

### Where this class was taught.

The context of this course will reveal where this particular course was taught.

In the State of Georgia. [1](#), [2](#).

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### **Tape 1 – Side A**

**Dr. Reams:** .... And to know wherein we speak. And what I'm going to ask you to do today, if you will, we'll stand and we'll have a prayer, and I'm going to ask Dr. Kelly to lead us in prayer this morning (garbled).

**Dr. Kelly:** Mighty God, Righteous God, in the conscience of Jesus Christ we ask that you would uphold us with thy perfect will and perfect life. We ask that like Solomon, that You, that we ask for the knowledge to be shared that we may better serve thy people. We ask that You would open our minds completely and give us perfect recall and memory of all this and will make it simple and usable and that we use it for thy glory and thy kingdom. Amen.

### **Biological Theory of Ionization – an analytical course**

**Dr. Reams:** .... Chart with regards to this course just as closely as is humanly possible. Up at the top of your paper it says "Theory of Ionization". I want you to write above that, "Biological". That word was left off intentionally. You can write anything you want to on this chart. It's your chart to do what you want with but there was a reason for leaving that word off this chart at this time.

We are going to learn something about this course. First, let's look at the legal aspects. The law will not permit us to use this equipment for diagnostic purposes. A diagnosis is a guess limited by experience.

### **Rule: We do not live off the food we eat. We live from the energy from the food we eat.**

This is not a diagnostic course. It is an analytical course to teach you how to calculate energy. We do not live off the food we eat. We live from the energy from the food we eat. No two people get the same amount of energy from any given number of calories in food.

So we're going to learn how to figure or begin to the study of calculating energy of each individual. Now this course is to teach you how to make a diet to fit any body chemistry. And there's not many just one way to do it. There's many ways that it can be done.

And before this course is over, you will be given what a perfect human anatomy should read like. You will be also testing urine and saliva and you will note and see how far from perfect these tests are. And then the purpose is to make a diet to bring those numbers back toward perfect. And when anyone is doing that, they are gaining energy. The farther these numbers get away from perfect, they are losing energy.

**Rule: Illness starts when you continue to burn up more energy than you take in.**

We are not going to measure the total energy. We are going to measure only the reserved energy. Anytime anyone burns up more energy in a day, or an hour, or a minute, than they take in, and continue it long enough, that is the day that illness starts. Illness is only a loss of energy and there's always causes for loss of energy, there's always causes.

Now some of you eventually will be able to use these tests and probably pin point any malady, anywhere in anyone's system from a brain tumor to an ingrown toe nail. It can be done. But that is not the purpose of this course. And legally it's against the law to do it now. But I hope in another two or three years, that we'll have the liberty to use all methods known in science to aide in the healing arts.

This course is a technical course. It's not a question and answer course, however all of your questions will be answered. And a good thing to do is to have a question and answer sheet, a question sheet, and whenever you tab this sheet, leave enough space for an answer so that you won't forget it, in all probability, that question will be answered before the course is over and if you bring me a question that we haven't yet come to, if I say that will be covered later, it's in order to cover somebody else's question that will not be covered later. Okay? So I will not leave any of you hanging out on a limb.

**The theory of this course is measurement of energy**

And the theory of this course is measurement of energy. Measurement of energy, it's all it is. Let me give you just a little thought in regard to measuring energy. In the field of agriculture, we can do soil analysis today, and have been for many, many years, and measured the energy in any given field, and tell you what the yield will be before you ever plant the seed, and within a 5% accuracy, and making no allowance whatsoever for weather conditions. Now, if you can do that for farms, why can't we do it for people? We can, we can do it.

**Benefits of this course – you will know if your instructions were followed or not**

Now here's some benefits of this course. I want to tell you something about the benefits of it. You will no longer need case histories at all. You can forget it. You can drop all of that completely, because all you need to know about a person is their age, height, weight, race, color, address, telephone number, and so forth. This is all you need to know about a person. And then you measure their energy and you begin from there. Because all this other doesn't amount to one hill of beans, nothing, absolutely nothing when you're measuring energy. Also when you

take this course and thoroughly understand it and complete it, I don't mean just today, but I mean in the weeks to come. And you tell a patient to do something, and they come back, you won't have to ask them, "Did they do it?". You will know whether they did it or not. Because it's cause and effect. If they do certain things, nature will do certain things. And if they don't do it, it will show and then you can say to them, "Well why didn't you do so and so?"

I had a lady one time that was highly anemic. Came in, and I gave her, she did not need to stay again, she could do hers at home, and you will find that about 95% of the people of the general run that goes through an average doctor's office could take a diet and go home. But about 5% of them it will be impossible because of the rapid body chemistry changes. Well she came back in two weeks and the test was no change. It was exactly the same. And she said to me, "Doctor I'm not a bit better." I said, "I see you are not, but why didn't you do what I told you?" She said, "Doctor I did what you told me." I said, "Now listen. You can lie to yourself all that you want to, but you're not lying to me. Now, if you are going to lie to yourself and try to lie to me too, get out of my office because I have no time to fool with you." She said, "I'm going to be frank with you doctor, I didn't have B12's so I took two B6's each time." Now I said, "Your arithmetic is excellent, but your chemistry is terrible. Now you go back and do what I told you." And she did and you should have seen the difference. And she said, "Doctor, I'm awfully sorry. I told you wrong before, but I didn't know there was a difference." Well there is a difference, so what I am trying to say is, you won't have to go into this. This won't happen very often. But you will find you will know whether that person did what you said do or not.

### **You will be taught how to blot out heart attacks**

Also in this course, this time, you are going to be taught how to blot out heart attacks. You are going to know when you finish this course this week, how to prevent heart attacks, either angina or pectoris. And a few of you, maybe some of you, may be able to learn to calculate the energy to know how much time anyone has to live if they do or if they don't. Now this is perfectly possible. We have figured it as high as three years and missed it less than three weeks, less than three weeks, because it's energy and sometimes you can do it with one test. Sometimes it takes two or three tests.

Also many times in this test you can tell very quickly whether or not their body will respond to diet or not, or whether it won't respond, by the first test. Sometimes it takes three or four tests a day apart or two or three days apart to evaluate the exact course of energy.

This course also has some weak spots. It has one or two weak spots. I want to tell you about those. It will not tell you whether or not there is a kidney stone or a gall stone. But when you finish this course, I don't mean just this week. You will be able to very well tell by the symptoms that are present in the energy loss from a given area that there is in all probability, a stone because a stone doesn't give off energy, not fast enough for us to pick it up. But it is very easy to dissolve. I will give you some principles to follow this week in this energy course that will aide you a lot in calculating the loss of energy due to gall stones and due to kidney stones.

So this course is designed to help you make a diet to coordinate your program of healing with a dietary program of healing. It doesn't make sense to me for a person to become ill because of their diet and go to his doctor and get treatments or get medicine or vitamins and minerals to get well, and continue eating the same foods that made him sick in the first place.

### **Learn about 15 divisions of the RBTI tests**

Now one of the great things that you are going to notice about this course is this. Whether a body is too acid or too alkaline; too much sugar or not enough sugar; too much albumin or not enough albumin, it can be both believe it or not; or too much salt or not enough salt; too much protein or not enough protein and what kind of protein. Now these things you're going to learn and when you learn these fifteen divisions of these tests this week, you're going to learn to do fifteen things and from that then, you are going to begin to learn how to apply those things for better health.

Also, is one important thing to realize at this time is in the calcium's. Our bodies uses more calciums than any other element by volume and by weight. All biological life does. There is no exception to this. Throughout all nature, all living plants, all living animals, all human beings, use more calcium than any other element.

There's a little catch in this thing. The word calcium is like the word yeast. It's singular and plural or some other words. It's both singular and plural, calcium. So sometimes in order to drive the thought home I'm going to add an S to calciums so that you will understand that I am talking about more than one kind of calciums. I know a quarter of a million kinds of calcium and there are many kinds I still don't know. And these quarter of a million kinds of calciums can be divided into seven different classes. And as long as you keep these calciums in this category, you are quite safe, you're quite safe, and they are always available.

### **Learn about cause and effect**

So, in this course we are going to learn about cause and effect. I'm going to say this statement a number of times. We're going to get in a little later to the math of this course. And in that there is a term called Euclid and innate. Now you have

been introduced to those two theorems already in geometry. This is where you first met these terms, but you are going to meet them again in differential calculus. Now in differential calculus, you do not just look at the number. You look at the number and in your mind it will come to you why that number's there. For instance when you look at your bank statement and look at the bottom of the page in the right hand corner, you see that a reserve, a checking account you have, but in your mind, you know why it's there. You get the idea? So, it's cause and effect that you are studying here in this course. If energy is in one place and it coincides right through the group, then it will pinpoint that problem. Now how is this possible? Why don't we use blood analysis? Well blood analysis changes every few minutes. It's unpredictable. Why don't we use hair analysis? Because it's too old. Two or three months old. Two or three weeks old. You'd have to shave your head every day to get anything near enough right at you to mean anything. Body chemistry often changes very rapidly, but when you get a urine, a saliva test, you've got something that is now, within the last five or six hours. You've got it right up to date analysis of what that body chemistry's like. How does the urine analysis reading mean anything to you? Well, some of our organs have more of one thing in it than another. For instance, the brain has more potassium in it than any other element. The heart has a high amount of arsenic in it. The sex organs are high in manganese. The liver in Iron, the liver is very high in Iron and Iodine and other elements. And so you go on throughout the entire body. The feet is benzene. And in the lining of the walls of our intestinal track, there's copper. And in our blood vessels, it's the copper that gives you the ability to expand and contract without getting out of shape. But just any copper won't do. It takes certain kinds of copper, and we'll get to that, and I will advise you never because of an energy reading, recommend synthetic copper in any shape form or way. Now it can be gotten in vegetables and foods. Now this is what we are talking about. We are not talking about it as far as drugs is concerned. We are only talking about it as far as food is concerned.

We are also going to study something about the proteins. The organic and the inorganic foods, the differences and so forth. But this is what the course is about, is learning to measure energy, learning to measure energy in every respect. And when you measure the energy, you can tell whether or not a patient is getting better or worse. Real quickly, sometimes you can measure it by the hour. And sometimes it's necessary to measure it by the hour or even the half-hour.

I was called to the Florida hospital in Orlando a few years ago by a doctor, and it was a cancer patient and she looked like the picture of health almost. But they had her in there under observation. And she had been slightly going down for about a nine months period. And when I ran the tests, I couldn't believe my eyes at all, I couldn't believe it. I thought I had made a mistake, even doing the tests myself.

Half an hour later I had the nurses take another specimen of urine and saliva, and did it over again. And then there was no mistake. I called her husband who was the head laboratory technician in this hospital. I went down to where he was. I said, "Is your doctor on the floor?" He said, "Yes." So he called and the doctor came down. I said, "Doctor you're losing a patient. This patient will pass within 40 hours. He said, "Awe no, you're wrong. She'll be here for months." I said, "No doctor. She's passing now." I said, "She's already dying." I said, "The organs in the lower extremity have already collapsed. The cancer has entered her spine. It's moving up the spine now at the rate of an inch an hour." I said, "I'm very, very tolerant when I say 40 hours." There the poor fellow was standing between two doctors arguing how long his wife would live. I said to him just like this, "I know that you're confused. Two doctors arguing over how long your wife's going to live." I said, "It's too late. The doctor can't do anything and neither can I. There's no use to bother with diet at this stage." I said, "Will you please do me one thing?" to the husband. "Call me when she passes." About four o'clock the next morning, just about 19 hours from the time that I did the test, because it was early in the morning. I got a call that she had passed. So, there are certain things that this diet won't do. Once the cancer is in the spine, there's no stopping it, there's no stopping it, there is no stopping it. So if you find this at any time, just face the facts, just face the facts, that's all there is to do. So what I'm trying to tell you, this course cannot do everything for anybody. And this is the final thing I am saying now about this theory of the course.

The most perfect diet that can ever be made for anyone is not an insurance policy for eternal life on earth.

**Student:** It's not the resurrection business.

**Reams:** No.

Now, if you need a little break, let's, no, let's look at our equipment first, let's look at our equipment first.

### **Introduction to equipment needed for the tests**

The big instrument on your desks, the big instrument on your desk, the biggest one is a solu bridge. The biggest one you have there is a solu bridge. It's still in a case. You haven't opened your case yet. It's in the case there. It's a solu bridge. This is the introduction to equipment. The biggest instrument you have on your desk is a solu bridge. Now this instrument is to measure the salt in anyone's diet, all the salts, all of them. Not just the sodium chloride, the magnesium chloride, the calcium chloride, the ammonia chloride, the potassium chloride, and all the other chlorides. This is what this instrument measures. It is very, very accurate and it is very important. It is very easy to have too much salt and it's very common not to

have enough salt. So we will learn that salt is an electrolyte and what it does as we go through the course. An electrolyte is a substance that conducts electricity. Whether it is aluminum wire or copper wire or saline solution or what not. That is all that an electrolyte is.

The next instrument you have in a little round case there is a refractometer, it's a refractometer. This instrument is to measure the sugar in diet, the carbohydrates of every kind. It measures the carbohydrates. You will be taught how to use this instrument as we go through the course. It's got a number of little gadgets on it there, all of it means something. And we could have bought a lot cheaper refractometer than this, but the thing about it is, you cannot keep them adjusted. This one will probably never need adjustment. We will teach you how to tell whether it is ever out of adjustment or not. And also, many times the lens fog up and you can't read it, and you have all kind of problems with it, so we bought one of the best that could be bought, and it's also about \$60 to \$70 cheaper than a Bausch and Lomb, however this is made by Bausch and Lomb in Japan. So we got it about \$50 cheaper than we could have got one instrument in this country would do the same thing.

No, two small ones. Well we'll see we'll come to it in just a moment. That's a refractometer. Yes. It's in a leather case my girl, plastic case. Yes?

**Student:** I notice you got a telescope. Do we have to buy a telescope additionally? Excuse me, a microscope.

**Reams:** Well, a microscope you should have. That's separate. We do not furnish the microscope. We do not furnish the microscope, but I would suggest that every office have one.

**Student:** Any particular type or brand or size?

**Reams:** Just so it has a 1000 power, 600 to 1000 power is enough. Yes. 10M.

The next thing I want to introduce you to is a little bottle called reagent number 1, reagent number 1, 6 oz bottle, one thing I want to warn you about that stuff, be careful with it. It contains a little bit of raw hydrogen peroxide, and a number of other elements, and it's very expensive. In buying it wholesale, we pay \$1,000 a gallon and take a case at a time in order to get it. So it is expensive, so be careful with it. It's cost about pretty close to 25 cents a drop. And it's the most expensive element that you will have. All this is furnished. We furnish you with all these things right on. Now these products are manufactured by Lamotte Chemical Company. But they will not sell to doctors and I'll tell you why. Because they were the largest manufacturers of laboratory testing supplies for hospitals for about 45 to 50 years. And the HEW has put such terrific restrictions on them because of some

other companies now, that has more political power, until they have quit manufacturing anything that they could partly could possibly be said to be used for diagnostic purposes. And when they found out that I was going to use this to teach to doctors they refused to supply it to me unless they put it under my labels. So I had no choice but to do it. I'm not set using it or recommending it for diagnostic purposes. What you do with it is your own business. I have no scruples on that. But we will supply the materials for you.

The next thing you'll notice are three little bottles of materials and these little bottles and these are reagents for measuring pH and that's enough to say about them at this time.

In this particular bottle right here, it is a sulfuric acid base, but it has a substance in it that is different from sulfuric acid because you can use straight sulfuric acid and you won't get any coloring. But this one has something added to it and I don't even know what it is that will give you a color whenever you are measuring urea.

This one in this bottle also is for measuring undigested proteins urea.

Urea is undigested protein in nitrogen form.

Then you will notice that you have two sets of little wells. These are porcelain plates with six wells in each one. You also have some pipettes. You also have six little cups, I believe, six little cups. Those you would use with these two solutions of measuring proteins. You will also notice that you have some paper towels. This is to put them down when you are working. Be sure you've got two or three sections of paper towels. Under where you are working so you will not damage the tables or anything. I'll try to get some plastic when we get to that to put down for safety sake.

You'll also notice that you have a box of baking soda on the table. In case if you get any of this sulfuric acid on your hand accidentally just put some soda on it and it will neutralize it instantaneously. You'll also notice that you have a graduated cylinder there, that round tube, a graduated cylinder. This graduated cylinder is used with the Solu Bridge in measuring the ionization of the urine. Also I see they forgot to bring the specimen bottles in but I'll see that they're in this afternoon. They're here? Good. Then everyone of you should have specimen bottles. You get two specimen bottles each. This is the equipment.

Is there any of the equipment now that I haven't told you about? Sir?

**Student:** You missed the electrode.

**Reams:** Yeah the electrode is the part that goes onto your Solu Bridge. Are they here? Okay they should be here. Those Solu Bridges are anywhere from \$75 to

\$95 apiece. Just that thing your holding in your hand. If it ever gets to where it has a dim light, send it back to me and I will clean it for you. And it's a \$20 charge on it. The thing to do, to keep it from it, is when you put it down into the solution, don't leave it don't leave it there overnight. Don't leave it there an hour. If you you'll just put it down, read it take it right out and rinse it off it'll probably last ten years without ever needing cleaning, but if you put it down in that urine and leave it, it's going to corrode and then it has to be cleaned. And I'll clean one for \$20 for you. It's just about what it would cost us to take that thing apart and get it out and clean it. But it'll be just as good as new again. I've been using some now for twenty years and I only had to clean them one time. So I've got one or two, it's about time to clean them again, but I like get two or three cleaned at one time instead of just cleaning one. All of these are brand new ones and they should last for years.

Now you also have some rubbing alcohol, this afternoon you'll have some little jars something like this, and you put this rubbing alcohol in these jars, and this is what you clean your pipettes with. You'll use for cleaning your pipettes.

There's also by tomorrow, I'll have some caps made with some pipettes to fit these various bottles, so that you will leave the pipette in the bottle, while you are using it. Take it out, clean it, wash it with soda thoroughly, and put the caps back on. One thing to doing it, you're ever timing it by air, be sure all of this is, the caps are very, very tight. Be also sure that their wrapped in plastic zip lock bags or something of that order, and also surrounded by cotton material because in flight, these have a tendency to leak. Are there any other questions of things that I haven't covered? Let's take a break.

If you look on your schedule you'll see that our subject now is energy. If you will look on the board, you will see the definitions for the chemical equations for energy. You'll notice that E, one of them has a 1 up by it, and one of them doesn't. The E that has the 1 by it is heat energy. And the one that doesn't have the 1 by it is electrical energy. The equation on the board is Einstein's theory. And he figured that once he put the first thing out that we would have enough knowledge about the subject if we understood the first on how to write the other. Now if energy equals matter converted to heat and electricity by the way of fire, you burn it and then it becomes heat or electricity. This is what it means.

Heat equals matter converted to either electrical or heat energy. Now yet if not this energy then matter is the substance converted from energy and electricity. Then electricity is the substance between heat and matter. There's nothing difficult about that equation. It's self-explanatory. It makes a complete evolutionary cycle. And this is the exact kind of energy that we are talking about. We are talking about heat energy; we are talking about electrical energy; and we are talking about

matter. And we will find out, or study something about the conversion of this energy as the course goes through. This is what we are studying about. And this is the basic primary foundation of the calculation of energy. We will not study probably the calculation of energy until this afternoon. We will then start to learn how to figure energy or why and wherefore of it. The reason that we are doing this before we start with these instruments is so that when you start with the instruments you have a little bit of an idea of what's happening. We could start right off on the instruments and I think if you survived that you wouldn't know which way you were going, at least I would, so I'm trying to arrange this course so that each step calls for the next one.

I've already mentioned about the law and diagnosis, and I'm going to mention it again. This course is not a diagnostic course. It is to measure energy. The purpose of it is to determine what diet will be the most beneficial to any individual. Diagnosis is a guess limited by experience and this is an analysis. There is no reason why everyone shouldn't come up with the same answer as far as the amount of energy, reserved energy anyone has. You will be shown a chart of energy from zero to 100% tomorrow and then you will be able when you finish these tests to place anyone's energy levels on these charts by their readings.

But before we go any farther into this thing of energy I have discovered that we need to learn some definitions of the meaning of certain words that we are going to be using here in order to know what we're talking about. Is everyone through with this equation? Copied it?

**Student:** You said back that one was ----- and one was electrical and heat.

**Reams:** This is the electrical. This one is the heat energy. This is heat energy. This is electrical energy. Okay?

**Student:** C is what?

**Reams:** Conversion.

Let's get onto some definitions now. I don't need to write these definitions. I'm going to give them to you verbally. And I will need the blackboard in a little while later. But let's look into some meanings of words, and we're going to be placing quite a few words and quite a few definitions all the way through.

**Malignant:** Now the word malignant, simply means moving at a very rapid rate. When I use the word malignant at any time, it means that anything that's moving at a very rapid rate.

**Organic:** The word organic simply means any substance containing carbon. That's all I mean when I say organic.

**Protein:** When I say proteins, I'm referring to nitrogen converted to protein by multiplying the nitrogen by 6.4. Nitrogen can be converted to protein by multiplying the nitrogen by 6.4. Proteins can be converted to nitrogen by dividing the proteins by 6.4.

**Hormone:** A hormone is a living cell.

**Enzyme:** An enzyme is a product of a living cell or a vitamin.

**Vitamin:** A vitamin and an enzyme is the same thing, only when we think of vitamin's we think of concentrated enzymes.

**Calcium:** Anytime I use the word calcium I will probably be using it in its plural form.

**Ion:** An Ion is the center of, center unit, or units of energy within any molecule. An Ion is the center unit or units within any molecule, within any molecule. An Ion can be either negative or a positive.

**Anion:** An anion is always a negative force. A single anion equals one Milhaus unit of energy. An Anion has variable amounts of energy, anywhere between 1 and 499 Milhaus units and still be one Anion.

