

**Excerpt from the book  
"Insights Into Lyme Disease Treatment"**

**Marlene Kunold, Health Care Practitioner**

Marlene works in Hamburg, Germany as a "heilpraktiker," which, in English, might be translated as "healing practitioner," but in Germany, this title encompasses a broad range of training programs and qualifications. Some practitioners with this title are only qualified to do reflexology massage, for example, while others do the kind of work that Marlene does, which is similar to that of a naturopathic doctor. To obtain her certification as a heilpraktiker, Marlene had to undergo medical training and take a written and oral exam, the latter of which involved standing in front of doctors who asked her difficult questions in an attempt to make her fail the exam! This practice, however, is quite common, and is done in order to separate the "good from the bad".

The education and training of a heilpraktiker is shorter than that of a physician's, but is more holistic, although the time that it takes to finish a particular program depends somewhat upon the student's initiative and how much he or she wants to learn. Marlene has also done a lot of seminars, studying and teaching on her own, in addition to what she learned through this program. That she is able to work as a holistic heilpraktiker is no small feat, since 90-95% don't pass the certification exam, because it's so difficult.

Those that do, however, can then choose the areas of medicine that they want to specialize and work in. So, basically it is all up to yourself, to decide, how deep you want to dig into the realms of healing art.

Today, Marlene maintains a practice in Hamburg. About 40% of her cases involve patients with Lyme disease.

## **How I Became Involved in Treating Lyme Disease**

I had Lyme disease myself for twelve years. At the time that I caught it, knowledge about the disease was scarce, and I didn't have the typical signs and symptoms, anyway. I caught it in 1995, while at an open-air event. I was lying around in the grass and two or three days later, discovered an eczema rash on my belly. I didn't remember getting bit by a tick, but it was not known at that time that eczema could be a sign of Lyme disease. I also had a slight fever, sore lymph nodes, and thought that perhaps these symptoms were due to an allergic reaction from a bee.

In the following years, I developed a persistent bronchitis, as well as frequent sinus problems. I went to a friend who was a doctor, and he gave me antibiotics (doxycycline), which overall made me feel worse! Years later, I became so sick that I couldn't continue my work. I had a successful PR office at that time, and was a music journalist. I even had my own TV show (the videos of which I keep stored away, because I think the show was quite bad!).

I started detoxifying my body and doing other things to improve my health, and meanwhile, moved to Hamburg from Berlin. Shortly thereafter, I became pregnant, and after I had my baby, I started getting muscle weakness in my body. Every time that I would kneel down to pick up my baby, I couldn't get back up again. Climbing stairs became almost impossible. Whenever I tried to carry something, it just

slipped out of my hands. My joints ached and my mental state was quite miserable.

I went to see a few different doctors, and I told them to test me for Lyme, and they did the usual antibody blood test, which always turned out negative, so they not only refused to give me antibiotics, but also believed, I think, that I was weird! They said that the symptoms were "all in my head", and that I was under too much stress.

Yet suspicious that I had Lyme, I began investigating alternative ways of testing and detecting what was wrong with me, and my Lyme diagnosis was eventually confirmed by these. At that time, however, there was still no such thing as a lymphocyte transformation test (which is an important test that is currently used in Germany to test for borrelia).

I tried different healing remedies, including Rife machines, Clark frequency zappers and colloidal silver, but nothing really worked. Then I used ozonides, which were very powerful remedies that also turned out to be beneficial for treating intracellular microbes, and as a result, my symptoms began to disappear. I also started working with a device called the QXCI, which is precursor of the SCIO system that is currently used. This device, along with the ozonides, enabled me to become symptom-free.

For awhile, I was optimistic that my Lyme was gone, but two or three years after these treatments, I was invited to see a Phillipine healer and attend a "clearing" session. Curious, I went to see the healer, who performed a treatment on me that compromised my breathing and

caused my head to become plugged within minutes following the treatment. After having been symptom free for quite awhile prior to this "clearing" session, I then developed a heavy fever that stayed with me for months. It eventually dropped to a lower level, but I continued to have it to a lesser degree for years.

At some point, I went to see another colleague and he diagnosed me with liver cancer! I was quite shocked to receive this diagnosis, but I started doing every single therapy that I had learned about up to that point for treating cancer because I wanted to live! At the same time, I came across more current information on Lyme disease, which described how cancers of different organs sometimes result from Lyme disease. So I learned how to give myself shots and infusions, and did literally every therapy that I knew of in natural medicine for treating cancer. Such therapies included Cell Symbiosis (Dr. Heinrich Kremer), and taking protein-omega 3 oil (Dr. Budwig). My son was six or seven years at that time and I was really struggling. To this day, I don't know how far the cancer had developed because I never wanted to see the tumor that the doctor had found on my liver.

