Eventually antibiotics are going to be seen as one of the worst things to ever come out of pharmaceutical science because in the end, they have made us only weaker in the face of ever increasingly strong super bugs that are resistant to all the antibiotics doctors have at their disposal. When we look at how deep the rabbit hole goes with antibiotics, we will get sick in our souls. Antibiotics have fulfilled their anti–biotic anti-life role leaving a long trail of death and suffering in the wake of their use.

“Diseases include measles, scarlet fever, tuberculosis, typhoid fever, pneumonia, influenza, whooping cough, diphtheria and polio. All were in decline for several decades before the introduction of antibiotics or vaccines.” – Dr. Lawrence Wilson.

Antibiotics do not kill yeast. Many women find after taking antibiotics, they get vaginal yeast infections (because their normal bacterial balance has been lost). Antibiotics bring on fungal and yeast infections thus will eventually be seen as a major cause of cancer since more and more oncologists are seeing yeast and fungal infections as an integral part of cancer and its cause. With upwards of 40 percent of all cancers thought to be involved with and caused by infections, the subject of antibiotics and the need for something safer, more effective and life serving is imperative.

“It may be some time before we really enter the predicted "post antibiotic era" in which common infections are frequently untreatable.” – Dr. Marc Lipsitch et al. (Harvard School of Public Health).

Antibiotics kill all bacteria in the body, including the ones we need.

An antibiotic is a substance produced by certain bacteria or fungi that kills other cells or interferes with their growth. In nature, these substances help some microbes survive by limiting the multiplication of other microbes that share the same environment. Antibiotics that attack pathogenic (disease-causing) microbes without severely harming normal body cells are useful as drugs but there does not seem to be any from the pharmaceutical companies that do not do damage. Dr. Lisa Landymore-Lin wrote all about this in her book Poisonous Prescriptions asking, "Do Antibiotics Cause Asthma and Diabetes?" We are now beginning to question the role of antibiotics as a cause of cancer since they do lead to pathogen overgrowth especially in the area of yeast and fungi. Chris Woollams writes, "It is estimated that 70 per cent of the British population have a yeast infection. The primary cause of this is our love of antibiotics. Swollen glands? Take antibiotics. Tonsillitis? Take antibiotics."

Two studies in the recent past have shown an association between the use of antibiotics with higher incidence of breast cancer.

In one study the increased risk was small, and the importance of the link has been played down by UK breast-cancer experts, but the findings add weight to recent studies that have found links between antibiotics and other diseases. In the past few years, heavy antibiotic use has been linked to the inflammatory bowel disorder, Crohn's disease, and to children developing allergies such as Hay fever and asthma. And as we shall see below, antibiotics play a hidden role in autism and other neurological diseases.

The Journal of the American Medical Association has reported a study on 10,000 women in which women who took over 500 days of antibiotics in a 17 year period (dubbed 25 plus doses) had twice the risk of breast cancer as those that took none at all. Even women taking just one had a statistical risk increase to 1.5 times.
“The consequences of resistance in some bacteria can be measured as increases in the term and magnitude of morbidity, higher rates of mortality, and greater costs of hospitalization for patients infected with resistant bacteria.” – Dr. Marc Lipsitch et al.

Broad-spectrum antibiotics are undiscriminating: in addition to "bad bacteria," they also kill healthy bacteria which normally live in the intestines and the vagina, and which are a necessary part of the indigenous flora to keep the body healthy. When the "good" bacteria are killed with antibiotics, then yeast, which is part of the normal flora of the body, can begin to overgrow because the antibiotics have altered the body's healthy terrain (internal ecological balance) allowing the yeast to hyperproliferate and cause many far-reaching, toxic symptoms.

But modern medicine so far continues to believe that antibiotics have played an important role in staving off bacterial infections since Alexander Fleming first discovered them in 1927. Many doctors are finally beginning to see that the effectiveness of these so-called miracle drugs has waned as some of the very bacteria they are meant to control have been mutating into new forms that don't respond to treatment. Many medical experts blame this phenomenon on both the misuse and overuse of antibiotics in recent years in both human medicine and in agriculture.

According to several studies, obstetricians and gynecologists write 2,645,000 antibiotic prescriptions every week. Internists prescribe 1,416,000 per week. This works out to 211,172,000 prescriptions annually in the United States, just for these two specialties. Pediatricians prescribe over $500 million worth of antibiotics annually just for one condition, ear infections. Yet topical povidone iodine (PVP-I) is as effective as topical ciprofloxacin, with a superior advantage of having no in vitro drug resistance and the added benefit of reduced cost of treatment.

