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Deconstructing Medicine: The Alternative Cellular Energy Pathway

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Author's contribution

The sole author designed, analyzed and interpreted and prepared the manuscript.

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Opinion Article

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ABSTRACT

The pharmaceutical model for treating chronic illnesses has largely dominated the practice of medicine since the Flexner report of 1910. It essentially entails biochemical based endeavors to correct detectable or discerned metabolic imbalances in diseased cells. These manipulations almost invariably alter the metabolism of normal cells leading to predictable adverse side effects. Enhancing cellular energy can potentially help overcome cellular impairments in diseased cells without necessarily affecting normal cells. The identification of the alternative cellular energy (ACE) pathway, expressed as a dynamic (kinetic) quality of biological fluids, is providing a useful new paradigm for universally applicable therapeutic endeavors. This article reviews the current understanding of the fluid activation process. It appears to be mediated by a repulsive environmental force termed KELEA (kinetic energy limiting electrostatic attraction), which reduces the strength of intermolecular hydrogen bonding. Various means of imparting KELEA to drinking water are discussed. The article is intended to encourage widespread clinical evaluation of KELEA activated "ACE Water" as a waterceutical™ in the prevention and therapy of many clinical illnesses.

Keywords: KELEA; alternative cellular energy; ACE Pathway; ACE water; waterceutical™; enerceutical™; stealth adapted viruses; energy medicine; chronic illnesses.

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ABBREVIATIONS

KELEA – kinetic energy limiting electrostatic attraction, ACE – alternative cellular energy, ICE – insufficiency of cellular energy, UV – ultraviolet.

1. INTRODUCTION

Rising costs of medical care in the absence of corresponding reductions in the prevalence of many chronic illnesses raise the concern that society is being misled by self-interests of the healthcare industry. The industry is engaged in two major pursuits that are both destined to help ensure continued growth and financial gain. First is the emphasis on identifying new clinical and laboratory-based criteria enabling patients to be further categorized into an ever-expanding array of diagnostic entities. Second is the parallel development of new pharmaceutical drugs and to a lesser extent of novel dietary supplements, which are collectively promoted as necessary for optimal therapy of the ever-growing list of defined illnesses. At its extreme, these developments are ushering in an era of precision medicine, with highly sophisticated analysis of the patient's entire genome along with the characterization of innumerable cellular biochemical pathways (biome). The data are used to design individually unique regimens of multi-drug therapies intended to specifically correct each and every aberration detected during the extended workup of the patient.

2. DISCUSSION

Costly expansions in medical services and provisions of pharmaceutical drugs run counter to the evolving proposition that many illnesses occur because of a common failure of a basic healing/regeneration process mediated by the alternative cellular energy (ACE) pathway [1]. It is still widely believed that animals derive energy for cellular activities only through the metabolism of food, which largely involves cellular organelles called mitochondria. Cell survival, in spite of markedly damaged mitochondria has been observed in tissues of humans and animals infected with stealth adapted viruses [1-4]. These viruses fail to trigger an inflammatory reaction because of the deletion or mutation of the relatively few genes in most viruses, which actually code for antigens normally targeted by the cellular immune system [5-8]. Infected cells can, nevertheless recover from the cell damaging effects caused by these viruses. They do so through the production of abundant mineral-bound organic materials, which are commonly pigmented and referred to as ACE pigments [9-11]. These materials display a range of energy-related properties, including ultraviolet (UV) fluorescence that is enhanced with certain dyes, such as neutral red and acridine orange [9,11]. Under high resolution, fluorescence studies show the particles are aggregates of self-assembled microscopic materials that are produced within the infected cells. The self-assembly of synthesized materials can also result in the formation of fibers and ribbon-like structures [9,11].

While ACE pigments were initially identified as a cellular response to stealth adapted viruses, their production is not restricted to this cause. Rather, the ACE pathway appears to be a normal physiological process able to compliment food metabolism, as well as possibly providing additional unique functions. Simple calculations defy the current assumption that humans typically only expend approximately two-thousand calories a day. More than half of these calories are required to maintain body heat, let alone fuel the work performance of the body's organs and muscular systems [11]. Defining photosynthesis as Nature's first cellular energy pathway and food metabolism as the second, then the ACE pathway is realistically viewed as a necessary third cellular energy pathway.