Some time after that, a colleague convinced me to do a lymphocyte transformation test, so that I could determine once and for all whether I had still Lyme disease. I agreed, and after more than ten years of negative lab test results, this one finally came out positive. As I held the results in my hands, I said, "Yep! It's Lyme disease." That got me investigating again other therapies that would get rid of Lyme disease. Finding a real solution, however, took me awhile.

I ended up developing my own treatment protocol for Lyme and, although it worked quite well, it was yet not sufficient for eradicating the infection.

At some point, I discovered Dr. Woitzel's biophoton therapy for Lyme disease. I combined this with my own protocol, which ended up being the perfect treatment solution. Following treatment, my LTT test came up negative, and has remained so, up to this day.

While living in Hamburg (and still having Lyme) I opened a wellness center and shop called Catch a Dream, which sold a variety of herbal and other remedies, as well as nutritional supports from all over the world. At that time, I was the only one in Germany who owned a shop like this one. I had a lot of clients with Lyme, allergies, drug addictions and other health problems who would come in to the wellness center. At that time, I still hadn't received my certification as a heilpraktiker, so I couldn't treat them, but they could consult me and I could give them advice, based on my own experience with different treatments. This was in some ways beneficial, because whenever I discovered a remedy that worked for me, I would share it with those who came into my shop.

Subsequently, at the beginning of the millenium, I received my certification as a heilpraktiker, and was then able to open a practice and start treating Lyme patients as well as others that were suffering from unexplainable illnesses. By that time, I had also already gone through a lot of extra training in immunology, endocrinology, neurology, and other disciplines, which helped to improve and expand my work as a heilpraktiker.

Initially, I treated my patients' borreliosis using stabilized oxygen and glutathione. This helped to reduce their symptoms, but it didn't eliminate all of the borrelia from within the cells nor heal them %100. So a little while later, I started using the Bionic 880 device, which proved to be very effective. In fact, ever since I have used the Bionic 880 in conjunction with my own specific healing protocol (which I have worked out over the years), I have been able to claim that I have found a successful treatment for borrelia.

Healing is about more than just simply getting rid of borrelia, because most patients are also confronted with all kinds of co-morbidities, opportunistic infections and immune system changes such as systemic inflammation, which must also be dealt with if they are to completely heal.

I am currently in the process of writing a book about how chronic, multi-system and autoimmune diseases come about. In this book, I discuss the factors that play a role in the development of disease, including chronic infections. I have found that certain chronic infections have been underestimated or forgotten by the scientific community, even by people whose work I respect a lot, and I think that this is a problem. For example, many health care practitioners will say that clamidia doesn't play a role in chronic illness, and that antibodies that patients have to this infection are really indicative of old infection. I think, however, that such antibodies may reflect the presence of an active, chronic infection, which can play just as much of a role in the development of chronic illness as borrelia, and this is one of the ideas that I emphasize in my book, among others. On the other

hand, antibody testing doesn't necessarily provide all of the answers. Antibody tests can be negative, even if an infection is present and active, and they can also be positive when an infection is not active anymore and therefore, it can be difficult to discern the status of infection in patients. For that reason, **only the LTT can actually determine whether an infection is active and if the treatments used for that particular infection are successful. This is, unfortunately (it is far more expensive than antibody tests and offered only in a handful of practices), the only accurate blood test for many –especially intracellular- infections.**

## **Healing Philosophy/Treatment Approach**

Whenever I suspect that a patient has Lyme disease (or borreliosis, as it is called here in Germany), the first thing that I do is an immunological test called the LTT, or lymphocyte transformation test (as mentioned previously). This test looks for a specific cellular immunological reaction to borrelia, and is about 90% accurate for detecting active infection.

I then do other blood tests to determine the state of the patient's immune system and what is happening in his or her cells, and once I know these things, then I can start to formulate a treatment protocol.

To help determine immune function and the state of the body, I **test the following:**

**-Homocysteine (to determine how well cell symbiosis is taking place)**

-Zinc and selenium (to determine the body's toxic load, and how strong and adequate immune responses are.)

-Vitamin D (which is almost always low in chronic disease, but essential for combating infection and inflammation, as well as for the building of hormones)

-Inflammatory cytokines (TNF alpha, IL10, IL 1 $\beta$ , Interferon gamma)

-Natural killer cell function

-Cortisol circadian rhythms. This is done using a saliva test. If cortisol levels are low, then they must be corrected before commencing borrelia treatment, as the treatment will be unsuccessful otherwise.

-Nitric oxide stress (to determine mitochondrial stress)

-Intracellular glutathione

My principal treatment for borrelia is photon therapy using the Bionic 880 device. This therapy involves placing homeopathic nosodes on the patient's solar plexus while administering biophotonic light to different points on the body. The homeopathic nosodes contain the energetic imprint of borrelia or whatever infection I happen to be treating, and give the body the information about what it must do, which is, in the case of borrelia, to expel the organism from the cells.