**Cation:** A cation is always a positive force. A single cation contains 500 Milhaus units of energy. A cation has variable amounts of energy. A cation may contain anywhere from 500 to 999 Milhaus Units of energy and still be one cation.

**Electron:** An electron is the outer shell of any molecule. An electron can be either negative or a positive.

**Milhaus Unit:** *A Milhaus Unit, just MH, spelled out M-I-L-H-A-U-S*, or just write MH, a single Milhaus Unit of energy is the smallest amount of energy that can be measured.

**Student:** unintelligible

**Reams:** No. It's not 1,000. It's 999. If it's 1,000 you got something different. [regarding a cation].

Now, I'm going to put here on the board some things to help you understand this. I have explained it to you in words, so now I'm going to put something up here on the board to help you understand it.

For instance, we still got an anion like a negative. I'll try to stand as far this way as possible. And this is the outer shell. Now this is a single atom of hydrogen. We're

going to take hydrogen, because it's a simple, it's this simple atom, one negative and one positive. When the anion is in the center, and the cation is on the outside, the electron rotates counter clockwise. This is very important in the study of energy. You are going to have to know it. And I would advise you to memorize this thing that I'm giving you now. It's about the only part of the course that you are going need to memorize is what I am giving you right now, okay? But you are going to need to memorize that or else you are going to become confused as you go through the course. Memorize it. Try to have it memorized by tomorrow.

Now this is a cation. Now an anion molecule would be like this. It rotates clockwise. This is an anion. Anything I need to make clear about this right now? These are possible of chemistry. You'll find them in most books. This is not anything new you were given.

Now an isotope is any molecule in which the negative and positive where the ion and the electron can change places, turn itself wrong side about, turn about with no apparent reason except the line of greatest pull. An isotope are those that turn themselves inside out and they will follow the line of greatest electrical pull. This is very important, if you miss it, you're going to get in trouble later. Okay?

**Student:** ... anytime the plus and minus change places they become an anion or a cation.

**Reams:** That's right. It's an isotope element. It is an isotope element.

Now this would be one atom of hydrogen. One atom of hydrogen just one anion and one cation equals one atom of hydrogen. This is the beginning of figuring of energy. Anytime you have one anion and one cation it is the beginning of figuring of energy and it equals one molecule of hydrogen.

**Student:** Now are those both a molecule of hydrogen?

**Reams:** This is the anion and this is the cation, okay? No, this is the cation and this is the anion. Whenever the

**Student:** (not clear)

**Reams:** Sir?

**Student:** (not clear)

**Reams:** Yes.

**Student:** (not clear)

**Reams:** Yes. Yes, one of them can be either an anion or an alkaline substance. (more garble)

**Reams:** This is an atom of hydrogen and this is an atom of hydrogen, each one. It's two different molecules but each one is hydrogen. This is hydrogen and this is hydrogen. Hydrogen is an isotope. Okay? In other words, it can be either one. It can be either negative or positive. Now.

**Student:** Hydrogen? Did you say?

**Reams:** It is. It is. Well can be and is, is the same thing. I mean if you change one you can change it. According to the less the pull of gravity or the greatest electrical magnetism, it'll pull toward that stage.

### **Unlearning some things that we've learned**

Now let's take oxygen. And this is about the simple as we can make it. Now over here I'm going to make up oxygen. Here's where confusion starts. This is the beginning of confusion. Don't think that it isn't. Now you were taught, now right here we are going to begin unlearning some things that we've learned. It's something that about drove me insane for about three years until I was taught how to figure energy. Even after I got my Doctors degree from Michigan State University, I couldn't figure energy. And I went to private teachers who were people in the field practicing, doing the job for industry. And they taught me how and I'm teaching you now what they taught me.

You were taught that an atom of Oxygen, this is Oxygen here, O-x-y-g-e-n. Has six electrons and six protons right? You were taught that. It's not so. It's got one anion and sixteen electrons. And if you ever tried to figure energy in that other way system, you'll fall flat on your nose. You'll fall flat on, now let's suppose now, I'm going to prove what I'm saying. Let's suppose that it did have six, I'm just taking this for argument's sake, suppose it did have six anions and six cations. What would the ratio be? One to one wouldn't it?

**Reams to a helper:** Behind me. Behind me.

**Reams:** And we were taught that and it's still in the books. Our kids are still being taught wrong in school and they can't figure energy because they want them to be technicians for some big outfit. This is what our kids are being trained for. And you won't get to know the difference in these unless you get some private teacher or some college professor that's trying to get fired and teach you this in your second years of college.

Now this is the principle of figuring energy. Now Nitrogen would be 14. 1 and 14. Potassium would be 1, on the Potassium it would be over here. Potassium would

have a cation for its center and all of it's electrons would be anions, and it would be 1 and 39, 1 – 39.

**Student:** What'd you say before Potassium?

**Reams:** Potassium, yeah.

**Student:** What's before? One of the elements.

**Reams:** Oxygen. Oxygen.

**Student:** One question.

**Reams:** Ah, beg your pardon, Nitrogen. Nitrogen is 14. Oxygen is 16.

**Student:** Yeah, okay.

**Reams:** Yes.

**Student:** Oxygen sitting better than some?

**Reams:** Same kind of deal. It's the same. Same pattern.

Iron would be this would be 1 and 55. And manganese would be 1 and 54. So, look at your book and go through it. From there on you can go by yourself.

Student: (unclear)

Reams: 1 and 39, only the positive (cation) would be in the middle of Potassium. Calcium would be 43. Yes?

Student: What number is the atomic weight you see there? (sounds like)

Reams: Yes. Yes that's what atomic weight means.

Student: All the rest, Iron, Manganese, negative ...

Reams: Yes. There's three, no, Potassium, Calcium, and Chlorine.

**Rule: All molecules are the same size under the same temperature and the same pressure**

For instance, the greater the number of electrons in a specific space, the greater the specific gravity. It varies from, here's a rule you might memorize. All molecules are the same size under the same temperature and the same pressure. (Avogadro's Law). If that wasn't true, there wouldn't be any such thing as specific gravity. All molecules are the same size under the same temperature and same pressure.

I'm teaching you the facts that you can figure on today, not to talk about what's in the book and this is where we begin to deviate from what you've learned in the book, and if you don't know it this way, you will never learn to figure energy. Is there anything now that's not clear so that I can erase the board?

**Student:** (garbled)

**Reams:** That's right. This is just the beginning.

Any one of these subjects that we have on this chart could very well be a course covering a semester. And I am just hitting the high points but I think you will be able to use a lot of it when you finish.

Now I'm going to give you the equation for perfect health now. This is the equation for perfect health. This is the carbohydrates between one and two percent. Let me write that a little larger. We get that much out of them and I'll write the rest of them and I'll write down here. This is here. Be sure that line is drawn straight. If it's drawn at an angle, it means something else. This is the equation for perfect health.

**Student:** Now the saline, is that the level of test for you?

**Reams:** Saline. No. This is the only S right here. This is all new here.

**Student:** That pH, is that 6.40?

**Reams:** 6.40 over 6.40.

### **Mathematical proof of the test equation**

Did you read mathematical proof yet? It tells you how this came about, this equation came about. It's with you, with your papers there. It tells you how this came into existence. The mathematical proof is on the back of your Urea, I mean on the back of you're a ...

**Student:** Do we have sodium there on the bottom of the ---

**Reams:** No. This is not sodium. This is saliva, saliva. This is saliva.

**Student:** Is that saline .....?

## **6-7C – C is hundred, that's hundred Milhaus Units**

**Reams:** Saline, yes, Saline.

6 to 7, that's hundred (6-7C). Hundred, that's hundred Milhaus Units. You measure that in Milhaus units. You are measuring that in Milhaus Units.

**Student:** Is what that C is there?

**Reams:** C means hundred. It's the Roman numeral for hundred.

Anytime you want to convert the sugar, the carbohydrate to the allopathic chart, multiply this by 20 and it will give you your average parts per million or per gram of blood or the milligrams.

**Student:** Multiply what thing?

**Reams:** The percentage. Multiply your percentage by 20. And this converts this to your allopathic chart in milligrams or parts per million.

This is perfect. All this is perfect. Now, if this was absolutely perfect here, absolutely, you are going to be amazed at how many times you find this one, 1.5. That is perfect, and that is absolutely perfect. It should stay right on 1.5 regardless of what you eat, or drink, or anything else. Your pancreas should be operating automatically. And when it's operating automatically, it will handle everything you put in and still leave this at 1.5 with very little variation. You hear people talking about afraid to eat carbohydrates, because they gain weight. They'll never gain weight until this number is above 2% or 40. You will not gain weight until on your allopathic chart, 40. In other words, that number has got to be above 40 before you gain weight.

**Student:** That's in Milhaus units effectively?

**Reams:** That's a percentage. This is a percentage. You're getting a percentage of the allopathic chart in parts per million of carbohydrate per gram of blood. This is your average. It may vary about a second. In order to explain the allopathic chart to you, 20 to 40 would be normal on the allopathic chart. But they cannot call you under the code of ethics by the American Medical Association, they cannot call anyone a diabetic until it reaches 120 on the allopathic chart. They should start anytime this leaves 40 on their chart or 2 on this chart and begin to bring that back to normal. That's when you begin losing (weight).

**Tape 1 – Side B**

Below 1 (brix) is tenths. You follow me? It's tenths. Your dealing in tenths and not a whole number.

**Student:** How do you get whole number out of there too?

**Reams:** Right. No, no. I'm below 20 on their scale. Then you're dealing in tenths. When you get below 20 on their scale, then you are dealing in tenths then. You see it's very confusing, most doctors don't even know that. But as you work with this chart here, we're going to show you how to work with this one. If you want to convert it to the other for the patients information, you may do it. But this is the one you are going to start working for. Now when this one gets down to 6 tenths (.6 brix), people begin to get groggy and comatose, and at 4 (.4 brix) they are quite comatose, and down to 2 (.2 brix) they are completely blacked out. But it's the easiest thing in the world if a person ever does that, ever gets low, put some honey on their tongue and they'll come back in one minute. Yes?

**Student:** So you're at 1 (1 brix), 1% multiply it by 20, at 20x it's the same as having 100 mg on a standard blood test.

**Reams:** No. 20.

Student: 20?

Reams: Yes.

Student: Question.

Reams: Yes.

Student: How is that pathology read on our standard at 1.0?

Reams: It's read as 20 on the allopathic chart.

Student: Question.

Reams: Yes.

Student: (voice too low)

Reams: Yes.

Student: (voice too low)

Reams: Twenty. You multiply it (brix) by twenty. I just said you multiply it (brix) by 20.

**Student:** I understand. 20 is 1% on your chart.

**Reams:** Right. Right.

**Student:** And now in the allopathic chart they've got a lot of numbers still on the lower limits of the, that seems nuts, .....

**Reams:** That's in tenths, as you get below that you're in tenths then.

**Student:** Then you're not in whole numbers.

**Reams:** That's right, you're not in whole numbers at all. You're in tenths then.

**Student:** What about when the allopathic chart says you're normal but maybe you are 110?

**Reams:** I know what this meant, it's as wrong as they can get.

**Student:** Okay.

**Reames:** Their just as wrong as they can get.

**Student:** 80 to 105, what would that be?

**Reams:** Well, let's see, if it be 40 on, it would be 4 here. 4 here would be 80. Well let me explain something, the allopathic chart is not made by figuring energy, it's made by taking 1,000 people from a given area and finding out where most of those people whether or not they were or not, looked like they were in good health. That's the way it's made. They don't have any rhyme or reason. This is made on energy and nothing but energy. Okay? Any question about the carbohydrates before we go to another part?

**Student:** (garbled, but talking about 20 and 30 or so on the allopathic chart.)

**Reams:** Right 20 to 40 is normal. Now 30 would be perfect on that chart. Yet perfect a 90 count. Yes.

**Student:** That means perfect blood sugar really.

**Reams:** Right.

**Student:** That's 30 on their chart.

**Reams:** That's right. It would be 30 on their chart. That's above tenths now. Yes?

**Student:** In this equation then you have, urine, saliva, and saline which is in the urine, and then albumin and Urea, five times.

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**Reams:** Right. Any questions now about this before we leave that carbohydrate follow up we are coming back to it this afternoon.

**Student:** Maybe it's better we figure this then go back and prove it.

**Reams:** Yes. These are principles that when they're ... I know that tonight you are going to be just about as confused as you can get. Just about as confused. Memorize this part I told you to memorize. Get that down so we will know exactly what we are talking about because my definition and yours may be different and unless you know exactly what I mean, we can be miles apart at the end of the week. But you are going to be about as confused as you get today, at the end of the day. But tomorrow when you begin to put it on instruments, it's going to make sense. It's going to begin to put itself together. But in the midst of confusion there's progress. Turn your pages back.

Now this pH 6.40 is normal. 6.40 for saliva and 6.40 for urine. The top number is the urine. 6.40 now ...

**Student:** 6 point 4 is 6.40.

**Reams:** Well I use the 40 because many times I'll have a 5 or a 8 or a 2 or something.

**Student:** 6.40

**Reams:** Yeah, I generally put 0. You can shorten it to 6 point 4 to shorten it if you want to. Now on this test, I would suggest believe me, it's from years of experience, that you let the figures alone. Many, many times you are going to find them the same. But there is that one here yonder there that will critically upset you terrifically, and you could lose a patient. So stick to these known system of measuring. Because this will not pick up the metallic substances in it. Now tell you where you're missing, a person is living in an area of high mineral content in the water of iron, or aluminum, and so forth, it will not give you the same reading. And don't, listen I'm advising you from hard years of experience, I have never had it happen to me, but I've seen cases where it could have happened to me by using a pH meter. Use the solutions and in that they are safe. They're safe and you know what you're doing, because this solution will not pick up the metallic content. It will only measure the amount of actually acetic acids and other kind of acids and it will let the minerals alone.

**Student:** Can I ask you a question.

**Reams:** Yes.

**Student:** They were testing this way and they were taking minerals and vitamins. I had them discontinue that for a few days before I got to run the test.

**Reams:** No sir. No sir. Do not change the diet at all. You change it for them. You do it for them. You tell them what to do. That's what you got to do. You don't care what they're doing. It don't make a difference when they come in the first time. Then you tell them what you want to do to get this equation.

**Student:** Saline then normally at 6% under actually Milhaus units.

**Reams:** Right. That's done of the Solu Bridge. Now just remember this measures all kinds of salts. 6C to 7C, this measures all kinds of salts. All kinds of salts.

**Student:** We're perfect between the 6 and 7 hundred?

**Reams:** No. No. Just so it's between 6 and 7 on some of them. Just so it's between 6 and 7. Now, on the albumin.

**Student:** Excuse me just a minute.

**Reams:** Yes.

**Student:** That's in your determination you ran him every hour and a person has a certain steady outputting, it would not vary, correct?

**Reams:** It varies a little bit. Your pattern remains the same. We'll get into that a bit later. We'll get into your patterns. That's where we are going to run into some confusion and then I will not be able to straighten you all out this time, but as you come back each time, you'll know a little more about it. Yes?

**Student:** ----- after eating how much should the saliva change?

**Reams:** It shouldn't change anything. It shouldn't change and if it does change, something is wrong with your body chemistry. It shouldn't change any. What you eat should not change these numbers. If your body is functioning normally, it will not change these numbers to, oh over 1/10<sup>th</sup> of a, just a tiny little bunch. And if it's perfect, it won't change. Now I'll find people that's in their 90's and over 100 that has this reading. And they eat what they please and their healthy. They get up and go and they are just wonderful people to be around. And they're not senile. You wouldn't think they were over 60 or 70. One person that I have is nearly 80 now. You wouldn't think he was a day over 45 or 46. He has these numbers, just like this. And they don't deviate. I've tested them every hour and they stay there. Whenever there's a quick change in numbers because of what you're eating, there's a loss of energy somewhere.

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Albumin. Albumin it works, albumin you have to draw on per 100 pounds of weight, you should have 40,000 parts per million per 100 pounds of weight, provided that that person is drinking half his weight in water converted to ounces.

**Student:** Say that again. How much per measure of ---- ?

**Reams:** A person should have 40,000 parts per million or milligrams of dead cells passing from his body for each 100 pounds of weight. Or you can figure it out on any fraction in number of pounds, if he is drinking half his weight converted to ounces in pure water a day. Now if a person weighs 100 pounds, just say it's 48 ounces because it's a quart and a half of water. You see 130 pounds you'd say 1-2 quarts of water, 64 ounces or something like that. I mean, make it in quarts, because people can understand it in that terms, rather than getting right down to the exact itty bitty ounce. Work it in quarts and then they can understand it. Okay?

**Student:** Now say that again. He's drinking water and half his weight.

**Reams:** 32 ounces. Sir?

**Student:** If he weighs 200 pounds he has to drink 100 ounces of water.

**Reams:** 96. That's three quarts. That is three quarts if he weighs 200 pounds.

**Student:** That's 90% minimum.

**Reams:** That's normal and the way he should take it every day. I have people come into my office and boast, "I never drink water." My thought is this, or my question is, "What do you think you are, a Volkswagen?" Because we are not air cooled engines. We're water cooled. And if we wash out these dead cells, we've got to drink that much water to keep these dead cells going out. If you don't, they accumulate, and accumulate, and there's pains, pains, pains.

**Students:** garbled speech...

**Reams:** Leave it as my car desires it, but they get it whether they need it or not. Whether they desire it or not. The thing about it is. Whenever you start get the testing, and you test yourself and others, we are going to see, into the a short limb why, it'll show up. Okay? It would show up. Now...

**Student:** So a man weighing 200 ounces roughly, should be drinking 100 oz of water.

**Reams:** 96 ounces, we say 3 quarts, yes. Any question right here?

Alright now, we'll take urea. Now this top number is nitrate nitrogen. And this is ammoniacal, let me just check and see if I am correct, I think I am. That's right, that is correct. This top number is nitrate nitrogen and this is ammoniacal nitrogen here. This is ammoniacal nitrogen. This is the dangerous one. This is the dangerous one.

**Student:** The nitrate.

**Reams:** Yes. The nitrate. Now, you are going to be able to use this one quicker, faster, and with greater success than any other one number that you have, on this chart, because this one by itself, does mean one thing. Anytime that that urea numbers increase above a total of 6, now you add those two together. Be sure to keep that line straight. It is not a fraction. This is differential chemistry and keep that line straight because it means it's not a fraction. Then in differential math too, anytime that number rises it means that proteins are not digesting properly. Right here, I'm going to give you some rules to thoroughly remember, thoroughly remember.

One of the great things that Chiropractors are neglecting right now, or the parents are neglecting, and the Chiropractors are not really making a great guide for his children. Children, and one of the first things that you will find in many, many children, is that the parents feed them meat. No child should have any meats until they are 12 years old. Their digestive systems are not made for it. Now you are going to find this when you begin to run the tests. I'm giving you the experience, the facts that I have found over years, and years, and years. That a child cannot digest meats period. And that means fish, that means beef, any kind of meat, they should not have it until they are 12 years old. This means broth, hamburgers, or anything else that has got meat in it. Just don't give it to them. So many people say to me about their baby 1 year old or two years old, "My baby won't eat meats." I say, "Well praise the Lord, the kid has more sense than you have." Because he doesn't like it. He doesn't need it. He doesn't want it. That kid's instincts have not been disturbed by taste yet, it has not been upset by taste. And the kid still goes by instincts and he doesn't like it and he doesn't want it and he shouldn't have it.

Also, the children should not have nuts or nut butters, until the child is eight years old. Now if you want your child to be sick and you want to keep him in a doctor's office all the time, you just break these rules and nature will accommodate you by having your children sick. Now there are some nuts the children may have. Boiled peanuts with very little salt in them, they may have. They may have coconut and Pineola nut. Those three they may have. And so many parents say, "Well why can't they have peanut butters ground up very, very fine?" The finest particle of peanut butter would be about the size of a football when compared with one atom of hydrogen at zero degrees centigrade temperature and 100 pounds of pressure as

compared with the size that it must be when assimilated by the human body. So peanut butter is just as hard for the child to digest because it takes more of it and not only that, when everything else fails to constipate a child, try peanut butter. It works because they can't digest it. It forms a gum. It sticks to the lining of the digestive track and especially the colon. Now these things remember. And it will just help you get a lot of children into your office and keep a lot of children healthy. Don't worry there's always enough sick ones that you'll have plenty to do.

Now also, children many times need, as you well know, without me telling you, adjustments of their spinal column, because of weakness or the way the mother carries the child. Many times they carry a child on their hip. The child's bent over and one side of the spinal column is pressed to the other, or one hip will be shorter than another, you know all this without me telling you. Children need adjustments too, but they also need a diet to help them stay healthy. These things I'm telling you, effect the protein of the child's diet.

When you can understand what protein does, you can stop all pectoris heart attacks. There is no other cause for pectoris heart attacks than a high urea. That is the only cause. A high urea causes pectoris heart attacks. It is also one of the greatest causes of crib deaths that there is, crib deaths, infants. It is also the greatest cause, I'll say 98% of the time of children dropping dead on the school ground because they have a high, high urea, way up dangerously.

Now this urea has zones in this urea reading. We may as well take up this zones right at this time, because I'm explaining this chart and what it does to you, for you, against you.

**Student:** You said those two numbers and two added together be what?

**Reams:** Six. Now, the higher these numbers go, the more tired the person is. Now, let's just jump right up to the top. What would happen if you had a 15 over 15? The patient would be dead. You've got a dead patient on your hands.

I'll tell you something that happened a year ago, a little over a year ago. We had just come into to the area and began testing a lot of people. And my baby daughter was up here helping me. She was doing my analysis at that time. She was raised in the laboratory. And two people came in and she was running the tests and when she got to the urea she dashed into my office as white as a sheet. Scared to death almost, she said daddy we got two dead people here walking around. And I said, "Well what do you mean honey?" She said that the urea is 45. I said, "Honey let me see that analysis." I told her it was 45. I said, "Honey all they've done is bring some hog urine up here to see if they could fool us." They have. I said, "Just send them in and I'll talk with them." So when they came on in I said, "Now gentlemen, this report says you're eating too much slop. You're wallowing in the mud and you

can't stay healthy if you do that." And it tickled them to death. They hadn't fooled us at all. You can't fool these numbers. And if you find that these numbers are above 15, there's a mistake somewhere. There is a mistake that is from the patient.

