



## **Basic Video Course DVD Curriculum**

**Section One:  
Presentation of a Cohesive Basis for a New Paradigm of Medicine.  
Bio-energetic Domains as the Most Fundamental Force in Health &  
Disease.**

### **Part 1**

Introduction. The importance of the cause of the problem.

### **Part 2**

Presentation of a case history. Audience analysis of the dismal ordeal of a young woman that caused 32 health practitioners, conventional and mostly alternative, to fail. Furthermore, her pitiful journey had begun with one complaint and, years later, ended with twenty serious problems. Do you have an answer?

Difficult cases are the real test.

### **Part 3**

We keep buying new keys instead of examining the lock.

Endless variables and parameters vs. entities of high clinical meaning.

### **Part 4**

Complex systems, their goals and essence of functioning. Matter-energy inputs.

Information flows. Homeostasis. Everything is energy.

### **Part 5**

Key properties of living systems: open, dynamic, complex (other properties: individual, diverse, discussed elsewhere)

### **Part 6**

Little intervention goes a long way.  
Stop giving; instead, start removing.

### Part 7

Individual meaning of findings.

### Part 8

Superficial conventional view of disease.  
The true triggering factors. Stress vs. strain.

### Part 9

Evidence for a new deeper view of physiology.  
Scientific evidence that everything is controlled by energy.

### Part 10

Various layers of energetic cellular depth.  
Bio-energetic cellular domains. Differences.  
Salient diagnostic and therapeutic implications.

### Part 11

Noxious Factors That Undermine Health and lead to development of all chronic diseases.

- (a) Miasms.
- (b) Heavy metals. Infectious agents. Radiation. X-rays. Vaccines.
- (c) Diet: poor nutrition. Problems with assimilation. Candidiasis/Dysbiosis, its true roots. The state of immunosuppression in. Candidiasis, fungi and Trojan Horse phenomenon. Caution and a major common mistake! Don't attack candida. Clean terrain or reap a vast iatrogenic harm. Candida's tendency to mutate and regrow. The role of residues of antibiotics and heavy metals.
- (d) Traumas. Neglect. Scars.
- (e) Root canals. Also: over-specialization. Narrow perspectives. True meaning of phrase 'scientifically proven'.
- (f) Suppressed Discharges. Misalignments.

### Part 12

Miscellaneous topics. Breathing therapies. Past, future and evolution of FCT<sup>®</sup>.  
Biological vs. chronological age. Individualized advice.  
Maintenance, follow-ups after treatment.

### Part 13

How virtually all the noxious factors can be turned into homeopathic counterparts, isodes (nosodes) and addressed therapeutically based on the Law of Similar through the science of hormesis and homeopathy.  
Emotions: how to treat them using FCT<sup>®</sup> & classical homeopathy.  
The importance of the terrain in development and sustenance of chronic diseases. Impossibility of positively altering terrain in chronic diseases through conventional and alternative pharmaceutical means or other narrow and linear approaches.

#### Part 14

Case history and analysis: Lyme disease, trauma.  
Incorrect order of treatment, importance of timing and potency in homeopathy.  
Avoiding overstimulation in hyper-sensitive cases.  
Distinguishing a "washout" (transient healing crisis) from genuine worsening of state.

#### Part 15

Dental factors.

#### Part 16

Toxic invasion of the cells as the real, core pathology behind all diseases.  
Stages of pathologic advancement. Therapeutic objectives: halting and reversing the processes of cell destruction.

#### Part 17

The diseases differ only by names which largely depend on the target organ: the causations are the same. All the diseases are **one** disease. Multi-systemic involvement and toxicity, including key immune and endocrine organs. What are we to address first? Organ support. Priorities. Immune support.

#### Part 18

Toxicology. Key toxins. Synergistic effect.

#### Part 19

Amalgam fillings. Prevalence. Serious concerns. Fluorescent lights, the source of biologically adverse information. Mercury poisoning. Starting in prenatal and postnatal life. Metal poisoning effects. Silver-mercury combination. Immuno-toxicology. The relationship of mercury to all diseases. Fallacy of safety in 'safe' levels.