I accompany these treatments with intravenous infusions of stabilized oxygen, which are given in a saline solution. The stabilized oxygen helps to oxidize floating microbes in the blood, and is thus a helpful adjunct to the photons. It eliminates borrelia or whatever other oxygen-sensitive microbes are floating around in the blood, and acts as a blood cleanser of sorts.

Patients usually require eight biophoton treatments for their borrelia infections to be put into remission. From the second or third treatment

on, I also give them homeopathic borrelia nosodes to take orally, which are of the same type that I place on the solar plexus for use in conjunction with the biophotons.

Most of the time, I also give my patients intramuscular B-12 shots after the therapy, because it gives them a little more neurological stability, and helps their bodies to heal on many levels.

It is important to note here that biophoton therapy does not kill borrelia. It supports the immune system, so that the immune system can accomplish this itself by means of the body's Natural Killer cells.

How does it work? In the human body, we have a highly sensitive, yet extremely effective way of producing energy by using oxygen. This energy – ATP – is so important for us, that we produce around 70 kilograms of it per day, and that, if not there, will lead to death within seconds. In each cell we have at least a thousand of mitochondria, who do that work each second. The process of forming ATP is a cycle. The transformation is done in 5 steps, or 5 complexes, in which electrons are being transported from one complex to the next. Complex IV of this chain absorbs about 90% of the body's inhaled oxygen. This absorption occurs within a wavelength range of 600 to 900 nanometers. Chronic illness is accompanied by a dysfunction in complex IV. The implication of this is that the electron transport process gets "stuck", which then creates dysfunctional mitochondria that are unable to adequately produce ATP. The Bionic 880 happens to emit photons at a wavelength of 880 nm, which falls within the body's range of complex IV absorbing photons. The body can therefore use the photons from the Bionic 880 to eliminate the blockages in its

electron transport system. So, the Natural Killer cells certainly benefit from sufficient ATP production, and – being informed by the nosodes – can now go to work.

**In the preceding paragraph you say that the body uses its killer cells to get rid of borrelia. So what do killer cells have to do with ATP production or eliminating blockages in the electron transport system? I need a sentence or two to link this paragraph with the previous one.**

Curcumin may also assist with this process. So the body is enabled to eliminate intracellular microbes by means of its own resources.

In addition, if photon therapy is undertaken without additional support for the other systems in the body that may be “out of tune”, then it may trigger a systemic inflammatory response. Where this is the case, patients will feel very bad after treatments. Their body’s inflammatory response, nitric stress levels, and even allergic or aberrant neurotransmitter reactions can be triggered in the wrong direction.

After the oxygen, I give patients a glutathione fast push, in order to support their body’s cellular antioxidant system, which is “run” by glutathione. Once the body starts to kill cells that are contaminated by borrelia, it needs an anti-oxidative support to detoxify the debris from these cells as well as from the borrelia neurotoxins, and this can be accomplished partially with glutathione. So glutathione acts as a kind of support for the cellular system.

Finally, it is vital to support the body in other ways during photon treatment. It is important that patients consume a diet low in

carbohydrates, but high in protein and omega-3 fatty acids. In addition, high doses of coenzyme Q-10, magnesium, B-vitamins, Vitamins D and C (which are anti-inflammatory), probiotics and certain amino acids that are precursors to neurotransmitters are a must during treatment. I recommend testing for deficiencies of these before supplementing with any of the above, however.

\*Author's note: For more information on how the Bionic 880 works, see the chapter on Dr. Woitzel, who also uses the Bionic 880 for the treatment of Lyme disease

## **Diagnostic Procedure**

When new patients come into my office, I first ask them to fill out a long questionnaire. We then have a conversation to discuss their responses, as well as any other personal information. I use this, as well as their lab test results to determine a treatment regimen for them. Then I use energetic testing devices such as the biotensor to confirm the treatments that I think might be most appropriate for them.

So I not only treat patients for borrelia, but for other problems that they may have, as well. It's important to test the function of the whole body. If I don't, then I make mistakes in my treatment of patients.

The elimination of borrelia should be at the center of any treatment protocol. If the body does not get rid of borrelia, then any other treatment is more or less useless.

When diagnosing patients, it's also important for me to determine their adrenal gland function, because the success of any treatment regimen depends upon the adrenal glands working properly. If patients' adrenal function is low, and cortisol levels are low, then as a practitioner, I will not succeed in anything that I do for them unless I can improve the functioning of their adrenals.

