

## PARASITES

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The remark, “Don’t we all have them?” has spread throughout the medical community. Every veterinarian knows that horses and other domestic animals are de-wormed twice a year. Most grandmas remember when kids were given some special de-worming cocktail at least once a year. But today, in our prepackaged and sterilized society, the issue of widespread parasitic infestations in the U.S. seems to be recognized only by those presumed, “odd holistic practitioners.”

The book, *The Cure for All Cancers* by Hulda Clark<sup>1</sup> adds even more confusion to this subject. Biological Medicine in the U.S. and its pioneer position already creates enough suspicion in the traditional medical community. Yet, if patients wave this book in front of their physician’s face, it’s like waving a red flag in front of a bull.

The statement in this book, that the organism “Fasciolopsis buski”<sup>1</sup> (a blood fluke) is the cause of all cancer is definitely false. This parasite is only found in the southern hemisphere; so, one could ask, what about people who have cancer in Norway or Alaska?

To understand the significant incidence of parasitic infestations in the U.S., let’s look at some facts:

According to the publication in 1995 “Parasitic Diseases”<sup>2</sup>, reported infection rates are:

- I. Nematodes (Round Worms) - 1 billion individuals
- II. Crestodes (Tape Worms) - 300 million individuals
- III. Tremadodes (Flukes) - 300 million individuals
- IV. Protozoa (Amoebas) - 1 billion individuals
- V. Anthropods (Insects) - 500 million individuals

The parasitologist Omar Amin, Ph.D., reported that 100 percent of fingernail samples taken from a four star restaurant’s entire staff, tested positive for feces under their nails. This is only one example of

how frequently parasites can be transmitted in the food handling business. "Bon Appetit!" *Clearly, it is dangerous and ironic to think that parasitic infestation is only a Third World Problem!*

Larger parasites like tapeworms and round worms can be treated effectively in a short time with chemical drugs and some plant extractions. Mostly overlooked however, because of inadequate laboratory procedures, are Amoebas.

The immune suppressive toxins (lectins) of pathogenic amoebas, such as *Blastocystis hominis*, *Giardia lamblia*, and *Entamoeba histolytica*<sup>3,4,5</sup>, can cause numerous symptoms, which are not associated with parasites.

Unfortunately, these lectins can affect specific areas of the body where the patient already has a constitutional (genetic) weakness.

For example, allergies, arthritis, asthma, nerve disorders - and even tumors - can often be directly linked to parasite infections. Parasitic infestations can also be completely asymptomatic. This does not make them less hazardous.

It was also found that lectins can block neurotransmitter uptake to the brain. Some of these poor patients may just end up on Prozac.

On the other hand, if when a stool test returns positive, the primary drug of choice is Metronidazole (Flagyl)<sup>2,4</sup>. Flagyl can be effective in acute *Giardia* infections, but fails 90 percent of the time in chronic cases. I witnessed a family of five who were all unsuccessfully treated with Flagyl for more than two months. According to the manufacturer, this drug should only be taken for 10 days due to the toxic stress it places on the liver.

### **FOOD ALLERGIES & LEAKY GUT**

Chronic amoebiasis can perforate the intestinal wall.<sup>5</sup> This enables larger, incompletely digested food particles to prematurely enter the blood stream. An immune response is triggered by this, causing an allergic reaction. Tough fungus with cork screw-like roots can also be the cause of this problem.

## **TEST PROBLEMS**

**Antibody tests**<sup>5</sup> are only partially conclusive regarding acute or past infections, therefore, stool tests are still the best detection method. Since the **human error factor** plays a major role in test inaccuracies, every sample must be evaluated by a trained technician via microscope.

**Purged tests** (where the patient drinks a laxative) seem to produce more accurate results than the standard stool test. Since many of these organisms stay in the upper GI tract, rectal swabs are limited, particularly in *Giardia* infections.<sup>3,4,5</sup>

## **Parasite Labs**

Diagnos-Techs, Inc.

Parasitology Center Inc. (PCI)

Metametrix Clinical Laboratory

## **TREATMENT**

Empirical studies have proven that natural substances (plant extractions) can be very effective in treating parasites with limited side effects. Today, more companies than ever before are producing natural parasite products. The effectiveness of these products can be easily verified before and after therapy by a good lab, through tests taken.

Although symptoms can disappear early in the therapy, this does not mean all parasites are successfully eliminated. In fact, pathogenic amoebas, such as *Entamoeba histolytica*, seem to have collective consciousness. When therapy that targets only the GI tract is used, these organisms can hide in crypts or withdraw into the liver ducts, waiting until it's safe to come out and play again. **Protozoa**, and also **round worms**<sup>2,4,5</sup> can migrate into other organs such as the lung, liver, heart, ovaries, prostate, and the brain where they can cause cysts and tumors.

