation was performed following below, 1) main six acupoints was rubbed to identify activated brain region corresponding with the acupoints (n=11). 2) FMRI studies were performed using LI4 with electro-acupuncture for the semi-quantitative stimulation and rubbing stimulation (n=17). 3) Using LI4, heat-pain stimulation fMRI was comparing with warm-thermal stimulation fMRI (n=11). These studies were analyzed using SPM (statistical parametric Mapping) and this method was considering brain activation as the physiological brain blood flow increased response to the stimulation. If the brain blood flow response was differed from the hypothesis of the hemodynamic brain response, we could not detect accurate activated brain regions. Therefore, further analysis was performed using ICA method. 4) Resting brain activation area after acupuncture was analyzed using this new method (n=8). 5) FMRI of manual acupuncture of LI4 with Deqi sensation was analyzed by this new method (n=13).

Apparatus: a clinical 1.5T MRI (GE, USA) and experimental whole body 3T MRI (GE, USA and Siemens, Germany) with clinical head coils.

Results: In the study of mapping of acupoint, manual-rubbing tactile stimulation was conducted in the right Shangyang (LI1), Shaoze (SI2), Hegu (LI4), Shousanli (LI10), Zuanli (ST36) and Taichong (LV3). We found significant activation in the contralateral S1 for all

acupoints (Fig. 1).

The activated regions were mainly located along the postcentral gyrus (sensory cortex) and the lower part of supramarginal gyrus. The postcentral gyrus representing the acupoints was arranged successively in the same order as on the body surface (S1). The lower part of supramarginal gyrus is well known as the secondary somatosensory area (S2). Comparing the manual-rubbing stimulation with electro-acupuncture of LI4 using fMRI, the latter stimulation did not show the activated area of postcentral gyrus (S1) and showed the activation in the supramarginal gyrus, insular cortex, opercular part of inferior frontal gyrus and anterior cingulate gyrus (Fig.2, 3).

Using heat-pain stimulation, brain activation was observed in the same area of electro-acupuncture stimulation. Moreover, the prefrontal region and S1 area was also activated. Finally, we studied manual-acupuncture stimulation of LI4 using a 1.5T clinical MRI and analyzed by ICA method. We found the activated area in superior frontal gyrus, supramarginal gyrus, cingulate gyrus, postcentral gyrus and cerebellum. We also found the brain activation continued after the end of stimulation (Fig.4).

Consideration: These results indicated that brain processing of acupuncture stimulation was the same pathway as the processing of noxious stimulus in the brain. We showed the usefulness of ICA method to evaluate the brain activation of acupuncture stimulation using fMRI. Since it is well known that analyzed data of brain activation of acupuncture was not enough reliable and also showed a great variety among individuals, our method and results was significant meanings.

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- 3)

The Effect of the Korean Style Qigong Hwalmyeong on the Emotions and the Brain – Measured Using the Psychological Scale and BDORT -

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ABSTRACT

【Background】 Recently, Qigong has been gaining attention as an Asian practice that can improve health. Although there are various types of Qigong, this research considered only the Korean style of Qigong, which is called Hwalmyeong (hereinafter, Hwalmyeong) (Kim et al., 2009). Hwalmyeong is a traditional martial art that has been passed down since ancient times in Korea, and it is mostly used to handle injuries that occur during training or to cultivate the mind. In modern society, it is generally practiced with the aim of improving personal health. Hwalmyeong can be divided into Static-qigong and Dynamic-qigong. Static-qigong entails maintaining one's posture while controlling breathing. On the other hand, Dynamic-qigong entails moving while connecting various motions, or while executing various motions continuously. It is reported that Qigong's benefits include a reduction of negative emotions (Kim et al., 2008), an increase in positive emotions, an increase in the lymphocyte, a decrease in the cholesterol level and high blood pressure level and other psycho physiological effects (Ng & Tsang, 2009). It is widely accepted that physical activities and exercise are closely correlated to emotional health. In addition, it is known that positive emotions tend to increase while negative emotions tend to decrease after exercising. In terms of the correlation between emotion and activation in brain, it is implied that the positive emotions are related to the activation of the left-frontal lobe, while negative emotions are implied to be connected to the activation of the right-frontal lobe (Honda, 2002). Activation of the frontal lobe was investigated to determine the difference between the left and right frontal lobes on an electroencephalogram (EEG) (Honda, 2002). However, the equipment itself is expensive, and has other problems, including the fact that the procedure of measurement is burdensome and time-consuming. Thus, Bi-Digital O-Ring Test (OMURA, Y. 1977-2010; BDORT) is used, which is economically beneficial and does not require extensive effort and time when measuring. Hwalmyeong is a physical activity. Because it is practiced as a form of "mind-body" intervention, Hwalmyeong is expected to increase positive emotions, decrease negative emotions and to activate the brain. The purpose of this study was to investigate the effects of Hwalmyeong on emotions and changes in the brain using the psychological scale and BDORT.

【Method】 The test was conducted in May of 2010. The participants included 11 people who were experienced in the practice of Hwalmyeong (one man and 10 women, Average age 60.1, Average experience with Qigong 21.5 months). In terms of the Hwalmyeong practiced, Warming-Up (5 minutes) was conducted, and then the subjects were asked to perform Static-Hwalmyeong (15 minutes), Dynamic-Hwalmyeong (15 minutes) and Breathing (5 minutes). Then, Pre-Hwalmyeong (Pre-H), Warming-Up (WP), Static-Hwalmyeong (SH), and Dynamic-Hwalmeong (DH), and Post-Hwalmyeong (Post-H) were measured. In terms of measuring changes in the brain using BDORT, research was carried out separately for the right and left sides of the frontal lobe. The number at which the O-ring was open was used to score, using the range from -6 to +3. Positive Emotions were measured using the Feeling Scale (FS: Rejeski, 1985). Answers included 「very bad (-5)」 to 「very good(+5)」, allowing a scoring range of 11 measurements. The subjects were asked to choose the number that they felt represented their feeling. To measure exercising intensity, RPE (Rating of Perceived Exertion: Onodera & Miyashita, 1976) was used. RPE is the measure that entails selecting any number between 6 and

20 (15 numbers) that suits the level of exercise that they perceive.

【Results】 Repeated measures analysis of variance showed significantly increased in scores on o-ring. The right-frontal lobe showed that significantly increased DH and Post-H (Fig.1). In addition, the left-frontal lobe showed that significantly increased SH, DH and Post-H (Fig.2). In terms of the emotional score, ANOVA analysis was conducted, and showed a significant main effect on time. Multiple comparisons on the positive emotion scores showed that DH was increased Post-H. Moreover, average RPE intensity levels for the Hwalmyeong were WP 9.0, SH 13.2, DH 12.3, and Post-H 11.8.