Symptoms of adrenal fatigue include extreme fatigue, depression, insomnia or oversleeping; for example, having to sleep for twelve or fifteen hours, or not being able to sleep soundly at all. Also, those with adrenal fatigue tend to catch every infection around, are often underweight and lack muscle strength. They may also have a pale complexion. The exhaustion in those with adrenal fatigue can be so profound that they get what is called "burnout syndrome", which means that they lose complete interest in their social obligations and life. Having to call people or to get things done by a certain time is overwhelming for them. They are basically able to sit or lie around, and are not able to do much else. Their tolerance to stress, noise or fragrances is also low.

So therapy for borrelia and other conditions may not be effective unless the adrenals are adequately supported, because when the adrenals are weak, the body simply won't respond to treatments. This I learned after treating many patients, because there were those for whom the LTT test would not become negative, even after multiple treatments for borrelia, and I would ask myself, *What's stopping us here?* After doing a few tests, I learned that poor adrenal function was what was hindering these people's healing, and I've seen this scenario quite a few times ever since.

In addition to the adrenals, thyroid function must also be carefully tested and treated, when necessary. Triiodothyronine, T-3, as well as TSH, are among the tests that I do for this. If I suspect patients have autoimmune disease, as well as high levels of nitric stress (nitric oxide and peroxynitrite) in their urine, then it may also be necessary to test them for thyroid antibodies.

In summary, when the adrenals and thyroid glands aren't functioning properly, it's very difficult for patients to heal, and I often see low thyroid and adrenal function in those with Lyme disease.

In general, it's good to look at the function of all hormones when treating patients, however, because the hormonal system functions by a reverse feedback system. The implication of this is that if you, as a practitioner, "push" one gland without addressing the others, then you may seriously disturb homeostasis in the patient's body.

### **Hormone, Neurotransmitter and Other Types of Testing**

I do saliva and urine tests to check the functioning of certain hormones, such as the catecholamines, which are the "fight-or-flight" hormones, such as epinephrine, norepinephrine and dopamine, and which are released by the adrenal glands in response to stress.

The Neuroendocrinological Stress profile is another test that I often have patients do. There is a lab in Munich (Lab4More), as well as one in Augsburg (Biolabs) that does this. The lab specializes in the diagnosis of neuropeptides, neurohormones, catecholamines and other

hormones, as well as neurotransmitters like GABA, glutamate, serotonin and dopamine. Through testing of the above, I am able to correct for hormonal and other imbalances that patients might have.

For instance, yesterday there was a young woman that I needed to do the Stress profile on. This woman is thirty-one years old and hasn't had her period for six years. She has anger problems, as well as a tendency to hurt herself physically in order to feel better emotionally. In addition, she has neuroborreliosis. This type of patient requires a complete panel of tests to determine what hormonal and neurological imbalances are playing a role in her illness. I can then correct these, for instance, with the use of amino acids and other neurotransmitter precursors, or homeopathic remedies that support the whole function of the body.

Also, here in Germany, practitioners have the opportunity to use injections containing real organ extracts, which help to balance hormones. By law, such extracts must be prepared by practitioners and can be used only in one's practice. These extracts are of extremely high quality and safety, however. Millions of potent, multi-purpose stem cells are stimulated when these extracts are given. (See below for more information on their use in correcting adrenal dysfunction).

Treatment, however, is always very individualized, because patients don't come to me with "just" Lyme disease. They have a wide variety of problems, and everyone with borreliosis has a different set of symptoms. Getting rid of borrelia first is important, but balancing

everything else in the body is, too. If we (the patient and I) miss out on an important issue, we might not reach our goal of health.

Another test that I do involves measuring patients' homocysteine levels, because if these are too high, then I know that they have a problem with ATP production. They might have, for instance, a problem with methylation, which is involved in ATP synthesis. It is very important to regulate the body's homocysteine production so that the cellular metabolism functions properly.

I also check patients' Vitamin D levels, because this nutrient protects the body against infections; it is both anti-inflammatory and anti-microbial. Just about everyone who is chronically ill has a Vitamin D deficiency. Also, Vitamin D isn't really a vitamin, it's a hormone that helps to keep the other hormones in balance. For all of the aforementioned reasons, its role in the body is vital for maintaining health.

It's interesting that nowadays, there are about twenty percent less photons from sunlight that reach the earth than from years past (the sun emits photons, just as the human body). This was measured and investigated in a research project on global warming, but since photons are light, I think it's more accurate to call this phenomenon of reduced photon activity global darkening, instead of global warming! This may be one reason why so many people these days are lacking in Vitamin D, especially in northern Europe, where people tend to stay inside the house during winter, when there is less sunlight, anyway.