### **Section Two: Serious Limitations of Current Medical Approaches, Diagnostic and Therapeutic, Conventional and Alternative.**

#### Part 20

- (a) Severe limitations of conventional diagnostic means. Only superficial fluids/tissues are accessible with the sole exception of autopsy.
- (b) Chelation therapy: Russian roulette. Releasing toxic lava and shifting it uncontrollably around the body.  
Nutritional/supplemental approaches: vitamins, antioxidants, etc.  
Limitations: superficial and non-individualized interventions are bound on failure as these conflict with the very nature of complex systems which is non-linear, diverse and individual, so effects are unpredictable. Reverse effect (hormesis) and great potential for harm.
- (c) Objective of reversal of cellular toxicity and salvage cells;

- (d) Iridology.
- (e) Traditional Chinese Medicine (TCM);
- (f) Classical Homeopathy;
- (g) Muscular-skeletal manipulations, osteopathy, chiropractic;
- (h) Neural therapy.
- (i) Use of autoisodes (intoxicated or infected body fluids) in acute poisonings, infections and nuclear radiation, especially whenever the source is not readily known or identifiable;
- (j) Serious limitations of conventional therapeutic approaches;
- (k) Live blood/darkfield microscopy;
- (l) EAV [(Electroacupuncture According to Voll) Same applies to all modalities of BRT – Bio-Resonance Testing – Applied Kinesiology, VEGA, Bi-Digital O-Ring Omura test, ART (Autonomic Response Test) and others].
- (m) **Conclusion: futility in pursuing "domino effect; the necessity of addressing the core causes.**

### Part 21

Dangers of fasting, sweets, fruit, EMFs, anti-candida treatments and probiotics. Antibiotics, great harm and practical means of removal of their residues from the body.

## Section Three: Presentation of Hands-on FCT® System of Diagnosis and Therapy.

### Part 22

Simple testing apparatus and circuit: use of metal platform, conducting wires, hand bar. Purpose. Finding a sick organ, cause and its therapeutic match.

### Part 23

A little-known non-force muscle testing (applied kinesiology) method. The positive reading, stress response. Overcoming limitations of other bio-resonance testing methods: fatigue factor on the part of patient and practitioner, patient lack of cooperation, attention or resisting force; subjectivity when applying pressure on muscle or acupuncture point; skin moisture, used up points, etc. Doctor-patient mind games.

### Part 24

Blocks (tester, testee, testing area). Establishing rules of game. Options you offer (Bio-Resonance Testing – BRT) terms. FCT®. Vertical testing vs. prevalent horizontal one. Exploring deeper layers. The matched reading. Energetic splitting of organs that enables to identify concealed morbid layers/causes not amenable to other methods. Probing deeper structures & finding therapeutic match. Ascertaining other weak organs. Testing for nutritional deficiencies. Offering items for acceptance. Determining frequency/repetitions. Offering further organ support. Testing when tired. Mental testing practiced by some practitioners without actual filter/vial kits often results in nonsense.

## Part 25

The testing algorithm. Course Synopsis. Best way to heal is to restore normal physiology rather than imposing substances. Test Control. Blocks. Care with protective devices. Importance of good health for practitioner. Placebo. Routine screening for the low conductance organs/tissues, stealth structures. The doomed diagnosis – ‘Genetic diseases’ – are often explained by mutagenic toxic substances inherited from mother and which still reside in the body while amenable to treatment.

## Part 26

Testing children, babies, animals, people in wheelchairs.

## Part 27

Convenience of wooden platform for organizing testing work station. Use of Master filters/vials. Storing test vials.

## Part 28

Presentation of clinical importance of testing kits contents.

Purpose of kits: portable energetic and sophisticated diagnostic facility.

### **The Basic Kit**

Rules of storing vials. Obtaining reading. Cellular filters, including DNA. Master organ filters.

Identifying immune, endocrine, nutritional and other deficiencies; also, pharmaceutical side-effects and residues. Case history. Emotional pain, depression, low self-esteem: mercury in Emotional Centre. Involvement of Frontal Lobe and classical remedy Anacardium. Cholesterol hysteria & red meat. Use of Peyer’s Patches to screen for worms and need for probiotics. Vaccination side-effects. Polio case where trauma, and subsequent heavy metals in spinal cord, were more important. Understanding the importance of blood flow to areas under strenuous use or to areas injured on one hand and enhanced delivery of toxic substances on the other. Implications, among others, for osteopathic and chiropractic practices and the true reasons behind the unstable adjustments.

## Part 29

### **The Extensive Kit**

Discussion of various organs/tissues and their correlation with associated symptoms/conditions.

Understanding how antibiotics propel susceptibility to recurrent infections.

## Part 30

**The Pernicious Kit** – the building blocks of diseases.

Introduction to and discussion of clinical importance of its contents.