【Discussion】 Frontal lobe changed from minus to plus, and increased on the BDORT. This shows clearly that the frontal lobe improved by the Hwalmyeong. According to reviews, activation of the left and right frontal lobe is related to the positive and negative emotions. Given this, improvement of frontal lobe is related to the increase in the positive and decrease in the negative emotions. This supports the premise that positive emotions were increased through Hwalmyeong using FS. Consequently, the improvement of the frontal lobe and the increase in the positive emotions are expected 30 minutes after starting the Hwalmyeong and after the Dynamic-Hwalmyeong is carried out. In addition, it is suggested that the use of BDORT rather than expensive equipment was effective. Hwalmyeong’s intensity level was close to RPE 11, which refers to 「fairly light」. Moreover, Static-Hwalmyeong was RPE 13, which refers to 「Somewhat hard」, and the intensity level of the Static-Hwalmyeong among the exercises was the high level. In the future, there is a need to clarify this mechanism by examining the correlation between the effect of Qigong on the mind-body and the changes in the brain with the BDORT.

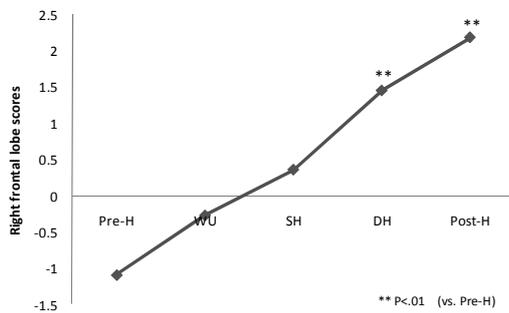


Fig.1 Result of BDORT on right frontal lobe scores

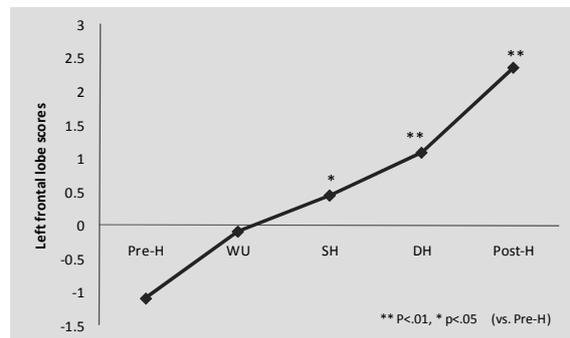


Fig.2 Result of BDORT on left frontal lobe scores

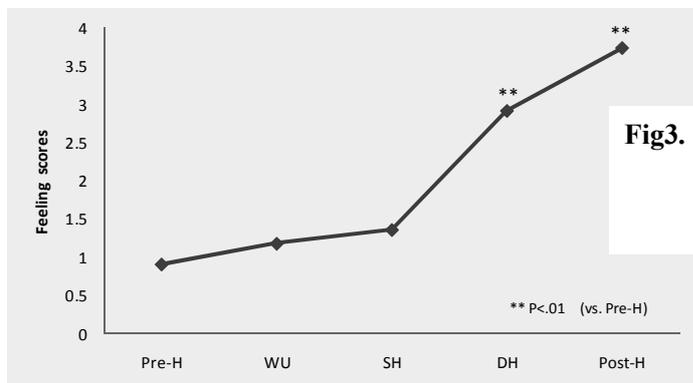


Fig.3. Changes in feeling scores during Hwalmyeong

Homeostatic Balance of Skeletal Muscles Power with a New Germanium in “DKS”

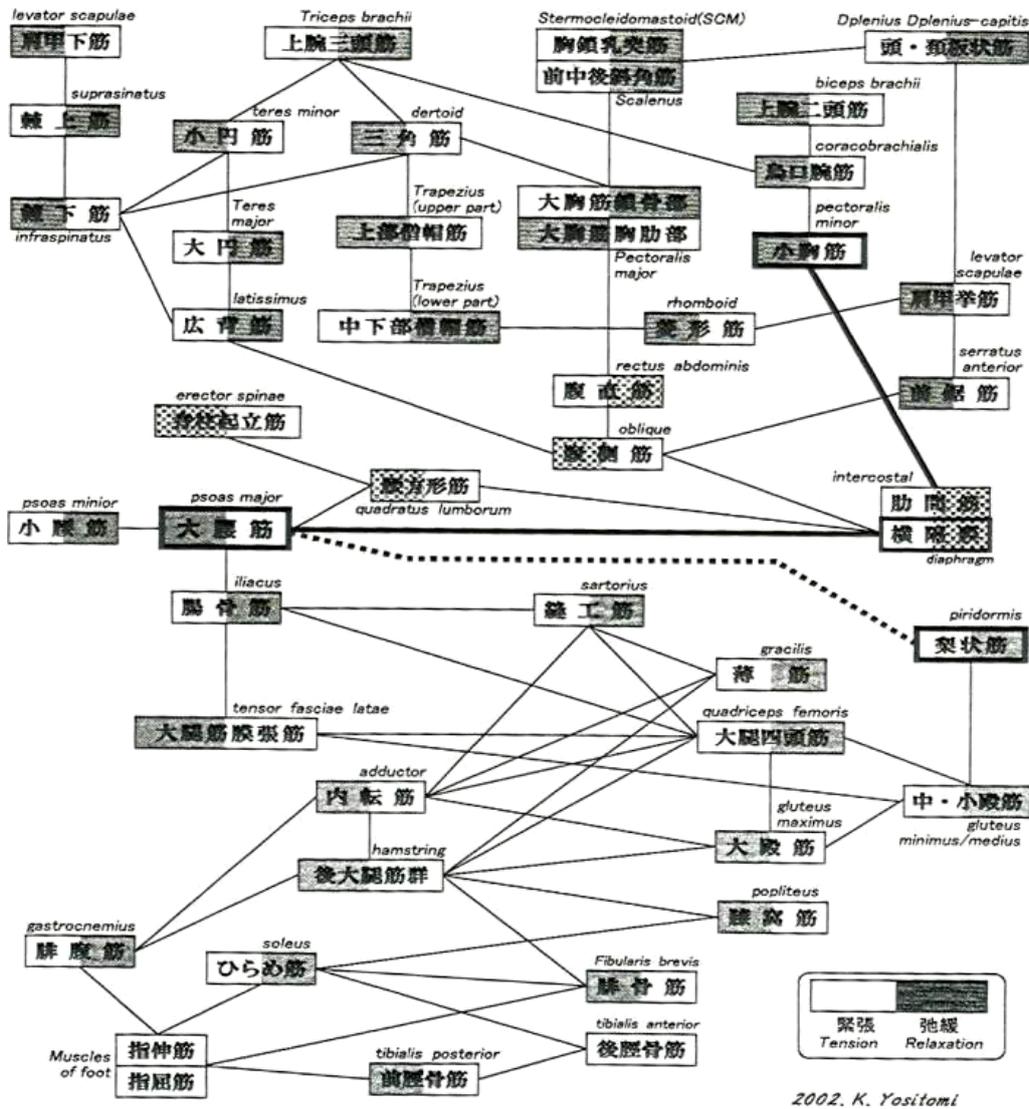
Kenichi Yoshitomi⁽¹⁾ / Takesuke Muteki⁽²⁾

Chairman of Not-for-Profit Organization Japan Kinesion Association⁽¹⁾

Prof. Emeritus of Kurume University⁽²⁾

[Introduction]

Dynamic Kinesio Synergy (DKS) is the way of therapy which improves natural healing power. It supports autonomic nerve system from continuous treatment by putting high purity germanium (over 99.99999%). We provide following advice after the “Arm test”. 1. Finding weak point of muscle. 2. Find a weak or exited point of acupuncture. 3. Recommend nutritional supplements at same time as well for “synergy”. Please refer the following exposition. The figure shows adjustment relations between the muscles. Bold line and dotted line show antagonism relations.



