

EDITORIAL

The Effect of NAET® on Human Immunodeficiency Virus

D. S. Nambudripad, M.D., Ph.D., D.C., L.Ac.

The human immunodeficiency virus or HIV, is a sexually transmitted disease. If one gets infected with HIV, one's body will begin to create antibodies to fight the infection by destroying the virus. Antibodies are special protein molecules that are supposed to defend the body by destroying the allergen that is attacking the body. In the case of HIV infection, the allergen that is attacking the body is human immunodeficient virus.

What Do You Find in the Blood Test?

When we perform a blood test for HIV, we are looking for these antibodies. If one has the antibodies in the blood, we can say that the person has an HIV infection. People who have the HIV antibodies in their blood are called "HIV-Positive".

What is AIDS?

AIDS (Acquired Immune Deficiency Syndrome) is a fatal disease caused by the human immunodeficiency virus (HIV). The disease can occur at any age even though it is more prevalent among sexually active young adults between 20 to 40 years old. If one is HIV-positive it doesn't mean that he/she has AIDS. There are many HIV positive people in the world but they do not all have AIDS. These people may not manifest any symptoms of a health problem for years to come or they may not get sick at all if they maintain normal health. For some reason, if their immune systems go weak, this opportunistic, retro virus will begin to act upon their bodies causing various health disorders in different intensities

causing their immune systems to wear down further and manifest in symptoms of AIDS (Acquired Immune Deficiency Syndrome).

One's immune system contains different types of cells that help protect the body from infection. One of these types of specialized cells are called the CD4 or T-cells. HIV attacks these types of cells and uses them to make more copies of HIV. In doing so, the CD4 cell becomes unable to do its job of protecting the body. At first, the body can make more of these T-cells but eventually the body can't keep up and the number of working T-cells decreases. This weakens the immune system and leaves the body at risk for different types of infections. A normal person without HIV will have 700 to 1000 CD4 cells per cubic millimeter of blood. HIV infected people are considered to have "normal" CD4 counts if the number is above 500. Once the body's CD4 cell count falls below 200 per cubic millimeter of blood, and/or an opportunistic infection (mold, fungus, parasite, etc.) takes hold of one's weakened immune system, then the person will be diagnosed with AIDS.

Prevalence

In the United States, there are about 800,000 to 900,000 people who are HIV-positive. Over 300,000 people are living with AIDS. Each year, there are 50,000 new infections reported. In the mid-1990s, AIDS was the leading cause of death. However, newer treatments have cut the AIDS death rate significantly.

Symptoms of HIV

Manifesting symptoms of HIV vary according to what stage of the infection one is in. The earliest symptoms of an HIV infection occur while one's body begins to form antibodies to the virus (known as sero-conversion). This usually happens between six weeks and three months after the person got infected with the human immunodeficiency virus. Those who do show early HIV symptoms will develop flu-like symptoms. This can include: fever, sore throat, skin rash, swollen lymph glands, headache, malaise and muscles aches. This phase, termed acute HIV syndrome, usually lasts one to two weeks and is followed by a period in which the virus keeps multiplying but causes no symptoms. However, for most people, the first symptoms of HIV will not be apparent.

Although the infection is slowly taking hold of one's body, the majority of those infected with HIV will be asymptomatic. Only by being tested for HIV can one know for sure if one has been infected. Yet, despite the absence of HIV symptoms, one is still highly contagious during this time making it very much a possibility to infect others, including one's child.

Symptoms of HIV becomes more evident as the infection progresses and people with HIV grow increasingly susceptible to illnesses and infection.

Without treatment, people infected with HIV can expect to develop AIDS within eight to ten years after the initial contact. With appropriate medications, however, this progression can slow down.

In the later stages of HIV, before it progresses to full blown AIDS, signs of HIV infection can involve more severe symptoms. These include:

- Chronic yeast or candida infections or thrush (yeast infection of the mouth)
 - Fever and/or night sweats
 - Easy bruising
 - Bouts of extreme exhaustion
 - Unexplained body rashes
 - Appearance of purplish lesions on the skin or inside mouth
- Sudden unexplained weight loss
- Depression
- Chronic diarrhea lasting for a month or more

The Centers for Disease Control and Prevention maintains a list of those illnesses that are deemed to be opportunistic infections and lead to an AIDS diagnosis.

This list includes, but is not limited to:

- Kaposi's Sarcoma
- Pulmonary tuberculosis
- Candidiasis of the esophagus, trachea, bronchi or lungs
- Toxoplasmosis of the brain
- Severe bacterial infections
- Invasive cervical cancer
- Lymphoma
- Recurrent pneumonia

Additionally, vision loss, nerve damage and brain impairment can also occur. Signs of brain deterioration include trouble thinking, loss of co-ordination and balance and behavioral changes.

While there are treatments to help prolong the life of those infected with the AIDS virus, there is currently no cure for AIDS.