**Two critical points should be noted.** First, treatment primarily addressing the GI tract using herbal capsules often have limited results. Second, digestive weakness from dysbiosis will limit the absorption systemic effect of herbal capsules. However, treatment with herbal tinctures has shown superior results because even a

weak digestive system maintains the ability to absorb liquids.

Parasites are also carriers of viruses and bacteria. As anti-microbials, ionized trace elements such as Copper-Gold-Silver, should be added to the therapy. Ionized trace elements are easily absorbed and have a far better systemic effect than colloidal elements.<sup>6,7</sup>

### ***TREATMENT DURATION***

Acute infections can be effectively treated in a minimum of 10 days with allopathic remedies, such as Albendazol. Systemic and chronic conditions need a six-week treatment using natural remedies. Due to the life cycle of some parasites, it is advisable to retreat the patient for one week after the initial three month therapy. A retest two months after the initial treatment is advisable in all cases. If retests come back positive it most likely indicates a systemic infestation. In such cases, the therapy should be continued for approximately one month. **Be aware that re-infection via lifestyle, spouse, etc., is a considerable issue.**<sup>2,3</sup> It should also be understood that gluten sensitivity reduces SIgA (secretory immunoglobulin antigen), which contributes to chronic condition. **Patients should avoid gluten products during this time.**

### ***THERAPY SIDE EFFECTS***

In comparison to allopathic drugs, most herbal combinations are well tolerated. Some patients may experience a faster die off. The treatment should always be supported with drainage remedies since more burden is placed on the detoxifying organs, especially the liver and lymphatic system. Most healing crises will disappear after three days, however, they can be minimized by decreasing the dosage.

### ***YEAST AND FUNGUS OVERGROWTH***

Candida albicans, which occurs naturally in the mucous membranes of every human body, often overgrows during a parasite infection and treatment. The antibiotic properties of these medicines (particularly pharmaceuticals), can contribute to an overgrowth. Therefore, Probiotic support using is indicated. We have to remember that anti parasitic herbs also have antibiotic active ingredients.

### ***RESISTANT CASES***

Under normal conditions parasites can be eliminated in about two

months. If the patient is therapy-resistant and, even after several months continues to test positive, three main obstacles may be responsible:

1. Heavy metal poisoning in particular, heavy metal stress from mercury (dental materials) can often be the cause of chronic candidiasis (check for heavy metal poisoning using hair analysis, DMSA urine test).
2. Amoebic gingivitis is often responsible for unsuccessful treatments. It is advisable to apply concentrated drops of essential oils (oregano, peppermint) to dental floss and use morning and night.
3. Re-infection through family members, partners, pets, swimming pools, drinking water, and raw foods (sushi, strawberries). *Spouses or partners of the patient must undergo the same treatment protocol.*

### **DIET RECOMMENDATIONS**

1. Avoid any protein after 3 p.m., and avoid tap and distilled water.
2. Avoid sugar products, including orange juice. Eliminate all gluten products during the therapy.
3. Hypoglycemic patients should eat a solid breakfast containing protein and carry some unsulfured, dried apricots as an emergency food (small amounts to be chewed like chewing gum).

### **PREVENTION**

1. After each bathroom visit, fingernails should be cleaned using a nailbrush. To disinfect the nailbrush, store in 5 percent bleach/water solution, or use a UV light.
2. Avoid raw foods in restaurants (salad bars, sushi, rare meats, etc.).
3. Organic vegetables in particular, should be cleaned very thoroughly.
4. Avoid cold cereals due to rodent feces contamination.

### **JOKE OF THE MONTH**

*Warning! "The following information may not be politically correct!"*

In July 1996 some acute cases of *Cyclospora cayetanensis*, a

pathogenic amoeba, were reported in California. For more than one week the local news media gave daily panic reports. Finally, the infections were linked to strawberries. On TV, serious-looking physicians in white coats advised the public not to eat strawberries and recommended taking antibiotics as a preventive measure!!!

**The facts are:**

Amoebas do not live in strawberries. The main fertilizer for strawberries and blueberries is manure, that is the reason. This organism is transmitted to people when they ingest food or water contaminated with human feces containing *Cyclospora cayetanensis*.

Many of the workers who pick strawberries may be infected with this organism and have no other choice than to perform their bowel movements in the fields. Without toilets, water, and soap for hand washing it is entirely possible that the parasite may have been passed from the hands of the workers onto the strawberries.

Out of ten random stool tests, approximately two to three will test positive for *Cyclospora cayetanensis* without the patients' ingestion of California strawberries. Fifty percent of individuals who test positive are symptom-free for this type of amoeba.

**Questions:** Since when does just any antibiotic kill amoebas?  
Is it true that medicine is supposed to be a science?

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