[Relation among skeletal muscle]

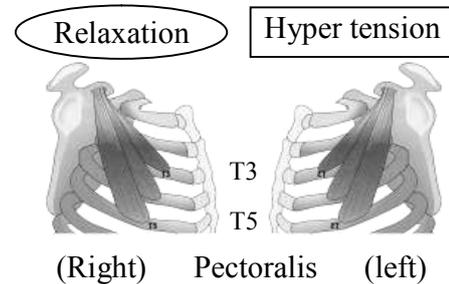
Various body muscles make equilibrium for each body action. Front figure is coordinated mechanism chart of cooperation muscle and antagonism muscle. (for normal and healthy

parson). It made it from a lot of our experiences.

[Importance of major psoas]

The obvious relationship would find around major psoas area. Weaken of major psoas on one side.

1. Same side of diaphragm will get hyper-tension. Intercostals also get hyper tension as well. Those muscle reactions would make symptom of dyspnea.
2. Pectoralis relaxation on rib attached side.
3. That cause of tension on the other side of major psoas. A problem muscle chain related to other muscle herewith.
4. It may cause pain when you press on pectoralis because of the muscle hyper tension.

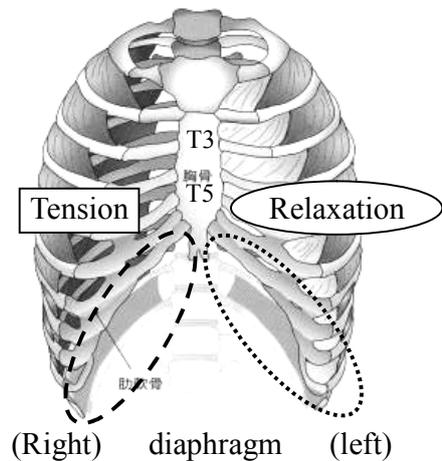


[Effect to shoulder joint]

Major psoas also related to shoulder girdle.

1. Pectoralis attached to scapula. Therefore, it pulls to tension side and pulls back on the other side of scapula.
2. It makes shoulder stiffness when the related muscles get out of balances. It may reach frozen shoulder under chronic condition.

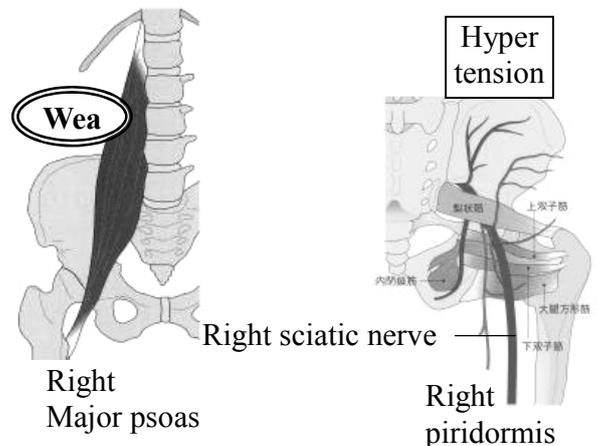
Claims shoulder pain for long time, which may even claims back pain in most of case. If the parson has a treatment on major psoas, it reliefs shoulder stiffness as well.



[Effect to sciatic nerve]

Major psoas also makes balance with piridormis.

1. Piridormis of same side is hyper tension when major psoas gets week.
2. Piridormis presses the sciatic nerve in the bottom.



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Some Particulars of Color Treatment

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ABSTRACT

I began color therapy around 1995 while studying the Bi-Digital O-Ring Test (BDORT) of Y. Omura. Diagnosing on cell level, treatments mostly use medicines. As long as the acupuncturist selects the medicines and indicates the results he does not breach the physicians' laws. What he can do is to select the vital points, balance the yin and yang with tonification (if qi is deficient) and sedation (if qi is excessive). These were tried in my practice but satisfactory results were unattainable. With Einstein's motto of the necessity of conversion in conception in mind-- "one cannot hope for an essential solution if conception is on the same level as the origin of a problem"--I came to realize that photons are colors. Material substances absorb light and change colors, so living bodies are also absorbing photons. Their so-called 60 trillion cells are also in action, action currents arise, and each cell is generating electromagnetic resonance. Diagnosis and treatment with colors are in use in the world but those all apply to visual sensation. I believe visual and optic sensations have a deep union with electromagnetic waves. Those wave lengths from substances must have some relation with wave lengths emitted by photon colors. Light is radiated with electromagnetic waves, enter the eye and produces visual sensation of 380-780 nm scope, so various colors are sensed according to an extremely narrow range of electromagnetic waves. Our visual sense can only see colors of a limited range. For creatures to go on living there is earth magnetism of wave length 7.46 Hz, which if intercepted, they cannot continue life. So it is not true that all electromagnetic waves are bad. There are waves important for life. As all material substances have electromagnetic waves, the cells that make up our human bodies are likewise, so an expert of pulse diagnosis can correctly judge the changes down to the thanatoid pulse. I believe this is a result of perceiving electromagnetic wave lengths rather than the flow of pulse.