You'll also find patients that want a good number and they'll put water in their specimen so they'll have a good reading. But, very, very quickly, you'll pick up the water just like you snapped your fingers. Don't mean a thing. You can pick up the one that dilutes their system. I've had one or two people that just bring me back a sample of water. Nothing, you can't even get a reading on it. Don't get excited if somebody tries to fool you, they can't. They can't fool you. It's impossible, but just expect this when you start to use this. Some smart-aleck is going to try to catch you off the guard, but he's only fooling himself, he's not fooling you. Now, let's move this down just a little bit. Just a little bit.

Student: Excuse me Doc, that bottom number, the higher it is the more fatigued?

Reams: The total of it.

Student: The total.

Reams: The total. The total of it. Let's say this one is a 6 and this one is a 10. This is a better reading than if it was turned around the other way. [must be 10/6]. In other words, the patient wouldn't be as tired this way at the end of the day. Anytime the total gets above 12, anytime this total here gets above 12, the person becomes more tired, more tired, more tired all the time. They're tired in the morning. They're tired at night. And when you are running this test on children, especially the ones from 8 to 16 and you find it 18 or 20, your total, you tell that child, you might say, "Do you hate to get up in the morning?" "Oh, yes. I do. I'm just so tired. Momma thinks I'm lazy." "Does your mother think you're lazy?" You'll see them nod their head a little bit. They don't want to speak against their mother. Then you say to the mother folk, "This child is not lazy. Their tired. Their not digesting their proteins." And then you make a diet for them. And then you make a child [friend] for you for life. Believe me, that child, you're her doctor then, or you're his doctor. You've got that child because at home, too many has been accused of being lazy, and when he's not lazy at all.

Also right at this same point in adults, I want to make a statement. This is contrary to what you've been taught. That overweight causes heart attacks. Don't you believe it, it's not true, it's not true. What causes heart attacks in pectoris heart attacks is the urea too high and you find it just as high on skinny folks as you do on fat folks. Just as high.

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Now, let's take one's here. I'm going to take one's here. I'm going to put a number on here and I'm just putting this like this, 10 over 10. I'm just putting this 10 over 10 to make it normally. It doesn't matter how you reach 20. It doesn't matter how you reach it or why you get there or anything else, just so it's 20. That is the beginning of the zone where pectoris heart attacks can take place. This is the edge of the zone where pectoris heart attacks take place.

Now, here also is where these numbers begin to harmonize. Suppose that you had a 10/10 [urea] here and that you had an 8 over here. And suppose that you had an 8.40 here and maybe you had a 2200 here or 3000.

8 8.40/X 30C 4m 10/10

The heart attack is very near, very close to it, very close, I mean you are probably less than a year away. But let's suppose that this, I want to change this just a little bit now. And I'll put say 15 here.

8 8.40/X 30C 4m 15/10

Now you've got 25. 24 to 26 is the zone where major heart attacks take place. Gentlemen, Doctors, there are no exceptions to this rule. Remember this. There are no exceptions. This doesn't mean that it's going to happen in the next few minutes because that depends upon the reserve energy that you'll find in these other numbers. Okay? Now let's do a little something different here. It doesn't matter how you reach that 25. But anywhere from 24 to 26, it is the zone for major heart attacks. It means the person will survive it. 20 to 24 is a minor heart attack. 26 to 29.9, if you want to measure it that accurately, is fatal heart attacks. There are fatal heart attacks. Just once, just one and it follows through.

Now, why is this? Now we're studying why and wherefore. That would be a fatal heart attack there. Any summary that gets 26 or more would be a fatal heart attack. Now why? We'll all study why this is. Undigested proteins causes the heart to beat harder each time and harder, and harder, and harder. Now here's one thing that you can do with your stethoscope. Whenever you are listening to a heart beat on a stethoscope, and you are hearing it beat harder than it should, it means a high urea. High urea is what it means. Now when a heartbeat is normal on a 3 over 3 it's going to be like a kitty walking upon eggs or something. And that's the way it should be normal. But if it's any below that, then it's too weak. If it's real weak and hardly visible [audible], then you're going to find this number below 6.

**Student:** Not getting enough protein ---- ?

**Reams:** If it's below 6, they are not getting enough, they are not digesting it properly. They're not digesting it.

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Here's another thing that you're going to find. You are going to find just as many vegetarians ill as you do the people who eat the clean meats, because they overeat starches, they overeat carbohydrates, and so forth, and overeat things. Of course, I'm not against vegetarianism. I'm not against those who eat meat. I'm just making a scientific statement, that's all. At no time would I sit in the seat of judgment against anyone. So, in making statements, all of them are the result of years and years of research in this field.

Now this is the one that can block out pectoris heart attacks. Keep this number below 12, and you'll never have anyone with a pectoris heart attack. This is also one---

**Student:** You mean the two or the two of the 12?

**Reams:** The total. The total. I'm talking about totals. Keep the totals below 12 and you'll never lose a patient with a pectoris heart attack.

Now let's suppose that we have a patient that is in the zone for a major heart attack, or in the fatal zone for a heart attack. The thing you do is this: put that patient to bed as quickly as possible, divide their weight by two, have them drink 4 oz of water until, every half hour, until that number drops to 12. Beginning, suppose it was 26 or 28. Divide that number by 2 and you can generally tell the number of hours that it will take to bring it to 12.

**Student:** Drink how much water?

**Reams:** 4 ounces every half hour. One catch now. There's a catch. It isn't always as smooth as it sounds. You also got to know the sugar content. Suppose they've got a 2 sugar.

2 8.40/X 30C 4m 15/11

Then they are going to have a little bit of fruit, carbohydrates or sweets. If they don't, their sugar level is going to drop too low and you'll have a comatose person on your hands. Don't forget that.

**Student:** So, 2 or 1?

**Reams:** Watch, you are going to have to watch their sugar two. Watch, if it's 1.5 your fully safe. If it's down on 1.5, but actually a beginning. If it's anywhere between 1 and 2 check in 4 hours to see. In other words, you'll have to do a test every 4 hours, but you won't have to do everything. Do this one and this one only. Just these two until it gets to 12. Now for this test, when you do these two tests, this one [brix] and this one [urea], you charge \$12.50. I mean that's the minimum

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to charge for these two tests, because these two [ sugar and urea] compose half of the total. Okay?

**Student:** I missed something on the, just --- on time. What do you think?

**Reams:** I'm not talking about time. I'm talking about cost of materials.

**Student:** I know but you said to divide this number by two to get how many hours.

**Reams:** On how many hours it would take to bring it down to 12. Yes.

**Student:** The total.

**Reams:** Yes.

**Student:** So if that totaled 24 it would take about 12 hours to get them ---?

**Reams:** Right, right, right. Many times, they will say, "Well I can't get off from work." Well, you say, "You are either going to get off from work or you're going to have a heart attack. You've got your choice."

One week, I had five men, you are going to find women too with this. I had five men come in and not anyone of the five knew the other. And what made this week so unusual was that I put four of them to bed at home, drinking the water, and then they had to report back. And when they report back, do not let them drive an automobile. Somebody else must drive them. Do not let them drive an automobile if they are above 25. Do not let them drive an automobile. I mean, I don't care what their age is, they either got to be driven or be put to bed in your office or something, until it gets below 25 to even be able to drive an automobile to go home. And when they come back to see you, don't let them drive an automobile. I'll tell you why in just a few minutes, because it upsets what you are doing. Finish getting this thing down. They need guidance and they've got to be close enough to you that you keep a test to keep this from dropping too low. Because suppose they live 30, 40, or 50 miles away and they call you up and say "My husband is unconscious." Well tell them to put some honey on his tongue right quick. And that's the quickest way to bring them back, because their sugar level's dropped too low. But the thing about it, if they live that far away, put them in a motel right close by. That's where you can do the test systematically.

Now, there's a way to do this and it makes it quite easy. For instance, suppose that they come into your office today at 10 o'clock. I'm going to come back to the timing in just a moment. Suppose they come into your office and you don't want to be getting up all through the night. So, start them at 10 o'clock at night, or 11 o'clock, or 2 o'clock, or 3 o'clock in the morning. And then they'll be at your office

during your office hours and then you can slip them in, and get them in without working a hardship on yourself. Otherwise it can get hard on you. But start them at the hour in the morning and run it clear to them, make it clear. Because some of you will say, "Drink four ounces of water every half hour." And they will take it every 2 when they got home. They forgot what you said every 2 hours. And when they come back, you'll know whether what you say or not, because it's very, very, clear.

Now about these five men, four of them I put to bed, there was a complete change in personality within a 24 hour period, a complete change, all that pressure and everything had gone off of them, and they felt so good, even better than they had in years, and they were not even aware that they had the pressure. One of them, he was tested between 9 and 10 in the morning, and he made all manner of fun of me and he was a 29. He was a 29, is what his reading was and said, "You just want me to go down to your sanatorium and see what." I said, "Fellow, listen, I'm going to try to get you to do it at your own house and come back for tests. You don't even need to be here at all. All you need to do is do what I tell you. Drink the water every half hour and come back." He didn't. He didn't do it. Made all manner of fun out of it. Said I was a quack. I said, "I don't mind being called a quack, because dead ducks can't quack unless they're living. You're not going to be in this condition very long." At 5 o'clock that afternoon, his wife called me crying, "He was pronounced dead on arrival at 2 o'clock in the hospital."

These things are accurate. Believe them. Believe them folks, believe me, because the heart attacks, pectoris, we'll tell you a little later how angina heart attacks can be blocked. There's only really two kinds. Now, there's other things that affect the heart and heart rhythm, but I mean actually cause the heart to spasm and tear up. Is there any question about this now at this stage?

**Student:** I didn't ---- ask you how you were going to control the urea there.

**Reams:** Know by drinking water.

**Student:** Water. Now that I just didn't ---

**Reams:** Oh no, we'll come to that in the diet. We'll come to that in the diet. I'm talking about after he's already there and he's in danger, is in bad danger.

Now you will find too, that these numbers don't move up very fast. You'll find one that's 16 or 18. It moves up very, very, slowly. It don't jump quickly. It moves up slowly but surely, but it can come down timely in a hurry.

**Student:** Ideally like that patient would have distilled water, but any water would be excellent at that time, right?

**Reams:** When they get that way, it don't make any difference. I like distilled water, but when they get that, all I want to do is get it down and get it down quickly.

Now here's a few times that you are going to have a problem with children. Children under 4 years old, you're going to have some problems, and you are going to find some of them in this zone. On infant babies, what you have to do then is give them enemas, one enema after another. Give one enema, and the first thing, they'll practically all come back, the second one most will come, but the third one they will generally stay in. If you can, get them into a baby one inch, if you can. Yes. Okay?

**Student:** Just repeat the enema every half hour or every ---?

**Reams:** Every half hour. Yes. And then you'll get it to stay in.

Also I've been called to patients that were, years ago, I used to make some house calls and I quit it. I had to quit it because of the great demand on me. I've been to patients and then we'd do the test right in their home. And I'll find this number very, very high, and also maybe this one very, very low [sugars] and they were practically comatose. And I don't mean just Senior Citizens, some of them were. But some of them were not. They were dying. They were actually dying. Their lips were already blue and all their doctors were giving them was drugs. Well the first thing we do, put honey on their tongue. We also make a honey enema and a coffee enema. We are going to put coffee in this. A little. Not a whole lot, but a little, and we start giving them enemas and we have brought them back and some of them are still living 20 years later. These were people that was practically dying because of these two conditions.

Now sometimes, remember this one too, this one is very important. Sometimes, the heart won't spasm. It just gets so tired until it will skip so many beats, or have a very irregular rhythm and lose so many beats with no apparent allopathic reason for it doing that until it just automatically stops, cardiac arrest. That's what happens to infant babies in the crib or the cradle, cardiac arrest and therefore if they had really a heart attack, you could pick it up. You could find it in the autopsy, but you can't when the heart just stops for no apparent reason. This little heart gets so tired, it can't beat anymore and it just quits.

**Student:** What's that brix in relation to turning this thing into good brix in that ---?

**Reams:** Well generally it's a high number. I haven't had any problem with breathing unless it was a lung infection or emphysema or TB or something else. I have not found a lack of oxygen when this was the cause. This was the cause. The reason I'm stressing this one so much today is it is the one thing that you are going

to do the most with the quickest. And believe me, this works. And any time that it's above normal, let's say 10. Then, begin to make their diet so that the proteins will drop to normal. And many times you can do that by drinking water. The normal amount of water that anyone should drink on any given day, is their weight divided by two.

Now when people are very ill have them to drink the water, 4 ounces, every half hour for every hour and not a whole lot at one time. Just a little bit. And this will help them gain their strength faster than trying to drink a whole lot of it at one time. And they may just have to sip on it, sip, sip, sip.

Suppose you find a person with high blood sugar. Very high blood sugar. Very high urea. That's the easiest kind to handle, I mean very easy. You don't have to worry about having a comatose patient on your hands. You can have them only come back 8 or 10 hours later and their still alright. They're very easy to handle.

Any problem now about this perfect health equation?

Common Sense + 1.5 6.4/6.4 6-7C .04M 3/3 = Perfect Health.

The whole course is based on this perfect health equation and how far away you are from perfect health.

**Student:** It includes these five numbers.

**Reams:** That's right.

There's thirteen things that this thing denotes here. There's thirteen different angles that you're going to be able to figure on all together in this course. But this is the one that we were supposed to cover up to this time according to our chart here.

Now I'm going to let you ask questions, if you need any about what we are studying. What I mean about a question and answer course, is that way out questions. Questions that doesn't pertain to the course. Yes?

**Student:** The test up here, here on pH, that's for the saliva.

**Reams:** No. That's just urine, the urea.

**Student:** You said that the blood would show those things that, will I hope the blood shows ---- tissues ---- seems like the blood show what's in the urine too.

**Reams:** It shows it, but it changes so rapidly, you can't keep up with it.

**Student:** Changes too rapidly.

**Reams:** Right. Right.

**Student:** It's too highly a buffered solution.

**Reams:** Right. You can't keep up with it in the blood. If you try, it'll drive you to the bug house. I tried it. And I quit just before I got to the bug house.

**Student:** You were saying something about whether the nitrate the nitrogen was elevated or the ammonia nitrogen was elevated at the start of 6 o'clock. Which is better to have higher or lower?

**Reams:** It's better to have higher, if it has to be, ammoniacal nitrogen than nitrate nitrogen.

I rather ran up on that while I was in college. I didn't have the money in the early years of college to stay in the dollar tour, so I went to the farm and made my way through in the garden. Depression, money was very scarce. Anybody making a dollar a day was considered good wages in those days. 50 cents was a lot more common. A college professor decided he'd go on a natural food diet even in those years and he grew an all organic garden for it, all organic foods for him. And also, he bought two female goats to have goat milk. As was recorded in the bible, but the goats, first thing they do they ate his wife's clothes off the line, and the next thing they do, he had a new 1925 or 26 sedan Ford and they got up on top of it. It had a canvas top on it and their legs went through. Then they crawled down inside and ate up the seat. Through the top and then he was through with the goats and he brought them out to us. I got through some of my early years of college with goat milk. But we were putting out some nitrate fertilizer on some plants we were growing for market. Cabbage plants, tomato plants, just when they come out of the ground we had a awful heavy rain. Washed our nitrogen out and before my roommate and I knew it, one of the goats had got into the nitrous of soda and ate all he wanted. He was a very dead goat the next morning. So I did an autopsy on him and I found out he had a heart attack, that his heart was torn up. So this was the key that led me on to what excessive urea would do in nitrate form.

[Note: Years later Dr Reams with Dr Manthei taught in the Anatomy 1 class that when nitrate dropped lower than the ammonia, new cells were not being made.]

**Student:** What about the relationship of nitrate being used as a preservatives aggravating ---?

**Reams:** Well, in your cold cut meats and so forth, if you are absolutely healthy, they won't hurt you because your system will throw it out. But if you have any weakness or your urea is too high, it should not be used what so ever, not at all. Yes?

**Student:** Not clear, but question about Einstein's equation.

**Reams:** The first E with a mark up at the top is  $MC^2$  Converted by fire to electrical energy and heat energy. Then you want to know your electrical energy, then you convert matter to heat energy. It's the same principle only you do it under vacuum under a process of enzymes and natural processes using, in other words like a very, very, slow process like a log decaying out in the forest, on a very slow process. Then if you want to know the matter, then that's not a natural phenomenon by the process of the Biological Theory of Ionization.

**Student:** When you go through  $M=E_1 * EC^2$  and that converts into  $E=M * E_1C^2$  I do not understand how you do that mathematically.

**Reams:** All I can tell you is those are mathematical laws that I did not make.

**Student:** Then you should according to normal algebraic mathematics, you should never assert this type function.  $M = E_1 * EC^2$  . If you pull the E out of that you should have  $E = M/(E_1 * C^2)$ .

**Reams:** Yes, that isn't accomplished with energy therefore. This is the theory by which we will do it later. This is actually what happens. This is the phenomenon of what is happening now. Do you understand? In other words, we are not figuring on the degrees of heat. Yes, it's the philosophy of the phenomenon. This is actually what takes place. We haven't gone into it yet, the degrees of energy, we'll start on that this afternoon in figuring out the energy and the math of it. This is the phenomenon that takes place under these circumstances. Do you understand? We haven't started on the math yet. This is only the phenomenon. Of how matter is made, how electricity is derived from matter, and how heat is derived from matter, and how matter is derived from electricity and heat, and so forth. This is only the map by which it will be done. And we haven't started on the math of it yet. Sir, we'll come to it, but we just haven't got there yet. Dr. Reams is laughing. It's a good question though. Yes?

**Student:** unintelligible.

**Reams:** Speak a little louder. I didn't hear you.

**Student:** What is the mechanism that the elevated urea precipitates a heart attack? What is that mechanism that works?

**Reams:** How does a high urea cause a heart attack?

**Student:** Right. What is actually happening to precipitate ...?

**Reams:** It causes the heart to beat harder each time. It's forcing the heart. It's beating hundreds of times harder each time. You can just hear it just about knock your ear out sometime how loud the heart is beating in the stethoscope.

(Reams and student talking at the same time)

**Student:** --- toxic substances.

**Reams:** She's mighty wavy..... It is toxic. Yes sir. Oh yes. Oh yes, it is toxic, yes. Yes it is. Also, while I'm thinking about that, on your refractometer, the darker – the reasoning is as you look through your refractometer, the higher the acid. That's just a little... don't really mean anything. But generally, the darker, the blacker the reading, the higher the acid. That's just a little, a little tell tale things that you can learn as you go through this at one layers out the other.

**Student:** That's in the sugar reading.

**Reams:** Yes, carbohydrate. While we are on this subject too, a person that has high blood sugar it matters little in most cases, where the sugar comes from. You will find some people can digest one kind of sugar better than another, one kind of carbohydrate. It also might be interesting to know that the sugar tolerance test is only 50% accurate, because some people can digest one kind of sugar and the can't another.

**Student:** That's why they get so many false 90 readings.

**Reams:** Right. Right exactly.

**Student:** When you use the word sugar or carbohydrate there or starches, you use them interchangeably you aren't differentiating this is from fruit, or this is from ....

**Reams:** No. No. Not as little.

**Student:** unintelligible

**Reams:** I know, when I do, we'll explain to those few. Any question up to this point? It's time to go to lunch.

**Tape 2 – Side A**

There is no difference. Why do we need two words? But here is an author who is qualified, that's Dr. Graham. Who has written a book on the cytology diagnosis of cancer. [The Cytologic Diagnosis of Cancer, Graham, Ruth M.] And he makes a clear distinction between carcinoma and cancer. It is a book that everyone in the healing arts should have. It's a very valuable book because it deals with every phase of cancer and also carcinoma. Now the main distinction that he makes in this, that the breaking down of the dna and rna of the cell is the beginning of the loss of energy which is the beginning of disease. He does not term it cancer until it forms a core or until a cell is completely dead. And it is very valuable, and he also distinguishes the difference very plainly in cancer that is malignant or a carcinoma that is malignant. You can have malignant carcinoma without malignant cancer.

So it is very valuable to know whether you're dealing with a core or with a mass of scattered cells throughout the system. You will see some of the effects of this as we figure and calculate energy as we go along. If anyone needs more information, this book is here on my desk, the publisher and so forth.

**Student:** It doesn't become cancer until the mass is formed. Is that it?

**Reams:** Well, until the whole cell is decayed. The whole cell must be decayed. If anyone is anywhere near healthy at all, nature will throw out the cell before it becomes cancerous. Whenever the cell begins to lose too much energy nature will throw it out and put a new cell in its place. Did you realize that God never repairs a damaged cell? He's not in the second hand business. He always puts a brand new cell in its place. We are all made out of brand new parts. Not a second hand cell in us. We're made brand new and every cell in our bodies should be exchanged, I'm speaking about adults now, every six months.

There's no theorem that every seven years or proverb. When that proverb was made, the average length of life was 39 years. This was made about 75 years ago. It might be interesting just as a matter of thought, to know that a baby chick changes every cell in its body every three days, every three days.

**Student:** I read that every cell in the body was replaced every eleven months.

**Reams:** Well it may be, but it's taking too long and you're growing old too fast. I'm talking about to be in perfect health. I'm talking about to maintain perfect health. Yes?

**Student:** I was under the impression that nerve cells divide. They form so many neurons and that's it.

**Reams:** Well ...

**Student:** That's true then there isn't.... [rather faint]

**Reams:** That isn't true. It isn't true, no. No. They are replaced. They must be replaced. There's a whole lot yet to learn how God does it. We don't understand exactly. How He can throw out a brain cell and put another brain cell in without affecting our memory but He does it. There's a whole lot we don't know.