## Part 31

Live consultation and testing of an outside patient never seen before (Case #1): long-term ankylosing spondylitis; cataracts; osteoporosis; fatigue. (a) Brief consultation. (b) Testing. EMFs, copper. Assessing dental leakage. Identified weak organs: Lymph, Supportive Apparatus, others. Testing by layers and

splitting with Multiple Energetic Layer filters (MELs) – the corner stone innovation in bio-resonance testing. Further toxic layers. Demonstration of multicausative nature of pathology. Case management discussion. Main therapeutic priorities, precautions. Understanding how different elements of immune system can at the same time be either suppressed or hyperactive. The nature of autoimmune diseases.

### Part 32

Live consultation and testing of an outside patient (Case #2): follow-up visit of a case of long-term multi-systemic collapse/chronic fatigue syndrome (CFS), multiple environmental sensitivities, metal toxicity, fatigue, parasitosis, allergies, insomnia. Past history of malaria, dengue fever, hepatitis, bronchitis, hookworms, kidney infections, giardiasis.

- (a) Symptoms; discussion. Progress: vitality, immune system, sleep, bowels, cognitive function. Current problems: kidneys, eyes, coal smoke.
- (b) Testing. Assessing vitality and regulation. The number of weak organs identified. Their toxic, infectious, pharmaceutical and other causations. Multienergetic layer testing. Discussion.  
Order of treatment: not to mix apples and oranges. Never mix different classes of isodes on the same day particularly at initial treatments.  
Probiotics: use, caution and high risk of iatrogenicity. Nutritional deficiencies found.

### Part 33

Tips for practicing and learning. Practice at home. Practice and experience enables everyone to test. E-letter, a great learning tool. Live cases reported/analyzed as they are taken and progressed.

The concept of strategy: testing is like playing a chess game. Basic strategy remains same, but which moves to prioritize at each turn?

Does your health influence the testing? The power of the mind. Homeopathy.

Does something not exist just because we don't understand it?

Self-testing: methods discussed. Cell components besides DNA.

Pharmacy/remedy dispensing; pills/bottles.

Uses of Classical Homeopathy.

Importance of testing patients' water. Downside of distilled water.

Age-old key metal toxicity: as long as there was plumbing. Lead.

Scientific studies of homeopathic (isodes/nosodes) toxins stimulating excretion of actual toxins.

Discussion of Patient Case #2. Danger of environmental re-intoxication during treatments. Frail constitutions. Major factors determining length of treatment for mercury intoxication. The role of antibiotics & number of amalgams.

Tendency of chronically ill patients to improve in an upward spiral rather than a vertical line fashion. Reversing neurological damage. Invention of the MELs: ascertaining deeper layers containing key toxins that were being missed.

### Part 34

Live consultation and testing of an outside patient never seen before (Case #3):

CFS (Chronic Fatigue Syndrome), multiple environmental sensitivities, history of Hodgkin's disease, chemotherapy.

Testing. Scars & surgeries: tonsillectomies amputating lymphatic system.  
Bone Marrow. Blood cells. Pale cheeks. Energetic splitting.  
Law enforcement analogy of police interrogation and multilayer testing.  
Going for the top criminals: don't chase minor hoodlums.  
X-ray residues in the bone marrow. The role of toxicity and low vitality.  
Splitting process. Cellular filters. The role of sarcodal support in addressing key toxins. Lesser ones will be excreted on their own, without any special treatment.

Constitutional splitting. Morbid factors found, serious dangers of premature amalgam removal that, unfortunately, is too common these days: Russian roulette played by holistic dentists and alternative doctors and their shallow and dangerous chelating approaches, including the "best" and "strong" chelators.

Homeopathic sarcodes (organs/tissues): protecting weak organs from the toxic onslaught and channeling it out. Also, prevent dumping of toxins into other organs that is too common to chelating and other detoxifying approaches.

Case analysis. Tubercular miasm; lymphatic focus. Chain effect – amalgams, adenoids, antibiotics, pharmaceuticals, chronic illness. Understanding of true health progress vs. suppression of symptoms with the latter being commonplace in both conventional and alternative medicine. FCT® experience confirms lack of development of serious and dreadful diseases such as cancer, heart disease, diabetes, Alzheimer's, premature aging and many others.

Thyroid. Strategy: milk the poisons & keep supporting the weak organs.

### Part 35

Hands-on practice: Guidance. Practical tips for speedy learning.