The best way to protect yourself is by taking preventative measures to avoid contact with the blood, vaginal fluid, semen, and breast milk of people infected with HIV. One can get HIV from anyone who is infected, even if they don't look sick, even if they haven't tested positive (yet). Most people get the HIV virus by:

- Having sex with an infected person.
- Sharing a needle (shooting drugs) with someone who is infected
- Being born when the mother is infected, or drinking the breast milk of an infected woman.
- Getting a transfusion of blood from an infected blood donor used to be a way people got AIDS, but now the blood supply is screened very carefully and the risk is extremely low.

There are no documented cases of HIV being transmitted by tears or saliva, but it is possible to catch HIV through oral sex, especially if you have open sores in your mouth or bleeding gums.

AIDS is different in every infected person. Some people die soon after getting infected, while others live fairly normal lives for many years (if they do not have too many allergies and have a sound immune system), even after they have been diagnosed as having AIDS.

What is the Treatment for AIDS?

There is no effective treatment for AIDS in traditional medicine. There are drugs that can slow down

the HIV virus, and slow down the damage to one's immune system. But there is no way to get all these viruses out of one's body.

What is the Effect of NAET® on HIV & AIDS?

NAET® believes that 90% of human ailments (including HIV infections and AIDS) are due to the after-effect of allergies and sensitivity reactions to food, chemicals, environmental substances, pets, and people in the living environment (Nambudripad, 1999, 2005). Repeated allergic reactions have the end result of weakening the immune system, which adversely affects the health of the person and their ability to resist disease (Krohn, Taylor, and Larson, 2000). After successful NAET treatments, allergy sufferers become normal, their immune systems begin to function normally making their bodies healthy and able to withstand many diseases and conditions. NAET® treatment for organisms, including viruses, bacteria, parasites, fungi, molds, and yeast eliminate the allergy to these organisms. Many disease conditions will heal after allergies are treated with NAET® including HIV infections. According to NAET® theory, if a person is not allergic to HIV, that person may not get infected even with intimate association with an infected person. I treated a female patient for insomnia and loss of appetite in 1986. This case confirmed my theory that allergy is the basic problem even in HIV infection. Her husband of five years contracted HIV before they were married. They lived happily for four years. Towards the fourth year he began manifesting symptoms of AIDS and a blood test confirmed it. He lived one more year and at the end of five years of their marriage, he died in her arms. At the time of his death, he was very fragile and debilitated. She was at his bedside in the hospital attending to his needs on a 24-hour basis.

This woman did not test positive for HIV. After her husband's death, she developed severe insomnia and a loss of appetite. She tried various treatments for three months, then one of her co-workers recommended that she see me. With my evaluation, she did not have any allergy to HIV. I postulate that that is the reason why she never got infected with AIDS even though she lived with a full blown AIDS patient over one year. However she had extreme fear that her blood test would be positive for HIV and she would die the way her husband did. I treated her for her emotional fear through NAET® cellular level balancing techniques. I also demonstrated to her that she had a strong immune system, had no

allergy to foods and environmental substances and especially, had no allergy to HIV according to NAET® testing. This was an indication that she would never get infected with HIV even though she had been associated with an AIDS patient on a long-term basis. She believed me fully and was relieved to hear that. On her second visit, she happily reported that she resumed her normal sleeping pattern and normal appetite. Twenty years later she still remains healthy without any sign of positive HIV.

HIV and AIDS, as well as many other diseases, are a result of the immune system being too weak to effectively fight the organisms and eliminate the diseases from the body. Treating with NAET® for disease-producing organisms, essential nutrition, environmental toxins, chemical toxins, emotional traumas, fear and other emotional imbalances as well as providing appropriate nutritional supplements to improve and strengthen the immune system can assist the body in overthrowing the opportunistic, retro virus permanently from the body and leaving the person healthy to enjoy many years of life.

The future is bright for the six HIV positive children from an orphanage in India who have recently been reported to have turned HIV negative after receiving regular NAET® treatments for the past two years (Naina, 2006). These children have been placed for adoption along with other normal children at the orphanage.

A larger study with 60 HIV positive patients is already underway to confirm those NAET® results with different groups and condition. Only time will tell how much NAET® can contribute to assist HIV patients worldwide to recover completely from this disorder.

REFERENCES:

- An anti-HIV microbicide comes alive Laurel A. Lagenaur and Edward A. Berger PNAS 2005 102: 12294-12295.
- Avert. Worldwide HIV & AIDS Statistics. September 4, 2006. <http://www.avert.org/worldststs.htm>.
- Berry, Steve and Rob Noble. Understanding HIV and AIDS Statistics. AVERT, August 23, 2006. <http://www.avert.org/statistics.htm>.
- Boyles, Salynn and Louise Chang. HIV Drugs Improve, but Not Death Rate. WebMD, August 3, 2006. <http://aolsvc.health.webmd.aol.com/content/Article126/116197.htm>.
- Centers for Disease Control and Prevention (CDC). Drug-Associated HIV Transmission Continues in the United States. CDC Home, May 2002, Reviewed July 2006. <http://www.cdc.gov/hiv/resources/factsheets/print/idu.htm>.

