

Guided Digital Medicine: Non-Disease Treatment of Fibromyalgia and Chronic Fatigue Syndromes

by Savely Yurkovsky, MD

"The physician should look for the force and nature of illness at its source. He is not to look to that which can be seen, for we are not called upon to extinguish the smoke but the fire itself."

— T. Paracelsus, MD (1493-1541)

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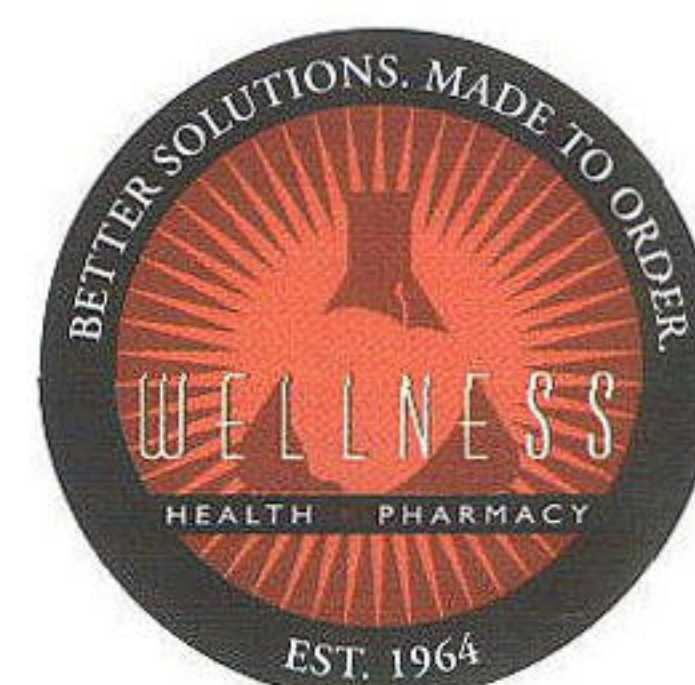
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A few years ago, as an invited speaker, I joined hundreds of MDs and DOs to hear a presentation concerning effective management of Fibromyalgia (FMS) and Chronic Fatigue Syndromes (CFS) at a prestigious symposium of the largest professional organization in alternative medicine. The speaker presented his impressive method of treating these debilitating entities and even documented it scientifically (what could be better?) through a positive year-long clinical study. Quite correctly, he emphasized that the immune and endocrine systems of these patients are compromised. Just as correctly, he pointed out that multiple morbid factors, such as nutritional deficiencies, chronic infections, food allergies, and numerous metabolic imbalances, play a sinister role in the pathogenesis of these entities. No less astutely he underscored that *multiple* dysfunctions and factors are involved in the pathogenesis, and treatment must address these simultaneously. A long list of tests and a seemingly endless list of therapeutics were presented. The latter included numerous drugs as well as natural remedies to kill, replace, or stimulate something. The drugs were purported to combat candidiasis and parasitosis, depression, anxiety, insomnia, allergies, pain, and even acid reflux. Hormonal imbalances were addressed also through thyroid, adrenal, and gonadal hormones. Indeed, no stone seemed to be left unturned, and most of the patients in the study reported improvement. Loud applause followed from the inspired audience for what seemed to be the success of a "natural" treatment, while a sad thought entered my mind. The only reason for applause, in my opinion, would be to graciously thank the speaker for teaching an exemplary lesson on how not to treat fibromyalgia and chronic fatigue or, for that matter, any other illness!

The space restraints of this article allow just a brief outline of the key tenets of another approach – one that contrasts directly with that detailed above and presents, for comparison, a far more fundamental approach toward CFS, FMS, and all diseases. First, it is imperative to note that a critical analysis of the currently popular approach in question has nothing to do with any physician personally, as I am convinced that all physicians do their utmost to fulfill their oath – helping the

sick with the best means available to them. Likewise, for the sake of scientific truth, I invite anyone to criticize with substance any notion presented here.

Tenet #1 – A successful clinical study does not necessarily establish a given approach as superior or even sound.

Even a major peer review journal, *Medical Hypothesis*, had to finally assail seemingly unassailable and even more rigorously designed, double-blind control studies. Well, it's about time, as the logical question has begged to be answered – i.e., why, after long decades containing thousands of successful clinical trials and just as many scientific discoveries, has not one essential dent been made in the care of chronic, degenerative diseases. Just the opposite, the chronic degenerative disease epidemic has skyrocketed, without a cure in sight. Furthermore, many interventions that proved effective in short-term studies have proven to be disastrous in the long run.

Tenet #2 – Symptomatic improvement of a given ailment in chronic diseases does not necessarily entail an improvement in the more salient entity – overall health.