Cell abnormalities emit wave lengths different from those of normal cells. Present day medicine regrettably does not recognize how important looking at wave lengths is for a living body. Therefore abnormal wave lengths from cells are diagnosed by electro-encephalograms or electrograms, but how these affect the body cannot be known that way. If these phenomena are not seen with the eyes or experienced, they cannot be trusted. Cells' action currents differ according to their movements' wave lengths. Switzerland's Basel University professor of psychology Dr. Max Luscher made personality diagnoses with cards of 73 different color divisions. In India treatments are still done with various colored jewels or by drinking colored liquids. When these are considered,

a close connection of colors with a living body's cells is not a strange concept. Thus, using the BDORT I am searching out colors with the same resonance as the cell prepared specimens, and to anticipate correctness in the selection method, I am using the Munsell color system of 20,000 colors, further distinguishing them in decimal units to the hundreds, thousands, and producing those colors. I first began with a real human skull. The color was sepia (a brown melanin containing pigment from cuttlefish ink), and there was a reaction. This was the beginning, but it was a very difficult task to find even one color per day. As months passed, I devised an apparatus to implement speed. If wave lengths are used from the same direction the topology is doubled, but in regard to cells within the body, if used from the skin theoretically there will be reversed topology. As members of BDORT are offered a variety of human cells, neurotransmitters, viruses, bacteria specimens, these were purchased though I had no idea what these molecules were, thinking that one day they would prove to be useful. Examining cells, neurotransmitters, heavy metals, viruses from one end to the other, I have been making colors. Once a patient came whose headaches were continuing for 4 hours and no medicine would help. On arrival at my clinic, the headache had just begun. I immediately pasted the skull color I thought related to the brain, on the tip of the middle finger as it connects with the vital point on the top of the head (acupuncture point DU-20). Within a minute, unbelievably, the pain disappeared. I was astounded even more than the patient. Colors do work! I was so impressed, that night was sleepless as I turned over thoughts of colors. (Later I discovered the color was not for the skull but for subarachnoid hemorrhage, as the skull was that of someone who had died of that. The color I had made were of those scars. The normal skull contains 9 other completely different colors.) From then on I positively pursued the research of colors and their relationships with diseases, checking them in clinical application, and adapting color diagnosis to immediate treatment. Moreover, I found that by adding colors on the cell level, the results were a step better, so in cases where there is reaction to over 10 types, rather than use a single color, pasting cell reaction types in layers, there has been technical progress, making multiple colors. At the International BDORT Congress in 1998, this was reported and created a great sensation. At present from chromosomes on, 8000 different therapeutic colors have been made. Reverse Topology By pasting colors of the same wave lengths as the cells, for example in cases of pain, there is immediate relief from pain. Display of instantaneous relief has been proven numberless times. This is because if the topology is the same, by pasting on to the skin, reverse topology occurs, mutually cancelling out to 0. If the wave lengths pasted on differ, there will be no change. If the pain is not completely gone, something is insufficient. From this too, one is confident that the reverse topology effect as a hypothesis is a theory that holds good. Further, even in diagnosis, one can see the progress of the disease by looking at the ATP. For example, due to

mitochondria, ATP (adenosine triphosphoric acid) is produced as life energy and acts, but becomes more insufficient with the progress of disease. The same cell's wave length naturally changes in quantity and telomere which directs a cell's life changes in wave length moment by moment with cell disruption. This cannot be seen by present medical practices. Though action currents are known to exist, they have no way of knowing how strong the currents are, whereas with BDORT we can do this. Whether this is really true can only be proven by checking at our clinic. Our pineal body along with practice can capture subtle cell action currents. For example, in the case of cancer, obviously ATP becomes over 30, and according to the frequency measuring apparatus I designed, the heavier the disease, the higher the registration--around 150 Hz, whereas generally it is around 55 Hz. Animals have a predicting ability, and in the human brain this ability is beyond theirs but asleep, it is said. On May 7, 2003, live on television, an expert polisher was shaving to 1/2000 mm of thinness. Judging the subtle change of the grinding sound and whetting water, he did polish to a 1/2000 mm part. Again, a glass artisan of Ryuugasaki city measuring by eye easily cuts precisely to not even 0.1 g of discrepancy. This is also from the working of the brain. The point is, even extremely faint electromagnetic waves of a micro world can be perceived with practice. That is what BDORT is. Dr. Hakusei Matsuoka wrote: "With BDORT the pineal body perceives the optic sensation (electromagnetic waves) of the visual sense pathway; the visual sensation has a deep union with electromagnetic waves. Electromagnetic wave undulations with directionality reach to all symmetries and there energy action arises. From here again the energy action reaches the pineal body region and generates electromagnetic wave resonance which is then determined to be an object's own 'polarity and fixed quantity'. That is to say, for the pineal body region, the object's inherent resonant action is the best condition for the living body, so the 'signal transmitter' of the pineal body region responds at the highest level, molecular- scientifically. 'Active energy phosphoric acid' reacts and arises, and this active energy phosphoric acid quantitatively and physic anatomically influences the amygdaloidal nucleus, cingulated nucleus, temporal cerebral supradigitorum muscle dominators and the like, and value quantifies the physiologic value basic standard peculiar to objects, ordering the muscle groups, valuabk information value is obtained." (valuabk Information Value. Paper of Dr. Hakusei Matsuoka, Anatomical Science 8-(2): 57-72, 1999) As for cancers, like DNA methylated-related, we have made remarkable progress and have as good results. As there are many cases of bone cavitation, for those interested in what colors we are using for immediate efficacy and what our clinical diagnosis and treatment practice is like, there are slides to introduce show you to how we work.

The Reason Which Chi Generates from Hands, Consideration

from Vascular Physician by BDORT.

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ABSTRACT

Purpose

We solved why chi comes out from hands paying attention to the form of the artery of hands.

Method

We connected the non-induction coil-like circuit (Fig.1) in series, and usually enforced hemodialysis. We checked the next change using Bi-Digital O-Ring Test (OMURA,Y.1977-2010;hereinafter BDORT) at the head of the non-induction coil circuit.

1. Physiological saline filling in circuit of hemodialysis preparatory step.
2. Blood filling in circuit under hemodialysis enforcement.

Result

As compared with the physiological saline filling circuit, strengthening of the muscular power by BDORT was accepted in the blood filling circuit.

Consideration and conclusion

A non-induction coil is explained. If the coil is rolled for reverse at the next and current is sent after coiling a lead in the fixed direction and marking a coil, electromagnetic induction will deny mutually, there will be and a zero magnetic field will occur.

Shigemi Sasaki of Emeritus Professor University of Electro-Communications says that the zero magnetic fields generated from this non-induction coil is chi.

The artery of hands receives a blood flow both a radial artery and an ulnar artery, and forms U character loop. This U character loop exists in fingers and a palm. (Fig.2)

And fingers were bent lightly, the palm was hollowed and it was thought that a fixed zero magnetic field occurred by stabilizing a pulse by long expiration.

That is, chi occurs from a fingertip and a palm.

It is a sedentary statue of Kuukai who makes a right-hand finger crooked unnaturally and has Gokosyo as an example. (Fig.3)

This Kuukai sedentary statue is clearly considered to be a chi Kung state.

Next, it is, Rituzenn, i.e., Tantoukou, which stands lengthening an arm lightly ahead and making an articulation genus and a hip joint crooked lightly. (Fig.4)

It cannot be overemphasized that this Tantoukou is training which makes the inside of the body generate chi.

It was thought that the loop-like artery structure which exists in fingers and palm was generating device of chi.



