

GERMAN NEW MEDICINE

What is the cause of disease?

Geopathic Stress
Malnutrition
Toxicity (Poisoning)
Genetic (< 10%, 1% ?)
Structure
Lack of Gravity (Lack of Exercise)
Injury
Emotional Shock Conflict

Do germs cause disease?

Pasteur vs. Bechamp

Pasteur: *Germ Theory Origin

1. Admitted his theory was false before his death.
2. Significant evidence *Pasteur* falsified his research.

Bechamp

1. Work refutes *Pasteur* and states microbes are beneficial, useful and have Biological meaning to man.
2. *Geison* proves *Pasteur* incorrect and validates *Bechamp*.

What is the reason for Microbes?

To compost organic matter back to the soil.

To help man to heal.

Biological programs playing out in body set forth by the brain mediating between the **psyche** and the body.

Dr. Geerd Hamer

www.GermanNewMedicine.com

In 1979, shortly after his son's unexpected death, Dr. Hamer was diagnosed with Testicular Cancer. After research leads him to **German New Medicine**, our concept of disease did not encompass the biological purpose of disease. Every disease comes from an unexpected shock experience that affects the **psyche**, but impacts at the same time, (visible on a brain scan) the part of the brain that corresponds biologically to the specific trauma.

Dr. Hamer is the first to prove scientifically that cancer, for example, is not - as previously thought – senseless proliferation of deadly cancer cells but rather part of a **Significant Biological Special Program** (SBS) of Nature that has been successfully practiced for millions of years of evolution.

The special biological program for this particular conflict is switched on immediately after the shock conflict. For example: a distressing phone call from the hospital that her child had been admitted from a bad accident. The breast duct cells turn on to help that child (even if 80 years old).

As soon as the conflict is resolved (let's say, the child is released from the hospital), the tumor immediately stops growing. Since the child is out of danger, there is no longer a need to produce extra breast gland cells. During the healing phase, the now superfluous cells are broken down with the help of myco-bacteria which have been trained to do exactly that. If the repair phase is not interrupted, for example, ending up on a track, the tumor will be completely removed with the completion of the healing process. (see article: **Breast Cancer** on the website.)

What happens in the conflict active phase- sympathicotonia?

This is the Sympathetic Dominant Phase. The body goes into protection.

The body or body parts are cold

Insomnia

Low or no urine output

Low blood sugar

Spike in blood pressure

What happens after the resolution of the conflict? The body is in healing crisis.

Body parts heat up

Swelling

Pain

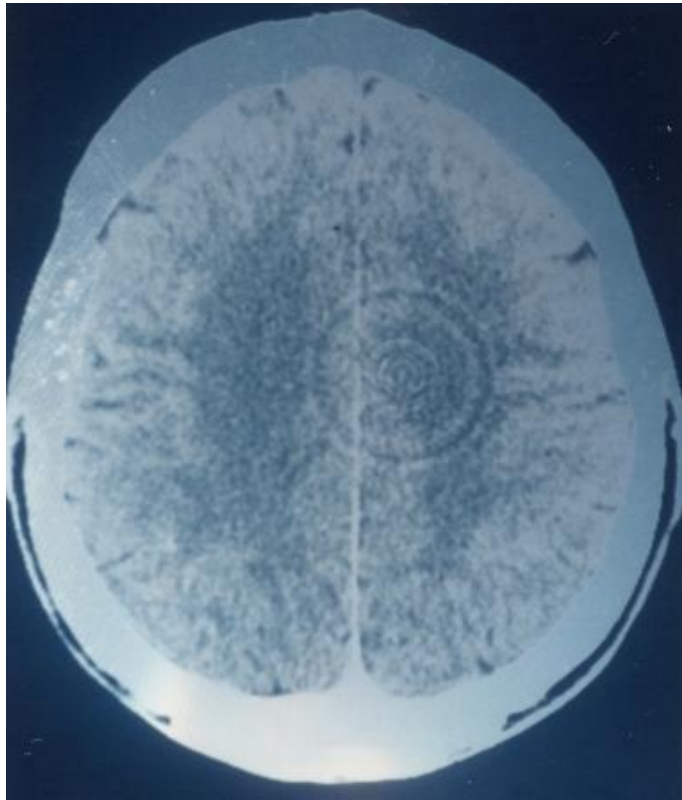
Fatigue, wants sleep

Night sweats

Headaches

May have discharge

Urine flow starts



PREMISE

The brain will set forth a survival program to protect the body from shock the psyche experiences.

German New Medicine understands the body as a unified organism, a unity, with the psyche being the integrator of all functions of behavior and all areas of conflict, and the brain being the main computer of all behavioral functions conflict areas and organs, and the sum of the consequences of all these events.¹

The founder of New Medicine, Dr. Ryke Geerd Hamer assigned the term DHS (Dirk Hamer Syndrome, named for his son) to an isolating shock that is very difficult, highly acute, and dramatic often resulting in cancer or other cancer-like diseases. Shock is experienced simultaneously on three levels: the psyche, the brain and the organ.