## **Treating Hormonal Dysfunction**

I support my patients' adrenals with a glandular formula that also contains licorice, siberian and Korean ginseng, Vitamin B-5 and other micronutrients. Also, I have recently produced an adrenal extract that is made from the adrenal glands of organically- raised animals. Preliminary results of the latter remedy have been promising, but so far I have only had a few experiences with it. It seems that caution must be exercised when using it on those who are extremely fatigued and cortisol-deprived. The extract regenerates the adrenals at the same time that it supplies cortisol to the body. It is quite difficult to produce, and in Germany, health care practitioners and medical doctors must make it themselves for use only in their patients. The organ extracts are administered via injection twice a week, and it's important to combine the injections with thymus extract, because the immune system needs support at the same time. If the adrenal organ extract is administered alone, then the adrenals might overreact to it, because the entire body runs on a "feedback and reverse feedback" basis. An over-stimulation of the adrenals can lead to peaks in adrenaline, accelerated heartbeat and circulation problems. It is wise to slowly start this kind of treatment with homeopathic cortisol or Regeneresen. Supporting the treatment with thymus glandular extracts can help keep the balance in glandular tissue excretion. Our Thymus is the home of all T-cells (T-helper 1, 2, 17, T-suppressor, T-regulating).

One supplement that I recommend which is beneficial for helping the adrenal glands to recover is omega-3 fatty acids. People should consume—or rather, drown the body in this stuff! In those with Lyme disease, omega-3 fatty acids are also important for recovery of the neurological system, and especially the myelin sheath that covers the

nerves, as well as for the body's cell walls. Also, omega-3 fatty acids help the body to get rid of borrelia neurotoxins. For this reason, I recommend high dose omega-3 fatty acids to my patients, as part of the baseline of their therapy. And when I say "high dose" that might mean 3-5 tbsp of linseed oil, along with 2 3,000- mg doses of omega 3 fish oil per day.

For treatment of the thyroid, I might give my patients selenium, if their test results show that they are deficient in this mineral. Because zinc supports the basic building blocks of thyroid hormone, I might also recommend zinc supplementation. If the thyroid requires more support than this, then I might ask a medical doctor for further advice and support, which may include a prescription for thyroid medication, containing active T3 and T4 hormones. (In Germany, health care practitioners that are not medical doctors cannot prescribe thyroid hormone, nor are they allowed to prescribe any other kind of hormonal treatment).

Another hormone that I test and treat in my patients is DHEA. When I look at their DHEA and cortisol lab test results, then I can determine to what degree they are stressed or exhausted. It sometimes happens that before cortisol levels go down, DHEA levels go up. This scenario occurs when the body is under constant stress, whether that stress comes from one's job, disease or environment. If this stress continues, however, then at some point, DHEA levels will also eventually drop, so that both cortisol and DHEA become low. Whenever this happens, I recommend that my patients request a DHEA prescription from their physician, since in Germany, only physicians are able to prescribe this

hormone. Fortunately, I work with some well-respected and excellent doctors in Germany, who collaborate with me on this issue.

Supplementing with **transdermal progesterone and/or estrogen may be a good idea for women, if they are deficient in these hormones.** I never, ever, advise patients to take synthetic hormones, however, only **natural ones** that balance the endocrine system. Once their hormones are balanced, I may recommend that they switch from bio-identical to phytohormones, or **plant hormones**, which contain some of the same hormone-balancing properties as the bio-identical hormones, but which also supply holistic plant information to the body. This is beneficial because **plants contain multiple ingredients that function synergistically to benefit the body**, whereas synthetic medications, which are made from plant extracts at best, isolate only one or two of these ingredients so that the body doesn't have the full benefit of all of the ingredients working together. **-(This required a more in-depth explanation. Tell me what you think ☺ Wonderful!** Soybean, red clover, Dong quai, and black cohosh are examples of such hormones.

## **Treating Inflammation**

In Lyme disease, there is systemic, chronic, silent inflammation in the body. Pain is one indication of inflammation, and when I see patients who are in a lot of pain, then I know that they have a lot of systemic inflammation that I need to address. If I don't, then their recovery will be more complicated and strenuous.

To determine the degree of inflammation that is present, I test cytokines, such as TNF alpha, interleukin 10 and 6, interferon gamma,

and, if necessary, interleukin 1-beta. These tests also help me to determine whether, for instance, there is an allergic reaction or systemic inflammation happening in the body.

There are four or five good remedies which are known to lower TNF alpha and inflammation. The lab I work with in Berlin determines which of these is best for patients, via a specific test that analyzes how the patient's TNF alpha reacts with certain agents such as boswellia, **curcumin, artemisinin** or a remedy called **TNF direct**.

My wonderful friend and colleague Thorsten Hollmann, who is based in Wuppertal, Germany, established this test. He always comes up with interesting new ways of discovering which remedies and lab tests work, make sense in monitoring therapy, and which ones don't. He is also an expert when it comes to diagnosing and treating CFS, Chronic Fatigue Syndrome. CFS by the way, is often a manifestation of chronic Lyme disease, (accompanied by other factors such as Epstein Barr Virus and "Herpes family", Candida, heavy metals, etc.) or one illness may lead to the other. A tremendous range of scientific material **on this and many other really interesting subjects** can be found on T. C. **Hollmann's** website, check: [www.cfs-center.de](http://www.cfs-center.de). Thorsten Hollmann definitely belongs to "the good" people in the health area.. I deeply honour and respect his work and feel blessed with this friendship.