Fig.1

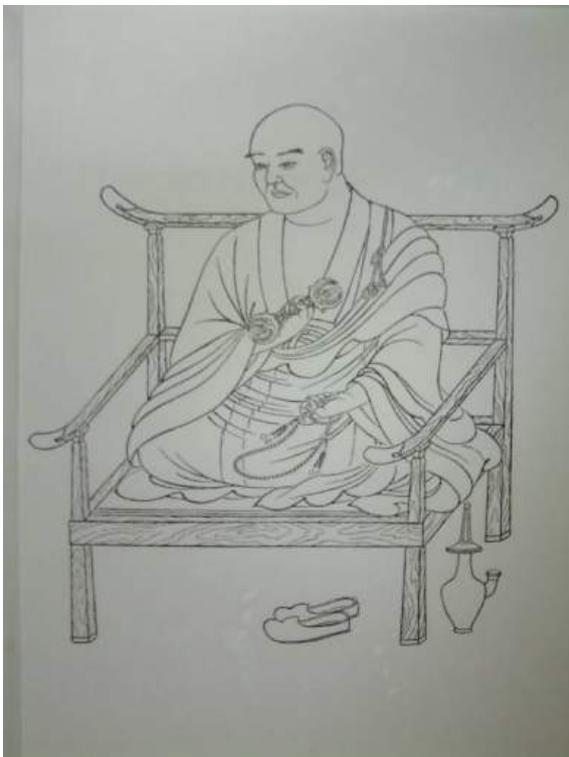
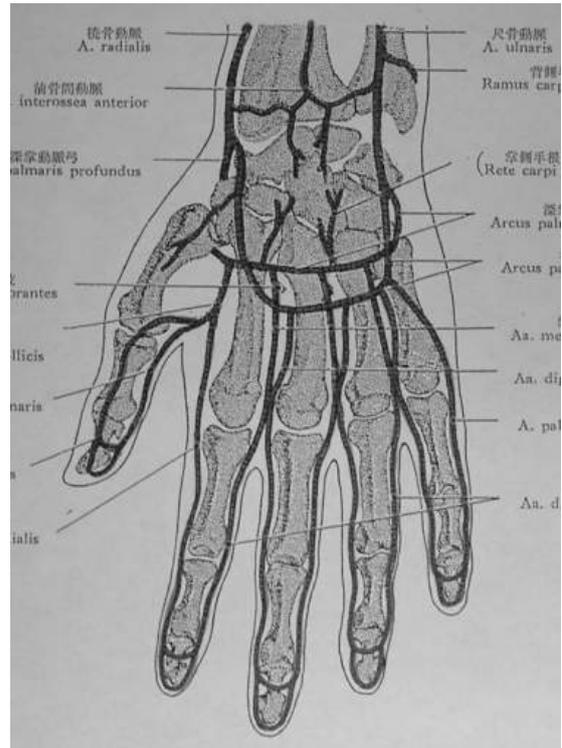


Fig.3

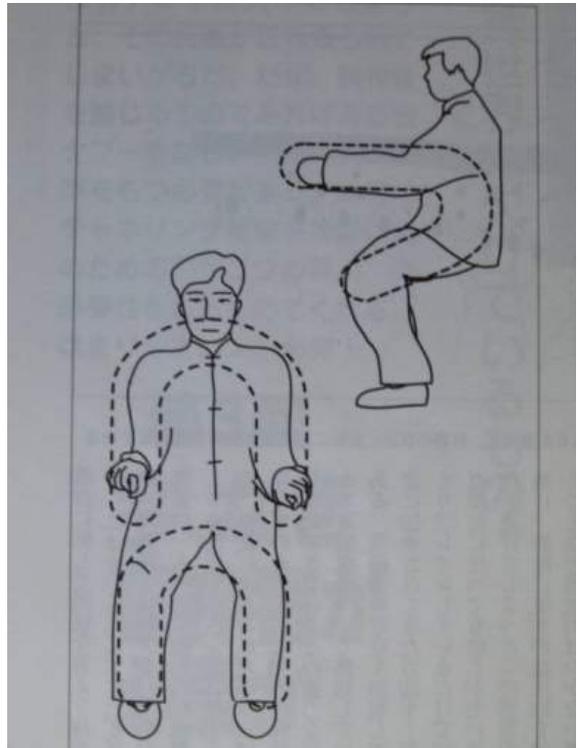


Fig.4

Effects of Qi-Gong Checked by Bi-Digital O-Ring Test

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2) Shimotsuura Clinic

ABSTRACT

Introduction

(About the internal Qi-Gong & external Qi-Gong)

There are 2 types Qi-Gong exists, namely “Internal Qi-Gong” and “External Qi-Gong”. In roughly described, “Internal Qi-Gong” is a method of increasing inner “Qi” and “External Qi-Gong” is a method of incorporating air to itself.

By using Bi-Digital O-Ring Test (OMURA, Y.1997-2010; BDORT), changing degree of the following parameters such as Telomere (Energy level), Integrin $\alpha 5\beta 1$ (cancer related parameter), Thromboxane B2 (circulatory disturbance), Herpes Simplex Virus, Cytomegalovirus, Chlamydia Trachomatis and Substance P (Parameter of Pain). Dr. Shimotsuura checks up these parameter before and after “Qi-Gong”.

(Case Reports)

Table 1 shows the results checked the parameters before and after “Qi-Gong”. By receiving “Qi-Gong”, various parameters are decreased and normal cell Telomere increases. (Table 1 shows the initial data, the current amount of bacteria and virus decreases prominently below 1yg (10^{-24}g) after “Qi-Gong”.

Case 1 61 year old woman Post-operative of right breast cancer, metastatic cervical cancer

She has already receiving “Qi-Gong” many years. She accepts “Qi-Gong” smoothly and easily and the duration of the effectiveness of “Qi-Gong” is several weeks. She felt lighter of her body. In January 2009, CA15-3 increased twice much as normal value and shadow in the lung was detected in February. But after receiving “Qi-Gong” the value of tumor marker decreased and shadow of the lung was reduced. (Chart 1)

Case 2 13 year-old girl Growth Hormone Deficiency (Pituitary Dwarfism)

She has been carried out in parallel to hormone therapy and “Qi-Gong” for several years. At the beginning of the treatment, the height was much lower than mean- 2.0SD. But after receiving “Qi-Gong”, tension of the height increases and closing to the normal value. (Chart 2).

(Discussion)

After receiving my “Qi-Gong”, the patient’s body moves naturally to the negative direction to heal his disease. Even the patient feels great pain at first, they feel like the pus out of the body, getting better. Compared the person receiving “Qi-Gong” only one day and receiving continuous 2 days, increasing degree of normal cell Telomere and decreasing rate of Thromboxane B2 and Substance P is different. With receiving continuous “Qi-Gong”, reduction of tumor marker, decrease in blood pressure and reduction of the pain.