For example, the 250-year practice of classical homeopathy is replete with countless observations wherein obliteration of symptoms was followed by an overall deterioration of health. It has mattered not whether an ailment was obliterated naturally or with a drug or an improperly prescribed homeopathic

remedy. Consider the examples where a skin rash was erased and bronchial asthma or depression/psychosis or migraine headaches ensued; or diarrhea was stopped, yet seizures, heart arrhythmia, or malignancy followed. The list is endless.

That is the chief reason why these types of myopic interventions have been labeled in homeopathy as dangerous and named "suppressive treatments" – i.e., only the outward manifestation of a problem, not its underlying cause, is resolved.

The problem is simply suppressed, thrust deeper into the body, moving from less hierarchically important tissues into the more important ones and thereby converting lesser pathologies into major ones over time.

In a nutshell, this is the very essence of great harm called allopathy or allopathic medicine. And this is the main reason that Constantine Hering, MD, formulated Laws of Cure, whereby resolution of disease states under prudent therapy has to progress (1) from up to down – i.e., from more important organs toward less important ones; and (2) from inside out – i.e., from deeper layers of the body to more superficial ones. In addition, the unresolved ailments must reappear (from the past suppressions) in reverse chronological order of their actual history – i.e., the ailments presented most recently must reappear first, while the ones that took place years back appear later. Laws of Cure would have been nothing short of an elegant mental speculation had it not been to



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Although neither the diagnostic method, bio-resonance testing, nor the therapy, homeopathy, are new *per se*, the innovator, Savely Yurkovsky, MD, has made, over time, numerous novel contributions to these modalities that have helped to transform them from "hit or miss" specialties into an exact medical science. Guided by his science mentor, Professor Emeritus William A. Tiller, PhD, of Stanford University, Yurkovsky was able to expand the unlimited potential of both bio-resonance testing and homeopathy using a great deal of knowledge from alternative and conventional medicines.

the sobering fact that, for over two centuries, the Laws have ratified themselves hundreds of thousands of times which, as an unfailing observation, fulfills the scientific criteria for their soundness. At the same time, the violations and repercussions that followed have understandably

been all this time? And, "What has that seemingly dormant ailment been doing – in or to the tissues – all these years?" In my opinion, if one does not have a sound understanding of these questions and the first two laws of cure, one is not treating chronic diseases per se, but treating mere blinking shadows labeled as diseases.

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been confirmed billions of times throughout the world and are clearly evident to the trained eye, in patients from babies to the elderly. Whether one starts by consuming one drug and ends with seven medications down the road; smears or swallows something acquired at the CVS pharmacy or local health food store; or even simply uses a good anti-dandruff shampoo from the supermarket – one way or another, time bombs inevitably set in and, just as inevitably, these time bombs go off, over time, according to a person's individual set of constitutional weaknesses.

That is why in classical homeopathy, and wisely so, practitioners have been admonished to observe a patient for several years (without the use of substances covering up the picture) to make sure that the totality of patient's features confirm true progress in health. Doing so ascertains that progress has been made, including the abolishment of the original malady, and that the initial problem has not been merely traded in for a more serious disease. This author's focus, however, extends beyond classical homeopathy which, unfortunately, is not capable of being the main therapy in the care of a severely poisoned modern population these days.

Deeper Questions

The third Law of Cure particularly captured my fascination and led to a Pandora's Box of questions. The most challenging of these is "When an ailment experienced some 30 or 40 years previously returns in response to the administration of a correct remedy, where in the world has that ailment

The answers can be found within sciences that often elude the training of both conventional and alternative practitioners: physics and cybernetics (laws of systems). Their detailed elaboration is not possible within this format but is absolutely essential knowledge for any practitioner of medicine, in the same way that a sound military doctrine is necessary to turn a stockpile of weapons into something effective and, just as importantly, safe.

In short, the human body represents a biological macro quantum system that owes its existence to processing energy and information. There are endless systems, compartments, channels, signals, decoders, feedback loops, and memory storages present in the body. The system, also reacts to morbid or therapeutic agents, according to an individual *meaning* these agents bear in relation to the state of a system at the time. In other words, the same morbid agent can be far more detrimental for one person than another. Likewise, a therapeutic agent may look good in a book, paper, or study, yet have little relevance to a given patient. Body chemistry – and all its related variables in health or disease (with minor exceptions) – represents a mere offshoot of the deeper energetic domain of the system. Overall, all pertinent medical knowledge with an emphasis on toxicology and infectious diseases is necessary for the proper understanding of chronic diseases.

Practical Implications and Lessons

1. Strictly speaking, CFS and FMS are reflections of a deeper, wider, and multi-systemic pathological terrain

that only manifests itself in certain individuals through certain tissues.

