

HYDROGEN PEROXIDE

Medical Miracle

William Campbell Douglass, MD



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by

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Dedication

To Charles H. Farr, M.D., Ph. D.,
to whom the world owes a great debt.

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Foreword

What's going on here? Peroxides are supposed to be bad for you. Free radicals and all that. But now we hear that hydrogen peroxide is *good* for us.

I have been very skeptical about this one, but so many patients were asking my opinion about H₂O₂ that it was getting embarrassing to say, "I don't know." I didn't want to give up Monday Night Football to research H₂O₂, but there was just no way out of it. (The games were lousy anyway.)

I was astounded to find that excellent clinical research had been done on the medical uses of hydrogen peroxide as far back as 1914! (There goes my Monday Night Football—maybe Sunday afternoon, too.)

Doctor J.S. Haldane reported in 1919 that oxygen dissolved in the blood would probably be a good way to combat infection. (Remember that in those days infection was it. If you didn't get stomped to death by a horse, you would most likely die of infection. Cancer was not a scourge and cardiovascular disease had not been invented yet.)

Hydrogen peroxide will put extra oxygen in your blood. There's no doubt about that. But *prevailing expert opinion* is that it has no value. The red cells must transport oxygen for effective oxygen delivery, they tell us. But this is manifestly untrue. Hyperbaric oxygen therapy, for instance, where oxygen is forced into the blood under pressure, can be lifesaving in carbon monoxide poisoning, cyanide poisoning, and smoke inhalation.

But pushing oxygen into the blood by using pressure is an expensive business. A hyperbaric oxygen unit costs about \$100,000. Hydrogen peroxide costs pennies. So if you can get oxygen into the blood cheaply and safely, maybe cancer (which doesn't like oxygen), emphysema, AIDS, and many other terrible diseases can be treated effectively.

Intravenous hydrogen peroxide rapidly relieves allergic reactions, influenza symptoms, and acute viral infections. These effects are thought to be due to the oxidation of the various foreign substances in the blood.

Tumor cells, bacteria, and other unwanted foreign elements in the blood can usually be destroyed with hydrogen peroxide treatment. Peroxide has a definite destructive effect on tumors, and, in fact, cancer therapy may prove to be the most dramatic and useful place for peroxide therapy.¹

No one expects to live forever. But we would all like to have a George Burns finish. The prospect of finishing life in a nursing home after abandoning your tricycle in the mobile home park is not appealing. Then comes the loss of control of vital functions—the ultimate humiliation. Is life supposed to be from tricycle to tricycle and diaper to diaper? You come into this world crying, but do you have to leave crying? I don't believe you do. And you won't either after you see the evidence.

Sounds too good to be true, doesn't it? Read on and decide for yourself.

William Campbell Douglass, M.D.

Introduction

Hydrogen Peroxide, peroxide, and H_2O_2 are terms which "will be used interchangeably throughout this book.

We are going to start with some quotes from a doctor of medicine, Peter Gott, M.D. He is passionately and irrevocably dedicated to the practice (and science) of medicine as it is defined (and enforced) by the great fountain of knowledge represented by the Mayo Clinic, Harvard, The P.N.E.J.M. (The Prestigious *New England Journal of Medicine*), and the American Medical Association (AMA).

Dr. Gott attacks viciously and acerbically anything that he perceives to be heretical, while ignoring the basic research and clinical research that has appeared in *his own revered conventional scientific literature*.

It's what I call *scientific scotomata*. Scotomata are blind spots in the visual field. On a test screen used by an eye doctor, these will be black blobs in various parts of the field of vision. There are many causes for this eye disease. The scotomata of the intellect seen in many scientists, especially medical scientists, is not a physical but an intellectual affliction.

We are taught in medical school, in subtle ways, that you can't trust any research findings that don't have the blessing of the temples of learning and bastions of the *status quo* mentioned above, *even if that research was done in a respected center by a respected researcher*. Look at the way they drove Dr. George Crile out of the Temple of Medicine for reporting, after years of careful research, that radical breast cancer surgery is a waste of time. His research was done at the Cleveland Clinic. Doctor Linus

Pauling, a Nobel prize winner, got the same treatment for his work on vitamin C and cancer.