As noted above, ACE pigments can be identified on the basis of the enhanced UV fluorescence occurring with neutral red dye. This dye will elicit strong fluorescence when applied to herpes simplex virus (HSV), herpes zoster virus (HZV) and human papillomavirus (HPV) skin lesions. Indeed, applying neutral red dye solution (0.1-1.0 mg/ml) and illuminated with a simple, store-purchased ultraviolet-A (UV-A) light provides effective therapy for herpes skin lesions [12-13].

Neutral red dye evoked fluorescence of skin, saliva, urine and/or dried perspiration provides a potentially useful marker to help identify individuals with an insufficiency of cellular energy (ICE). This can occur in a wide range of circumstances, including i) Added demands during cellular recovery from injury and infections; ii) Impairments in oxygen delivery to tissues, as occurs in emphysema, anemia cardiovascular and cerebro-vascular diseases;

iii) Metabolic disorders, such as diabetes; iv) Cancer in which persistence may reflect a failure of energy-requiring growth-reversing cellular maturation or apoptosis; and v) Aging. A potential answer to the correction/improvement in many of these conditions may be through therapeutic endeavors to enhance the body's ACE pathway.

The self-assembly process of ACE pigments is consistent with their expressing separated electrical charges. ACE pigments are also occasionally ferromagnetic and can both donate and receive electrons in redox reactions [9]. When placed into water, they can lead to the formation of gas bubbles [9]. These and other observations in ACE pigments-containing tissue culture medium have been interpreted as a reduction in the strength of the intermolecular hydrogen bonding between the water molecules [14,15]. Interestingly, lipids can also form in ACE pigments-containing culture medium in the absence of living cells; apparently by cold fusion of carbon and hydrogen. The lipids can take the form of solid crystals, pyramids, concave linear troughs and collections of yellowish materials [9,11].

Various dipolar compounds, broadly classified as enerceuticals™, provide similar fluid activating activities as those shown by ACE pigments. Examples include: i) Humic/fulvic acids, zeolites, mica, volcanic rocks and magnesium oxide pellets; ii) Various herbal and plant products; and iii) Certain pharmaceuticals and others chemicals. Agricultural and clinical benefits have been widely reported with the first category of products, but are generally attributed to reversing presumed mineral deficiencies. Ongoing studies are more consistent with their water activating activity, especially since benefits can still be shown after removal of the water activating compounds by zero residue filtration. It can be similarly argued, with increasing experimental support, that many compounds identified as chelating agents, e.g. EDTA; anti-oxidants, e.g. vitamin C and niacin; oxidants, e.g. ozone and chlorine dioxide; agents of neural therapy such as procaine and lidocaine; colloidal silver and possibly even monoclonal antibody preparations may actually work non-specifically through activation of the body's fluids.

Special mention should be made of so called homeopathic remedies. Rather then simply viewed as water being activated by various tinctures of mainly herbal materials, homeopaths have maintained the unproven therapeutic notion of symptom specificity as embodied in the "Laws of Similars" [16]. This self-serving concept helps maintain a role for homeopaths in the patients' diagnoses and in the formulation of various remedies [17]. It is notable that a clinically effective, supposedly homeopathic therapy termed Enercel® was found by the author to contain undisclosed lidocaine. Two 3 ml intramuscular injections of this product significantly shortened the duration and reduced the severity of tropical diarrhea when injected into children [18]. Enercel also suppresses active tuberculosis in AIDS patients [19] and has led to marked reduction of HIV even when used without any added anti-retroviral pharmaceuticals (unpublished). Encouraging preliminary results have been observed with Enercel given in patients with various medical conditions, including amyotrophic lateral sclerosis [20].

