

HOW ANTIBIOTICS WORK

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Antibiosis: An association between two or more organisms that is injurious to one of them; specifically in ways related to growth retardation (growth inhibition).

Antibiotics: Catabolites which kill bacterial spores and some viruses.

The first and most well known antibiotic is penicillin. It was discovered in 1928 by A. Fleming in London. This discovery, which changed the world's medicine, occurred by accident. Throughout history, most great discoveries and inventions have evolved this way. Very little was achieved through multi-million dollar research projects and labs back then and the same holds true today.

Once taken and absorbed, antibiotics (many of which are derived from fungi), diffuse into all body tissues and fluids, except the cerebrospinal fluid. Saturation of the entire body with antibiotics takes up to six hours. Antibiotics eat a hole through the cell wall of the bacteria.

Microorganisms replicate very rapidly and during this phase all newly developed bacteria contain built-in antibiotics. Bacteria simply cannot live with holes in their cell wall. Unfortunately, friendly bacteria in the intestines are affected by antibiotics as well.

Due to the short time it takes for antibiotics to saturate the whole body and simultaneously attack the cell walls, all of the newly developed bacteria will also die the same time. If the right antibiotic is prescribed, the fever will drop in six to eight hours.

Why can this be a problem?

The body's immune system produces killer cells called macrophages, which eat up invaders such as harmful bacteria. During an infection caused by bacteria the body develops fever. The temperature rises because the heat kills microorganisms. The bacteria simply get

cooked to death. So, fever is the natural defense mechanism against the invader and should be welcomed. This natural process works slowly but steadily and the macrophages like PacMan, gradually eat up the dead bacteria as they die.

During treatment with antibiotics the sudden die-off floods the whole body with dead microorganisms, but the macrophages are unable to digest them all instantly. The waste, which remains in the form of residuals decay cycles in the bloodstream. This massive toxic waste cannot instantly be eliminated by the natural detoxifying processes via the urine, stools, sweat, etc. Circulating metabolic waste in the bloodstream are of great danger to the body, and what cannot be eliminated will be stored in the connective tissue, which is a momentarily safer place.

Throughout a lifetime, these toxic deposits build up and will congest the Basic System. Worldwide, many physicians claim that almost all chronic diseases and many forms of cancer have their origin in old, suppressed infections. For example, in the intestines it starts with an irritation developing into a polyp, advances to a cyst, and ends with a tumor.

Can you imagine what an acne patient goes through when a dermatologist prescribes 1,000mg of antibiotics a day? Acne is symptomatic, but think about this particular patient who was on this treatment for five years without satisfactory results and is now totally run down – 1,000mg daily for five years! This treatment is quite common and always renders the same unsatisfactory result.

Another example is a mother with a 3-year-old child who has suffered from recurring ear infections since the age of 3 months. The child has had ten ear infections, treated with antibiotics. This of course, only blocked the symptoms and laid the foundation for the next infection. The poor mother is afraid that her child could suffer hearing loss and doesn't know where to turn for help.

Antibiotics are the first choice of most doctors and if they cleared and prevented recurring infections, I wouldn't be writing this article. Ask your neighbors how many children they know suffer from chronic ear infections. No doubt, you are already aware of how many children are

affected by this chronic disorder and how often the antibiotics don't work. If your car's carburetor had a problem and two weeks after the repair, the problem returned, you may give the repair shop a second chance. But would you go there ten times and pay money every time for the same thing with no results? Probably not. But, many people continue to turn a blind eye towards the medical profession; repeatedly paying for and accepting treatments that do not work.

When a patient sees a physician and complains of symptoms that suggest an infection, most likely, an antibiotic is prescribed. Many doctors prescribe antibiotics at the first visit without results from lab tests and proper diagnosis. Some important questions could be asked: Why not simplify the process of obtaining antibiotics as they do in some Asian countries, where these drugs are sold over-the-counter to all who choose to buy them? Why not save the doctor visit and lab fees and just purchase antibiotics at the local Seven Eleven?

Western physicians study eight to ten years to become practicing physicians. With the exception of specialized surgeons, most will practice using a few primary medications including antibiotics, sedatives, beta-blockers, insulin, pain killers, and hormones. That's it. Their therapies are solely based upon these five types of drugs! And if they don't work, surgery will be recommended. Why would anyone study medicine so long just to practice in this way?

In most cases clinical diagnosis only describes symptoms using medical terms. Very seldom is the real cause of the problem discovered. Statistics show that hundreds of thousands of surgeries per year in the U.S. are unnecessary. Some physicians with heightened awareness state "if it wasn't for the hope of the patient who suffers, the medical profession would already be bankrupt."

No one argues that in a critical condition, antibiotics should be given and that they have been proven to save lives. However, the medical profession lags behind in understanding why discretionary use is necessary and how bio-restorative steps are required following antibiotic treatment, to protect the patient's health.

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