According to a study published in the Journal of the American Medical Association, taking properly prescribed medical drugs was listed as the third leading cause of death in the U.S. Antibiotics were listed in this category because antibiotics can be deadly.

A 17-year-old St Margaret's College student in New Zealand has exposed multiple antibiotic-resistant bugs in fresh chicken sold in supermarkets? Jane Millar's discovery of a range of resistant bacteria in chickens that could compromise antibiotic treatment in humans is an important finding that the bacteria have developed resistance to antibiotics not used in the poultry industry but important for treating serious infections in humans.

“We can create resistance to medically important antibiotics by using antibiotics that are presumably safe in agriculture.” – Jane Millar.

Jane bought six fresh chickens – free-range, barn-raised and organic – from a supermarket. She took samples from each bird and grew bug colonies, which she used to test different antibiotics. Apramycin is an antibiotic used sparingly by the New Zealand poultry industry to treat infections. The bacteria of two chickens tested resistant to apramycin. They also proved resistant to another two antibiotics from the same family – gentamicin and tobramycin – used for serious human infections. Gentamicin is not used by the poultry industry; tobramycin is restricted to human use only.

A recent risk assessment study commissioned by the U.S. Food and Drug Administration (FDA) has estimated that about 8,000-10,000 persons in the U.S. each year acquire fluoroquinolone-resistant Campylobacter infections from chicken and attempt to treat those infections with a fluoroquinolone.

Every day, new strains of bacteria, fungi, and other pathogenic microorganisms are becoming resistant to the antibiotics that once dispatched them with extreme prejudice.
"We know that antimicrobial resistance will follow antimicrobial use as sure as night follows day," said Dr. John A. Jernigan, deputy chief of prevention and response from the Center of Disease Control. "It's just a biological phenomenon." It turns out that the indiscriminate killing of harmless microbes damages the body in complex ways we are only beginning to understand. Powerful antibiotics introduced into the complex environment in our intestines cause mayhem, much like a series of bombs tossed into a market square. Antibiotic resistance is a widespread problem, and one that the U.S. Centers for Disease Control and Prevention calls "one of the world's most pressing public health problems."

One of the deadliest germs is a staph bacteria called M.R.S.A., short for methicillin-resistant Staphylococcus aureus, which lives harmlessly on the skin but causes havoc when it enters the body. Patients who do survive M.R.S.A. often spend months in the hospital and endure several operations to cut out infected tissue. Hospitalizations associated with a drug-resistant form of a Staphylococcus bacterium doubled over six years in the U.S. to nearly 280,000 cases in 2005. The death toll rose from 4,700 in 1999 to about 6,600 in 2005. It estimated that 94,000 Americans suffered invasive MRSA infections in 2005 and that about 19,000 died.

One out of every 20 patients contracts an infection during a hospital stay in the US. Hospital infections kill an estimated 103,000 people in the United States a year, as many as AIDS, breast cancer and auto accidents combined. The vast majority of lethal cases occur in hospitals and nursing homes, where open wounds and punctures provide the opportunistic staph a ready path to the bloodstream and organs. The dangers of infection are worsening as many hospital infections can no longer be cured with common antibiotics.

More than half the time, doctors and other caregivers break the most fundamental rule of hygiene by failing to clean their hands before treating a patient.

"Recently there has been an alarming epidemic caused by community-associated (CA)-MRSA strains, which can cause severe infections that can result in necrotizing fasciitis or even death in otherwise healthy adults outside of healthcare settings," is the word coming from the National Institute of Allergy and Infectious Diseases (NIAID) research team, headed by Dr. Michael Otto. Necrotizing fasciitis is the so-called flesh-eating disease that can destroy healthy tissue and even kill patients. The team found that some strains on MRSA secrete a compound called phenol-soluble modulin or PSM. It attracts immune system cells called neutrophils, the researchers found, and then blows them up in a process called lysis. Neutrophils are key immune cells involved in clearing bacterial infections, so destroying them would allow the bacteria to thrive almost unmolested.

"In the United States, CA-MRSA is now the cause of the majority of infections that result in trips to the emergency room. It is unclear what makes CA-MRSA strains more successful in causing human disease compared with their hospital-associated counterparts," they add.

When the peaceful activities of a normal microbial population are disrupted, malevolent bacteria may take full advantage of the opportunity to strike. The intestinal infection C. difficile colitis, now rampaging through hospitals around the world, is one of the worst such complication of antibiotic use.