Doctor Gott writes a syndicated column in which he attacks anything in medicine that he considers to be heresy. One of his recent attacks was on hydrogen peroxide, the subject of this book. Doctor Gott has apparently, from the content of his remarks, had no experience with H_2O_2 beyond the bleaching of hair. He says that hydrogen peroxide is for external use only and especially for *women who are convinced that blondes have more fun*.

Dr. Gott *knows* that he is right because he is a doctor who *embraces scientific methods*—like calling peroxide therapy knavery—without having bothered to research the scientific literature. Gott is in for a surprise—if he ever does his homework.

In one of his sarcastic articles¹ he lists what I call *ha ha* items to show his contempt for some of the claims made by researchers associated with hydrogen peroxide:

Micro-organisms give off calcium waste matter that cements bones together—*ha ha*.

They lodge in liver and kidneys—*ha ha*.

And they line the arteries causing hard deposits on the arterial walls—*ha ha*.

Gott is apparently too convulsed with laughter to tell you that the basic research from which these claims were derived was done by Dr. Edward C. Rosenow, author of 450 published medical papers and an associate at the Mayo Clinic for over 60 years! (*Ha Ha*). Dr. Rosenow proved *over 80 years ago* (1914) that bacteria could be found consistently in the lymph nodes that drain joints.² He was probably the first scientist to postulate that H_2O_2 would help arthritis because of its ability to supply oxygen to oxygen-hating organisms causing arthritis (*streptococcus viridans*).

I have reviewed the scientific literature of the past 176 years on hydrogen peroxide; hundreds of articles on such subjects as: "Catalysis of single oxygen production in the reaction of hydrogen peroxide and hypochlorous acid by diazabicyclo octane."

Can you imagine how boring it is to wade through that kind of sanskrit to get to the good stuff? (I hope you show your appreciation by buying a lot of these books.)

Walter Grotz, one of the pioneers in oral peroxide therapy, has a keen and inquisitive mind. Although he is an ex-bureaucrat himself (retired postmaster), he understands and dislikes bureaucracy like most of the rest of us. And Mr. Grotz understands something else that many don't understand. All of the bureaucracy and self-serving bureaucrats are not in the government.

Take the American Cancer Society, for instance. Grotz took peroxide by mouth, and in 16 days his arthritis had improved dramatically. He called the American Cancer Society and asked their opinion of hydrogen peroxide therapy. The representative who answered the phone said it was quackery.

"You mean a therapy that costs a lot of money and doesn't do any good?" he asked. "Yes," she replied, "that's the best explanation I have heard. It costs a lot of money and doesn't do any good."

His treatment cost less than six dollars.

Walter Grotz discovered something else that dispels a myth about H_2O_2 . Ask the average scientist if he would expect to find any oxygen left after boiling and distilling hydrogen peroxide. He would probably say no, because H_2O_2 has a boiling point of 152 degrees Fahrenheit. You don't have to heat it much to make it boil. But, surprisingly, after distilling there is still considerable oxygen left in the fluid. It's a quirk of nature. Undoubtedly, there is a scientific explanation, but I don't know what it is.

There are a number of products on the market that claim to supply oxygen to the body better and more safely than H_2O_2 . These products (Aerox, Di-Oxychloride, Anti-Oxid-10, and others) are simply a very expensive method of doing what H_2O_2 will do for pennies.

A comparison of peroxide with these little bottles reveals that hydrogen peroxide contains 94 percent oxygen. The dropper bottles contain 47 percent oxygen, which comes from chlorine peroxide.

The peroxide, which is dirt cheap, breaks down into water and oxygen. The chlorine peroxide breaks down into chlorine and oxygen. So at equal volumes, you get *twice as much oxygen* from peroxide and no chlorine (which you don't need, although it does no harm in such small quantities).

So you are actually paying \$40 *an ounce* for your oxygen in these products. (They cost \$20 an ounce, and up, but are less than 50 percent oxygen.) Peroxide can be obtained for \$.40 a pint. Take your choice.

Chapter 1

The Roots of a Remarkable Therapy

The Indians (as in India) have been fascinated by oxygen as a therapy for a long time. Back in 1940, Doctors Inderjit Singh and Mangaldas Shah of Bombay, India experimented on oxygen given intravenously.¹

But the concept goes back even further. O₂ therapy was discussed in the *Lancet* for the first time in 1916.