Table 1 : Change of the parameter before & after “Qi-Gong” (BDORT unit)

Age	Name of Disease	TxB2		HSV		CMV		Substane P		Telomere	
61	Colon Cancer p.o.									60	70
69	Diabetes, chronic gastritis			100ng	100ag						
30	Dystonia					10fg	1yg ↓				
83	Stroke	100ng	100ag								
27	Alopecia			100ng	1ag						
50	Hypertensive heart disease			100ng	10fg	100ng	10ng				
55	Diabetes, Hypertension	100ng	100ag								
62	Lung Cancer									20	350
46	All head hair	1μg	10ag	100ng	10zg	100ng	100fg				
78	Both leg pain low back pain	100ng	100ag	100ng	10fg	100ng	10ng				
43	Hip pain & lower back pain			100ng	10zg						
77	Prostate Cancer, Hypertension	100ng	10zg								
63	Ischemic heart disease	100ng	100ag								
53	Peripheral neuritis	1μg	100ag								
42	Low back Pain & Shoulder pain							1μg	1yg ↓	220	570
32	Cerebellar ataxia			100pg	1yg ↓						
73	Rheumatoid arthritis	100ng	1ng							50	270
57	Diabetes, Hypertension					100ng	1yg ↓			100	250

Chart 2 : Change of CA15-3

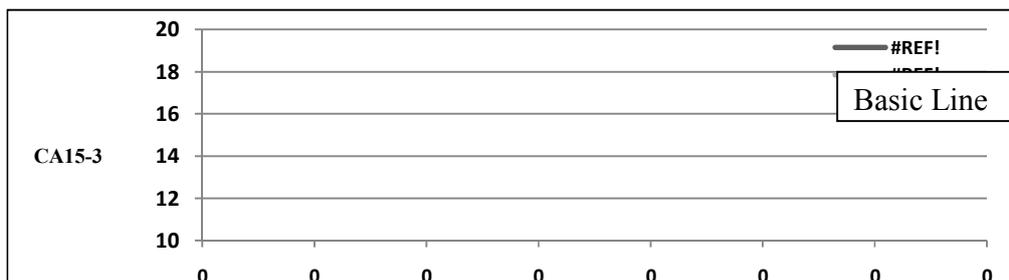
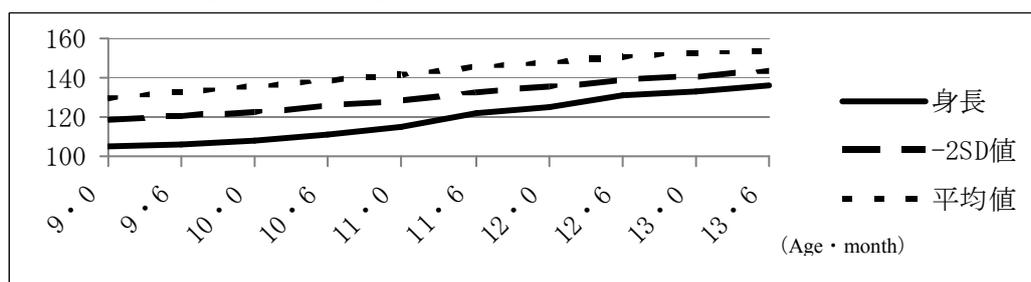


Chart 3 : Change of the Height(cm)



Active Exercise Therapy of Psychosomatic Function

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ABSTRACT

The medical profession has been asserted that "not prevention, not rehabilitation" Alzheimer's disease, are encountering the challenges of a new therapy. Shanghai has been introduced from Japan, "functional activity of psychosomatic therapy" for Alzheimer's disease, stroke sequelae brought the gospel! Functional activity of psychosomatic medicine in Japan, founder of NPO, Japan Association of physical and mental disabilities function of guidance, Mr. Ogawa sincere Xu Yan in his disciples, under the positive activities, through the Vice President of Shanghai Society of Japan, Professor Wang Shaopu description, will this have in Japan the desired effect of new treatments introduced in China in the Shanghai Civil Affairs Bureau with the support of the opening of new treatment guide training, and welfare of the Shanghai Xuhui District, the second Alzheimer's disease patients and stroke patients a pilot rehabilitation The results were achieved satisfactory effects! And the result was held in Shanghai, published in the General Assembly. In practice, research and development of this therapy, and to education, training guide with disabilities in the form of dementia, stroke, brought the gospel for the elderly.

"Functional activity of psychosomatic medicine" is a medical, psychological, kinematics in one physical therapy, through science, the correct regular exercise, will stimulate the desire of the elderly themselves, and in joy, pleasant atmosphere, complete systemic the rehabilitation exercise, so as to achieve "from care to independence," the purpose of rehabilitation.

Alzheimer's type dementia (including if years type vascular dementia prevention, improvement. Infarction, Parkinson (Parkinso's), Cerebral palsy children improvement

1. Warm exercise therapy

Maifanshi mat by infrared heating plate heated to a prescribed temperature (direct and human cells respond to), the guiding persons in accordance with standard movements for use by the hand, shoulder, back, knees, feet and other rhythmic pounding knock, massage, its relaxation, systemic warm soft; whole process with use persons cordial exchanges completed also played open use persons hearts role. He entire movement process most critical aspect allow use who generate "I think action" desire

2. Finger stick exercise therapy

Movement in the warm, based on the body by stimulating the brain or second hand (palm, back of the hand, fingers) to activate the spirit of the brain. Standardization movement in the guide under the guidance of persons combined group-type drive, use those to power your lungs shouted voice, singing and other brain centers linked style rhythmic body movement, to use in the relaxed, cheerful, rhythmic movements in there "I move" awareness.

3. Health Central, exercise therapy

Rod movement in the finger based on the stretch through different angles, different parts of the body are balanced and coordinated, completed in guiding persons driven rhythmic aerobic exercise, to take advantage of those who cultivate concentration, memory, improve balance and reflection function, in the exercise of deep breathing also give heart and lungs get enough oxygen to complete the specification used in the action in the sense of "moving the energy."

4. Gore Croquet exercise therapy

Based on the previous three campaigns, has a good physical and mental condition, will inspire those who have used the team competition and spirit: guide persons in control, driven by simple

rules of the game through practice a ball game, grip, alignment, concentrate and attack so coherent action, the human body in a natural state of completion of the rehabilitation process "is active, not passive; that I move, not his action."

5. Therapy for high Corbin throwing fruit

Concentration and the use of those capabilities are throwing in an instant play, all ages, with suitable effort, happy mood and a sense of achievement when settlement rates will make use of the mental, physical function was improved (refer to the instruction manual specific rules).

6. Recall that exercise therapy

Targeted dementia, stroke sequelae (language barrier) and so use those first four movements, based on the guidance of persons the right inspiration, guidance, through sound, pictures, aromatic and other stimulus features, point to area, in the rich taste of naturally open the door thinking, in a good atmosphere and the restoration of the natural completion of the session memory training, in order to achieve "from care to independence," the purpose (refer to the specific method of instruction manual).

Improved cases

Ms. Min dysfunction by the co-ordination to be good at communication.