Clostridium difficile was first recognized as a hospital microbe in 1978. By 1996, it had increased to 31 cases per 100,000 people discharged from U.S. hospitals. In 2003, the most recent year for complete statistics, prevalence had risen to 61 per 100,000. C. diff is part of the natural flora, or bacteria, in the colon. "We're seeing all of the warning signs that this is the next MRSA," said former New York Lt. Gov. Betsy McCaughey, founder of the Committee to Reduce Infection Deaths, a Manhattan-based nonprofit. "It spreads like wildfire in hospitals."
Clostridium difficile is a spore-forming toxin-producing bacterium that is overtaking peoples' large intestines from which it mounts an attack on the bloodstream. Like MRSA, Clostridium difficile has become multi-drug-resistant. Although once a bacterium that mostly affected elderly, hospitalized patients, a bolder strain is crippling the robust. In emergency efforts to save some patients' lives surgeons remove the entire large intestine to prevent overwhelming infection.

One case had been treated by a dermatologist for an ingrown hair on his back and prescribed an antibiotic. He took only a few pills, but quickly became ill. Based on what his doctors told him, the short course of antibiotics proved sufficient to destroy virtually all the natural bacteria in his intestine - except C. diff, which was freed to ravage his colon.

Frequently, stethoscopes, blood-pressure monitors and other equipment are contaminated with live bacteria. Yet doctors and nurses almost never clean the stethoscope before listening to a patient's chest.

"It strikes precisely those hospitals which are more 'high-tech', and handle more serious illnesses. Applying more disinfectant is not the answer; some strains of germs have actually been found thriving in bottles of hospital disinfectant! The more antibacterial chemical 'weapons' are being used, the more bacteria are becoming resistant to them," writes Dr. Carl Wieland.

Health-care officials are increasingly concerned about emerging new forms of drug-resistant Tuberculosis (TB). According to the WHO, outbreaks of drug-resistant tuberculosis are showing up all over the world and threaten to touch off a worldwide epidemic of virtually incurable tuberculosis. An October 1997 survey by the WHO, the U.S. Centers for Disease Control and Prevention and the International Union Against Tuberculosis and Lung Disease estimates that 50 million people are infected with a strain of TB that is drug-resistant. Many of those are said to carry multi-drug-resistant tuberculosis, incurable by two or more of the standard drugs.

New DNA technology has found hundreds of previously unrecognized species in the traditional stomping grounds of the mouth and intestine, and traces of bacteria even in tissues previously thought to be sterile.

**Lessons from Autism**

Medical scientists at Arizona State University tell us that antibiotic use is known to almost completely inhibit excretion of mercury in rats due to alteration of gut flora. Thus, higher use of oral antibiotics in the children with autism may have reduced their ability to excrete mercury. Higher usage of oral antibiotics in infancy may also partially explain the high incidence of chronic gastrointestinal problems in individuals with autism.

Many physicians are unaware of lasting adverse effects caused by routinely prescribed medications such as antibiotics. Antibiotic therapy for minor colds and runny noses is a common practice. People routinely receive multiple courses of broad-spectrum antibiotics throughout life or are injected with long-acting corticosteroid medicine for joint or muscle pain. Once established, sub-clinical colonization with yeast in the body may persist unrecognized for many years. Antibiotics, such as tetracycline, can greatly increase yeast in the colon after only a few days.

The extensive use of antibiotics will make the condition of Candida much worse because it reduces heavy metal excretion, which is a food source for the yeast like organism and also killing the beneficial bacteria at the same time.
Normally, candida albicans lives peacefully in our intestines and elsewhere, in harmony with other flora that keep the yeast in check. Take an antibiotic and all this changes. By suppressing the normal flora, candida takes over and problems begin. In its mild form, the result is diarrhea or a yeast infection. Dr. Elmer Cranton says that, "Yeast overgrowth is partly iatrogenic (caused by the medical profession) and can be caused by antibiotics and cortisone medications. A diet high in sugar also promotes overgrowth of yeast. A highly refined diet common in industrialized nations not only promotes growth of yeast, but is also deficient in many of the essential vitamins and minerals needed by the immune system. Chemical colorings, flavorings, preservatives, stabilizers, emulsifiers, etc., add more stress on the immune system."