Drs. Turnicliffe and Stebbing noted in their *Lancet* article² that Nysten had used O₂ successfully in dogs in France in 1811: "The animal seemed entirely unaffected by the injections" (i.e., no side effects).

They also pointed out that Doctor Demarquay, in 1886, made the observation that the oxygen given was not completely eliminated by the lungs and, therefore, went to the tissues.³ He made this simple and very astute observation by cutting the animal and noting that the blood was bright red, rather than the usual dark red of the venous blood. This observation was recently confirmed with modern, precise instruments.

With these encouraging reports from the old French literature, Turnicliffe and Stebbing in England tried pure oxygen intravenously for the first time in humans in 1916.

Their conclusions from their experiments were unequivocal: *The intravenous method of oxygen administration, if carefully carried out ... is available to the clinician and will give therapeutic results.*

Doctors being doctors, they became victims of the "Tomato Effect." Everyone, including "scientific authori-

ties" in the 18th century, knew that tomatoes were poisonous. So, today, "everyone knows" that hydrogen peroxide cannot be used as a therapeutic agent. If this were not so, we would have read about it in the *Journal of the American Medical Association (JAMA)*. A quick look at a copy of the *JAMA* will tell you why doctors don't know about peroxide "bio-oxidative" therapy. Drug companies, through their advertising, foot the bill for the journal. Cheap peroxide therapy would put many of them out of business.

Our Indian friend, Doctor Singh, attempted in 1932 to give oxygen under the skin and into the abdominal cavity. He found that the amount absorbed was too small to be of practical value. The first recorded use of peroxide in this country was by a Georgia doctor located, I'm proud to say, a short walk from my former office. In 1888, Dr. P.L. Cortelyou of Marietta, Georgia, reported on the use of peroxide in treatment of diseases of the nose and throat.

In one case of diphtheria, often fatal in those days, he used a nasal spray of peroxide, and the patient was well in one day.

Many other attempts at oxygen therapy were made between 1811 and 1935. But researchers lost interest with the advent of the drug era in medicine, starting around 1940.

Intravenous oxygen therapy isn't the only promising line of research that was dropped with the advent of the pharmaceutical revolution. Homeopathy, herbology, electro-medicine, and a lot of other promising lines of research were thrown out. Drugs were in. That's where the research money was (and is). Drugs were going to solve all of our medical problems.

We now know that drugs are not going to solve all of our problems. Some researchers are going back to basics and taking up research that never should have been dropped, like oxygen therapy.

Going back to 1940 and Dr. Singh, the last of the early pioneers of oxygen therapy, he found that dogs could be kept alive for 16 minutes on intravenous oxygen—with-

out any air going through the lungs. It's usually curtains within three to five minutes.

He next tried giving oxygen in the vein to patients dying of pneumonia. Pneumonia was another deadly disease in those days. The antibiotics deserve some credit here for saving people from death due to pneumonia. (But they get more credit than they deserve.)

Out of six cases given the intravenous oxygen, five died. One typical report: "There was distinct clinical improvement, but the patient died after seven days."

Hmmm.

The one in six who lived wasn't as sick as the others. There was little oxygen research done for the next 20 years. I guess I would have gotten discouraged, too.

A German doctor, H.S. Regelsberger, wrote a book on the oxygenation of blood for the treatment of high blood pressure. He theorized that oxygenation would reduce the viscosity or thickness of blood and thereby reduce blood pressure. The theory proved to be correct. His book, *Oxygenation*, should be required reading for all medical students. (I've been trying to locate a copy—no luck.)

Dr. Edward Carl Rosenow's 450 published papers should also be required reading. *But they have disappeared into the memory hole.* It's the strangest thing. I looked him up in the authors index at the Emory University medical library. There were no references to any of his peroxide research. A call to the Mayo Clinic was a waste of my nickel. The girl I talked to didn't know who I was talking about.

The researchers at Baylor University had their funding cut off, although their findings were sensational. Is there a conspiracy here? Seems like it to me.