Thanks to Thorsten Hollmann and his scientific approach to holistic medicine, I had to **advance my knowledge in certain areas of medicine** at the speed of light in order to keep up with his expert knowledge on chronic illness. Four eyes see more than two, as we say in German! So when we health care practitioners throw our findings together, the outcome can be quite enlightening at times.

Hence, the TNF inhibiting test can help practitioners to discern the appropriate anti-inflammatory remedy for their patients, depending upon their individual results. It may be that boswellia turns out to be most effective anti-inflammatory agent for one person, while curcumin is most effective for another. Also, and in general, it is wiser to use the micronized form of these agents, because a lot less is needed (than the other forms) to achieve the same results.

When patients' joint and pain symptoms get worse following photon treatment, then this indicates to me that their body's inflammatory response hasn't been adequately treated.

As a practitioner, when you work "anti-infection," then you are also working "pro inflammatory", meaning, that inflammation is the normal physiological response of the immune system when eliminating infection. Whenever there is systemic inflammation, however, it is important to be mindful of immune system overreaction, but there is a fine line between achieving optimal immune response and adequate treatment of microbes. That's why, as a practitioner, when you are dealing with both inflammation and infection, which is usually the case, then you need to balance patients' anti-infection treatment with some type of anti-inflammatory treatment. If you neglect either one of these, then patients will get worse.

## **Treating Other Infections**

I treat my patients' other infections after borrelia using the Bionic 880, but I also support getting rid of microbes with herbal remedies.

The anti-microbial herbs that I use include **Kardenwurz**, which is a type of thistle, as well as **olive leaf**, **cat's claw** and **artemisia** (the latter I use for intracellular microbes). The most promising remedy, however, for **oxygenating** the body and thereby eliminating unwanted microbes, are ozonides. These are made in a base of **ozonated castor oil, using the essential oils of potent plants**. They are water and fat soluble, which means that they can go everywhere in the body. They are a potent treatment to use along with biophotons.

One of the reasons that I use herbal remedies in conjunction with biophotons is because there may be infections that I haven't been able to detect and if I use only the nosodes and photons to treat these, then I might miss one of them. Using the blood as a homeopathic nosode, however, will usually mop up any undetected infections, but this should be applied only after the body has had the chance to build up its capacity to recover. Otherwise, herxheimer reactions may be quite strong.

In any case, I think that we sometimes have "to come at the buggers" from different angles in order to get rid of them all! For this reason, I may recommend that patients take herbs at the same time that they do photon treatments.

Some patients are sensitive to strong remedies, so once I have "worked off" some of their more important infections, like borrelia, chlamydia, or candida, then I may then treat them for other undefined infections or stressors, using a drop of their blood as a nosode, a kind of natural vaccination, along with the biophotons. This usually takes care of any remaining infections in the body, because every human cell

(including those in the blood) contains all of the body's information, including that of the infections that are present in the body. Which means that even though a particular pathogen may not be present in the blood, the blood yet contains information about that pathogen's presence, whether the actual pathogen is in the tissues or elsewhere.

I must warn people against believing that photons and nosodes are the solution for everything, however. The photon therapy only donates photons to the body, to assist the body in what it needs to do. This is physics, but there is a biochemical side to the body, too, which requires its own support. If patients don't get this support, then one system in the body may be activated, while another is neglected, which means that patients can get worse, instead of better, as a result of photon therapy. This does happen, and for that reason, I also caution readers to not underestimate the power of this therapy.

Photons, however, are extremely effective for getting rid of infections. Some patients that I have treated only with nosodes, detoxification and anti-inflammatory agents, as well as **TH1 and T2 balancing agents**, have improved significantly through these things alone, but others need more support.

## **Detoxification**

It's crucial to **support the body in the detoxification process**, and to do this in conjunction with borrelia treatment, because once the body is activated by photons, then the cells start "spitting out" toxins by themselves, and the body must be able to deal with these toxins. Also, immune cells lead diseased cells to apoptosis, which is programmed

cell death, and cells with borrelia inside are marked for this type of destruction. So this waste needs to be “processed” and leave the body, too, or else it will harm the body, which is why it’s good to have a detoxification program in place to deal with all these neurotoxins.

My detoxification protocol involves using substances such as glutathione, selenium, cysteine, zeolites, alpha lipoic acid, omega-3 fatty acids and sulfur-containing agents to chelate, bind and dispose of the toxins generated by biophoton and other treatments. All of these substances need to be tested on each patient though, because not everyone can use the same ones. The choice of toxin binder or detox agent also depends somewhat upon the types of toxins that patients have collected in their bodies. For example, I must determine whether solvents, chemicals, heavy metals, or medications are a problem, and to what degree they influence the physiology. It may also be important to check patient’s genes to determine what their detoxification capabilities are.