2. Modern diagnostic laboratory or imaging techniques, short of special autopsy exams, are not capable of ascertaining true causes of chronic or even most acute diseases.
3. Likewise, therapeutic interventions acting on a body chemistry level are capable of only suppressions and/or rechanneling of morbid elements.
4. The two preceding points – diagnostic laboratory techniques and therapeutic interventions – have to be guided by an energetic diagnostic method, bio-resonance testing, which, equally importantly, must be led itself by a great body of pertinent medical and non-medical knowledge.
5. Considering the vast number of toxicological, infectious, and other morbid agents residing in the body, their interactive momentum, a person's individual response, and the numerous potential secondary effects arising from therapeutic interventions, these interventions must be undertaken with as much precision and knowledge as one would use in placing each ounce of hardware in a spacecraft or computer. Keep in mind that the design of either machine is far better understood than that of a human body.
6. Inquiry into a problem or disease state should not be limited to a horizontal mode of questioning (candidiasis, parasitosis, viruses, nutritional deficiencies, allergies, etc.). Such inquiry should also take a vertical approach: "What are the deeper forces that sustain these problems? What sequence of order and what means do we need to choose to address them? What are the possible unintended consequences of our interventions?"

Let us illustrate this by returning to our successful study in question, while adding that I am far from teaching a sermon against successful studies, but rather attempting to examine critically their formats. Based on successful and long-term experience in addressing a great variety of chronic disease states (including CFS and FMS), I wish to share the following observations with the reader.

- Chronic immune, endocrine, vascular, musculoskeletal, neurological, and other pathologies are caused primarily by toxicological agents, heavy metals, in particular, with mercury and lead being the most ubiquitous of all.
- All chronic infections are sustained by the state of immunodeficiency that bears specific and removable causes.
- Antibiotic residue is an additional and major factor that sustains candidiasis.
- High carbohydrate/sugar diet is detrimental to health.
- Without addressing these factors, pharmaceutical bombardments to eradicate infections or stimulate the poisoned organs are senseless and equal to short-term band-aids.
- This also holds true for the treatment of Lyme disease, commonly missed as an important etiologic agent in FMS.
- Treating chronic candidiasis with antifungal drugs or natural agents is a futile exercise that invariably culminates in a great deal of iatrogenic damage. Candidiasis cannot be erased; it is a part of indigenous gut flora and transforms into highly virulent mutated forms. It also releases, under the bombardment, mercury and other metals to which it binds.
- For the same reason, probiotics or immunostimulants (thymus preparations, etc.) lead to a release of toxic metals, too.
- The drugs prescribed for anxiety, depression, insomnia, and other maladies (all caused primarily by mercury, infections, EMFs, and their ultimate domino effect) result in pharmacological dependency as they cause down-regulation of genes and receptor sites.
- The nutritional deficiencies cannot be addressed effectively via supplementation, because they arise from blocks in toxicological agents absorption sites and metabolic and digestive organs. In addition, chronic gastrointestinal infections add to malabsorption. Likewise, these factors not only lead to allergies to food, but also allergies to other substances.
- No one knows individual constitutional needs, nor does anyone know the safety or efficacy margins of nutritional supplementation within the

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severely poisoned and disrupted system unless assessed via bio-resonance diagnosis. So, the substance that may stimulate today may just as easily overbear tomorrow.

- A reliance on "strong" chelators (supplements, herbs, drugs, etc.) is a game of Russian roulette, as the toxic substances become stirred up

and redistributed throughout the body uncontrollably.

These points illustrate how the study and approaches alike, over time, may win the proverbial battle but lose the greater war, as the unaddressed toxins, carcinogens, vasculo-, neuro-, and other toxins continue to reside in the body. ➤



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A Few Examples of Guided Digital Medicine in Practice

Case #1

A 78-year-old man presented with severe fibromyalgia for two years that had not responded to either conventional nor many alternative modalities. He could barely walk and was in excruciating pain. He was treated with homeopathic system (under the guidance of bio-resonance testing) to clear out heavy metals from key immune, endocrine, musculoskeletal, and other systems. Parasitosis, residues of antibiotics, and candidiasis were addressed, too. He was cured in just a few visits, including normalized elevated prior inflammation marker, C-reactive protein. At a four-year follow-up, just on periodic homeopathic support, he was free of recurrence.

Case #2

A woman in her 50s presented with CFS, including generalized joint pains, from which she had suffered for 30 years, and was managed through the same system. Mercury, antibiotics, candidiasis, dental infections, parasitosis, Lyme disease, and multiple immune, endocrine, and other afflicted organs were addressed. Cured in several visits. No dependency on supplementations.

Case #3

A 16-year-old boy presented with fatigue and joint pain for two years and bronchial asthma for eight. Minor exercise left him exhausted and in pain. Key organs, including blood vessels, were cleared of mercury inherited from his mother and then restored. Following this, parasitosis, candidiasis, Lyme disease, as well as residues of

antibiotics and vaccines were addressed. Cured of everything in several visits and joined the track team. Does not follow the recommended diet nor takes any supplements.