Although not having the economy of high dilutions, various plant and herbal extracts are reported to have renowned health benefits. Prominent examples are leaves of *Moringa oleifera* trees and of *Ashitaba angelica* plants; aqueous extracts from the sap of Japanese trees (HB-101) and from pine needles, bark and cones harvested in Geogia (*Folium pX*). The products are sometimes marketed for their broad medical benefits, such as moringa being a cure for over a hundred diseases [21], or for more more specific uses, e.g. *Folium pX* as a heavy metal remover. Business models are favoring the daily purchase of these and many additional supplements in the form of beverages, rather than monthly purchase of 30 or more capsules. By filtering out the activating compounds, functionally active drinks can be sold as pure water. Elevating the pH of drinking water can also increase its kinetic activity presumably from a greater absorption of KELEA by hydroxyl (OH^-) ions compared to hydrogen (H^+) ions within water.

Various electrical devices that can attract and release KELEA are also highly effective in activating drinking water and other fluids. One approach entails the abrupt on-off switching of electrical power. Historical examples of medical devices using oscillating currents include; Edgar Cayce's Violet Lamp, Royal Raymond Rife' Beam Ray, Georges Lakhovsky's Multi-wave Oscillator and Panos Papas' Papimi pulsed electromagnetic field [22]. A discharging Van de Graaff generator also provides similar pulsed electrostatic fields.

Based on the above considerations, the terms "KELEA" and "ACE Water" are being adopted for water capable of enhancing the ACE pathway in humans, animals and plants. The productivity of both rice and sugarcane has been increased in fields in which the water is activated by finely ground and pelleted volcanic rocks [23]. Moreover, there was a lessening of infections and rodent infestation in the treated fields. Rigorous well controlled clinical studies are underway to extend the many anecdotal reports of patients improving upon the consumption of various water products, including some that are readily available in stores. Beyond the disease categories already mentioned as being due to an ICE from food metabolism, a special emphasis in the planned clinical trials is being given to common illnesses with impaired brain functions. Some of which, like autism, behavioral disorders, certain psychoses and possibly Alzheimer's disease, are likely to involve persisting stealth adapted virus infections [24-27].

As noted above, monitoring of the ACE pathway can be performed by the testing of various bodily fluids, including skin, saliva, urine and/or dried perspiration for neutral red dye inducible fluorescence. These tests can be easily performed by patients and by family members, as can the production of all but the more highly energized water and other drinkable liquids. Community leaders can also assist by organizing trials among their memberships to determine the extent to which ACE Water consumption can diminish dependency on prescribed medications. So too can drug addicts potentially find an inexpensive alternative to their current mode of self-medicating relief from the prevailing sense of exhaustion, commonly experienced by those who are drug addicted.

The availability of at least a partial remedy for many common, chronic illnesses will clearly be a challenge to the economic interests of the medical industrial complex. On the other hand, thoughtful healthcare providers, largely disenchanted by the relative ineffectiveness yet not infrequent toxicity, of many currently prescribed medicines, will see their own health and that of family members improve. Their professional time might also then be better spent exploring the many intriguing unanswered aspects of the biophysics of the ACE pathway. They may only have to attend to patients after unsuccessful self-administered corrections of any underlying ICE using ACE Water.

An exciting frontier is the potential role of fluctuating electrical activity of the brain and muscle, including the heart, acting as antennas to attract kinetic energy into the body [28]. Humans may learn to intrinsically enhance their ACE pathway through brain and muscle activity. Those less able to do so due to illness or other circumstances may well achieve this goal through using other methods of ACE pathway enhancement, including regularly consuming enerceuticals™ and KELEA activated water.

3. CONCLUSION

The basic thesis of this article is that the consumption of water with lowered levels of intermolecular hydrogen bonding resulting from the absorption of KELEA [14] can potentially forestall and even reverse many common disease processes. The only diagnosing needed is a broad subjective distinction between optimal and less-than-optimal health. So too, the goal of ACE pathway therapy is to regain optimal health. Very few of today's pharmaceuticals can claim this achievement.

CONSENT

It is not applicable.

ETHICAL APPROVAL

It is not applicable.

COMPETING INTERESTS

Author has declared that no competing interests exist.

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