For instance, the liver manufactures about six billion different enzymes to keep us in perfect health. And at any time the liver's manufactured 85% of that number we should be in perfect health. And I'll tell you why. When they're infant babies, they're in one division of cells. And as we come to a little boy and little girl age, we're into a different number. And as we grow, we come into different phases of growth which different numbers of cells come in. But any time the liver is functioning 85% you should be in perfect health. I just wanted to bring this up before we started to get into this math of anions and cations.

I mentioned to you this morning how anions and cations energy is calculated, but were going to study a little bit more about those things and I want to keep introducing subjects ahead of actually what is listed here in order to give you the repetition. They tell me that good teachers repeat often until we learn. They also tell me that when a teacher repeats a lot, it's a sign of old age. They tell me that there's three signs of old age. An absent mindedness or forgetfulness is one of them. I don't remember the other two. (laughter)

So let's get into this anions and cation energy now. Let me look at this as how it's really written.... It is written ..... that's like a Milhaus unit is written .... Milhaus units that's just a variable. In your Milhaus units of energy. A Milhaus unit of energy is so small that it cannot be divided, it comes in wholes and is in its singular form. It comes in wholes. It's kind of like filling up a tub with marbles and you can't divide the marble. You have whole marbles. Or it's kind of like having a pencil. You might have a pencil, we'll say, that's six inches long, and you may break that pencil in times six times and have six pencils or a yard long. Each is a pencil. But this variable Milhaus units of energy, actually a single one is the smallest amount of energy that God ever created that has ever been measured by man. There's nothing any smaller. And after that there is nothingness.

And everything that is made is made out of anions and cations and nothing is made that is not made from those. Those are the basic substance of all mater, all air, all elements. The only thing that we don't know is what the spirit is made of and probably that's made out of them also, we don't know. There's one thing that these instruments do not measure that you have here, is God's mercy, God's grace. You're going to find things occasionally that are unbelievable, and yet they still exist, but it still doesn't mean that person is in good health.

You will see people doing things in the measurement of energy is low enough, you do not understand or comprehend how they do it. And the many hours that some people can work and still not ever be tired at all is incomprehensible, unbelievable, but you will see it. There are things that these instruments do not measure. So we see it briefly, but these instruments do not measure the place of God or the mercy of His great existence. They only prove that He's there. Somebody has to run this universe.

Now if you are dealing with any element, and you know that these are the variables from the substances from which they are made, isn't it astronomical to think how many different kinds of anything you can have, and have each one of them absolutely pure. Do you realize that with this equation that you could have a hundred billion different kinds of pure water? [H<sub>2</sub>O] Absolutely pure water. You could have dry water, wet water, heavy water, and all be pure water. Now the same thing can be said of any substance any element, many, many different kinds of it. So what I'm trying to get across here is that the calculation of energy does not have to be measured down to the anion, but it helps you to comprehend and understand why some of this phenomena is going to take place and how it takes place. And without understanding this it is quite confusing. Is there a question before we take up elementary energy? We are going to start on elementary energy in just a moment.

**Student:** Something about the air conditioner coming over the microphone onto the tape recording... do we need it?

**Reams:** It will get pretty hot in here if we don't have it.

Now were going to begin to deal with elementary energy. And when you're dealing with elementary energy, you are dealing with energy that is derived from a single substance, or substances, or like substances, not necessarily elements. Let's begin to study something about animals that eat out of the same pasture all the time. They live on, for instance, cattle or horses, they live on grass all the time, just grass. And then as we begin to feed those animals other foods. Then we are feeding them a compound energy, a variable energy. But as long as their feeding and feeding one thing, you're dealing with elemental energy. A baby that is drinking it's mother's milk or drinking from just a bottle with one formula is elemental energy. But the moment the child begins to eat orange juice, or grape juice, or fruits, or any other food. Then this energy becomes compound. It's very easy to calculate the errors made in elementary energy, but when you begin to start on compound energy, then there has got to be another factor known. And I'm going to put that factor on the board this time. I'll put that factor on the board at this time.

I'm going to leave this up here, and this deals with frequency, frequency. Man kind, I'm just going to say Man. This means all the human race, lives on a frequency of 24. Well the males, let me write it exactly like it is. We just say 24, but it's a little different than that. I'm going to write it exactly accurate. .000024 Now females, this is the male, females then well same number of zero's but a .000026. This is the frequency that they live upon. Frequency means number of wave lengths per second the same as you would find in any dictionary.

Now horses live on a frequency of 44 (.00044) for the male horse and 46 (.00046). Dogs live on a frequency of 38 (.00038) for the male and 40 (.00040) for the female. Citrus trees live on a frequency of, a log frequency of 9 (.009).

A dog only has three zero's and so does a horse, only have three zero's.

**Student:** A cat.

**Reams:** I have it down at home. I'd have to look that up. I don't have it down from memory.

**Student:** What did you say a female dog was?

**Reams:** Female dog is 40 (.00040).

**Student:** A female horse is 46?

**Reams:** Yes. Yes. Now we know the frequency of some 16,000 kinds and a quarter of a million species but I don't keep all those in my mind. They are available, but it's really not important as far as this course is concerned. I only give you this because it has a lot to do with the compound energy because this will give you a little idea of how our food is digested. As I said this morning, we do not live off of the food we eat, we live from the energy of the food that we eat.

Understanding now, that the anion and cation particles of energy are actually what we live from. If you could see particles of energy blown up to be the size of jig saw pipes they would have similar characteristics. However, there are not as many patterns. There are only nine different patterns in which all of nature is made. Nine as far as I know. As far as science knows there's only nine different patterns that are made up of what, I don't understand exactly is this, if there's sixteen theorems in geometry, then why don't we have 16 patterns? But at the present moment, we only know nine, I'll say it like that. We only know nine of these patterns.

We live on the same principle by which silver plating, nickel plating, chromium plating, is conducted in a silver plating tank or a chromium plating tank, exactly the same theory. Exactly the same principle. And right here, I know what some of you

are thinking now, not that I'm a mind reader, but I just had the question asked so many times before. If everyone lives on the same frequency for the males and females, then why don't we all look alike? There's a reason for that. Under the frequency we have micronage. This is where we begin to deal with compound energy now, micronage. The micronage is the way that nature stacks the anions and cation substances together to make the frequency, to make the frequency.

**Student:** Is there an element or energy element in micronage?

**Reams:** Huh? It's element. It's elementary, it's elementary. This is frequency right here. This is frequency. Micronage is the breaking down of the food we eat into anion and cation particles to form micronage patterns. This is where we learn of the compound patterns of structure.

Under micronage we have mili-micronage. And under that we have mili-mili-micronage. Now, mili-micronage is the pattern of the electron in orbit that determines color, heat resistance, and so forth.

Mili-mili-micronage is identity. No two blades of grass are alike. There is no two things of any kind that are alike. And one of the greatest phenomenon that I've ever stumbled on or come on in research was that you can cremate anything to an ash and it does not change the pattern of these micronage numbers. They still remain constant. They remain constant even in the pure ash form. They still remain constant. And it is through this system that the FBI can analyze ashes from a burned building and tell you the race, the number of people that were burned in the building, and so forth, through this very system. And this is very important when you begin to study these energy patterns. Are there any questions at this point?

**Student:** The mili-micronage pattern indicates color?

**Reams:** Color, yes. Color has to do with heat. The darker the color, the greater the heat.

**Student:** unintelligible

**Reams:** Is identity, no two things exactly alike. Identity separates.

When we realize these things as symptom as truth, which you will in time if you haven't already done it. You will know then that there's no such thing as a cure all. That we're going to have to deal with each individual on his own peculiar merits that he has. Did you have a question? Okay. We are dealing with each on his own peculiar merits. Also we will learn by these tests, as we work with them, that no two people will get the same amount of energy from these foods that they eat. Whether it be apples, the same weight, off of the same tree, or whether it be a slice

of whole wheat bread, no two people will get the same amount of energy from these foods. In fact, I have seen, one person with a slice of whole wheat bread, gain energy and another one lose energy over the same identical bread. So therefore, we have already come to the conclusion in the past years that what is food for one person is poison for another because there are many different reasons why that the same food doesn't agree with everybody. But biologically reasoning, it is because of this structure we are studying right here before us now, that makes the difference and what will agree with us and what will not agree with us. What we want to know is, what is truth and what is true what is not true. This is what we are trying to find out. And when we are working with an equation that we know, what perfect is, and any food that will bring that equation back toward perfect, is more perfect than one that would not. So we are on the path of truth, whenever that equation begins to come back to where it's normal. I'm speaking about the perfect health equation that I gave you this morning.

1.5 6.4/6.4 6-7C .04M 3/3

Let's suppose that you have a patient that has a body chemistry about as far out as it can get and still the person keep going, and you gave to them a diet to follow as well as other treatments and things that you deem necessary. And let's suppose that in the third day that that equation was almost perfect, almost. That would not mean that that person was in perfect health. But it does happen sometimes, but it does mean that nature is restoring that person as rapidly as is humanly possible to be restored.

One of the things you must keep in mind, too, that any system that is restoring cells rapidly, is working very hard and that the patient will be tired. They will naturally be tired. And one thing to absolutely keep in mind and that is if the patient is ill, seriously ill or has a serious problem that they are not to do any work at all. I meant minor work, until the energy rises high enough that they can do it without effecting their reserve energy. Unless they do this, no diet is going to take.

If I have a person come into my office, into my lab, and they are seriously ill, I will not give them a diet unless they stop their job, their work, I don't care what it is, how important it is, how many little children they got or anything else. Because no diet will help if they are going to burn up more energy every day than they take in. And you are only fooling yourself and fooling them to try. So, one thing you must do is get them slowed down and that the major content or whole and start to restore that energy.

But this is what we are talking about when we're talking about elemental energy and compound energy, is the many variable ways in which energy can be formed and made. It would be almost foolish to even take the simplest of mathematical

equations right here and try to calculate energy because we are going to do that a little later when we've got more facts at our finger tips. But I'm only showing you here that there exists a place where we can do it.

Now let's study a little farther here. Enzymes are vitamins. They're products of living tissue.

**Student:** Four grams (grams). You say more (over). (not very clear)

**Reams:** Vitamin ---

**Student:** So, are more hormones also?

**Reams:** No, hormones are living cells, and enzymes are products of living cells.

Let's study now, for a little while actually, Vitamin E. Because we are studying energy and vitamin E has an awful lot to do with energy. And vitamin E just does one thing, one major thing to the human anatomy and that is that it thins the blood. It is a blood thinner. People who have thick blood have a high urea reading. And as that blood thins down, the urea goes down. And it is said that vitamin E is a wonderful thing for the heart. It is, because it thins the blood and makes the heart, aids the heart in pumping because the blood isn't so thick. The thicker the blood, the harder the heart has to pump to get it through. Now also, there are bloods that are too thin, and the heart has to pump harder, actually, to get thin blood through as well as it does thick blood.

And the way to thin [thicken] the blood is discontinue vitamin E if you are taking it, and take vitamin K. However, you do not necessarily need vitamin K, because alfalfa sprouts is one of the richest sources in the world and also alfalfa tea. Or the fresh alfalfa made into tea is one of the richest sources of vitamin K in the world and it is excellent for anyone with hemophilia or a bleeder. That will get that under control quicker.

Women, who have a too heavy menstrual flow without the clots of blood, can be aided greatly with alfalfa sprouts and alfalfa tea. But if there are blood clots there, then it means that there are problems that may need greater attention than vitamin E or K will handle.

This next step is on laetrile, Amygdalin or mistletoe shots we get from Germany. We are still dealing in this vitamin energy, things to increase our energy by the use of vitamins. Laetrile makes vitamin C available to your system. I tell you these things so that when you begin to work with these instruments, you will see these things come to pass. Laetrile makes vitamin C available to your system. The blood should carry at least 4,500 micrograms of vitamin C per gram of blood and no-one is ill that has that number. There are no illnesses with people carrying that number.

Illness drops [increases] when vitamin C content and ratio drop below the 4,500 micrograms per gram of blood. A microgram is one part per million. It takes 10,000 parts per million in one gram of blood to be 1%. 10,000 ppm in 1 gram of blood to be 1%. So, if I didn't put this on the board, it might be awful confusing but these numbers I'm giving you here and the numbers on the board make sense. It begins to put tools in your hand to work with.

**Vitamin D.** Vitamin D makes calciums available to your system. Without vitamin D calciums cannot become available to your system.

Vitamin C is one of the most misunderstood vitamins I presume that we have and there's a lot of false things recorded about vitamin C. And that is, it is so dependent upon some other, practically all the other elements it depends upon. Or the other vitamins in elementary form or variable forms. Vitamin C is the vitamin that knits our cells together. It holds them together. It is also called the police part of our system, in that, whenever we have the vitamin C available to our system diseases cannot really get a hold on and strike at us at all. Vitamin C should never be given with the pH of urine below 6.40. It should not be given because it is not available because vitamin C is an acid, is a cation, a cationic substance at the present time. I'm speaking about in tablet form or in liquid form. It should not be given when the pH of the body is below 6.40. You're only aggravating a condition that will cause the loss of energy if it is used very extensively there. Vitamin C is best used whenever the system is 6.40 or above.

You generally will find rose hips and many other forms of vitamin C manufactured synthetically or made into tablet form. But one of the richest sources of vitamin C that you can give whenever the body is below 6.40 and it's the only one that I know of, it's onion soup. It's the richest source of vitamin C in the world, is soup made from onions. This will pick up vitamin C in those people who are not allergic or have an allergy to onions. Some people have an allergy to onions. If it's only a lower bowel or gas, do not pay any attention to it, but if it gives acute indigestion, give it plenty of thought. Are there any questions at this point now in this?

**Student:** You say this form you can give to somebody with a pH lower than 6.40?

**Reams:** Yes, you can.

**Student:** Cooked or uncooked onions?

**Reams:** Cooked, steamed. That is steamed onions.

This is using your enzymes for your elementary and compound energy results. Vitamin D should not be given with a pH over 6.40. Do not give vitamin D to anyone having a pH of 6.40 or over. If you do, it will slow down the entire

digestive process and therefore hinder the vitamins and energy from being available to the persons that are needing it so badly.

**Student:** Which reagent tests ----- ?

**Reams:** No that's the urine. That's the urine.

**Student:** unintelligible.

**Reams:** Vitamin D in "dog" D. No, we are not even going to touch on vitamin B at all because it's a complicated system. You'll just run into more confusion now than ever. About the only rule is people that are overweight do not need vitamin B1 and B2. That's about the only rule I know of in B that you can really stick to when you go to measuring energy. You get into vitamin B and you're going to get into such a terrific chain of events until you're just going to have to work it out the best way you can at this time because it will certainly get you into confusion. Were just not going to touch upon it.

One conclusion to draw here would be that the greater the range in diet, the safer it is. The wider the range in foods, the safer it would be.

One of the richest sources of hormones is cheese. You're eating live hormones when you eat cheeses, butter milk, cottage cheese, those contain and are very rich in live hormones. Also, freshly squeezed juice, freshly out of the fruit, but the hormones that's in the fresh raw juice will die within a four hour period after they are squeezed out.

Wheat that is freshly ground if kept in the refrigerator will time it's hormone for about four days, but every day it becomes less and less. So, wheat at its best, is freshly ground wheat daily. This is also true of dried corn converted to meal or grits.

I am often asked at this point, "What about the eating of white sugar?" Two pounds a year won't hurt anybody. The average consumption of white sugar I saw a few days ago was 156 lbs per capita in the United States. But two pounds of white sugar a year will not hurt anyone. I've never found it to hurt anyone, even a diabetic, a very serious case, providing they stretched it out over enough period of time.

**Student:** Usually where they've done good at a few pounds a year.

**Reams:** Yes. Also, honey is about the same. About 2-3 pounds of honey per year should be sufficient. Most of that should be consumed in the winter time.

Now, you've been told that vitamin C cannot be stored. That's not true. It can be stored. God has placed an oil over our bodies. And that oil holds the vitamin C

within our bodies. And those people that use soap every day of the year and wash every bit of that oil off their bodies are plagued with a cold all through the winter, pneumonia and other things, maladies, illnesses. So try to keep the oil on your body during the winter. If you must wash it off, put it back on with some other natural oil. You can put just a little bit of bath oil in the water and wash it off. If you put a lot of soap in, then it's going to dissolve that oil and your system. And this will also prevent a lot of escape of vitamin C from your body is to keep an oily coat on your skin. In the summer, you sweat and oil comes naturally out, but in the winter time, it doesn't. And therefore a loss of oil on your body is also a loss of vitamin C. When the vitamin C is high enough in your system, even parasites cannot get in, bacteria cannot strike, and you are quite safe and in very good health if you'll keep that vitamin C high enough.

Too much calciums in the body cause the body to be too alkaline. And too much acids in the body cause the body to lose energy because the foods go through in a preserved state and therefore have not released the energy that they should have released while they were being carried through the alimentary and the stomach digestive system.

**Student:** Say I get that reaction, too much ....

**Reams:** Too much acid causes the foods to go through the system undigested. In other words, they do not give up energy.

At this point I'm going to take up lemons and what it does and how to use them effectively. Lemon juice is the only natural hydrochloric acid in all of nature that I know of and I have analyzed over a quarter million different foods from all over the world and this is the only one that I know of is the lemon water.

The liver manufactures a hydrochloric acid also, called bile and in bile there is probably six billion different enzymes that are needed for health or the foundation for them are manufactured by the liver to feed the various glands in our body. And these various glands make certain changes in these respective enzymes which go to different parts of the system. We will see a little bit more about that in just a moment. And all of these are in anionic form, anionic substances. All of the rest of the foods that we eat are cationic.

And I explained to you this morning the difference between anionic and cationic substances. The direction in which the electron travels and as the acids the cations come into contact with the anions energy is given off. It is picked up in these digestive juices and is carried to the various parts of our system. This energy is in, all these energy particles are in nine different patterns that will fit the various organs in our body and if the pattern of energy fits the jigsaw pattern of the particular organ in our body, then it builds a new cell and pushes a old cell out of its

place which as it goes out, gives into the new cell its energy that it had yet in reserve. There's a base exchange of energy there that no man has explained yet. The old cell surrenders it's reserved energy as it leaves to the new cell coming in. At this stage, it would be well ----

**Student:** Can I ask you a question?

**Reams:** Yes.

**Student:** You said calcium and potassium and

**Reams:** Chlorine.

**Student:** chlorine were the only ones that were anionic.

**Reams:** That's right. That's only what's used in our foods.

**Student:** unintelligible

**Reams:** Some substances are more acid than are others. Some foods are more alkaline than others.

**Student:** What did you say about the, you talked about the bile besides the hydrochloric acid, you said something about the bile ....

**Another Student:** Extreme enzymes 6 to 8 enzymes about the liver ....

**Reams:** Yes.

**Student:** unintelligible

**Reams:** Bile, it's called bile.

**Student:** I thought the bile was a like you say the enzymes are carried out in the bile. Is that what you said?

**Reams:** Well the bile contains, well there's good bile and bad bile. And there's both kinds, when it gets stagnant and ferments, then it's bad bile.

**Student:** That's why we should keep our gall bladders strengthened then.

**Reams:** Right exactly when the gall bladder becomes enlarged, the enzymes from the liver, the bile ferments and you're in trouble. And if that begins to ferment and a gas forms in there and that tube is so small it goes out of that duct into the lower intestine there which goes into the stomach. That it crimps and more and more and stretches and stretches and stretches. And this is one of the weak points of this system because when that gall bladder stretches, it's just like a balloon. It has no infection in it. It just stretches like a balloon. It's very difficult to pick up, very

difficult. But you can pick it up and the loss of energy that that gall bladder. I've seen them as big as a two quart container and yet you couldn't find a trace of infection in it even after it was taken out. Once it gets very large, and the weight of the bile pulls it down, there's nothing to do but surgery to come out of there because you cannot get it back. You can't get that bile to flow out and there's no known way to pump it out that I know of to get it back to normal size. It's just one of those situations that surgery is required as far as I know. It's too far, now if it's just stretched a little, there's a whole lot you can do about it, but when it stretches so far that it's got 8 or 12 ounces of weight in it, you've had it as far as that gall bladder is concerned.

**Student:** That thing happen often gall stones?

**Reams:** Gall stones form, we discussed that one this morning. Gall stones. You dissolve gall stones with olive oil.

Now we'll need to study the ratio and proportion of atomic energy as pertaining to human life. We are going to study it from the view point of making a diet to fit the persons problems.

The first thing that you will get into in this testing is, "What is the person's problem?" And in Einstein's theory we are figuring energy as  $E = MC^2$  as converted by fire. But in this system we're using the third one, matter. What matter is we are considering now matter back to matter, instead of matter to energy or matter to electricity. We are considering matter back to matter.

However it is going to go through the form of disintegration into heat and into electrical force. And there is a great process taking place in our stomachs whenever the acids come into contact with the anions, cation particles of food, and they turn into jig saw patterns of energy. Then these particles are cation particles and they are going to travel to another positive pole.

And here we are going to have to unlearn something that we've already learned as a positive backed, probably taken an examination upon it. And you were taught that negative forces attracted positive forces or vice a versa. That is not true. They actually repel each other. Negative repels positive and positive repels negative, because they destroy each other or attempt to break each other down into the anionic and cationic particles when they meet. If they were attracted to each other they would become greater and greater and greater. But if they repel each other they become less and less and less. Now that makes sense to me but I was taught that they attracted each other. They attract each other in such a way as to destroy each other. But not to help each other. Anions are seeking to get back to the place where there's all anions. Cations are seeking to get back to a place that's all cations. If you've ever had any experience with silver plating, nickel

plating, chromium plating or copper plating, you know that the negative pole sends out the electron that picks up the particle of ionized metal that's in the plating tank and takes it to the cationic pole or the positive pole. So, that's what's happening in our system. The liver has taken an anionic substance and mixed it with a cationic substance and therefore it has made into it or released from that substance a cationic particle of food that will find its home in some of our organs, a cation to cation. And there is no other way for it to happen.

It might be interesting to know that this earth turns on cationic rotation. And up above the earth there is the Van Allen belt which is the anionic belt or outer shell that covers this cationic core of the earth.