-DHS triggers a program available to the organism in times of emergency and shock.

Hamer called edema in the brain that forms as a result of an emotional shock a **HAMERschenherd (HH)**. This is referred to as a “program”.

The location in the brain is determined by the content of the conflict caused by DHS.

One shock often is accompanied with another shock or associated with “imprints” of the situations. Hamer called these “imprints” tracks. *Tracks* – the imprint of the conflict and accompanying circumstances experienced through a DHS. Tracks remind us of the shock, or trigger the thought patterns of the circumstances of the original shock. An example of a track is a girl holding a cat while the phone rings. She receives the shock of bad news of a relative passing away. The shock creates a separation conflict from the relative passing and creates two tracks. The first track is a cat allergy. The second track becomes the telephone; every time she holds the receiver to her ear, she relives the shocking experience. This has the potential to either postpone healing, or could create a hanging healing in which she goes into healing phase but is brought back to conflict anytime she touches the receiver.

Dr. Hamer gives this example of a track in his Summary of the New Medicine:

While on a flight from Senegal to Brussels a gentleman suffered a heart infraction. Because of the limited ability to do anything at the time, the wife suffered a death fright conflict for her husband who could have died at any moment. Though he quickly recovered upon his return to Brussels, his wife became ill off and on with a solitary lung-nodule causing her to perspire heavily (created by the tubercular bacteria) for days or weeks when the tumor would be broken down. The wife experienced DHS at the time of her husband’s heart infraction and became ill from the panic she experienced any time a family member boarded a plane. Though it was unlikely any of her family members would also experience a heart infraction, the plane became a track connected to death fright, creating a conflict-complex situation where the wife would suffer a recurrence of a solitary lung nodule every time a family member boarded a plane. The wife no longer experienced symptoms when the family stopped communicating their airline travel plans to her.

REVIEW: Death fright (with eventual healing) + airplane track (bringing her back to conflict again) = a hanging healing.

Laws of German New Medicine

Ryke Geerd Hamer, M.D.

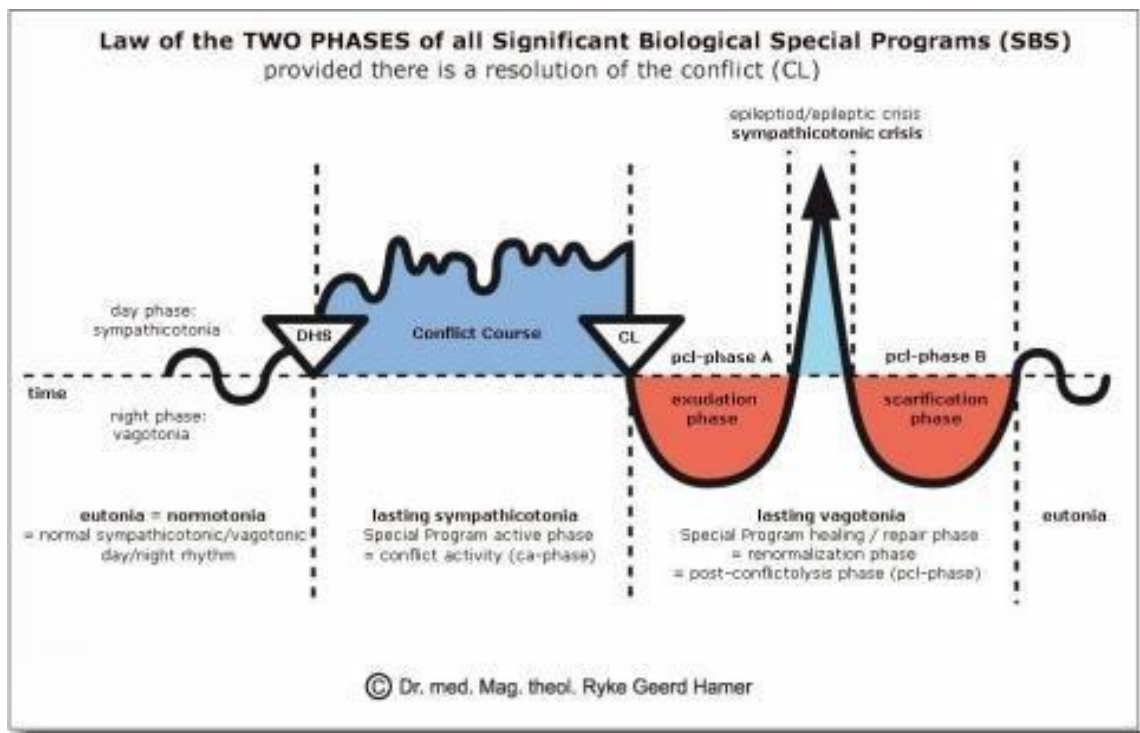
LAW 1: Every disease originates from a shock that the body is not prepared for.