In 1920, Doctors Oliver and Cantab reported to the *Lancet* on the use of hydrogen peroxide in a series of pneumonia cases in India. An 80 percent mortality was being experienced among Indian troops from pneumonia.

Doctors Oliver and Cantab made a bold move against this devastating epidemic. They decided to do the un-

thinkable—inject hydrogen peroxide directly into the vein. Textbooks warned that gas embolism, a dreaded condition causing strokes through bubbles in the brain, would result from intravenous hydrogen peroxide administration.

The doctors felt they had little to lose. The soldiers were dropping faster than in a battle with the Gurkas. They treated only those cases that were considered hopeless. Out of these they saved about 50 percent—13 out of 25 lived. All would have died without hydrogen peroxide. There was none of the dreaded gas embolism or any other side-effects.

What was the mechanism of these remarkable recoveries from a terminal condition? You'd think that if the oxygen is stimulating the good cells, then the bugs causing the problem would also be stimulated. What apparently happens is that the toxins formed by the bacteria or virus are *oxidized* by the oxygen. (That's just my theory. I'm open to suggestions.)

They point out that hydrogen peroxide has always been assumed to be toxic to cells. Boy, were we wrong. It now appears H_2O_2 is an *essential metabolite*. That means it's not toxic, but *essential to life's process*. How's that for a switch? Doctor Rannasarma of the Indian Institute of Science says, "The generation of H_2O_2 in cellular processes seems to be purposeful and H_2O_2 cannot be dismissed as a mere undesirable by-product."

Another terrible condition that often leads to death, unless massive antibiotic therapy is combined with hyperbaric oxygen, is gas gangrene, an infection that follows severe lacerating injury or surgery.⁴ The bacteria involved create a gas that invades the tissues. The tissues swell to enormous size due to the gas formation, and the most unimaginable smell emanates from the infected tissue. It's literally the smell of death, the smell of the battlefield. If untreated, the victim will die within 48 hours.

Like cancer cells, the bacteria that cause gas gangrene thrive without oxygen, so the treatment of choice has

been massive doses of penicillin combined with hyperbaric oxygen (HBO). But HBO is not readily available, and probably never will be.

Two Indian doctors in New Delhi, India, experimented on dogs given a gas gangrene infection. The dogs were injected with two billion gas-forming organisms into the muscle of a leg. One set of dogs received H_2O_2 treatment through an artery leading to the infection site. The other set of dogs got the inoculations of gas gangrene bacteria but no H_2O_2 .

The dogs not getting the H_2O_2 developed the usual stinking, rotten infection with sloughing of skin and muscle. They all eventually died of septicemia. Of the 10 dogs treated with H_2O_2 only two developed gas gangrene infection.

Gas gangrene is most commonly seen under wartime conditions. If medical science would only recognize the importance of this long-neglected therapy, many battlefield tragedies could be avoided at little cost.

Chapter 2

It Really Works But How?

Hydrogen peroxide, which properly should be called "hydrogen dioxide, is a colorless (blue in thick layers), odorless liquid. Its melting point is minus two degrees Celsius, and its boiling point is 152 degrees Celsius. It is soluble in water at all concentrations and it is usually encountered as a dilute solution of three percent. Hydrogen peroxide is used (1) as a bleaching agent; (2) as an antiseptic and disinfectant; (3) as an oxidizing agent, and (4) as an oxidizer in rocket motors for small rockets.

Hydrogen peroxide solutions dismutate (i.e., break down) slowly when undisturbed at about the rate of one percent per month. Contrary to popular belief, hydrogen peroxide is not unstable, and even when heated, it will break down very slowly. If this dismutation reaction is rapidly increased in the presence of contaminants such as dust, metal, or glass, it may be quite explosive. Cold retards the dismutation and solutions may be refrigerated or stored at temperatures below zero degrees Celsius. Hydrogen peroxide occurs only in traces in nature, mostly in rain and snow. It has not yet been detected in interstellar space.¹

Early studies on H_2O_2 infusions predicted that its half-life is less than one-tenth of a second. However, more recent studies by MacNaughton calculated that the half-life of peroxide ranges from three-quarters of a second to two seconds and is dependent upon the rate of mixing in the blood.

All species of animals do not react the same to peroxide because there are species differences in catalase en-

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