We could very easily get into theology right here but I'm going to let that alone. This power that's up above, the cations are trying to get back up there. Therefore we walk straight up and if were not for that cations pushing upward we couldn't walk straight up. We wouldn't know which way straight up was. That's why a tree grows straight up. It's because these anions that's in the earth that are least and are grabbed up and are pushed up and that tree follows that line trying to push up back to the anionic force, a force that becomes mature long before it gets there, but it's on the way. And as these clouds pass over the earth, around the earth, they are traveling along on a temperature level, but they are rich in anionic particles that seems to build a fence between that and the cationic earth's surface. And when the atmospheric condition becomes dense enough that the anionic substance in the air touches the cationic substance of the earth, we have lightning. In other words we have a short circuit. We have resistance.

So, it is this same type of energy that we live on, that we thrive on, that brings about life. It brings about breath. It brings about energy of which we operate on. And this is what we are thinking about when we are thinking about the theory of anionic and cationic energy.

Let's study now about the ratio and proportion of atomic energy, the ratio and proportion as pertaining to diet. I'm going to have to go back to the board on this one because it's easier to write than just say it. This is the beginning of our calculus now. This is the beginning of the edge of the calculus. We are just going to smell it. We're not going to get deep into it.

Let's assume for argument sake, not always true, that we are dealing with anions now where we'll say 250 mh Milhaus units. We're dealing with anions with this power. We're assuming that that is the power, it's going to be a great variable, and we are dealing with cations we'll say with a power of 800 mh. We've got to start somewhere with a problem in order to solve this ratio of proportion. This is actually  
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**Tape 2 – Side B**

We are dealing with 250 Milhaus units of energy in our anionic substance and 800 Milhaus units in our cationic substance. Let's take, for instance, we'll just deal with protein alone, just the protein. Now, this morning I told you that protein was only nitrogen. That nitrogen was composed of one anion and 14 cations. Is that correct? That's what I told you. Now, let's multiply this 14 now by 800. Okay. 11,200 is that correct? Now, we're going to have up here with that 11,200, we have only a 1, so we got 11,201 Milhaus units of energy. Any question about this at this point?

**Student:** How come you said 1 instead of 250 for the nitrogen cations for just the nitrogen protein?

**Reams:** Well, this is 250 right here, this one anion, it was 250 Milhaus units of energy. Do you see what I'm speaking about? 250. We get them in a whole unit. We've a whole anion there. You could very easily add the 250 to it if you want to do it that way and have 11,550 [11,450]. This is such a small variable, it don't make any difference. If an airplane was flying five miles from the earth, and the shadow passed right over you and you measured the shadow, how much larger would the shadow be than the airplane? It would be the same size. It wouldn't make any difference. The sun should probably wouldn't make any difference. Do you follow me? So when you get out in here it's a small variable. It doesn't matter if it's 200, or 500 or even 1,000. It matters very little. But you're dealing in whole units. This is what matters. This is the part that matters, the whole unit, the whole cation, the whole anion. Now, what I'm showing you how to figure this energy by the loss of energy.

Now, you have the theory there on your ratio and proportion of atomic energy is the difference between your anionic substances and the cationic substance. Now here's the confusing part. Here is the confusing part. That your body uses more calciums than all other substance and it's an anion. So now then, you need to multiply 39, multiply 39, I beg your pardon, that's potassium, that's potassium. 43, multiply 43 by the 250. You have 250. Multiply 43 by 250.

**Student:** unintelligible

**Reams:** Calcium. Calcium, it's in any other substance.

**Student:** Is it anionic?

**Reams:** Yes. Calcium is an anionic substance. Yes.

**Student:** You said that anions have a signature --- positive charge?

**Reams:** No sir. Calcium is a negative charge. Calcium is an anionic substance. Calcium, potassium and chlorine are anionic substances. The electron travels clockwise in those elements.

Now, here's the problem I'm going to give you to calculate. Our bodies are cationic, and what would be, let's assume that we're dealing, well let's take an easy problem, a 100 grams of anything. It doesn't matter what it is. A hundred grams are, well let's take a hundred grams of calcium. I just used a hundred because it's one and two zeros. Now how much, what would the ration of cations be for converting that to a pH of 7? How many cations would you have to have? This is a thinker for you, I'll tell you in a few moments. Yes?

**Student:** How many grams? What was the question?

Reams: A pH of 7. What would the ratio be to give you a pH of 7? No. Not 1 to 1. The ratio is 1 to 5, now figure it. This is the rule, 1 to 5. In other words, 1 cation will displace 500 anions. That would still be a pH of 7. See that wasn't hard was it?

**Student:** 1 cation would replace 500 anions?

**Reams:** And still have a pH of 7. Yes.

Student: I'm really lost.

Reams: Lost you. The rule is 1 to 5. In your singles and follow through pretty much. Doesn't matter if it was there, but this is near enough. This is variable. Even at 250 and 800 it's almost exactly 1 to 5. There'll be a small, very small difference in ratio. But it's 1 to 5 is the rule there figuring energy.

In other words, if you've got, let's take an easy example, let's get some bigger numbers and see how it comes out. Suppose that you have one ton of pure white sand. Now pure white sand has a pH of 7, is it not? Alright, let's take and add to that 50 pounds of 100% calcium substance. 50 pounds. And then we'll add 1 pound of sulfur, flowers of sulfur. We got a ratio of 1 to 5 right there in this equation. And the pH would still be 7. One part sulfur to five parts of calcium. Sir?

**Student:** What's the objective here besides the pH?

**Reams:** We're starting out why the pH is where it is. Because the pH is what determines our energy. The higher the pH the less energy we have. The lower the pH that gets us below the range in which we can accept the energy that it gives us. It gives it to us too fast.

**Student:** I think where you lost me, which product was organized here, you go back to the cation is acid. Right?

**Reams:** The cations on the board.

**Student:** What I get from that situation is you cast out the situation that's round in search of this.

Reams: The rule is 1 to 5. The rule is 1 to 5 always, there's no exception to that rule in figuring energy, 1 to 5 with a pH of 7 between the anions and cations. That is it's broadest sense. Now it does have variables. Don't misunderstand me.

Suppose this anion here was only 1 and this cation was 499. Do you see the variable? But I just gave you a problem here about a 1 to 5 ratio, to calculate on. But suppose you had 1 anion with only 1 Milhaus unit and you only had one cation with 499 Milhaus units, you'd still have a ratio of 1 to 5. Right? The ratio would still be 1 to 5 figuring your energy, or 500 if you want to say it definite. Convert it to log and just use the 5 and drop your zero's. The energy ratio will come out the same in the end.

Student: There is always 1 unit of energy in an anion and 5 --- of energy in a ---

Reams: That's the minimums. That's the minimums. No, it's variable. It's a variable. It's certainly variable. But don't worry, you're dealing with such small particles here that a few aren't going to make any difference. What I'm trying to get across to you is when you get into these tests this is going to make sense to you. But I told you this morning that you were going to be just about as confused as you can get by night, this is because it will not make sense until you begin to put it on the test and see for yourself. Then you'll be able to get a picture of what's happening. But if you don't have this in mind, you will not know what's happening whenever you get your reading. You will not know why it's there. The fact that the reading is there is not important, but the cause for it to be there is very important. We are working here on the energy that causes it to be where it's going to be. Do you see what we are driving at? The cause it's there.

For instance, if you go to the store and you buy something for 50 cents, you give the lady a dollar, you know you're going to get 50 cents back. Cause and effect. Base exchange. You give me so much and I get so much. And this is it, this is the way nature works.

Let's study proteins right in here in this ratio. Just what do proteins do for your system? We're going to come back to this problem, but we're going to figure it out with the protein in a few moments, rather than most any element. Just what do proteins do to your system? Of course it's building blocks and vitamin B, that's

right but just how did it do it? Just what causes it to be building blocks? What makes them a building block?

**Student:** Nitrogen changing it rather than it breaks down.

**Reams:** It's a nitrogen chain that breaks down, but just how did it do it? Let's say it that way. How did it do it?

**Student:** Base igniter check.

**Reams:** All that nitrogen is to your system or to any part of biological life is electrolyte. And no cell can exist without electrolyte. It is the electrolyte that holds the substance together. It is the electrolyte, nothing else in the world, except the electrolyte. And if it was not for the nitrogen, the nerves could not take the electrical charges from the brain to the various organs of the body. And therefore, if it were not for the electrolyte within the cell, the nitrogen itself, it could not receive the message. It is the vital part of holding our systems in contact with a central station to keep us living. It is electrolyte that distributes equally the messages that come from part of our mind.

Unless there was a little bit of, unless there was a very small amount of protein in every anion and cation that we consume in our foods, for which it joined in similar compound form when we eat them but break down to elementary form as they become available, we'd starve to death, we'd cease to exist. Any question right here? I see you quite confused right here. If you ask a question it will help me make it clearer. Yes?

**Student:** In the previous problem you were saying to add 50 lbs of calcium and then only 1 pound of sulfur?

**Reams:** That's right.

**Student:** Yet the ratio is 1 to 5?

**Reams:** Yes. You got a pH of 7. How come it'll to come up on that to start with

**Student:** unintelligible

**Reams:** That's right. You go back her to your cationic powers. That's where you're missing it. You're missing it in your cationic powers and not in your pounds of substance. How come they didn't come upon to this form of figuring energy. They so put so much literature and things about the importance of pH in the soil and therefore they didn't tell us why or what caused the pH to be where it was. Sometimes you'd have a pH just where you wanted and have an abundant crop. Sometimes it would be the poorest crop in the country and anywhere near. I figured then and many years ago that you can have many different ratios between

your energy and your pH and still have the same pH. So I took a ton of pure white sand and I kept adding sulfur until I got my pH of 7. And this was the answer. I got 1 pound of sulfur and 50 lbs of lime and I got a pH of 7. I put it into a fertilizer mixer and turned it for 12 hours. I come up with a pH of 7. So this is how come it's annoying that it isn't a ratio in arithmetic. It's a ratio back to your cationic and anionic energy here.

**Student:** Okay now, if I wanted to, here we have a --- with calcium. We have a pH of 7. I want to displace the pH of that where the acid side.

**Reams:** That's a gram.

**Student:** I'm going to add more cation supplements. This is hairy. I don't think we are understanding.

**Reams:** Well I misunderstand your question perfectly.

**Student:** Well here you say that one cation will displace 500 anions on page 7.

**Reams:** That's right.

**Student:** That's a lot of move towards a pH of 6.4 okay.

**Reams:** Yes.

**Student:** I'd like to see the mathematics ----

**Reams:** We'll come to that later when we get onto the instruments.

**Student:** We just have to understand here right now that one cation displaces 500 anions.

**Reams:** That's right. That's right. We'll come to that later when the instruments come in. That's true, but we drop the zero's. You just drop the zero's there because it's just 1:5. Just drop your zero's. Because you are dealing in articles of energy so small it just isn't important. I mean it isn't important because they're so small. You just use the 1:5 and your perfectly safe. Just drop your zero's. Forget about it or else you're going to get into such a long equation you won't know when you get the answer. Be fairly confused, but whenever you get into actually dealing with your substance at all, it's a lot easier to take these readings off of these instruments and then say you can correct this by doing thus and so, thus and so, and thus and so. Okay? And the cause and effect of what each element does upon the system. It's much easier, but right here, all I'm trying to do is to explain to you the theory of it, of how it originates, and if we can get this across, I think it will be well worth while.

It's time to take a break anyways.

One of the reasons that so many of these little decimal numerals way out in the billion form ah, millionth form is not too important is because of the variable amounts of nutrient in foods.

One of the things that I wanted to do when I was in my early years of college was to be a medical doctor and I took pre-med. And I could not get into medical college because you had to sign up at birth or buy your way in and it was impossible so I went into studying nutrition as a dietitian at the university of Wisconsin. And one of the things that disgusted me with the course the first semester was this: that I could see through the whole thing. All you would know when you got through was a lot diet, a bland diet, and when it wasn't, and to count calories. That's all it really amounted to.

When they recommended food they had no idea what so ever of the nutrient value of the food. They didn't know whether the beans had  $\frac{1}{2}$  of 1% sugar, or whether they had 5 to 7% sugar, and they cared less. They didn't make any sense to me at all.

So then I in turn start over to the Agriculture department to teach the farmers how to put the nutrient into the crops that they grew so that the dietitians could get more benefit out of the foods that was produced. And I thought when we did that that the farmer would cut a path to my door. Well he didn't. The only farmers that paid any attention to it was the one with the Sherriff at the door it couldn't turn or twist. All he wanted was someone to lay the blame on. Well I built a business that lasted 38 years on that and banks and fertilizer companies and everyone else would call on us to get these people out of their financial rut by building up high quality foods, because the higher the quality of food that you produce, the more pounds you produce per acre. The higher the sugar content, the greater the mineral content. Don't forget that rule. The higher the sugar content, the greater the mineral content. The less time it takes to produce a crop, the greater the mineral content. The longer it takes to produce a crop, the less the mineral content. If nature has to beg and borrow and persuade and trade, and delay time in growing a crop, it is deficient in mineral and lower in sugar.

There is one thing in soils that is very, very important. That makes plant nutrients what they are. First there is the calcium which determines the volume of your crop. The phosphate determines the sugar content of the crop. And there is no exception to that rule anywhere on earth. The potassium determines the size of the fruit and also the caliper of the stalk or stem that it grows upon. And you can go on through the various minerals, but most of the minerals that go into food go into the foods in phosphate form. Phosphate of iron, phosphate of calcium, phosphate of

zinc, and so forth on through the great amount of elements that are in the food. This is where we are talking about ratio and proportion of quantitative and qualitative analysis. This is what we are talking about right now.

Now, whenever you have anyone that you want to put onto a diet, it is very important for you to know the sugar content of the produce that they are using or how you can supplement it to make up for its shortage. We are right now in our dining room having problems of getting high quality food, but we supplement that with honey, black strap molasses, and a number of the condiments, to get back into the foods the nutrient that the farmers should be growing in, putting them in there to start with. Now we, by so doing this, we are getting the desired results from the diet, on the cards, on the tests each day that we expect. So, the ratio and proportion of any element as far as energy is concerned, depends upon the qualitative amount of the sugar that's in the substance.

There's also another substance in many foods to contend with and that's the acid content. Divide the acid into the brix and then you will get the probable available number to start dealing with as a substance to be contended with in diet. A into B, divide A into B there.

**Student:** I test in what?

**Reams:** Into the brix. B-r-i-x, the sugar content. The sugar content is the brix. This is what you will find out with your refractometer when you test the sugar content of food. This you will find the brix. The brix is the percentage of sugar.

**Student:** This gives ...

**Another Student:** B, R, I, T, S or C?

**Reams:** X, X. B, R, I, X. Brix.

**Student:** This gives you, you divide the acid into the brix.

**Reams:** Right.

**Student:** We can do that.

**Reams:** You'll get the potential number for the beginning of dealing with energy there. In other words, you can count on that being what you can count on. For instance, you may have we'll say an acid of 10 and a sugar content of 12. Then you can count on an energy of probably 1.2. Something of that order. A 1.2. That's right a 1.2. You see this is what you are dealing in, you see this is if you've got the maximum. So this is the way you calculate the amount of energy from acid foods. That is a potential. Now, that is in the food. Now, whenever you get the

test from the person and then you use that answer against their alkalinity or acid, it's going to come up with a different story, but we'll get to that by and by.

Whenever you deal in math long enough and get into calculus and differential calculus, you'll be studying then the cause and effect. And in differential calculus it is not necessary to start with any knowns. You can start with all unknowns and make your own pattern. And many times without these tests, we would be starting with all unknowns. We would be diagnosing, but since we have these tests, we are not diagnosing, we are analyzing. We have some facts here to start our problem of differential calculus dealings. We've got some facts to build on. We begin to know some truth about what we're doing. We know whether we have too much sugar, not enough; too much acid, not enough; too much salt, not enough; too much of this and too much of that, and so forth. And these tests indicate many times, well, most every time, other deficiencies that are not even tested. For instance, you can take this test and pick up an iron deficiency when you don't even have a test for iron, because you know what the loss of energy that is caused by the lack of iron. Is it making sense?

Or, for instance, suppose that the person had diarrhea. All the food was passing through just within 30 minutes from the time they eat. It just went straight through. You couldn't stop it long enough to get any nutrient out of it. This would mean that you would have a loss of energy because there is a low digestive process from taking place. Then there's only one place to start and that's what we learnt there, to find out why. It is manufacturing and therefore we give lemon water to get the liver to manufacture more enzymes to begin the digestive process.

Also, sometimes you need to find out where their allergy is. Sometimes it's wheat. Sometimes it's milk. Sometimes it's fish. Sometimes it's alcohol, and on through the list. But when you master this subject, if you ever master it, if you study it long enough, you should master it. You can pick up within a matter of minutes after you get the test, any allergy anyone has, in other words, you can know what's bringing about their loss of energy and their loss of energy is because of an allergy. Nothing more and nothing less.

So you're dealing with here, numbers that in your mind, will paint a picture of what the anatomy looks like insides. This is the ined of calculus, it paints the picture. And it begins back in geometry in making your angles and division and so forth. In geometry you prove your theorem and so forth, but in higher calculus, you will see that the same principles that you learned back there, are now painting pictures of what the biological subject that you're dealing with within that person, anywhere from the top of their head to the bottom of their foot. You had a three dimension picture color of what's taking place in there. Also, at this same stage, calculus and the euclidean factors, it becomes a language to you in which you can commune in

math the same as you would in French, or German, or English, you can commune in those languages.

About ten years ago I set up a food program for the country of Haiti. On top of that was still not living. I was invited by the government to set up a food program. And the agriculture department they were a very fine department of agriculture. For a small country they had an excellent agricultural department. But they did not know the principles of growing food in the solid lime rock. And they spoke French and I spoke English, or tried to. And we could not commune, but we communed in math and now they are now inaugurating the program that I set up in Haiti some ten years ago. So, you can commune in math just as well as you can in English, one you've learned this system.

Now I'll help you to understand you commune more in math than you realize. When you get your bank statement and look at it, it not only speaks at you, sometimes it screams at you. You got a picture what's happening, a cause and effect. So you use numbers a lot more than you imagine. Also, for ladies, they go by numbers an awful lot. Then your wife, or you sent someone, or went to the store. You get a spool of thread, number 1450. You would get a navy blue color and a thread 150 from an inch in diameter. So you see how numbers talk, how they begin to paint pictures and patterns and so forth? And when you are traveling down the highway and you see a sign that if you're hungry, such and such a place is ten miles away. You know about how far and how long it will take you to get there. But when you get there it's closed for the summer. All the fine advertisement and you got so hungry and then they are closed for the summer. One that I came to one time said, "Go in peace for the day." Numbers talk to you a lot more than you'd think. And this is what the raw entity is for is to help us put this on computers so that when you put the numbers in from the lab you will be able to immediately get back the results and also the recommended diet.

And there's lots of ways you can change the diet. There's many different ways to solve a problem. I just borrowed some \$800 worth of books in color on the human anatomy. My daughter here was looking at it and she said it names all the diseases but don't tell you what to do for them. Laughs... don't tell you what to do for them. Well your supposed to go to the drug salesman to tell you what to do for them. All the doctors are supposed to name them. The drug salesman will tell you what to do for them.

But here we learn what foods to eat and which foods to eat for what. The center of the calculus cause and effect. As you begin to deal with these numbers you're going to come to a place that all these numbers look alive to you. And you got your eye on the number, shame on you, shame on you. Look at the reason why that number's there. Why is it there? Look at the cause of it being there. Do not try to

say that if this number is here, the guy's got a sore toe. That the numbers here he's got an earache. Don't try to do it like that. If it's here there is causes and effects. In other words, if that number's a we'll say a 7, you can't say a guy's got a toe ache. Or if it's 10 he's got an earache. It isn't like that. If these numbers are there find out why they are there. There is a reason they are there. And this is what this is about. The ined and the Euclid of calculus applied to biological life. And it is accurate; It is effective; And it works.

Let's go into studying here for a few moments, calciums, because we use more calciums than any more substance. Little babies need more of calcium gluconate than any other form, calcium gluconate. There's exception to this rule, an infant baby with a very high alkaline system. If they drink milk, it'll curdle on their stomach and they can't keep it down and therefore they need a little different diet.

There are babies that are born that are allergic to casein in cow's milk, but can take goats milk. There are babies that are born, they can't even drink goats milk. But I have never seen a baby yet that could not take soy milk, soy milk. I have not seen that fail yet. However, it's a good idea, if you can, to use some in all the milks for a baby. It helps them an awful lot.

Now as a child begins to grow, get's a little older, then you begin to introduce another form of milk. Probably butter milk or cottage cheese. Now the difference in the calcium in sweet milk and in cottage cheese is that in the sweet milk, it's calcium gluconate. And in the butter milk it is calcium lactate. Bacteria there changes the form of the calcium from one kind to another, a bacterial change.

Student: What's cottage cheese?

Reams: Cottage cheese is lactate. Buttermilk is lactate. There's some exceptions to that. You can take sweet milk and cause it to curdle. And still have, you can still have, you see, it can still be done, you can have a cottage cheese with a gluconate if you cause it to curdle quickly by the use of some sort of chemicals. And yet it is - ---- It isn't a very good cottage cheese. It's chalky tasting cheese and so forth.

Also in making yogurt, yogurt is a gluconate, but acidophilus is a lactate.

Student: Maybe acidophilus is yellowing.

Reams: Acid-----

Student: ----- type of bacteria ---

Reams: Yes. It's under bacteria. Yes. Acidophilus is white. And yogurt is Bulgaria bacteria, that's correct. Yes?

Student: It's different than the acidophilus.

Reams: Yes, it is different, it should be. When we first come up to Georgia here I brought some yogurt I got at home and it was not yogurt, it was acidophilus. Which we like acidophilus alright, but when you put yogurt in your mouth and you're expecting yogurt to taste acidophilus it's like you expected ice-cream and put a pickle in your mouth. And it's quite a surprise to you. So I complained to the merchant where we got it, I made a complaint. I said, "We'll keep it. It's alright but the yogurt I bought from you was not yogurt. It was acidophilus." They said, "Well what's the difference." "A major difference." And so they told the agent, the milk man that brought it, he didn't know the difference, but when it got back to the company, they knew the difference. And then they changed it and they labeled it like it should be labeled. But acidophilus is quite acid. It's quite tart. And yogurt is almost a neutral pH. It's very good.