Children with autism had significantly (2.1-fold) higher levels of mercury in their baby teeth but similar levels of lead and similar levels of zinc. Children with autism also had significantly higher usage of oral antibiotics during their first 12 to 36 months of life. Reporting in the July 11, 2007 issue of the Journal of the American Medical Association, researchers say the use of antibiotics as prevention boosts risks for drug resistance while doing nothing to shield kids from future urinary tract infections (UTIs). Giving antibiotics to prevent recurrent urinary tract infections in small children not only will not help but will hurt these children. Prior use of antibiotics to prevent infection did boost the likelihood of developing a drug-resistant infection by nearly 7.5 times. Indeed, 61 percent of recurrent urinary tract infections were caused by a pathogen with antibiotic resistance, the researchers pointed out.

In a 2005 study, the antibiotic Augmentin TM has been implicated in the formation of autism. The study strongly suggests the possibility of ammonia poisoning as a result of young children taking Augmentin. Augmentin has been given to children since the late 1980's for bacterial infections.

Many physicians seem to be unaware that birth control pills comprised of the hormones estrogen and progesterone can also make the body more susceptible to fungal infections. If antibiotics are prescribed, it acts as a double whammy to ensuring a fungal infection will take hold by diminishing the protective bacteria in the intestines. Many pregnant women seek medical treatment for minor problems and are indiscriminately given antibiotics and this begins a long decline into problems that are complicated at each turn by OBGYN doctors at birth and by pediatricians who just love to poison children with the toxic chemicals found in vaccines. In many places in the world they still give mercury shots at birth.

**Microforms poison us with their waste products.**

The waste products are acetylaldehyde, uric acid, alloxin, alcohols, lactic acid, etc.

Antibiotics may be to blame for hundreds of children developing autism after having the controversial MMR jab. More than two-thirds of youngsters with the condition received four or more antibiotics in their first year, a British survey has revealed. It is thought the drugs weakened their immune systems, leaving them unable to withstand the impact of the triple jab. Allopathic medicine has been stubborn and slow to look at its abusive use of antibiotics. It's the same with vaccines, the holy grail of medicine. But with last-line-of-defense antibiotics failing on increasingly drug-resistant superbugs and young children's systems being destroyed by them you would think they would wake up and find some alternatives.

Antibiotics are mostly derived from fungi and are therefore classified as mycotoxins. Mycotoxins Are Poisons.

**Iodine – a Pillar Against Infections**

Iodine offers a serious and potent replacement for much of the antibiotics that are literally destroying
people’s lives and can be used safely with children. Parents, who chose not to dose their kids with dangerous vaccines will be glad to know that iodine can be very effective against a host of viral infections that medical officials insist threaten children.

Though it kills 90 percent of bacteria on the skin within 90 seconds, its use as an antibiotic has been ignored. Iodine exhibits activity against bacteria, molds, yeasts, protozoa, and many viruses; indeed, of all antiseptic preparations suitable for direct use on humans and animals and upon tissues, only iodine is capable of killing all classes of pathogens: gram-positive and gram-negative bacteria, mycobacteria, fungi, yeasts, viruses and protozoa. Most bacteria are killed within 15 to 30 seconds of contact.

“Iodine is by far the best antibiotic, antiviral and antiseptic of all time.”– Dr. David Derry

Dr. Derry says that iodine is effective “for standard pathogens such as Staphylococcus, but also iodine has the broadest range of action, fewest side effects and no development of bacterial resistance.” There is a world of difference between using an antibiotic – anti-life substance – and an antibiotic, antiviral and antifungal substance like iodine, which is life serving because it is a basic and most necessary nutritional substance.

Iodine kills single celled organisms by combining with the amino acids tyrosine or histidine when they are exposed to the extra-cellular environment. All single cells showing tyrosine on their outer cell membranes are killed instantly by a simple chemical reaction with iodine that denatures proteins. Nature and evolution have given us an important mechanism to control pathogenic life forms and we should use it and trust it to protect us in ways that antibiotics can’t.

"My husband Ron had a small infection at the base of the nail. This very quickly turned nasty and our doctor agreed it looked like gout. Three weeks later Ron heard back from his Doctor who was in a mad panic saying Ron had septicemia. On seeing the surgeon that same day the surgeon wanted to go in and cut the finger open end for end and look at the finger and that she would probably have to take it off anyway. Finally the Nascent Iodine we ordered arrived (my husband was refusing to take antibiotics). He started on quite a hefty dose of 15 drops while continuing to apply magnesium chloride transdermally."