Conclusion

To be left to the reader.

Savely Yurkovsky, MD, is internationally known as an author, teacher, and expert in integrative medicine. He has founded a teaching organization, *SY Integrated Health Systems, Ltd.*, which is dedicated to sharing his medical system under the concept of FCT – Field Control Therapy® or Guided Digital Medicine™. This system has been presented at the annual BTR (Bio-Terrorism) 2005 conference: "Unified Science & Technology for Reducing Biological Threats & Countering Terrorism" with affiliation to the Homeland Security Office. At the present time, he is authoring his second book, which concerns solutions to an alarming rate of multiple health problems in children in the US and other developed countries. Dr. Yurkovsky offers training to capable health care professionals.

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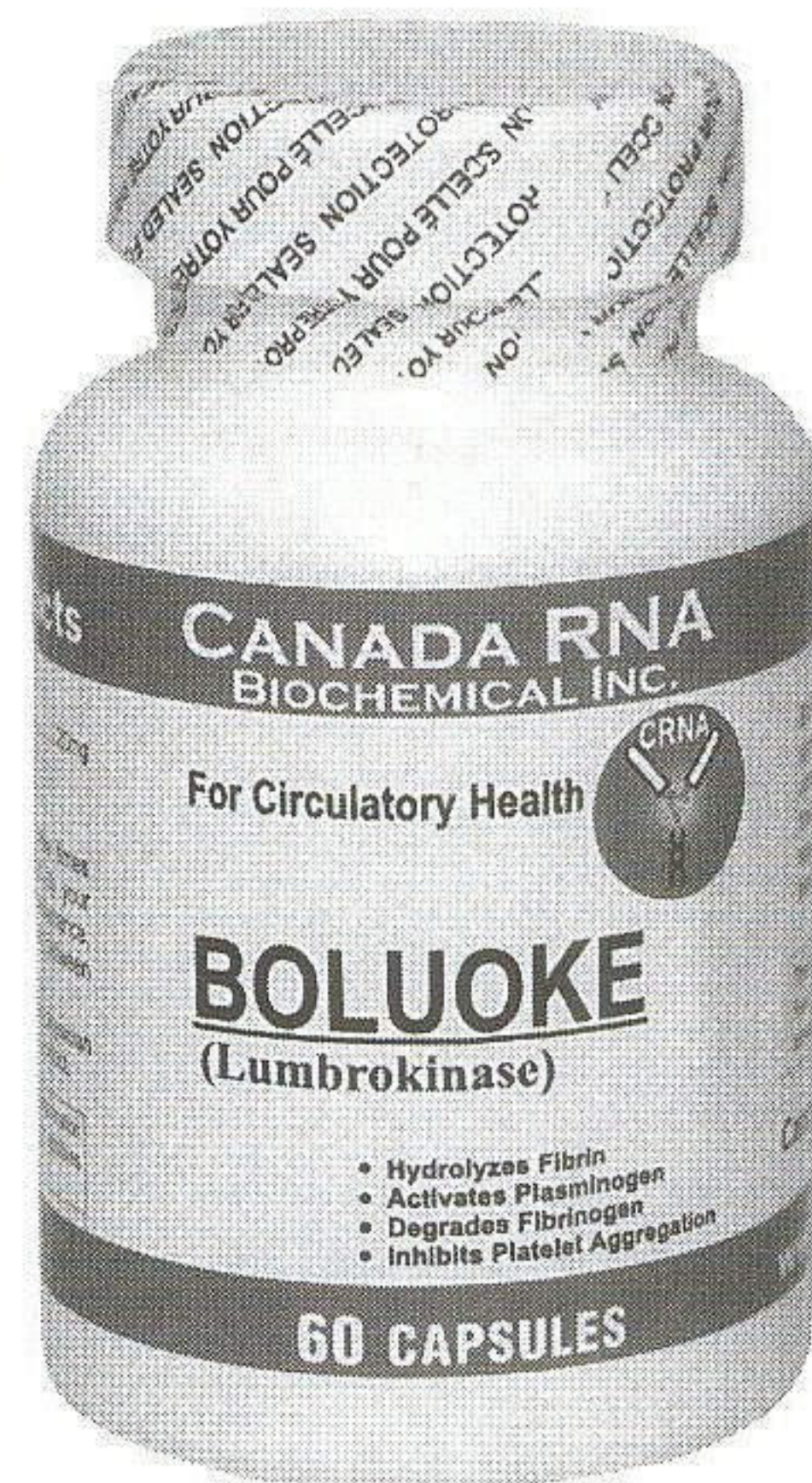
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