I am often asked this question, "Well, which is better for people? The goat milk or the cow's milk?" If you take the cream off of the cow's milk, many times there isn't any difference as far as the nutrient is concerned. One is about as good as the other. But there are people that are allergic to the casein that's in cow's milk. The goats milk is almost goats milk has very little in it. There's very little fat in goats milk compared with the amount of fat that's in cow's milk.

So whenever you begin to compare foods without evaluating the difference in those foods you can get quite confused. The soymilk has very little fat in it at all, practically none.

This brings us into the question of oils in our diet. The finest kind of oil to use in cooking is to use corn oil. Mazola or most any other, the small amount of preservative in it is practically negligible. You need not worry about it. And the reason that I recommend Mazola, and you will as you work with these diets more and more, it requires less solvent to dissolve in that oil than in any other oil known. However, a little of all the oils are good. But I'm speaking about the main cooking oils. There's an old proverb, "Throw away the frying pan." That proverb was made over a hundred years ago and where they had nothing to cook with except hog fat, pork fat, lard.

Today, we should bring the frying pan back and use our fine vegetable oils because many times today people do not get enough oil in their diet and therefore they're their colons become coated with a plaster material that is very difficult to get out. And anytime that the food lies in the colon and the digestive tract too long a part of it will stick to the wall and if you ever get to the place of which I hope most of you do, that you can actually see the pictures, you will see some of it in there that looks like vulcanized rubber. Black, hard, and some of it ½ inch thick coated onto the lining of the colon. And if you're having the experience of giving colonics you will have seen pieces come out that look like vulcanized rubber or asphalt. And I've

taken the pieces of that that came out as almost as big as your hand, dried it and one of the most amazing things I learned about it, it was almost as hard as cobalt iron. It was hard, very hard whenever it lost its moisture content and when I struck it with a little metal piece, it had a leisure contone to it (continuous tone). That amazed me. And I'm trying to remember at other times it always had a musical pitch to it instead of just a thud. So ---

**Student:** What is it internally?

**Reams:** Carbons. Carbons. Yes. With enough metal in it to give a little tone to it.

**Student:** Well what about, because the diet has thinned in oil.

**Reams:** Yes.

**Student:** What about the pesticides in corn oil and cotton seed oil? If the colon did that it would be -----.

**Reams:** I have yet to see any harm come from them. Most of the pesticides today evaporate in three or four days, that is that are applied on the crops. The one that does the most damage is the 2-4-D and the 2-4-5-D that is applied to soil as weed killers. Now those can do some damage. They have done so much damage to crops. I don't know of any being used in the last two years now at all. And they have been outlawed in many states that they can't use it at all. And I have found cancer tissue that had these pesticides in them. But the only reason that they were in them to start with was that the cell was so damaged, it couldn't repel it. It just stuck there because it was a spongy mass. It just happened to get caught there by accident.

I have found this and I believe you will find that cancer, there's only one cause for it and that is a mineral deficiency. A mineral deficiency. No other cause under the sun for cancer. A mineral deficiency. You can analyze children with these systems and predict years in advance where that cancer will strike if that mineral deficiency continues. And do it accurately. And do it within a time limit in which it will strike. And many other things that you want to be able to predict accurately. Not fortune telling. Not psychic. It should be math that we will be able to enlighten you to be able to do this thing.

And one of the sad things today that we are dealing with and are forgetting about is our children and their diet. Now many children that I find, pre-school age, that are diabetics, way high up, children that's uncontrollable almost, miserable. I had a mother bring and a father one Monday, a number of years ago, bring two boys into my office that wrecked my office in five minutes. And yet they looked perfectly

healthy to look at them. They were not underweight or anything else, but they were miserable. And they had been expelled from three schools and four times the parents had to move. They were not in the fourth school --- I'm just waiting for you it's all right ---

**Student:** And nobody bothered to check?

**Reams:** They were in the fourth school now and were told that this time the children would be sent to the state home for uncontrollable children. And as a means of last resort someone suggested that they bring these two boys to me, nine and twelve years. And when the test was run and brought into me I said to the parents, "These are the most too undernourished children I have seen this year. And the mother spoke up rather haughtily and she said, "That is impossible. We live next door to a hamburger stand and these children have an open account." I said, "You have just verified what I have said. These children are undernourished. That hamburger stand is a filling station. It is not a home. It is not a nourishing place. Now if you want to keep these children home, I'm going to give you a diet or else the state is going to take them and raise them for you. And I want to see you each Monday until these children's diet comes up to normal." And I gave them the diet to follow, meal by meal, what to fix for those children. And the mother did it. And you should have seen the difference in those children in one week. Four weeks later, I dismissed them. The mother had learned how to prepare the foods that I wanted them to. Those children were dressed differently. But the little boy, nine years old, the younger boy said to me, "Doctor, I want to ask you a question." I said, "Alright, I'll try to answer it for you." He said, "Before I went on your diet, my teacher was an old hag, but now she's the sweetest teacher I ever had. How did my diet help my teacher?" A change by a teacher.

So, you know, children's diet brings about behavior problems that little dream about. How much damage we do to our children through ignorance on the diet that we give them. So the cause of that child's behavior is largely dependent upon the diet that child is getting. Cause and effect. Cause and effect. Look at these numbers and look for cause and effect. And if they all get to looking alike to you it's simply because you are looking at the number and not looking at the cause and effect.

There's one other thing that I want to call your attention to that's very important. That a change in one number will often result in a change in all numbers. A change in one will often result in a small change in all numbers. Therefore you can have many patterns and still have the same picture.

Study cause and effect. That is differential calculus. If one thing is here, something else has got to be there. If something else is there, then the combined

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effort means something else. So try to see the cause and effect. Are there any questions now up at this point? Yes?

**Student:** Are you talking about the numbers on the ---

**Reams:** On the card that you are going to learn. Tonight you are going to learn about how to put those numbers on the cards. They have to be put on a certain way. Yes?

**Student:** Doctor Reams I have two questions. At one point earlier in the seminar you mentioned that the possibility of predicting life spans from people that take a test. Is this true?

**Reams:** I'm sorry, I didn't hear what you said.

**Student:** You mentioned that you could predict a person's life span by the figures that are taken from the test. Is that true?

**Reams:** Many times, yes.

**Student:** Many times, not in all cases.

**Reams:** Well, there again, the grace of God comes in. And a change in their pattern.

**Student:** I understand --- get a rough idea.

**Reams:** And then people can change their ways of living.

**Student:** (student talking over Dr Reams) – just figuring available you could get a rough idea of their expected life span, assuming that they continued that way.

**Reams:** Yes, oh yes.

**Student:** Okay, question number two then. Is a, you mentioned about, we were talking about dairy products. Well some of the other nutritionists that I have known, such as Dr. Shelton in Texas, and Melvin Page in St. Petersburg Florida, ---- -- Phil Ellis up at Tarentum Pa, all were strongly against the use of cow's milk because they felt the hormones present there would over stimulate the pituitary gland. And they said that cow's milk is for calves and not for human beings. Dr. Ellis seems to say that no human should use cow's milk for today's ..... Now, I'm in a quandary. What's the true picture?

**Reams:** Well if you'll just read enough health books and do everything everyone of them says, you'll starve to death.

**Student:** Right. I know this, but it's rather confusing.

**Reams:** Yes it is, but what I want you to do is to forget your past and go by your numbers. Now the Bible recommends milk and honey very highly for food. Now some people say that milk is mucus forming. That's not true. There's only one thing that manufactures mucus and that's bacteria. And you can't starve bacteria without starving yourself too. The thing to do is to start on a procedure that work the bacteria that you could eat the things that you need and then still destroy the bacteria. You will learn how to do that as you proceed through the course. But milk contains calcium gluconate and it's a very, very excellent food for most people.

There are people have an allergy to it from infancy, from birth, and as some of them develop it after they're 20, 30, 40, 50 years old, and therefore, they have to let it alone. I do not know any one food that somebody isn't allergic to.

**Student:** The casein in the milk that is tied up doing that?

**Reams:** To some people, yes. The casein is high enough to do damage to them.

**Student:** What's the average that in your ---?

**Reams:** Well, to the average person, within casein you'll find the calciums. That's where you find the calcium. Yes?

**Student:** You mentioned the use of raw honey also. And as honey should ---- there's only about about two pounds per person per year?

**Reams:** Two to three pounds to the statistic. Yes.

**Student:** Per year?

**Reams:** Yes. Yes?

**Student:** Why, what in your opinion is it, that in milk that what are most people are being more constipated drinking milk than they've ever been?

**Reams:** What causes milk to make most people constipated is vitamin D in milk. This we've already covered today. Yet whenever you have too much vitamin D, you're constipated. So, the only reason that it works in that order, is that you're body's too alkaline and you're not taking enough acids to counteract your alkali's. In other words, I have no opinion of it. I go by the numbers. I go by the numbers. Since milk is rich in vitamin D and vitamin D is constipating in over supplied amounts.

**Student:** Rich in Vitamin D, is that nature or the added vitamin D to it?

**Reams:** Both. Natural and the added. Yes?

**Student:** Raw milk, will have the ----- ?

**Reams:** I don't know. I really don't know. I can't tell any difference in the biological tests that we do. They're on there and others, I can't tell any difference. I mean it's energy wise, I'm speaking about. Energy wise, if it were not for pasteurized milk enough bacteria would get into it that it would do us more harm than the pasteurization however if the raw milk is skimmed it makes a lot of difference. I do not recommend that anyone drink the whole milk. Always drink the skimmed milk if it's cow's milk unless you have reasons to do otherwise, scientific reasons. Sir?

**Student:** What would you do with the cream?

**Reams:** Feed it to the cat.

**Student:** What about butter? We'll use butter?

**Reams:** If you figure it may help you, you may use the butter, but the animal butter requires a lot more solvent than any normal butter or margarine. The best margarine to use is a Mazola 100% corn oil margarine. Mazola does make a 100% corn oil and they make one that isn't. Fleishman's makes a 100% corn oil. It's very good. It's one of the easiest to digest, but it requires less solvent. Yes Sir.

**Student:** This Dr. Ellis stated that margarine requires a temperature of 111 degrees to melt or to digest and he said the body cannot it as well as butter.

**Reams:** Well your foods are not digested by temperature my good friend. It's digested by chemical action and not fermentation. The only fermentation that takes place at all is in the lower colon. Is in the colon at least, in which you have aerobic bacteria. You have some in the small intestine, but most of it is in the colon. And you have a small amount of, but I wouldn't call it exactly fermentation. I would call it a base exchange or a release of energy there. Yes?

**Student:** Now, Vitamin D in milk will cause constipation in the intestines ---

**Reams:** If it's alkaline. If it's acid, it would not.

Student: Wouldn't milk become ---- ?

Reams: Not necessarily, if it's healthy in won't it wouldn't.

[end of tape]

**Tape 3 – Side A**

[This starts out describing the colors in the Nitrate nitrogen test. This tape could be out of sequence.]

The tints of blue. The number 1 is just the faintest shade and sometimes it takes a light to reflect to even see it. And sometimes it's a good idea to have a transparent solution and another side to even get the light of the slightest reflection.

While I'm on this subject I want to tell you something about the eyes. In reading these solutions. In order to tell you about this, I'm going to tell you an incident that happened during the military service. When I took an eye examination before I was drafted in, I was told that I was color blind. And I said to the doctor, "You're as crazy as a bed bug. I'm not color blind." I said, "I read colors, tints and shades and I can read them better than you can and I know the numbers of them." "aw" they said, "No. You're color blind." I said, "Alright, you get some thread and I'll tell you the numbers of the thread". And I did, bang, bang, bang, better than they could. Now this chart started them to working on a system wherein that certain eye ranges do not separate colors. In other words, they don't see a pattern. They see every color separate. You know the polka dots and so forth that's on the page which sees the numbers. There are eyesight's that see each color individual, represents them to the brain individual. And there are colors that they all blend together into a pattern. Whenever this, I didn't know the answer to this until after the war.

When I was to an eye specialist, and he had developed the difference between color blindness and these with this very delicate eye range in which it starts at 32, 34, 36, 38, you can see the patterns with these numbers all together, but above 38 they begin to dim out. And at 42 you don't see anything and after then people are considered color blind. But their connector is 44, 46, 48, 50, 52, and 54. And that is the range. Now, these people with a 44, 46, 48, can actually see delicate tints and shades better than those who read those numbers out of the patterns perfectly.

Now if you have an eye range or if you have been considered color blind in the past, you are not really color blind. You're going to have less trouble with these delicate shades than you are if you read those numbers easily. So, I'll pass this along and this does give you a little problem when you first start, but most of the time it won't move you out of the range in which these colors take place.

Number 2 is faint, very faint. Okay. Number 3. Is a delicate shade. A tint, then you come down to a tint. You can definitely tell on the 4 that it's a tint. There'll be no question there. Number 5 is a darker tint. On 6, your going to drop to say that

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a 6 is a very delicate blue. All this you may confuse for a purple. I mean it's so delicate it's difficult to tell which it is. Are you copying this?

**Student:** What's the difference between a 3 and a 6?

**Reams:** 3 is a delicate shade. And this is a delicate blue. There's a difference, there's quite a difference in it. Each step is a little, little bit more prominent. They should have called it this because I want to go along up into the balance of it. Got it all? At this 7 you got a delicate blue and yes you might call this a violet blue. An 8 is a deeper violet. Now the circles begin. At 9 the circles begin. Now this is time for us. Do you have this? Everybody have it?

Now, number 9. Something happens here at number 9. In your reading in your chart there will be a blue circle around like this, around the edge and it will be a light blue in the middle and a darker blue out here. Okay, that's number 9.

**Student:** Dark blue outside huh?

**Reams:** Yes sir. Darker blue outside.

Now were doing 10. The only difference in a nine and a ten, is that this circle is wider on a ten.

**Student:** The outside one?

**Reams:** No, this circle rises. It's a lighter circle. This is a lighter blue in the center.

An 11 is still a wider blue. That circle it's just a wide blue like this.

And a 12. It's about like that.

And a 13, it's just a faintest little spot right here in the middle. It's just a very little faint spot on a 13. In the middle.

Now 14, that's something different. 14 is a navy blue. At the end hall, Navy Blue. Well I would say a light, a lighter navy blue. It's 14.

And 15, 16, 17, and 18 just gets darker and darker and darker and 18 is almost black. Okay? Now it's a very good idea when you get to about 14, to dilute your solution and multiply by two.

Now be careful in that dilution because you can get confused real quickly. What you do then is to take 12 drops of the extract solution out of your cup that you'll concentrate it. Let's see no, it will be 12 drops of the reagent number one and one drop of urine.

**Student:** Start at 6.

**Reams:** That's right. You can do that, there's a short cut that you can take. You can add six more drops to the ---

**Student:** unintelligible.

**Reams:** Well it's kind of hard. It will mess you up a little bit there because you are taking one drop out. Do you see what I mean? You are taking one drop out. The best thing to do at this stage is to add 12 drops and then the 1 drop of urine and then multiply it by two. And then you'll come down into a range and this gives you your top number on your card at the right hand end.

**Student:** Okay we're down at number 14. We've added twelve drops of that ID.

**Reams:** You're at 14, 15, 16, 17, 18, anywhere along in there.

**Student:** Yeah.

**Reams:** Yes?

**Student:** Okay so. Then you add another six drops of solution?

**Reams:** No. The best way is to get another cup. Just start all over. Get another cup.

**Student:** Oh I see. Get a drop of this and add another twelve drops.

**Reams:** Add twelve drops. Instead of six, add twelve. And that way, you multiply by two.

**Student:** Then you multiply these numbers one through nineteen by two?

**Reams:** No. No. No. When you get above fourteen, it's rather difficult to read up to eighteen. You're not going to have very many of them, just one now and then. Then you use twelve drops of reagent number one and one drop of urine. And then read and multiply it by two. It's rare. You don't find too many of those.

**Student and Reams talking at the same time:** Unintelligible.

**Reams:** Sir?

**Student:** You're still talking about the same thing, where your twelve drops of solution of reagent number 1 and one drop of urine.

**Reams:** That's right.

**Student:** And then you multiply by two?

**Reams:** That's right.

**Student:** And then you multiply what by two? Reading the color?

**Reams:** You multiply your reading by two, whatever your number. Yes. Yes. Whatever your number reading is by two.

Suppose there was above we'll say about 12. And then you put twelve drops of reagent number 1 and one drop of urine. You concentrated it for one minute. And then you read it and suppose it came out with a seven reading. And then you multiply this seven by 2 and it's 14. It will be somewhere 7 or 8. It won't be way down low unless you made an error and have some equipment not cleaned or something of that nature. Sometimes just dust on equipment will cause it to give you a false reading.

**Student:** Fingerprints?

**Reams:** Fingerprints, yes.

**Student:** So way down to the 15 to 18 line. You're supposed to be getting 30 to ---?

**Reams:** No. For instance if you got an 18, you'll have the other one be a low number, 4, 5, 7 or a 6. One will be opposite, the other will be lower. If you got a 15 on one reading, you might have a 14 on the other, but once in a while you'll find 14.5 or 14.9. I've seen a few of those. I've just never seen over a half a dozen of those in my whole life. Not very many of that in that range. That is a limited, when I find them on people that is already dead anyway. Get them to hear the gospel of the here and after. To test quickly as we could after they died in the hospital. I was verifying this and immediately upon death we took the sample.

**Student:** So you fit in a 36 on top?

**Reams:** You could not have a 36 on top. No. No. You add those two together and if the total is 30 the patient is dead or you've made a mistake. That is, if it's a human being.

**Student:** If it's not a hog.

**Reams:** Not a hog. No. No. After you get used to them for a while, you can read them up to 18 without doing them over. It takes a little bit of doing to understand it.

Are there any questions about this Urea now? What effect on the human system does Urea have? How does it affect the human system?

**Students:** The heart is a point. Stresses the heart. Heart.

**Reams:** What does it do to the heart?

**Student:** Makes it beat harder.

**Reams:** No, stimulates it, causing the heart to beat harder. And when the heart beats harder what happens to the human system?

**Student:** A lot of illness.

**Reams:** What's that?

**Student:** unintelligible.

**Reams:** Well, sometimes, but not always.

**Student:** Fatigued.

**Reams:** Fatigued, they're tired all the time. That's right. You are tired all the time. That's right, you're more tired. You get anyone 16 or 18 total, and they're tired all the time. They're tired in the morning. They're tired at night. They're never rested. They truly have tired blood. Tired muscles. It doesn't matter how much they rest. Or how long they rest. And that urea stays up there, they are still tired. You cannot get rested, if it stays up, and it stays that high.

**Student:** So we got to learn to get her down, right?

**Reams:** Right. Get it down. There's a number of ways. That's a good question you bring up, next to how to get it down. There's a whole lot of factors involved here but I want to name the most common one and that is cut meat down to twice a week. Down over meat. Very light servings. Cut the meat down to about to about twice a week, the clean meats, and soak the blood out. There's more urea in the blood than there is the meat.

Also people that have eggs every morning of their life. You should cut them down to two twice a week. They're very high in protein and help keep it up.

Discontinue all protein drinks like concentrated proteins and things of that nature. All high protein drinks. I'm talking about these things you buy at a Cala Food store, high protein drinks. Some people think the bigger the number, the better it is.

I want to tell something that happened when Laverne was just a little girl in the first grade. I went to the school one day to pick her up. It was raining very hard that day in the afternoon and she had a beautiful young teacher. And the teacher said to me, "You're a much younger looking man than I thought you were." I said, "What's going on here?" She said, "Oh, we were telling how old our daddy's were

and your daughter didn't know how old you were so she said, "You were a hundred years old." She thought the bigger the number, the better the daddy."

The first grade. And you know that's what so many Americans think today. The bigger the number on the package of mineral content, or vitamin content, the better it is. And if you only knew, many times, that you're only getting ---- I saw the other day at a health food store, powdered milk and the analysis of it. And it looked beautiful. And about six dollars for sixty tablets for nothing in the world but powdered milk, in a health food store. Just the analysis of powdered milk. So (chuckle) know something about what's in something and it will help you to understand what is on the label of the vitamin or mineral that you are buying. It gives you a big insight into what's going on there.

**Student:** Well you didn't finish up on that ---- when you got onto age, that's were you got.

**Reams:** Well these are principles, then you water principles that you followed yesterday, the drinking of water, systematically. We charge \$50 out at the retreat house when we find a person who has a 29 or above 24 reading to bring it down within 24 hours. We charge \$50 because we are running tests every two or three hours and many times every hour until get it below 12. And when it's below 12, he goes home. And I would suggest that you follow the same plan because, anywhere, he could drink 4 ounces of water every half hour until he drinks about half his weight converted to ounces in water. And it will generally bring it down to below 12 and then he could go home and he feels like a different person. But when you run so many tests you are going to have to charge \$50. You can charge more if you want to. Actually, you're saving the guy's life. You have really saved his life.

And bring it down as quickly as possible by drinking water. And no foods while you are bringing it down because the heart is pounding hard enough and as it starts to come down, if you have food in your stomach too, sometime it creates a gas and causes pressure on the heart.

Also at this same stage, many times when you have a person that's tired all the time, they have cold feet, cold hands, or cold all over, chilly. And at that time after you get this down below 12, suggest that they take one teaspoon full of zest tonic in four ounces of water, skim milk, or fruit juice and sip it slowly for a 30 minute period after lunch, after dinner and after supper.

**Student:** ----- how much zest?

**Reams:** One teaspoon full in 4 ounces of fruit juices, or milk, or plain water and sip it slowly over a 30 minute period. And they will be warm before they get it down. When your body temperature is running too low, your food does not digest

normally and this will bring the body temperature up. All people having cold hands and cold feet all the time. Many times people having cold hands and cold feet are not aware of it. So you're going to have to test their hands and feet for a while until you learn to see by the numbers that they have cold feet and cold hands.