LAW 2: There are two phases of this shock which must be expressed.

LAW 3: The brain mediates between the psyche and the body.

LAW 4: The microbes in the body help the body heal this psyche-brain-body expression. There are three brain levels that control the body. Each area of the brain evolved differently and uses different microbes.

LAW 5: The reactions of the brain-body are a natural healing reaction. They are a program that helps the organism survive and is a coping device that has evolved over thousands of years.



The HH in the CA-phase and the PCL phase

HH is organ relay that forms through a DHS. It has a sharply defined “target” configuration during the CA-phase. Rings edematize during the PCL-phase.

The target configuration in the conflict-active phase have for a long time been misinterpreted as equipment error or artifact. This controversy was put to an end with the signing of a protocol with Siemens and is now fact: a target configuration means a conflict-active phase in a specific relay or group of relays in the brain.i

Clear HH’s are a result of the work by the body to repair the HH and are grounds for relief and not for further shock and certainly not for surgery on the brain.

Often the brain and the organ both have target formations in simultaneous correspondence and the target configuration on the organ has a specific development.

Three things happen at conflict resolution (PCL):

-Cerebrally: edematized dissolution of the HH from the CA-phase (edema rings, intra- and perifocal edema of the HH)

-Psychically: the conflict is no longer an issue

-Organically: a new, healthy growth in organs controlled by cerebrum and cerebella medulla. Tumor disintegration in organs controlled by old brain (this will not occur if the body lacks the necessary microbes).

REVIEW:

PCL-phase (post conflictolytic phase) – beginning in the conflictolytic and ending with re-normalization. The epileptic or epileptoid crisis occurs here.

DHS – balance of the autonomic nervous system disrupted at the beginning of an illness so that the organism swings into sympathetic overload.

CL - (Hamer’s term, conflictolysis) is the conflict’s resolution. It is the beginning of the healing phase.

EC - epileptic or epileptoid crisis, at the apex of the healing phase. It occurs in the middle of the healing phase and is a necessary conflict-relapse where the patient again experiences, in compressed time, the entire biological conflict of the conflict-active phase. This is the brain’s attempt to push out the edema in the brain and re-normalize.

Diuresis occurs here, eliminating the body of all the excess water it has stored.

The Law of the Two Phases of Diseases

CL is interrupted by the epileptic or epileptoid crisis that marks the turning point of the healing-phase.

All diseases follow this course as long as there is conflict resolution. The illness will be two-phased if there is conflict resolution.

If there is no CL, two other scenarios are possible:

1. With acute conflict activity, the disease may be mortal and end in cachexia;
2. The body reduces the severity of the conflict, possibly by accommodating it thereby, lowering it and making it less intense.

Two further possibilities may occur if the conflict recurs:

1. Chronically recurring conflict activity caused by predominant conflict activity that is resolved by small or short healing phases;

2. Resolution is never reached because there is always some recurrence before final resolution. Known as a “hanging healing”, Parkinson’s disease is a good example of this as the tremor is a healing of a motor conflict of the musculature of the hand. The body heals for most of the day but for a very brief dream about the conflict at night, interrupting the healing phase.

There are combinations of possibilities (known as *syndromes*), all dependent on the psychological ups and downs in the soul of the patient.

Combinations occur within conflicts and conflict-events, as well as, when several conflicts co-exist at different points in their phases. There may also be two or three conflicts all hitting the brain hemisphere at the same time from the same DHS but, from different points.

It is possible to have two active conflicts that are not resolved at the same time so that one is in conflict activity and another in resolution. The result is mixed innervations – half sympathicotonia, half vagotonic – and leading to further complications.

--*Example:* If a female patient has a fear-revulsion conflict in the left glucose center, with another active conflict in the right cerebral hemisphere that has just gone into resolution, she has a continuing hypoglycemia together with vagotony, meaning she will eat large amounts of food and become obese.

The Ontogenetic System of Tumors and Cancer-equivalent Diseases

Three embryonic layers describing types histological tissue each one being the same or similar to another

- **Inner germ layer:** Cessation of cancer-growth, encapsulation or destruction by fungi or myco-bacteria¹
- **Middle germ layer:** Cerebellar-mesoderm (growth-stops, encapsulation or destruction by bacteria) and Cerebral-medulla-mesoderm (regeneration with swelling and excessive growth that is totally harmless). The bacteria are helpful in rebuilding.
- **Outer germ layer:** Ulcer-necroses tend to fill with reconstruction or scar reconstruction with help from viruses.