Guidance from Mao Yaping Shi and Lu Meiling President's report

She used to be a doctor, unfortunately suffer from Parkinson's disease and cognitive disorders. Received physical and mental function in active physical therapy treatment, abandoned the "universal medicine" of ideas, and actively cooperate with the treatment. In the short period of time has greatly improved. Trembling hands and feet away, even after treatment initiative to help clean up equipment.

Complications of Parkinson's disease Ms. Min, a former doctor, also served as president of the hospital. Introverted, self-esteem strong. She and her daughter had been living, retirement suffering from Parkinson's disease shortly after, after, another concurrent cognitive disorders. Just moved into social welfare, she cannot control their behavior, energy, inability to concentrate, memory is low, often mistaken, wandering, do not match the treatment. Hands shaking so badly she could not stride. Sometimes confusion may even have forgotten the order of dress, and on cold and hot to very slow response. Almost no communication with people. Her long-term use of several drugs. We implemented five times a week for her treatment, she was not interested. She also often "tired today, do not do" and refuse treatment. Finally holding her by the experience of a mentor, but also just stay in the warm phase of therapy. Understand the character of the daughter's mother. She said we need to convince her mother to allow her to understand the treatment, enforcement alone is not work. After listening to Mr. Ogawa and translation of Miss Xu Yan psychosomatic function describes the effectiveness of active physical therapy after, Ms. Min seems to have a point of interest, but one person alone is unable to complete her. Began to actively cooperate with Functional activity of exercise therapy in the treatment of psychosomatic process, gradually, Ms. Min walking much better state than before. Golf croquet on the afternoon more and more positive campaign. After golfing, the pace of many strong and vigorous than before, his face gradually smiles. Reducing medication, physical therapy, then adhere to, the effect really different, but she still cannot completely get rid of drugs. With a little improvement of cognitive disorders, Ms. Min is also able to listen to others speak. Because she Dr. Zeng Danguo, so "you are sick, can only take medicine" mentality ingrained in her mind. But now, she felt through sport, the spirit of a lot, so consciously reduced the amount of medication. Meanwhile, she is also familiar with the whole process of physical therapy a lot, ring finger exercises and health campaigns can be a person independent complete.

In order to Find the Best Way with The Bi-Digital O-Ring Test for Atopic Dermatitis, Depression and Persistent Lower Back Pain

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ABSTRACT

The report of case studies of atopic dermatitis, depression and persistent lower back pain using the Bi-Digital O-Ring Test (OMURA, Y.1977-2010 ; BDORT) .

【Atopic dermatitis】



- Using steroid drug from 3 years old to 22 years old
- BRM is not effective
- Imaging of adrenal gland
- Three-stage treatment of atopic dermatitis

【Depression】



- Comparison between Jzoloft and Chinese herb and EPA- α
- Effect of EPA- α for the stomach
- Acupuncture treatment for neck and changed telomere and acetylcholine

【 Persistent lower back pain】



- Persistent lower back pain as the result of X-P
- Inflammation of articulation sacroiliaca ?
- Possibility of lung disease

【Conclusion】

It is quite easy to draw virus infected area and organ imaging using BDORT. We have to choose the best way from among many methods. But how? Organ imaging taught us how the organs work and imaging virus infection taught us what kind of drug is effective. There is no way to digitalize the disease without BDORT. Digitalization of the disease is one of the important factors to decide the way of treatment.

Facial Acupuncture with Bi-Digital O-Ring Test

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ABSTRACT

[Prolusion]

Oriental medicine offers an idea towards nature; “Kembu (health and beauty)”. The patients, who experience an improvement with their daily clinical acupuncture, start to feel more cheerful and beautiful. As a number of issues should be accounted for the balance in between health and beauty, we report the effectiveness of the facial acupuncture method with Bi-Digital O-Ring Test (OMURA, Y. 1977-2010 ; hereunder BDORT).

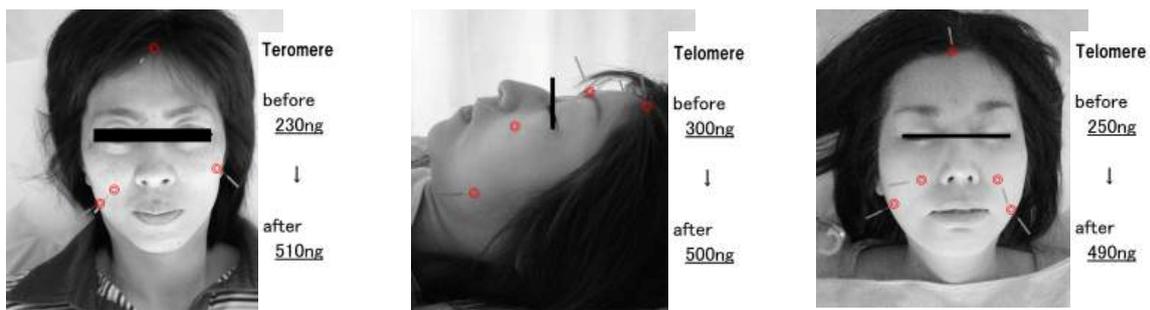
[Method]

This testing has been targeted to twenty patients (male: 4, female: 16) in their 20's and 70's , who underwent the BDORT screening in our clinic. They were categorized into three different groups; 1. Mouth 2. Intestine 3. Nerve (Mental). The reactions from performing acupuncture on their faces were evaluated by BDORT. We have used the No.01 (0.14) 15mm needles by Seirin. The duration time was five minutes. (The targeted patients agreed to participate in this study.) 1. Mouth: temporomandibular joint and surroundings (Quanliao: SI18, Jiache: ST6, Xiaguan: ST7) 2. Intestine: main facial intestine regions (Quanliao: SI18, Yingxiang: LI20, Yintang: Ex-HN3) 3. Nerve (Mental): median line and facial nerves, trigeminal nerve regions (Quanliao: SI18, Xiaguan: ST7, Jingming: BL1, Taiyang: Ex-HN5) After acupuncture the above meridian points, the pain scale and the telomere values were measured (BDORT Unit). The before and after values were evaluated.

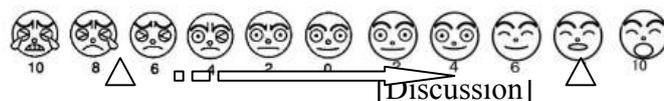
[Result]

All acupuncture points showed the increase in the telomere values. Many of the patients felt the muscular strain and the pressure pain around SI18, however the sense of discomfort was immediately resolved by the facial acupuncture. The pain scale has improved from -7 to +8.

