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Dear \_\_\_\_\_, Ph.D.

Indeed, magnet therapy is killing cancer. Also, magnet therapy is killing any invading microorganisms. The mechanism of killing cancer and of killing invading microorganisms is probably the same. These microorganisms and cancer require a degree of acid-hypoxia. They basically make their energy by fermentation. Fermentation is acid-hypoxic-dependent. Human cells make their energy by oxidative phosphorylation which is alkaline-hyperoxia-dependent. There may be a lot more to this. This whole area of microbiology needs to be restudied in terms of a magnetic field producing alkaline-hyperoxia with a negative field and acid-hypoxia with a positive field. This still is dependent on the human response. We cultured bacteria and the simple exposure of a bacteria culture to a negative magnetic field did not stop the growth of the bacteria. What we are doing is strengthening the human capacity to be antibiotic. It is interesting that a stool culture showing the numerous pathogenic bacteria and also Candida died out in three months of sleeping on our super magnetic bed. At the same time, the good, non-invading bacteria were flourishing at the end of three months. I have figured out that the non-invasive bacteria are negative magnetic poled and make their ATP by oxidative phosphorylation the same as human cells. Therefore, they cannot invade because they are a negative magnetic field and the human cells are a negative magnetic field. This gives them no capacity for invasion whereas, the invading microorganisms are positive magnetic field making most of their energy by fermentation which is acid-hypoxia-dependent and therefore, they can invade if they can have a positive magnetic field energy that is higher than the human negative magnetic field. When we come along and support the human negative magnetic field, these microorganisms and cancer can no longer make their ATP. We have to maintain a high alkaline-hyperoxia and by doing so, cancer and these microorganisms can no longer make their ATP and they die out. It is such a wonderful thing that we have a predictable antibiotic. It is merely a matter of going high enough of the human exposure to a negative magnetic field. Our super magnetic bed composed of 70 magnets that are 4" x 6" x 1" appears to be adequate. We could make it stronger by stacking four of those 4" x 6" x 1" magnets together. We do that for our head unit but we could do it for the entire bed and of course, we could go much higher on our magnetic field if we make it with an electromagnet like MRI does. I envision the day when hospitals will have magnetic beds, either static field or electromagnetic, which they can put a patient on and immediately stop the infections or the cancer and by maintaining it long enough, which would be a minimum

of two weeks, the organisms and the cancer will have died. The higher we go on the gauss strength, the more efficient our program would be. We are dependent now on this lower level of a magnetic field and it being continued for an extended period of time. We always allow three months for cancer and for systemic infections like Epstein-Barr, cytomegalovirus, Lyme's disease and so forth. The reason I mentioned two weeks, is that in treating shingles, I will put a 4" x 6" x 1/2" magnet on the thoracic spine where the infection begins from latent herpes zoster viruses that are hiding in the neurones of the thoracic spine and when the immune system allows it, then they flourish and produce shingles around the ribs. I put a strip magnet of plastiform across the ribs, extending around to the back, then put this 4" x 6" x 1/2" magnet on the spine itself. Within two weeks time, this is completely over and does not return anymore. We can do the same thing with herpes simplex I and 2. There was a late stage diabetic with an ulcer of the foot that would not heal. He was scheduled within a week to have surgery for the removal of his foot. We placed a 4" x 6" x 1/2" magnet directly over this non-healing ulcer. Within a week, evidence of healing was taking place and the foot was never removed. We did this without managing the diabetes at all, just treating the infection. The antibiotic effect of the negative magnetic field certainly deserves extensive study and microbiology needs to examine human infections when the human is exposed to the negative magnetic field. Forget all about looking at whether a negative magnetic field will inhibit microorganisms in culture. We have already demonstrated that it does not but it does support the human body to kill these invading microorganisms.

Charles Steinberg, Ph.D., professor at Magill University in Montreal, Canada, called me stating that his wife was in Montreal Neurological Institute which is really a world famous institute particularly for working out neuroanatomy with extensive publication on that subject by Penfield. He said that his wife was in the neurological institute and that she had a brain tumor and he wanted to use magnets. I told him that she was in a hospital and that magnets could not be applied in a hospital. He said, "Well, I will see about that." So he found that there is a law in Canada that said if a subject is using a particular therapy and it is not harmful, that they have a right to continue it when hospitalized. So he approached them and said that the FDA of the United States had demonstrated that the application of magnets to human is not harmful and that he wanted to treat his wife with magnets. They gave him the permission. We used a 4" x 6" x 1" magnet placed on the side of her head where the tumor was. He spent most of his time in the hospital keeping the magnet leaning up against the side of her head where the tumor was. She had lost most of her function in her left arm and her left leg. The tumor was on the right side of the head. In fact, this was her third hospitalization at Montreal Neurological Institute. She had undergone chemotherapy twice. Now she was in the hospital a third time, with no treatment and with an expected date of death. They had gone as far as they could and had accepted that this was a failure case. By the way, Montreal Neurological Institute is a component of Magill University. The result was that within a six week period, the function of her left arm and left leg had returned. This also was at the time that her death had been predicted. Instead of death, she was now getting a return of function. A nurse came in and gave her an injection which turned out to be cumiden which is an anticoagulant. This is often used with patients who are bedfast simply to keep clots from forming in their legs. It turned out that the record shows that she actually was given, by error, an