Another substance that I find to be beneficial for detoxification is broccoli extract. A chemical in this extract supports phase two detoxification in the liver, which often doesn’t function properly in the chronically ill, especially in those with glutathione or SOD enzyme deficiencies. So broccoli extract makes it much easier for the liver to get rid of toxins.

Zeolite is good for binding toxins but it doesn’t touch neurotoxins or stored toxins. Lecithin and omega-3 fatty acids are better for detoxifying fat-soluble toxins and those that are in the brain. They also protect the lipid part of cell walls.

For the detoxification of heavy metals, I use a remedy called Biologo Detox. It's **micronized chlorella** that contains **coriander** and healing mushrooms. It's quite powerful, and I use it often in my patients. In addition, I use another remedy called **Sporopollein**, which is also extracted from chlorella algae. **It's very strong and can remove large toxic burdens from the body.** For severe cases of heavy metal toxicity, however, intravenous chelation with EDTA might be the best type of therapy, but it is powerful. Most of the time, I prefer to "walk a softer path" with my patients.

If people respond well to intravenous chelation therapy, however, then the greatest benefits occur when the therapist is able to administer ten sessions, for an hour and a half per session. Chelation therapy is also quite expensive.

Finally, I don't advise patients or practitioners to detoxify heavy metals using nosodes and photon therapy! This is dangerous and harmful, because while the photons mobilize metals, they cannot bind them, and will instead invite them into the nervous system, which is dangerous. Whenever I speak to doctors and therapists, I emphasize that the detoxification of metals with homeopathic and energetic strategies is not a good idea, because such strategies mobilize metals but do not carry them out of the body. It's important to use a substance that also binds with the toxins and which can assist the body with their excretion, otherwise they will circulate in the blood stream and eventually settle down again someplace else in the body.

## **Patient and Practitioner Challenges to Healing**

Adrenal problems are patients' greatest obstacle to healing, and problems with other hormones or glands is the next greatest. Those with compromised detoxification also have trouble healing, as do those with certain emotional problems.

It is sometimes important for patients to ask themselves questions like: "Do I want to heal? Am I able to work for my healing? Do I believe in my healing? Am I a positive person?" And if the answer to any of these questions is No, then they must work to change those. That said, Lyme can completely change a personality, and make people miserable, aggressive, childish and hurtful, as well as many other things, and it takes discipline to change one's thinking patterns or ways of being.

I try to help my patients with this aspect of healing, however, by discerning what their emotional issues might be and then giving them exercises, affirmations and other suggestions for dealing with these. I might, for example, give them homework that involves standing in front of the mirror every day and saying things like, "I am the boss in my body. I am the boss of my life. Problems must take a backseat for now!"

Sometimes, I will also teach them strategies for dealing with any leftover childhood trauma. Before that, however, I usually do a therapy with them that is called the Life System. This therapy uses biofeedback to provide me with a deep look at the bottom of the patient's soul, using different strategies that are helpful for discovering the root cause of his or her problems. Using biofeedback strategies

involving sound, light and energetic frequencies, I can balance that person's fear, or whatever negative emotional or thinking patterns that may have built up inside and which are keeping him or her from wellness.

Other people need to forgive in order to heal, but before they can do this, they need to know what this means first, because forgiveness to me involves a belief that our souls have contracts with other souls and that we are here to fulfill those contracts. Let's say, for instance, that your husband makes you learn some very painful lesson. When looked at from a universal angle, it may be that both you and your husband agreed to the situation that led to the painful lesson, and that such a situation was necessary in order for you to take the next step in your journey of personal growth.

When looked at in this context, it becomes much easier for people to forgive, because then they can say, for instance, "He and I both needed this situation in order to learn a certain life lesson." We can then be grateful that a dear person was willing to "play mean," just so that our stubborn heads could learn this lesson. Consequently, saying "Thank you" to the person that hurt us, instead of whining, "You are so mean, and you are the reason why I feel bad!" can be beneficial, because you have learned something as a result of the experience, and perhaps the other person did, too. You were divine tools for the growth of the other.

## **Lifestyle and Dietary Recommendations for Healing**

### **Sleep Hygiene**

If I suspect that my patients have weak adrenals or immune problems, then I tell them to go to bed early, before 10 P.M. Taking melatonin before bedtime can also be helpful. Only when they get very sound sleep is it possible for their immune systems to regenerate.