**Student:** You said to sip it over one hour?

**Reams:** About 30 minutes.

**Student:** speaking over the top of Reams.

**Reams:** Zest – z-e-s-t. Zest tonic. You're going to be shown about a half a dozen or more products tomorrow, and what to do with them, and how to coordinate those with this diet to accomplish quickly the desired result and you may buy those at wholesale and put your own labels on them if you like. This will be available to you. Or you can buy them with their regular labels on them. But there's a very nice profit in it for those who wish to use these elements. They work, is what really counts, they really do the job. Yes?

**Student:** Would you please review the original procedure in ----- the replacement in calcium and so forth.

**Reams:** I misunderstand your question.

**Student:** The procedure used. The procedure. In the start with the organ origination is over abused.

**Reams:** We are only dealing with the sulfuric acid right now as is the nitrate nitrogen we are testing for.

**Student:** ---- drops.

**Reams:** Oh, oh, how many drops?

**Student:** Yes sir.

**Reams:** You use six drops of reagent number 1.

**Student:** 1.

**Reams:** Yes, reagent number 1. 1 drop of urine. Concentrate it for one minute. And you use 4 drops of the sulfuric acid to bring out the color.

**Student:** unintelligible

**Reams:** No, after you put the one drop of urine out in the plate. About three minutes from then it will reach it's climax depending upon the temperature of the

room. It will quickly fade out after it reaches it's climax. Do not read it too quickly. If the room temperature is about 40 degrees or 45 or 50 degrees it will take around 5 minutes for it to reach its climax. But if the room is 60 to 80, it will reach it in 3 minutes and fade out rather quickly after words.

**Student:** You add your sulfuric acid after the mixing the urine in.

**Reams:** Then you take one drop of that concentrated solution and put it in the well plate. And then you add four drops of the sulfuric acid and in adding those four drops, do not drop it into the urine, into the one drop. Drop it on the side of the plate and let it slide down into it. Because sometimes it has a tendency to fly out all over you. And everyplace it flies out and a little spec hits you, you have a hole in your clothes. It's a good idea to use lab aprons that are made for laboratory work because this will not hurt them. Whenever you are in it all the time, is to wear laboratory aprons. And when you're doing this today, move it farther back on your desk like this. Don't have it right up at you like this. Hold it out front of you.

And drop it into the side of the plate. And when you see it smoke because of a rapid change of temperature when the acid strikes the water and you'll see a puff of smoke or steam go up from it.

**Student:** Do you have any limed agents to ----?

**Reams:** You won't need them just today, but when you're in a hurry and working for them all the time, just work out a little bit from you. After you put 5 drops in, you just have to do it all over again, because if you do 5 drops, what you can do is this, is add three more and multiply it by two. (chuckle) But then, you've wasted 3 drops instead of using another drop of urine. Well, that's the same way, either way. You're hooked either way.

**Student:** unintelligible.

**Reams:** Yes.

**Student:** unintelligible.

**Reams:** Use the reagent number 1.

**Student:** unintelligible.

**Reams:** That's the wrong way to do it. No. Put your urine in first.

**Student:** What happens if the government demands our good friends, the FDA and so forth, decides that your popularity is ranging far and wide and getting greater than it is and after you get all the disciples out working for you, your religion or

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church here, then they say you can't ship this stuff in the mail to us, then what do we do? Can I adversely get it?

**Reams:** No, we'll send it by United Parcel.

**Student:** And then they can call it interstate commerce and call it off. Their definition of interstate commerce says something about that. The great expense is a --- The interstate transportation, they say commerce, which means they change their mind, but it actually means interstate transportation.

**Reams:** It's supposed to save money.

**Student:** Yeah.

**Reams:** Well I don't see how they can do it because here's this big plant here that manufactures sulfuric acid and ships it all over the United States.

**Student:** unintelligible

**Reams:** Well they ship it to me. They ship it to me in gallons. I don't see why I can't ship it to other people. We'll get it to you. Don't worry.

**Student:** unintelligible

**Reams:** Well, let me tell you while you are on the question. The state of Texas has passed a law which comes into effect July the 1<sup>st</sup> of this year that takes all benevolent work out of churches. In other words, you're not allowed to do any welfare work at all whatsoever in Texas. As of July the 1<sup>st</sup>, child welfare, you have to witness an offence or any kind of welfare whatsoever. Now this is going to cut the Salvation Army very badly, or anyone they want to enforce it on.

**Student:** They can enforce it on the ones they want to.

**Reams:** That's right and they're going to let the others alone. Now there is a meeting in Texas in Dallas starting at the 1<sup>st</sup> Baptist Church on the 2<sup>nd</sup> of July and the 31<sup>st</sup> to the Coliseum of the armored building on the 4<sup>th</sup>. And we are raising there, one million dollars, we'll probably do that the 2<sup>nd</sup> day in possibly less than an hour, for legal fees to force the United States to live up to the first paragraph of the constitution, in which the state cannot interfere with the church liberties that's invested in the constitution to the churches. And this meeting is on July 2, 3, and 4<sup>th</sup> in Dallas Texas and it's one of the biggest meetings that's ever been held for requiring the government to stay out of church business. That's right.

**Student:** Then delivery did this to, first for credit roll off.

**Reams:** Right. Right. But anyway it's aimed at him. But we are meeting there and my attorneys and his attorneys and some other attorneys are fighting this thing in which we're going to win or we are going to know why. And I love a good fight. I thoroughly enjoy it.

**Student:** Well I hung you on the same subject then, ah, can we be ministers or assistants in your church and be covered under your church?

**Reams:** Absolutely. Yes. Every person that takes this course or takes a every person probably will miss our little certificate to sign and you all we do not have church members. We have church applicants. Which is the same as members and every church member of this church is a minister. And every employee is a minister. The same as Jehovah's Witness. The same as Mormons, and so forth. So therefore, at this present moment the law doesn't apply to ministers. So we're, our church is lily white.

**Student:** And then when we go home and the first time the local fuzz come in finds us, why then we'll start screaming we're ministers of the interfaith Christian church.

**Reams:** Right. Put it up in there and put it out.

**Student:** As a minister of the interfaith ---

**Reams:** I would also require that we will furnish you these slips, that everyone you test must sign one of these slips. They're for an application and the last paragraph of that says, this does not interfere with any of your church beliefs or working with any other church whatsoever. There's no law that says you can only be a member of one church. You can be a member of six churches if you want to. But this so far, we have the authorities here in Georgia thoroughly buffaloed. They don't know what to do. They are talking among themselves now trying to find a way out.

**Student:** Now we had an old undertaker said that our town that we had the Sevanah church renders church services at 9 o'clock in the Methodists had theirs at 11 and he was member of three churches and was a greeter at all three churches. So he could rake up business and ----

**Reams:** Yes.

**Student:** -----

**Reams:** They can do anything they want to. They can take your property. It might be interesting to know the United States Supreme Court has just ruled that no Officers of the United States was allowed to destroy any of the equipment of

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anyone's without due procedures of the court. This has just been passed in the last two weeks, three weeks. So you might be interested – (interrupted by a student)

**Student:** Talking about fighting with "authorities" and ending up with a lawyer and and a fight against those who are out to oppress anything not associated with the American Medical Association. (This is just the sum of it.)

**Reams:** That's right, interfering with the church. This will be a subject folks. By and by it will be a subject. But it's going to be a fight. Last November there was a meeting of the Alabama Association in Las Vegas in which they swore an oath to destroy every phase of the medical practice arts unless that branch joined the American Medical Association. And they were going to do it by striking down the people in the healing arts one by one by one. Now this happened last November and I will try to get this whole affidavit to you. I have requested copies and I will try to get a copy to you to see how hellish a thing can get.

**Student:** Now the Jews said, and Paul said it too, "We won't eat until you're dead."

**Reams:** mmm.

**Student:** Well I'm still hungry.

**Reams:** Yes. Laughing. That's right. Well that's the same way, either way. It should hook either way.

**Student:** I guess for a guy that's a, we didn't go to school to have this conversation into bible talk.

**Reams:** Yes. Just like --- didn't talk. If they put you in jail then start a revival meeting. They don't know what to do with you then. If they ever put you in jail, start a revival meeting. I did that. They put me in jail for a week and I started a revival meeting. It was the first one that had ever been held inside a courthouse and they couldn't put me in jail for it. And I didn't have any order. Court, I mean, it was not listed as a church. So the county itself was breaking the rules, the zoning rules for permitting a revival meeting in a jail when it wasn't zoned for a church. Laughing. They were thoroughly confused.

Now you have the special in violets, so you know what to do with it.

**Student:** But that hydrochloric acid does not go until the urine is in does it?

**Reams:** Sulfuric acid.

**Student:** I mean sulfuric acid.

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**Reams:** That's right. It's the last thing that you put in. You put the drop in of the concentrate solution. Then you put four drops of the sulfuric acid in. Now Laverne, oh she has her sun glasses. If you bring the contact caps okay, now you take the top off this bottle and put that cap on it'll fit. It should fit. It was bought for that anyway. And now you may go around and if anyone needs help, you show them what to do okay? Laverne cut her teeth in the laboratory.

**Student:** I'm sure he's been to your house.

**Reams:** Yeah, I would have liked to. I enjoyed him so much. I enjoyed him.

The ammoniacal nitrogen readings are done exactly like the other readings until the very last step. Instead of using the nitrate nitrogen test solution, the sulfuric acid, use the ammoniacal test solution. Instead of the colors being blue, it will be some tint or shade of yellow. You may proceed.

**Student:** Instead of the sulfuric acid?

**Reams:** You use this solution, the ammoniacal nitrogen solution instead of the nitrate test solution. This is the nitrate. Now.

**Student:** See ammonium nitrate.

**Reams:** Instead of a blue reading, you're going to get a yellow reading or some tint or shade of it. One of the things that I'll call your attention to is that when you are doing these readings you'll generally do both of them at the same time, using 1 drop of each and 4 drops of the interim nitrogen test solutions. You use 4 drops of this one into the 1 drop of urine and you use 1 (4) drop of the ammoniacal nitrogen.

**Student:** 1 drop.

**Reams:** One drop of the extract and 4 drops of this into the 1 drop. You put 1 drop into the plate of the extract solution, reagent 1. And then you use, both times, you use 4 drops of this or 4 drops of this. This one must be kept in the bottom of the plate, next to you. The same as you record it on your chart. When you are doing a whole group of readings, you can have a different person's test in each well. You know what you're doing. The ammoniacal nitrogens are on the bottom and the nitrate nitrogens are on top. Nitrate nitrogens are done with the sulfuric acid and the ammoniacal nitrogen is done with the ammonia nitrate solution.

**Student:** see it says -----

**Reams:** Same system known as Nessler. This one will not make circles. This will be shades altogether.

**Student:** unintelligible.

**Reams:** At 9 we have what we call rims. We start at 9 with rims. We don't really call them circles. We call them rims. They are a little different. Rims----

**Student:** unintelligible

**Reams:** Well show you when you get there. They are more like rims. They're

**Student:** We put a screw top pipette in the ammonia reagent? Where do we get those?

**Reams:** Yes sir.

**Student:** I got a short one but now I have to get long ones for ---

**Reams:** Okay. That's all right. We are having trouble getting pipettes. Believe it or not, they are hard to get.

**Student:** -----

**Reams:** We got a case full of them out there. I don't see why they didn't bring us a whole ---- okay, well we got a whole lot of tops out there.

**Student:** What do you do, just put a red top on this for now?

**Reams:** Just put a red top in it for now. But always close the bottle back up. Do not leave a bottle open. If there is anything in the world that will make me blow my top is to have a laboratory technician with a cap off of a bottle. Especially extract solution number 1.

**Student:** It's too expensive to buy it.

**Reams:** That one is expensive. It doesn't matter how many times each day you open a bottle. Always put the cap back on.

**Student:** unintelligible

**Reams:** You must keep these reagents clean and clear and as pure as possible. Caps in solutions --- if you ever get impurities into them they will turn black or dark and you may still use it but it gives you a cloudy reading but you can still read it. But try not let it turn black because if you let it turn black and you probably won't be able to use it at all. If you mix it up yourself and you do it two or three times, you'll get a feel for it. So long as you use it and keep it clear. So, it can be used even though it can get quite dark.

**Student:** Comes to on a slant.

**Reams:** Some you hit it. When you start with atmospheric conditions, you can do everything you wish or try and it will still be a cloudy reading, even in the nitrate nitrogen. And just work on it a little bit. Study it. And you can definitely see the color, but don't always expect it to be clear cut. It isn't always.

**Student:** unintelligible.

**Reams:** No. That's how this the nitrate nitrogen. This is the ammoniacal nitrogen.

**Student:** Oh, I see.

**Reams:** But yeah just for a little while because it's a little different from what you've seen. You can still get a reading alright if you just study it a little bit. Use that knot on your head, on your shoulders called your head, and you'll figure it out real quick. Most doctors don't have that problem they do use that head.

**Student:** ----

**Reams:** Of the two nitrogens, and how they differ from each other. The first one made with the sulfuric acid. The top number is the nitrate nitrogen. It is highly a volatile nitrogen in your system because it creates a sense of heat and it over stimulates the heart a lot faster than the ammoniacal nitrogen and it is the one to be feared because it is the most dangerous of the two.

But let me also explain to you something about these undigested proteins and that is they do not generally rise quickly. They generally go up very, very slowly. In other words, over weeks do they climb, unless someone gets into something, or trying to poison themselves, or comes into contact with some relative material that is highly dangerous, or something on that order. From ordinary general foods they do not climb very fast. It is in dealing with these two forms of protein that you can calculate the range of life, one of the factors. For instance suppose that you ran a test and you found that on a certain day, it's the first day that you ran the test, that the average was, we'll just say 10 for easy figures. Suppose, 90 days later, you ran the test and you found it to be 12. Suppose, 90 days later you run it and it was to 14. Then you've got definite steps that you can figure if that diet isn't changed until it is going to reach 30. Do you understand? But you must figure in the timing the days in which it happens. Now it's not any problem.

Now there are times and there are ways to do this when you only have one test. Just the first test. By calculating the total number of energy and comparing that with perfect.

There is another way. There are three ways to prove your work, but we will not get into that this time, where we have barely covered the essentials of principles to begin with, we will have done well.

We will not get into proving anything at this time, but when you begin to come back, we will. We'll show you how to prove what, when you've done, and you will understand it a lot better. Are there any questions about this for undigested protein?

**Student:** In an elevated ammoniacal nitrogen, what does that mean to you?

**Reams:** Well the elevated ammoniacal doesn't cause the heart to pound much as the nitrate nitrogen. In other words, we'll say if you have a 12 reading of ammoniacal nitrogen and we'll say just for argument sake, a 3 reading of the nitrate nitrogen the heart wouldn't be pounding nearly so hard as if it would with the opposite with a 12 nitrate nitrogen and a 3 ammoniacal nitrogen. It would be beating with the latter nitrate nitrogen, it would be pounding much harder.

**Student:** What this really means to you is they are not clearing the proteins metabolized.

**Reams:** That's it exactly. The proteins are not digesting. And this is what drove me to the conclusion that children cannot digest proteins. They cannot digest them and you are only asking for doctor bills and sick children if you insist on it. If every child in school had this one test you could stop heart attacks of children dropping dead on the school ground.

Now we start this test as soon as the baby gets home from the hospital at a couple of weeks or three weeks old. At that age when you have to squeeze the diaper in order to get a drop of water to test it. Yes and we've started and I've never had a crib death in any patient I've ever treated because I've looked after them. Because we start with the infant as soon as it gets home from the hospital.

**Student:** You say this is the color of the acid and the enzyme and not the ---- ?

**Reams:** Well for instance, a mother that eats an awful lot of meat.

**Student:** Say what?

**Reams:** A mother that eats an awful lot of meat in her diet and she's nursing her baby. You see? This is where it comes in. A mother that's a heavy meat eater, then the protein is in the mother's milk. Because in the child, the child can't even digest them even in that form. And they build up and up and up. And then they're three months, the baby doctors tell them to start feeding them on baby food with meat and lamb and chicken and everything else in it, and that's just as wrong as it

can get. It's just as wrong and whenever they start that, zip up goes, up goes the protein. And it'll rise rather rapidly in a baby. It'll rise a lot faster than it will in an adult.

**Student:** They think that proteins can burn up.

**Reams:** That's right. The baby is only kicking it around with all of it. Very little is burning up a lot of energy according to the child, but nothing like we're burning it up. And it's much more concentrated per pound of weight for the child than it is for the adult.

**Student:** In other words, you recommend that the baby get his proteins from more or less milk or maybe some eggs or something like that?

**Reams:** I've maintained that if it's at all possible and the mother's nursing the baby, not to give it any food until the baby is six years (six months) old, except the mother's milk. If she's giving sufficient amount of it and the mother's healthy and the child is healthy.

But one of the greatest mistakes that's made by young mothers or by any mothers for that matter, is they should start the baby on drinking water out of a bottle. The first week it's home from the hospital, start the baby on drinking water. Now the you'll only get a few drops out the first few days, but pretty soon the baby will drink an ounce of water, and two ounces. And by the time the child is walking, it's drinking a glass or two of water a day. And that's what it should be doing. It is necessary for a child to have water, distilled water even though it's living all together on milk. Milk digests entirely differently from water. Completely different, the whole digestive system is different. So, be sure that babies get water.

**Student:** So your saying nursing mother until six years old?

**Reams:** Six months old.

**Student:** You said six years.

**Reams:** I'm sorry. I'm sorry. I'm sorry. Six months. I was thinking that and the word years come out. Thank you for helping me. Six months. Until six months old.

**Student:** The bible says until they are three years old.

**Reams:** Sometimes they did. That's right. It's Six months. Now them babies should be started on vegetable broths, fresh fruit juices, fresh carrot juice, and one thing I do not recommend for babies and that is strawberries.

**Student:** Too many seeds?

**Reams:** Too many seeds, right. And if a baby has it at all, make it rather dilute. Also the first year of the babies life, dilute all fruit juices 50%. Now when you first start a baby on orange juice, suppose you have a baby that you know for some reason is deficient in vitamin C. Then you can give them 1/3 rd fresh orange juice and 2/3's water providing the baby has an alkaline system. You are going to find babies with an acid system. And what you do then is give the baby lime water.

Lime water. And we have it and we will explain especially, and a few drops of lime water into drinking water and it does not hurt the change of the water. It only takes a drop or two to 6 ounces of water to pick that baby's system up from acid to alkaline.

**Students:** Can adults use that too?

**Reams:** Oh yes. But we use it as a means of last resort on adults. I'm talking about urine test.

**Students:** A few drops of lime water with a bottle.

**Reams:** Now this is not water from limes. This is lime water. Just a couple of drops to six ounces of water.

**Student:** Calcium carbonate?

**Reams:** Yes.

**Student:** You aid the baby is already acid. This is getting his acid from his mother when he's born right?

**Reams:** That's right.

**Student:** unintelligible.

**Reams:** That's true.

**Student:** But most babies are alkaline. Most people are alkaline.

**Reams:** A healthy baby is 6.40 over 6.40. You'll find more healthy babies than anything else.

**Student:** This would be an official then right?

**Reams:** That is if you test the babies they generally yes. No. That's not a neutral. A 7 over 7 is a neutral. It's 6.40 over 6.40. You'll find perfect health whether it's a baby or whether it's an octogenarian or centenarian or anyone else.

**Student:** What about proteins for health? Is there a test for them?

**Reams:** It varies. It varies. Last night I think I referred to the eleventh chapter of Leviticus for meats. And a person that cannot digest their meats at a high protein, they should cut it down to not over twice a week on meats.

However, you are going to find that all the vegetarians, complete vegetarians, in the zone for fatal heart attacks. You will find them, and in that case they are not drinking enough water. And then they need dolomite. You will find vegetarians just as ill as anyone else as far as their health is concerned, and their body chemistry just as far out. But you can make an all vegetarian diet that will suite them, that will supplement the minerals that they're deficient in. They generally require more minerals and vitamins than those who use some meats.

**Student:** But maybe you can get soybean products too heavy like the meat products can be too heavy?

**Reams:** Too much of one thing and not enough of a great variety. Yes?

**Student:** Is it your opinion that the soybean especially on of the most excellent diet there is isn't it?

**Reams:** If you're sick, yes. If you're well then no problem.

**Student:** Actually to in that twice a week also then for a vegetarian.

**Reams:** Your heavy foods, yes, your heavy diet foods. Most of these meat substitutes do a wonderful job for people who are heavy meat eaters. All you have to do sometimes is change the type of protein they are eating and it comes down very, very quickly. Just change it. Even though there is a much protein in one as there is the other, the very fact that you've made a change, makes all the difference in the world. But when you get into the meat substitutes, most of them, you have to cultivate a taste for them. Some of them are the most delicious dog food you've ever tasted. But when you know how to prepare them with a lot of onion and mushroom and a lot of good herbs, then you can eat the herbs off and throw away the meat substitute if you want to. But I'm just having a little bit of fun with some of them but some of them are absolutely delicious.

**Student:** unintelligible

**Reams:** Forget about it. It's all right. Never seen any damage. But some people, yeah but you get a terrible taste in your mouth. You got bacteria in your esophagus. There's a bacteria in the esophagus. It's bacteria that causes bad breath. Bacteria that causes mucus, always, there's no exception. There's one disease called halitosis breath that was certainly bad breath. I'm going to ah---

[end of tape side]

**Tape 3 – Side B**

Depending upon whether the body is acid or alkaline. Yes.

**Student:** We used to run litmus paper tests on this and it would change by the hour sometimes.

**Reams:** I wouldn't be surprised if anything happened with litmus paper. But it doesn't on these instruments here.

**Student:** It seems like on the sugar the impact is with a subtle amount.

**Reams:** I want to take up another phase of our foods that we probably won't touch on again, and that is potatoes, Irish potatoes. It is the poorest food in the world. The very poorest. They are tasteless, odorless, if it wasn't for the cream, or the butter, or the gravy you put on it, you wouldn't even eat them, and they practically turn to all carbohydrate in your system. And, well I'd advise you not to eat them. Unless you are in a restaurant, and then you have to or starve to death. That's the only thing they know how to cook in most restaurants.