(Figure 1: Meridian points, Change in amount of Telomere (TTAGGG))

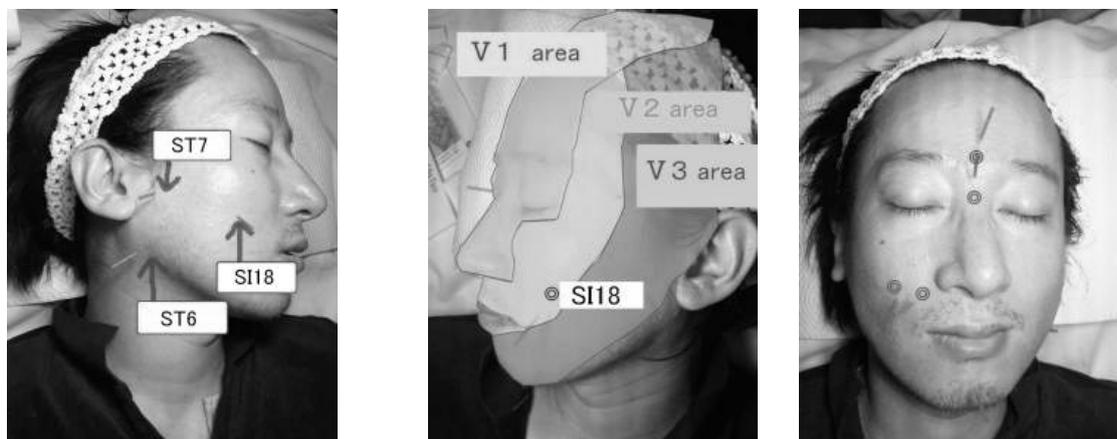


(Figure2: Change in pain scale)



The main stomach region, which is the main facial intestine region, could be considered as the extremely important acupuncture point to increase the telomere value. The result indicated the effectiveness of acupuncture treatment by evaluating the improvement on the pain scale. As an accounted result with détente on muscles of facial expression, it is also considered that the lymph circulation was improved and rejuvenation on fibroblast cells was occurred. Improving intraoral immunity could lead to effective treatment for preventive medicine. Despite the influence from virus, the results indicated the encouragement to the brain stem and the possible serotonin secretion on nerves (mental) through facial and trigeminal nerves.

(Figure3: Trigeminal area chart, Meridian points)



[Conclusion]

The increase of the telomere value was detected by facial acupuncture. We were able to acknowledge the usefulness of facial acupuncture as the necessity in the future if it acts on any immunity. The natural beauty, which is beyond health, can be achieved by screening the selection of acupuncture points and their depth by using BDORT beforehand in order to perform safe and efficient facial acupuncture.

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Study about ST36 using Bi-Digital O-Ring Test

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ABSTRACT

PURPOSE

ST36 is one of the famous acupuncture points used in acupuncture treatment. In Bi-Digital O-Ring Test, Omura's ST36 is important Point in Selective Drug Uptake Enhancement Method. BDORT resonance phenomenon was present to affect nearby Omura's ST36 on Stomach meridian, so we reviewed it.

METHODS

A case is 5 male (24, 44, 31, 38, 58 y.o), and 7 female (24, 33, 47, 49, 58, 62, 67 y.o) of the this clinic patient, 12 people in total.

We detected the points like acupuncture point nearby ST36 which were resonant with reference control substance of Acetylcholine Chloride 100 μ g(BDORT Unit).

We drew the location to be resonant with each point of a~j by connecting copper wire coated insulation gum and aluminum foil disc same as them.

Furthermore, we put aluminum foil on the area that we plotted using BDORT imaging methods and examined resonance in a whole body.

We examined the change of quantity of Telomere (TTAGGG) in the most abnormal part and a palm when a point of a - j was stimulated.

RESULTS

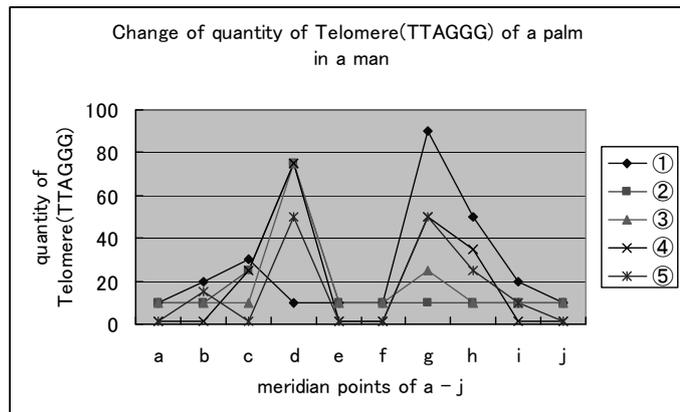
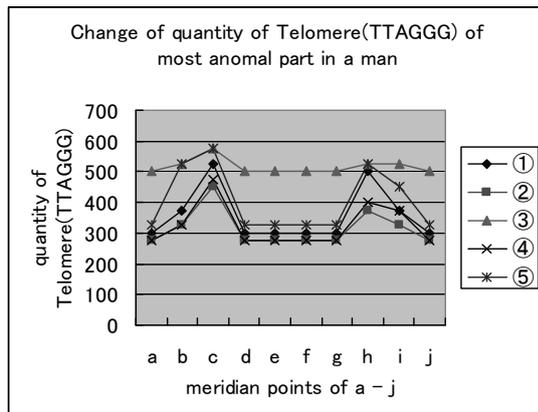


Figure 1 The points which were resonant with nearby ST36 in a man



Figure 2 As a result of resonance with a point of a - j in a man

Figure 3 A change of quantity of Telomere(TTAGGG) the most abnormal part and in a palm of a man



We were able to detect each point like acupuncture point of a - j at regular intervals about approximately 2 or 3 mm by a case. The area of A - E of figure 2 were resonant with whole-body (abdomen / back). The area of A and E was hardly resonant. The B area was resonant with a body mainly. The C area was resonant with line like Stomach meridian mainly. The D area was resonant with extremities and head mainly, but was not resonant with the body. The Telomere of the most abnormal part increased when we stimulate the point of c / h, but not increased in a / e (resonant with cardiac region) / f / j (resonant with pyloric region). In a palm, a male became the results that each point raised Telomere of d g (a female, b i).

DISCUSSION

It seemed that a point of c / h (resonant with cardiac region / bottom / body region / pyloric region) were the most effective to give action to a meridian and acupuncture points and the whole stomach. In addition, the area of B D showed the resonance that (body and extremities) supplemented each other, and it was thought that each site of action was different because b / i (resonant with bottom) and d / g (resonant with body region) changed quantity of each Telomere. A point like acupuncture point of b / i acted on internal organs mainly, and it seemed that point d / g acted on periphery mainly.

CONCLUSIVE

In clinic of acupuncture and moxibustion medical examination and treatment, it is significant to use BDORT to raise therapy effect to aim for. What Acupuncturist us always minds is to be it as for the acupuncture point and meridian and stage of disease relations with a whole body how. We think that we can perform more effective treatment by knowing a meridian and acupuncture point and relations with a whole body.

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