"Two days after starting the iodine there was feeling starting to regenerate and pain again in the finger and Ron thought it looked less discolored. Then the following day the swelling had started to go down and the normal healthy pinkness was returning at the base of the finger. Over a period of days it has progressively improved with no other treatment than the iodine and magnesium chloride. We also then made a poultice with a mixture of comfrey, honey and garlic for a few days, then the Nascent Iodine dripped into a goldenseal ointment."

Magnesium chloride is the only form of magnesium known to have anti-infectious properties. When it comes to fighting infections, iodine and magnesium chloride are a dynamic duo that should not be overlooked by allopathic or naturopathic physicians or by anyone else. I talked a few months ago to a missionary in Africa who was using iodine (in the atomic or detoxified form) to successfully treat malaria. My own children have recently had bad coughs and it is iodine, not dangerous over-the-counter cough medicines I reach for.

The feeling of security for a parent comes from administering substances like iodine (Nascent and other forms) and magnesium chloride (natural forms) to their children. Yes in dire emergency we would still use an antibiotic when fever is high and all else has failed but until that kind of critical point, iodine, backed up by magnesium chloride, sodium bicarbonate and even clay, is our main line of defense against a full range of pathogens.
“Determining what is an appropriate use of an antibiotic is a judgment call in which cultural, social, psychological, and economic factors play at least as great a role as clinical and epidemiological considerations.” – Dr. Marc Lipsitch et al.

The way to combat antibiotic resistance is not bigger, better, stronger antibiotics but, rather, no antibiotics at all. Instead, other molecular weapons are available with the ability to disable bad germs without bothering good ones. Iodine is the ideal broad spectrum antibiotic that is not an antibiotic – it is not against life. Not against human life that is but you can hear the little pathogens screaming as high enough levels of iodine fan out through the system. Meaning all the viruses, bacteria, yeasts and molds that are threatening us are threatened with instant death when iodine is used orally to fight infection. It’s hard to make a mistake with iodine but with pharmaceutical antibiotics we are playing at the crap table hoping our choice of which one to use works against the pathogen that is actually threatening a person.

**Infection depresses levels of vitamins B6 and C.**

“The right dose of Vitamin C will stop every infection in its tracks without needing to use antibiotics.”

– Dr. Gary Gordon.

Another reason to avoid antibiotics, except in the most dire emergencies, is that they interfere with the absorption of many vitamins and minerals, leading to their deficiencies. Deficiencies in these nutrients can set the stage for increased susceptibility to more infections.

Following is a list of the Drug/Substance and the Nutrients which are depleted by that substance:

* Antibiotics – (Nutrients Depleted) Vitamin A, B-12, C, E, K, Biotin, Calcium, Iron, Magnesium, Potassium
* Chelators – Copper, Iron, Magnesium, Zinc
* Anticonvulsants – Vitamin B-2, B-12, C, F, K, Folic Acid, Calcium, Magnesium
* Antidiabetics (Oral) – Vitamin B-2, B-12, C, D, Folic Acid
* Antihistamines – Vitamin C
* Aspirin – Calcium, Folic Acid, Iron, Potassium, C, B Complex

"When I was finally discharged from hospital, I still had a strain of supergerm colonizing my body. Nothing had been able to get rid of it, after months in hospital. However, I was told that all I had to do on going home was to 'get outdoors a lot, occasionally even roll in the dirt, and wait.' In less than two weeks of this advice, the supergerms were gone. Why? The reason is that supergerms are actually defective in other ways, as explained. Therefore, when they are forced to compete with the ordinary bacteria which normally thrive on our skin, they do not have a chance. They thrive in the hospital because all the antibiotics and antiseptics being used there keep wiping out the ordinary bacteria which would normally out-compete, wipe out and otherwise keep in check these 'superwimps,'" wrote Dr. Carl Wieland.

Interestingly enough Dr. Weston Price, who studied the diets and health of many primitive societies during the early 20th century, found that many primitive people would eat food that has been dipped in water dissolved with clay – in order to prevent upset stomachs from food poisoning. Two types of clay are today commonly sold for consumption as health supplements – bentonite and montmorillonite. These have been variously called "living clay", "healing clay" or just "edible clays".
Clay is highly absorptive. It readily absorbs toxins, heavy metals, bacteria, virus and fungi. But because clay itself is not absorbed by the body, whatever it absorbs is passed out in the stools.

**Mutating Viruses**

Did you know that a nutritional deficiency can cause a virus to mutate to a more virulent form? That is the news from the United States Department of Agriculture (USDA) who are reporting that a human virus, normally harmless in laboratory mice, mutated into a heart-damaging pathogen when the animals were raised on a diet devoid of the essential element selenium. And, once mutated, the virus continued to damage hearts – even in mice that got ample selenium in their feed.