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overdose. The error though had been made by the doctor's order. A few minutes after this injection, she started coughing up blood and then hemorrhaged, dying from hemorrhage from the lungs and died in his presence. He approached the authorities at the hospital and said, "I could sue you for neglect but I don't want to and I will not sue you if you will do a research project on cancer of the brain." The only cancer cases they have is of the brain. They don't treat any other cancer. They are called on frequently of course, to diagnose cancer of the brain so they proceed also to treat this. They had an oncologist who handled this brain cancer treatment section. I wrote a protocol to be followed and I prepared a head unit with twelve 4" x 6" x 1" magnets. Four magnets are on each side of the head and four at the crown of the head. This provided the strongest static field magnet that we could provide. If we stacked five together, it does not increase the strength, so therefore, we used four for a total of twelve. The negative pole is facing the head in all instances. The magnetic field is bent by the magnets being at the crown of the head and extends down into the neck as far as the shoulders. Having these two negative magnetic fields facing each other does not reduce the value. The magnet fields simply come up to a line and butt up against each other giving a full strong field. I also made a hat of neodymium disc magnets that weighs about three pounds. My protocol was for them to sleep all night on this head unit and also during the day, wear the hat. This protocol was accepted. Eighteen patients were to be treated and these were not to be end-stage patients, but patients that they felt three months would still be compatible with life. The oncologist was enthusiastic about the program. The hospital agreed to do the program and they said "We will do 10 patients and if we get even 50% of them to achieve our goal of reversal, then we will do a large project." We happen to know that Magill University has 20 million dollars set aside for research. We are simply asking them to use some of that. Charles Steinberg, of course, being a party to the Magill University and therefore to Montreal Neurological Institute, knows about their finances. Unfortunately, Canada, including Quebec, is in a state of financial flux in its medical program. Because of this, the oncologist who had agreed to the program left and went to New York University. He carried with him the protocol but he has no finances to implement his program even though he would like to do so. He still makes some visits back for a general supervision, just biding the time until someone is officially appointed. He doesn't want to be there for financial reasons and we don't have the appointment of an oncologist who is ready to proceed with the program. Charles Steinberg is there and is demanding that the program proceed.

Meanwhile, a doctor who had a relative in the Jewish Hospital in Montreal had a brain tumor. He knew of this project that was planned for the Montreal Neurological Institute. Therefore, he requested for the hospital to use the head unit that I had developed on his relative in the Jewish Hospital. They agreed. This was such a bad case. The tumor had become cystic and was making pressure in the brain. They had to drain this tumor. We still won. Even in these adverse circumstances, the tumor died. Like you, I am hoping that some respectable scientific institute will study what I have discovered. I know what the outcome will be. We are still expecting and anticipating that the Montreal Neurological Institute will proceed with the program that has already been agreed to.

Just for your interest, I have enclosed two new projects. I have written a book review on a recently published book on diabetes type II and I have also written a letter to the editor at

the New York Times on autism. Please understand, I really do have a substantial answer for autism, learning disabilities, behavioral disorders, schizophrenia and manic depressive. The answer is, first of all, kill the invading microorganisms which are basically Epstein-Barr and cytomegalo. We have seen any number of these children with autism, learning disabilities and behavioral disorders progress to schizophrenia and manic depressive. There simply is a progressive encephalitis. We know how to kill the viruses. Secondly, there are reactions to foods, chemicals and inhalants. This should be appropriately handled by proper spacing and avoidance. Fortunately, by treating the head, heart and the liver with a negative magnetic field ahead of time, we can materially stop these food reactions so that we can go directly to rotation and provide the magnets ahead of meals. A negative magnetic field placed on the head as disc magnets can not only stop anxiety, depression and phobias, but also within five minutes, stop delusions, hallucinations, and paranoia. I have given over 70,000 electric shock treatments which is itself a magnetic treatment. But these two discs placed bitemporally can run circles around electric shock treatment. There is no disturbance of consciousness at all. We just calm the brain down with a negative magnetic field. Of course, we must examine for toxicities especially mercury toxicity, and treat accordingly. However, the magnets themselves will process the mercury out of the body. It is a powerful detoxifying agent. The negative magnetic field activates the alkaline-dependent oxidoreductase enzymes. They now can process toxins. When the toxins were inhibiting their function, by us providing a strong negative magnetic field, these enzymes can again work and process toxins. Any heavy metals are a positive magnetic field. A negative magnetic field can cancel this positive magnetic field which is producing free radicals and acidity and turn it around and prevent this damage from the free radicals of heavy metals and then these will be processed out of the body. Nutrition should be optimized but not relied on as the central treatment that is going to reverse these conditions.

Sincerely,

William H. Philpott, M.D.