The Ontogenetic System of Microbes

Microbes correspond to their ontogenetic age with fungi being the oldest, then bacteria, followed by the youngest, viruses.

Microbes become active only in the healing phase beginning with the conflictolysis and only ending at the completion of the healing phase. Prior to and following the healing phase, the microbes exist as apathogenic and are considered virulent germs during the healing phase. Healing will occur even without special microbes, but not to the biological optimum.

Suppressing tuberculosis has prevented natural breast and intestinal tumor destruction

Induce tubercular infection if one has not already begun

Surgery may be appropriate if progression has well advanced without tubercular infection

We were not able to understand disease prior to understanding these laws. Removing the physical mass of cancer is ineffective. It is important to understand that microbes are not aggressors but in fact, helpers that heal. The healing phase can be more dangerous than the CA-phase in some diseases.

METASTASES

--It is common practice to think that cancerous cells spread and “move” to new locations. These local foci are known as “*proximal metastases*”. If a corresponding HH is found in the brain, they are called “*distant metastases*” – a result of the assumption that the cancer cells travel to the brain via the blood.
--There are, in fact, no “metastases”, but only secondary, tertiary, etc., carcinomas. For this reason, “benign” and “malignant” are terms not used in New Medicine.

Here’s how a metastasis may typically happen:

The patient suffers an emotional shock from her husband leaving her suddenly. The patient has a growth medically known as cancer. We understand the growth to be part of healing process due to emotional shock. She is told by the doctor that her breast has to be amputated because of danger that the malignant cells will spread or “swim” through the blood and generate a “distant metastasis”. The diagnosis scares the patient; she gets a disfigurement conflict, a melanoma in the surgical scar from the excised breast. This happens after she tries on clothes and they do not fit because of the disfigurement of the missing breast. Next she develops a self-devaluation conflict when she feels useless, losing the use of that breast. This may be a rib osteolysis. She also feels that the operation “attacked” her and develops a pleuro-mesothelioma of the lung pleura. Ultimately she suffers a death fright as her condition worsens and develops a pulmonary adeno-carcinoma.

REVIEW:

Separation Conflict- Ulcerated Duct Cancer

Disfigurement conflict – melanoma in the surgical scar of her previous left breast

Self-devaluation conflict – rib osteolysis in the area of the left amputated breast

Attack conflict – pleuro-mesothelioma of the left pleura; conflict against the left breast area to be operated

Death fright conflict – pulmonary circular foci (adeno-carcinoma) above

Because fear is a contributor to DHS, New Medicine provides the patient with hope and a prognosis that is neither frightening nor terrible and does not result in further conflict-shock. Patients go into further shock when told by their doctor that “there is nothing we can do” and “you are going to die”. Hamer’s term is “**Vicious Cycle**”/**Devil’s Circle**: A mechanism of recurring and new successive conflict in combination with psychic self-build-up caused by doctors creating panic (or panic in general).

--Be careful in GNM knowing that every word is delicate and can precipitate a new conflict.
--Nature does not make mistakes and means for only meaningful, goal-oriented solutions. We need only to understand the process even when it may seem incomprehensible or “bad”.

Working With the Biological Laws

Key: Precisely determine when the DHS was established and the accompanying circumstances. A CT scan is most appropriate, *not* an MRI unless the patient is in the PCL-phase as an MRI shows accumulations of glia and edema very clearly. (A CT will do this just as well for a professional).

Know the mass of the conflict and be clear on the feasibility of resolution of the conflict before making rash diagnoses or prognoses, i.e. give up job, sell company, divorce, etc..

There is the responsibility in New Medicine to assist the patient through the PCL-phase inasmuch as there can be conflict resolution just as a good physician should use all the medical means at his or her disposal to help the patient. In the PCL-phase the patient must be convinced that the current symptoms are not as bad as they seem and are in fact welcome – symptomatic therapeutic relief.

A new understanding of microbes causes us to rethink previous doses based on standard practice, i.e. cortisone therapy which can cause edema to progress, particularly in the brain.

Though a New Medicine physician understands that Mother Nature has optimized all developments, he is not opposed to medication.

The New Medicine therapist must understand the inner workings of the patient's disease.

A patient's thinking, especially in active fear, it is difficult to maintain German New Medicine concepts. In a GNM clinic, the panic would not exist. Terminal patients full of hope without morphine or intensive care is more humane than passing into the next life with panic.

An individual must reach resolution within a certain amount of time to avoid the possibility of downgrading the conflict and survive with a hanging conflict.

The Biological Conflict in the Embryonic Phase

Biological conflict that bypasses the mother

Mother panics, causing the supply to the placenta to close thereby starving the child

If the mother suffers conflict, it will remain on hold as the pregnancy takes absolute precedence. This changes if the child in the womb enters the CA-phase at which point it will abort itself (commit suicide).