The importance of this is not limited to nutritionally-deprived populations, say researchers with the University of North Carolina and Agricultural Research Service of the government, who collaborated on the studies. In theory, one selenium-deficient person or animal could produce a new family of virus mutants that could cross species and spread worldwide, causing disease even in well nourished people.

The USDA is now officially on record that nutritional deficiencies cause viral mutations and they expect to find the same results with vitamin-E-deficient mice because both selenium and vitamin E are nutrients that serve as antioxidants in the body. This means that the government is recognizing that free radicals and oxidative stress affects the world of pathogens creating super bugs out of regular critters. They are even going as far as saying that this may help explain the many new strains of influenza virus arising in China, which has widespread selenium-deficient areas.

The implications are enormous for a form of medicine that understands absolutely nothing about nutrition and the science of low level toxicity. Part of our infection fighting arsenal needs to include selenium and ALA (Alpha Lipoic Acid) and this is critical not only for maintaining glutathione levels but also for the neutralization of mercury. Mercury provides the ideal environment for viruses, bacteria, fungi and yeast infections. Though most are in total denial of it, we are as a race being overrun by mercury pollution that is everywhere in the air, water, food, vaccines, dental amalgam and even beauty products.

When a person is bitten by a snake, spider or scorpion it helps the doctors to know which poison they are treating. One cannot say anything about health or disease anymore without dealing with mercury and its rising tide. You cannot treat infectious diseases in effective ways without dealing with the soil of the infection, with the mercury and other chemical toxicities that are driving the pathogens. A doctor needs to know his poisons but most of them find their minds obscured by the denial of the fact that most of the pharmaceuticals they use are mitochondrial poisons. Modern medicine is lost when it comes to dealing with mercury and in fact endorses its use in vaccines and dental medicine.

Garlic is one food that has powerful anti-bacterial and anti-fungal properties and some scientific studies have found it to be at least as effective as the popular anti-fungal drug, Nystatin, in destroying candida albicans.

We have to change our perceptions about infections and infectious processes. We need to shift away from the competing paradigms of pathogen vs. terrain. We need to deal simultaneously with pathogen, terrain and poison. Certainly we need to deal with nutrition and the use of concentrated nutritional substances that help us deal safely and effectively with infections.

Much more could be said about natural remedies and other substances like colloidal silver, which is known to have antibacterial properties. I would choose iodine first because the body needs it anyway where it does not need colloidal silver. When we use concentrated nutritional substances as
antibiotics we are doing a lot more than confronting hostile pathogens. We are supporting total body physiology as well as elimination of heavy metals and other toxic poisons.

Nearly 500,000 people are dying yearly in America due to infectious disease. It now ranks number 3 behind heart disease and cancer in claiming American lives.

About the author

Mark A. Sircus Ac., OMD, is director of the International Medical Veritas Association (IMVA). Dr. Sircus was trained in acupuncture and oriental medicine at the Institute of Traditional Medicine in Sante Fe, N.M., and in the School of Traditional Medicine of New England in Boston. He served at the Central Public Hospital of Pochutla, in México, and was awarded the title of doctor of oriental medicine for his work. He was one of the first nationally certified acupuncturists in the United States. Dr. Sircus’s IMVA is dedicated to unifying the various disciplines in medicine with the goal of creating a new dawn in healthcare.

He is particularly concerned about the effect vaccinations have on vulnerable infants and is identifying the common thread of many toxic agents that are dramatically threatening present and future generations of children. His book *The Terror of Pediatric Medicine* is a free e-book one can read. Dr. Sircus is a most prolific and courageous writer and one can read through hundreds of pages on his various web sites.

He has most recently released his Survival Medicine for the 21st Century compendium (2,200 page ebook) and is racing to finish his *Winning the War Against Cancer* book. Dr. Sircus is a pioneer in the area of natural detoxification and chelation of toxic chemicals and heavy metals. He is also a champion of the medicinal value of minerals and is fathering in a new medical approach that uses seawater and different concentrates taken from it for health and healing. *Transdermal Magnesium Therapy*, his first published work, offers a stunning breakthrough in medicine, an entirely new way to supplement magnesium that naturally increases DHEA levels, brings cellular magnesium levels up quickly, relieves pain, brings down blood pressure and pushes cell physiology in a positive direction. Magnesium chloride delivered transdermally brings a quick release from a broad range of conditions.

http://www.naturalnews.com/022800.html