- Centers for Disease Control and Prevention (CDC). Mother-to-Child (Perinatal) HIV Transmission and Prevention. CDC Home, May 2006. <http://www.cdc.gov/hiv/resources/factsheets/printperinat1.htm>.
- Centers for Disease Control and Prevention (CDC). HIV/Aids among Women Who Have Sex with Women. CDC Home, June 2006. <http://www.cdc.gov/hiv/topics/women/resources/factsheets/print/wsw.htm>.
- Centers for Disease Control and Prevention (CDC). HIV/AIDS among Men Who Have Sex with Men. CDC Home, July 2006. <http://www.cdc.gov/hiv/resources/factsheets/print/msm.htm>.
- East Asian Medical Studies society: Fundamentals of Chinese Medicine, Paradigm Publications, 1985.
- Essentials of Chinese Acupuncture, Foreign Language Press, 24 Baiwanzhuang Road, Beijing, China. 1980, 291-292
- Editors. "Where HIV Began." New Scientist. June 2006; 90 (2554): 18.
- Gadd, Chris. "HAART reduces AIDS events even when treatment response is poor." NAM. Aidsmap News, March 1, 2006. <http://www.aidsmap.com/en/news/F81E07DC-5171-4D0E-B120-DC74FCA3642A.asp>.
- Huang-di Nei-Jing Su-wen (Yellow Emperor's Inner Classic of Medicine), Beijing, People's press, 1963. (First appeared in 100B.C.).
- Hiti, Miranda and Louise Chang. Global Report: AIDS at a Crossroads. WebMD, 2006. <http://olsvc.healthwebmd.aol.com/content/Article/122/114958.htm>.
- HIVInSite. Infections Associated with HIV. UCSF Center for HIV Information, 2006. <http://hivinsite.ucsf.edu/InSite?page=kb-05>.
- HIVInSite. Malignancies Associated with HIV. UCSF Center for HIV Information, 2006. <http://hivinsite.ucsf.edu/InSite?page=kb-06>.
- HIV Vaccine Trials Network (HVTN), Seattle, Washington, 2006. <http://www.hvtn.org/about/index.html>.
- IAVI. Aids Vaccine Blueprint 2006-Actions to Strengthen Global Research and Development. International AIDS Vaccine Initiative, Inc., 2006. <http://www.iavi.org/blueprint>.
- Gandhi, Monica. HIV Infection. Medline Plus, August 11, 2006. <http://www.nlm.nih.gov/medlineplus/ency/article/000602.htm>.
- Fohn.net. The History of AIDS. Fohn.net, 2005. <http://fohn.net/history-of-aids/>.
- Kanabus, Annabel and Sarah Allen. Updates by Bonita de Boer. The Origins of HIV and the First Cases of AIDS. AVERT, July 1, 2006. <http://www.org/orgins.htm>.
- Krohn, Jacqueline and Frances Taylor. Phenolics and Other Allergens. Los Alamos, NM: K and T Books, 2001.
- Krohn, Jacqueline and Frances Taylor. Finding the Right Treatment, Second Edition. Point Roberts, WA: Hartley & Marks, 2002.
- Krohn, Jacqueline, Frances Taylor, and Erla Mae Larson. Allergy Relief and Prevention, Third Edition. Point Roberts, WA: Hartley & Marks, 2000.
- Lawson A, Calderon L. : Inter-examiner Agreement for Applied Kinesiology Manual Muscle Testing. Percept Mot Skills. 1997; 84(2):539-46.
- Lederman, Michale M., Benigno Rodriquez, and Scott Sieg. HIV INSite Knowledge Base Chapter. Immunopathogenesis of HIV Infection. HIVInSite, October 2004, Reviewed January 2006. <http://hivinsite.ucsf.edu/InSite?page=kb-02&doc=kb-02-01-04>.
- Motoyama M. Comparison of Diagnostic Methods in Western and Eastern Medicine. A Correlation between Ki Energy and Environmental Conditions. Tokyo, Japan: Human Science Press, 2000
- Nambudripad DS: Freedom From Environmental Sensitivities, Delta Publishing Co., Buena Park, CA, 2005.
- Naina, Sister SND. "Research Update from India." Presented at the 12th Annual NAET Symposium, Buena Park, CA, 2006.
- Nambudripad, Devi. Say Good-Bye to Illness, Third Edition. Buena park, CA: Delta Publishing Company, 2002.
- Nambudripad, Devi. Say Good-Bye to Your Allergies. Buena Park, CA: Delta Publishing Company, 2003.
- HIV InSite's collection of HIV prevention and treatment information for patients and the public. This section includes information for people newly diagnosed with HIV, HIV/AIDS Basics, our popular Ask HIV InSite forum, and information for youth and other populations.
- Osmond, Dennis H. Epidemiology of HIV/AIDS in the United States. HIVInSite, March, 2003. <http://hivinsite.ucsf.edu/INSITE?page=kb-01-03>.
- NAET Website: www.naet.com
- NAR Foundation Website: www.narfnet.org.
- Reprints Request to:
- NAR Foundation
6714-32 Beach Blvd.
Buena Park, CA 90621
email: narfoundation@yahoo.com