## **Dietary Recommendations**

The Lyme sufferer's diet should be rich in EFA's (essential fatty acids), as well as protein. Carbohydrates should be kept to a minimum, because these can be "heavy" for those who are very ill, and can exacerbate inflammation. Apart from these guidelines, people should eat things that they know they can tolerate, because some have food intolerances and immune reactions to certain foods. Most of the intoxicated and chronically ill can't tolerate dairy or wheat, for example, and I will sometimes recommend that my patients go a week without consuming any dairy products, to see how they feel. If they don't notice any difference in their symptoms, then it may be okay for them to continue consuming a particular dairy product. In any case, milk should not be part of anyone's diet, since we are humans and not baby cows!

If patients feel worse after consuming certain foods, then they should stop eating those foods. When their adrenals aren't functioning well and their cortisol levels are low, then you can bet that they have food intolerances and allergies. Also, it is much easier for the immune system to recover when patients avoid the foods that they react negatively to, as well as those foods that don't match their blood type. In general, avoiding milk and dairy products, wheat and refined

carbohydrates, and especially white sugar or flour, is also important. The worst possible diet for a Lyme sufferer would be to consume white flour, white sugar, heated fat and animal protein. So burgers should be a thing of the past!

## **Exercise**

I recommend aerobic exercise for my patients, as well as certain sports, as long as they don't leave them exhausted. I also don't advocate that they do any type of "heavy" movements. Weight training or **exercise that increases the pulse beyond 125 beats per minute isn't beneficial, because it puts the body into a catabolic state. Lyme sufferers should not get into a catabolic state because this causes pain in the body the day after they exercise and hence more oxidative stress, which is not beneficial for healing.** Exercises such as walking and cycling are better.

## **The Role of Nitric Oxide in Disease**

Nitric oxide and peroxynitrite are two chemicals that patients with Lyme disease often have in abundance in their bodies. Quite simply, whenever the body is bombarded with intracellular microbes, it fights against them by producing nitric oxide within the cell. Chronic intracellular infection raises nitric oxide levels for a rather lengthy period of time compared to other causes of excessive nitric oxide output. Therefore, I believe that intracellular infections have a lot to do with elevated nitric oxide levels in the body. Elevated nitric oxide levels can then cause peroxynitrite to be produced, which is a substance that is very toxic to mitochondria. When patients have

elevated inflammatory levels, then this causes nitric oxide to upregulate (hence also creating more peroxynitrite), which in turn increases their inflammatory levels, and it becomes a vicious cycle. So if patients have nitric stress in their bodies, which can be ascertained through a urine test, then this cycle must be interrupted, as well.

This can be done in a few ways. First, I might give high dose CO-Q10 to my patients. Co-Q10 plays an important role in interrupting nitric acid production, as do hydroxycobalamin (Vitamin B-12) injections, alpha lipoic acid, magnesium, L-carnitine, Vitamin D, and intravenous Vitamin C in high doses. Checking and balancing any other nutritional deficiencies can be helpful, as well.

Scientist Martin Pall wrote an excellent book called *Explaining Unexplained Illnesses*. His discoveries and findings on nitric stress have been amazing. And over the last year, even more information has come out on the subject. Such findings are important, because nitric stress is one key factor in the development of autoimmune and multi-system illnesses such as PTSD, CFS and MCS, as well as in neurological illnesses such as MS and Parkinson's.

I am convinced that intracellular microbes play a role in the development of auto-immune disease and may switch on the nitric stress cycle once patients have been suffering with long-term inflammation, and there's no way that the body can shut this cycle off unless we help it to do so. This is another reason why I believe that it's dangerous to claim or even hope (as some do), that one machine (the Bionic 880, for example) can heal everything. The Bionic can light up the body where it's dark; it can support the body, but it's not a

machine that can heal everything. There are so many reasons why chronic illness happens, and we have to determine which areas of the body need to be upregulated as well as which ones need to be downregulated, and choose the most appropriate way of reachieving balance. People tend to want to have just one tool that they can build a house with but that is a dream; it can't happen. Human beings are more subtle and complicated than that. **If patients have a dramatic vitamin B-12 deficiency, for instance, then how in the world do they expect to balance that with biophoton therapy? It just doesn't work. They must instead give the body supplemental Vitamin B-12.**

## **Last Words**

As a practitioner, if you have ever had to battle illness, then you have a different kind of compassion when you work with patients who are going through similar experiences, because you have felt what they are going through and can empathize with them. I am one of these people. My Lyme patients don't need to explain to me how they are feeling, because I have experienced many of their symptoms myself.

Many patients have been given the impression by previous health care providers that their illness is "all in their head," yet deep down they know that this is not true. They suffer from severe immunological illness. And I feel blessed that I can assist such patients in realizing what is actually wrong with them, and support them in getting well again.

## **Marlene Kunold Contact Information:**

Naturheilpraxis Marlene E. Kunold

Gärtnerstr. 101

D-20253 Hamburgt-Germany

email: [hp-mek@gmx.de](mailto:hp-mek@gmx.de)