The potato keeps more people in the doctor's office than any other food that we eat, the Irish potato. They peel the skin off, the only part that's any good at all, throw it away. Now I'm speaking about people that use them three times a day. So many times when I tell a family to discontinue eating potatoes, they say, "Well what else is there to eat?" Because they are eating them three times a day. And practically all their children are diabetics, high sugar, hard to control, sick, and in a doctor's office all the time, getting drugs to get well, and cramming down potatoes. So this food I would say to limit it to two pounds per year, at the most for potatoes.

There is so many other good nourishing foods that you can eat, just forget about potatoes, and if you must eat, but French fried potatoes, please use tomato catsup on them. If you don't, they don't digest very well, and they're quite constipating. They have a lot of calciums in it. There's a calcium oxide of which the body uses very little of to start with and it passes on through and by using the catsup with it, between the two you get a little extra energy out of the catsup. But there is practically nothing in the potato to start with.

**Student:** Baked potato does have a few ---

**Reams:** No, it don't make any difference. Baking a potato or frying it or creaming it or anything else doesn't make any difference because the nutrient is just not in it. It's all practically water and calcium oxide. Very trace of vitamin C in the peel of a potato. It's just very little food in it, so forget about foods that are very high in bulk and not fiber. If the potato was even fiber, it would help some. Thirty five percent of your diet should be fiber. And if it is, you'll never be constipated. The

same is for a cow or horse. Thirty five percent should be fiber. The best place to get that from is salads. And when you eat your salads, you should eat them first before you eat any other food. To get your system ready for the other foods that you put into your body. I'm telling you from years of experience how to get the most energy out of your food, how to get the most energy. If there is no other food to eat, but a potato, it can keep your stomach from accusing you, ahead of having your throat cut. That's about it.

**Student:** What about yams or sweet potatoes?

**Reams:** Very good foods. Very good foods. Yes?

**Student:** What about the new potatoes?

**Reams:** The what?

**Student:** The new potatoes.

**Reams:** The little new potato is the finest way in the world to eat them when they're still young and fresh, about the size of marbles or a little larger. Those, creamed are excellent.

**Student:** I understand that eating raw potatoes is a high source of vitamin C also.

**Reams:** No. That's not correct. Only in the skin is a little bit. Time you get into the potato, it's very little.

Also, all a potato that has its eyes sunk way down into it, is deficient in manganese. But if the eyes are on the outside of the potato, then they have a little manganese in it. And manganese is the one element, it's called the element of life. And without manganese, nothing can leave offspring. This earth would quickly become unpopulated. No life would be upon it that depended upon a seed or germ of life to carry it forward.

Manganese deficiency is the chief cause for prostrate problems and for carcinoma or cancer of the uterus, manganese deficiencies. Cause and effect is what we are talking about, the ratio and proportion of foods. Yes?

**Student:** These aren't exactly potatoes, but what about these squashes, like acorn squash, butternut squash, they keep well and have quite a bit of fiber don't they?

**Reams:** Very good. Very good. Very good. Yes. Yes. They are excellent. Sprouted beans are a good food but they are very low in protein. The dry beans are higher in protein than the ones that's cooked dry than the sprouted ones. However, the sprouted ones are higher in enzymes and vitamins. So you got a choice between your mineral and your vitamin. If it were not for the seed losing its

protein, it could not sprout. That's why it sprouts, is a loss of protein. Is there any other questions? Yes?

**Student:** Zinc would work well with the prostrate also as well as with the pancreas?

**Reams:** No. Zinc is used in making the cartilage from which the bones are made but after the cartilage is made and formed into bone, then it is no longer present. It loses it when the bone is formed. Also, the zinc mixes with copper and makes in the very, very, minute proportion, about ten zero's after the decimal, in which it makes the arteries and the veins and the intestines elastic like and without it they lose their ability to expand and contract and to stretch.

I do not know of any organ in the body that cannot rebuild itself with the proper diet, providing that there is not damage to the central nerve [Vagus nerve] between the brain and the vital organs. The central nerve does not go through the spinal column. It comes down through the side of the neck on each side and it goes to the lungs. It goes to the vital organs and the stomach, and the sex organs, and the heart, and so forth throughout the system. If that were not true, if anyone had their neck broke they would die instantly. But many times they will live for days and some times a few years. Back of their neck the spinal cord is broken completely, but this nerve goes down through, if there is damage to that central nerve between the liver and the brain, your body will not respond to diet. You do what you please and it will not respond either to drugs or to food.

Sometimes there is damage to the central nerve between the liver and the central nerve tree, so to speak and the pancreas. And therefore when this happens, the pancreas will become carcinomic and then cancerous and that the message can't get through to the pancreas, you cannot control the sugar and the person will lose weight very rapidly until they die. But if the nerve is not damaged, and the pancreas has only a mineral deficiency it has a remarkable ability to rebuild itself and so does the liver.

I just had a patient come in with only two weeks to live, two weeks ago. Cancer of the liver. Yellow as in your yellow paint, you ever saw. And even the liver was not manufacturing enough enzymes to keep the teeth from bleeding. Even blood was under his fingernails. The nose was bleeding heavily. In other words, every symptom of leukemia however, the WBC was normal. Well, you should see the fellow today. He was there about ten weeks and just doing beautifully well. And he will be able to go to work in about another four months. Be able to go back to work.

But that fellow was pointed to dying when he came in. He had nothing that had stopped him at all. They were using the chemo therapy and he had one more

treatment to go and he said, "I can't stand another one." He said, "I'd like to have died with the last one and all my hair is falling out." So this was the condition when he came to us. You just have to see --- hemia then it will be necessary to have a better BC count. Especially at the earliest moment that you are dealing with the leukemia patient or anemic patient. And leukemia can cause a too high WBC or a too low WBC, either one of them could be indicative of leukemia. But most generally the WBC runs too high. One of the finest ways in order to bring the WBC down to normal is first to carry them through a few days with the lemon water which you will be told about a little later. And keep a close check upon the urine samples, very closely while this process is going on. And as soon as you can, begin to give foods very rich in vitamin A.

Carrot juice is an excellent form of vitamin A for anemic patients plus you want to also give B12 also some B6. These are things that will have much to do with the control of anemic conditions. And the WBC goes too high it begins to drop you know that you are gaining ground. Leukemia ---

**Student:** Say that again doctor I was ---

**Reams:** Anytime that you have a high WBC and it starts to drop toward anywhere near normal you know that you are gaining energy. This is another proof that you need to know. And you can do these tests yourself or you can send them out to laboratories and have them done. But a decrease in a WBC that is too high is a sign of an increase in energy. However, you will notice the increase on your own tests before it will probably be visible with the WBC count. For you who are not familiar with the WBC count, between 6,000 and 10,000 is normal. Well, it's a great average, however, there are some people that it never gets above 5,000 and some it never gets below 12,000. Most of the people it will be between 6,000 and 10,000 count. So, this is a case in which a laboratory analysis of blood will be a help to you.

Leukemia isn't always cancer of the marrow of the bone and it's caused because of a vitamin A deficiency. Your body is not assimilating vitamin A. Cucumbers are rich in vitamin A if you eat the skin and all. And carrots are rich in vitamin A. Those are the two chief sources of vitamin A for Leukemia patients.

We had a patient come here, the fifth one we had when we come in here, was doctor Lock, a dentist, a dentist surgeon, oral surgeon from Lincoln, Nebraska, hemorrhaging badly from the lips, the gums, some in his eyes in the morning. They were blood at the edge of his eyes probably on the outside. Blood seemed to be a substance coming out from the fingernails. It was in his stool. He had been this way six months and getting worse. He was brought in here. He was not able to walk. He was on the PNR line, the point of no return of energy. He was right on

that line. If he had dropped one degree below it, there's no coming back, unless a miracle of God, you could consider the dead is raised, if it drops below that line and you come back.

And in one week we had the hemorrhaging stopped and in ten weeks he went back to practice. He's been practicing a year now. He just come by to see me the other day. He looks the picture of health. He said, "Thank you for saving my life." It was God who saved his life. And I'm telling you the principle that we followed just once that we followed on this and how he increased in energy and this is the pattern to work toward and in cooperation with the other analysis. You will find that the urine analysis tells you a lot more about how to correct the various conditions in the system in the blood. And if I had my choice between the two tests, I would take the urine analysis every time because as I have told you today already, getting the sugar back into normal and these other elements back toward perfect is a sign that the person is getting well.

Whenever you see an analysis, seek to find the cause of it. But you must also know how to correct the cause once you know where the cause is. For instance, if you have a patient that you know is anemic or Leukemia, you will know that it's a type of cancer of the blood cells. Nothing more or less. You know it's a vitamin A deficiency. You know which way to work on it.

And these tests will denote very plainly what your problem is and how you can gain energy. Seek the cause always of why that number is where it is. There are plenty of ways to tell why it's there. There is plenty of things that you're going to learn starting tomorrow morning of why that number is where it is. And seek diligently and try to keep your eyes off of the number without adding into it amounts to tracking it, so to speak. However, there's going to be a certain amount of that done too. You are going to do a little adding and a little subtracting and so forth. But you don't divide it. You don't multiply it. You look at cause and effect to find your condition and then you put foods to that person that will make those numbers go to where you want them to go. This is the plan, cause and effect. And if you fail to get the cause of the problem, or fail to evaluate correctly by the analysis, what the cause is, then you can very easily be found guessing, guessing, guessing, not getting anywhere. So one thing that I'm going to drive home every day is go by the numbers or throw the whole thing out. It's either all good or it's no good. Go by the numbers. Follow the numbers. They are just as important to you in this as flying an airplane in the dark, in the night, in the storm. Go by the numbers and if you think for one second that you can make a diet without that card before you, you're wrong. You're wrong.

You've got to have that card before you every second when you're making a diet because if that number is there, there is a reason why it is there. And everything

that you give that person is to bring that number where you want it. And anything different from that, you are guessing. Please, please, go by the numbers. Even though if you disagree with them, go by them until they have proven themselves wrong. And if you go by them correctly, they'll never prove themselves wrong. I've been working with these same numbers now since 1931 and I haven't found them wrong once yet. Not once have I ever found them wrong. Because if it did it, I would lose confidence in it.

Laverne can you bring us some of those cards over please. Those cards for recording. I want to show them how to record on the cards the information that we need. I also said to you this morning that you do not need case histories. You do not need them. They are a worthless waste of time to you. How long the person has been ill or how ill they are or what they have taken is not important with the exception of one thing. There is one thing that is important. One question that if they are an advanced cancer patient that you should ask. Have they had radium or cobalt treatments? If that flesh is cooked internally the nerve will not grow back into it. It will not grow. The whole body may respond satisfactorily. But the first thing you'll know, that place that's been cooked will start to decay and there is no stopping it that I know of. I have never seen it stop. And generally at that stage, the body chemistry will refuse to respond to any product.

Here's another thing that you will find about these tests. If you can do this. It doesn't matter how ill a patient is or what the name of the disease is. It doesn't matter. If you will follow these numbers and you can keep that patient responding for 30 consecutive days, that patient should get well. I have never lost a patient that we could keep living 30 days. It doesn't matter how ill they were, already been operated on, opened up, closed up, nothing we can do, the infection broke out in the incision, and some of them were only a matter of hours away from the time left that the doctors had told them they could live, and many of them are still living today.

This system can take care of rebuilding bone structure as well as tissue structure. One of the more difficult things for this system to use is a brain tumor. That depends upon where in the brain it is. That is one of the most difficult things to handle. There are many different kinds of brain tumors, many kinds. I saw one the other day that looked like a branch of a tree. It looked like you just broke a limb off a tree. It started in this back part of the brain on the left side and this was the picture that shown. And at that stage all we could do is merely give the person a little thing to help them just adjust the best they could but there's no stopping it because of the area that it's covered there. It was already covering one fourth of the brain. And you can't you can't function normally with one fourth of that part of your brain gone. It's impossible.

We had another patient here that had a tumor on the pons of the brain that started with the top vertebra at the spine connected into the skull. And that tumor started inside of that socket and grew into that pons of the brain and there was no stopping it. Her body responded for about four days and it stopped and no more response. Well she went home and she lived about two weeks, three weeks. We told the family that there was no stopping it. It was what the problem was and the body ceased to respond. So we do not count that a loss of patient unless the patient responds for thirty consecutive days unless they succumb quickly here on the property without any notice then we count the transit. But so long as the body responds for thirty consecutive days and do what they tell them, there's no reason why they shouldn't get well.

Let me also describe another condition to you and that is highly advanced carcinoma and even cancerous condition of the upper and lower abdomen. I had a minister a few years ago, 75 years old, that was brought in on a stretcher, and he was just to the point of death when they brought him in. And he'd been operated on a month before and said to have only thirty days to live and he only had a few days of that left. And we began the same care that we gave any other patient under the condition. And in three months he was able to jog a mile a day, a quarter of a mile at a time, but we were feeding him on baby food. Just baby food. It had to be baby food. And on a Monday morning he came into my office, he and his wife, he said, "We've decided to go home today." He said, "I want to be dismissed." Well I said, "This is not a prison and you can go home anytime you want, but I'd advise you not to go home yet." And we were not charging him anything. He did not have anything, so we were not charging him anything. I said, "I advise you not to go home yet because you are not ready to go home." And I said, "I know why you want to go home. You think you've eaten this baby food for as long as you can stand it." He said, "That is so right. I just can't stand this baby food another day." I said, "You either got to stay on this baby food for two to three more months or else everything that you've done and everything that you've gained is going to be lost. You cannot eat roughage food at this time because a part of those intestines are healed real well and a part of them are still very, very weak and whenever you put food in there up too heavy they are going to convulse and if they convulse, then it's going to cause a tear and a hemorrhage". And I said, "You are going to be in trouble you can't get out of."

And I said, "If you eat roughage, you will probably be buried within two weeks time." He said, "Well we've decided to go home. I'm going home." I said, "Go home and see your -" I said, "Well, God has healed you, but you are not healed yet." They did. They went home. The next morning he ordered bacon and eggs for breakfast, well crisp, his intestines ruptured before the day was over and he was

buried two weeks from the day he left. Now that's suicide. That's suicide and you can't do anything about it.

I had another man come in with emphysema. He come in March or April. And he was one of the worst cases I've ever seen. I said come in, he was brought in a roller chair. And he ran a poultry barn. And by November, there was no sign of the emphysema left at all. It was absolutely clear. But all those tissues in those lungs were so tender and babyish. I mean they were not seasoned like older cells should be with base exchange. They were comparatively very new. And I said to him the last two visits that he was in a month apart, I said, "I don't care what happens to your chickens. Don't you go out in this rain. Your energy level is gaining. But it's too low now and you have used up all of your reserved energy to get you well this far. Don't go out in that rain or damp weather. Let every chicken you've got die, but don't go out there." Well, about three weeks later, I got a call about noon that he had passed away that morning. The day before had been raining. He went out in it, got double pneumonia, and passed in 24 hours. Now that's suicide. Remember those lung tissues that are quickly replaced are very easy subject to weather conditions just like an infant baby because the other cells in their body. The doctors did an autopsy and were so surprised that he had no emphysema, no emphysema signs whatever.

So I'm telling you folks that some folks commit suicide, in spite of everything you can do, and there's nothing you can do about it. It's rather rare, but it's things that you are going to have to expect, and this is not a failure of the test. It's just people that are in such a hurry to get to the cemetery, they can't wait and they'll take any short cut they can get. And after all your effort and trial and struggle and everything else you can do to save their life and then they throw their life away it just kind of disgusts you to a certain extent.

These are things that I'm telling you that are cause and effect. There are cause and effect that's outside of the human body. This is what I'm bring up now, is the cause and effect. It affects your system that comes from without. There is also another effect coming in right here at this time that we'll want to study. And that is hate. Hate is the finest cancer seed on earth. You cannot find it any better. It is even hybrid cancer seed. Hybrid urine. So, many times we'll have a person come in here that's in pretty poor condition with cancer, visible, or else had operated on. And after 3 or 4 days this person will not be responding to diet at all, and we know of no biological reason why they are not responding. Then I go into the person and I say, "Tell me about your childhood. Who did you love most and who did you dislike most?" In their good time they'll tell me if they hate somebody, the one they dislike most. "I hate my mother." "I hate my father." And then you've got a psychological problem on your hands to conquer. Or else that cancer will not respond. But I have had them, get up with them, prayed with them, and helped

them to completely forgive that person, and seen a response within 24 hours in the increase of energy. I have seen this happen over, and over, and over again. So, this is one of the factors that you should check into if you have not already checked into it. Whenever your tests show that the person is not responding by the fourth day, check to find out if they have hatred or malice in their heart. Because there's something about the phenomena of our anatomy that stands in the way of our progress.

One more case that I'll tell you about that had happened about four years ago, whenever I was not allowed to do any test by the courts in Florida because the case had not gone through the Supreme Court, and that was that some ministers had brought me this girl that had been operated on about 90 days before and she had 90 days to live. She had less than 30 when they brought her in to me. She was just like a walking skeleton. She had to have help to walk. And I said, "I cannot run any tests. I can't do anything. But I will tell you some things that I would do if I had your problem." I laid out just what they might call a shotgun prescription. A little of everything, which is not necessary with these tests. But then I said, "Tell me about your childhood. Who do you hate? Who do you love most?" She said, "I hate my mother." I said, "Have you forgiven?" She said, "Oh yes, I've forgiven mother." I said, "Then why aren't you well?" She said, "I don't know." These two ministers with her were both Baptist ministers. I said that, "You have forgiven your mother?" She said, "Oh yes." I said, "Do you know where your mother lives?" She said, "Oh yes." Do you know her telephone number? She said, "Oh yes." And I said, "Give me her telephone number." So I wrote the telephone number down. I turned around to the phone and picked up the telephone and I said, "I'm going to call your mother and ask her to come and spend two weeks with you." She said, "Oh doctor, I'll die if you do that." I said, "See you haven't forgiven your mother. You haven't forgiven her. You can't get well until you do." And you know, she then saw herself and she did forgive her mother in the next few days. She called her and her mother spent a wonderful couple of weeks with her. And you know, she got completely well completely. Got married. She married a man with two children and they were a very happy family. So, understand what hatred can do, it can rob you of your health. It's such a sneaky thing it won't show up in these tests. And it is just one of those things to investigate when a person doesn't respond. We are talking about cause and effect. This is right in our chart tonight.

There's another thing about cause and effect. And that is people who seek revenge, have a chip on their shoulder, this causes high blood pressure too. People who have got malice, hatred, revenge, the whole world has got it in for me, nobody knows the trouble I've seen. It's an inward, mental approach, that can cause high blood pressure. They are always on the defensive. Everybody else had a wonderful time except them. This is one of the causes of high blood pressure. And many

times this can be handled psychologically, I also, with a good test and plenty of calcium. Sometime you also have to use B3, Niacin. Also, while I mention niacin, please let niacinamide alone about as much as you can. They use it many times. I've never seen an increase of energy from niacinamide, but I have from niacin B3. I have seen increases of energy from that.

**Student:** The niacin B3 is different then from niacinamide.

**Reams:** Oh yes. Yes. It is different. So, there again you will find a cause and effect.

There's one more last cause and effect that I want to mention. That is outward cause and that is worry, worry. People who are chronic worriers. People who stay two weeks behind with their worrying, all the time on hold about things that are never going to come to pass. You can deal with this on a philosophical view with most people. Whenever you tell them or ask them what it's worry and very few people can tell you what it is. But I'm going to tell you what it is and I want you to remember it. I want you to tell people and I want you to use it for the glory of God. Worry is the devils prayer, no more and no less. And to prove that, you cannot worry about anything and pray to the Lord Jesus Christ at the same time. It is absolutely impossible. And all you got to do to stop worrying is to change the person you are praying to. And if you can get that point across to a person, you can stop worry providing there's not a neurosis or calcium deficiency with it. But many times, it's better to handle the calcium deficiencies first before you ever approach this subject. Get the person ready for it before you throw the book at them, so to speak. Get them ready for it.

These analysis that we are going to start running in the morning are quantitative and qualitative analysis. And as I have shown you today, through the possibility of the factors of converting these quantitative and qualitative readings to relative energy. You can then understand the real and true cause and effect and see the picture of what anyone looks like on the inside. I want to stop at this time before we go into the recording of these numbers and so forth on these cards and ask for questions up to this point.

**Student:** What is the ah --- you think that the world was turning clock wise in the time of the Garden of Eden? Tell me about the anion and the cation.

**Reams:** The way the world turned at that time, evidently it changed, yes. Yes, I think so. There's a lot of evidence to indicate that it did.

**Student:** Yeah. What about all of our object motors that turn clockwise that we use? It would be better if they turned counter clockwise.

**Reams:** I don't think it makes any difference with an iron machine.

**Student:** Are we generating a lot of bad electrons or something ran ----

**Reams:** I haven't done any research in that field. Yes?

**Student:** Is there any significance in that you notice any reason that people are left handed or right handed?

**Reams:** No.

**Student:** When you form these pictures, you know these pictures of these conditions, are you convinced that this is pure mathematics? Or a word of knowledge from the Lord with it or what?

**Reams:** It is pure mathematics my friend, pure mathematics. I am not psychic whatever. If I am, I'm not aware of it. If I was psychic, I wouldn't need the numbers.

**Student:** I just, you know, feel that you get such a complete picture of the thing and I hope I was a little tough -- (not clear) --.

**Reams:** By the time this course is over you'll be seeing some pictures.

**Student:** Praise the Lord.

**Reams:** I hope you will. I see no reason why you shouldn't.

**Student:** Is one of the reasons you get such a complete picture, though, because you have done it so many times? That it won't change it any?

**Reams:** No. I said to a doctor one time, you have it very easy. The patients can come in and tell you where they hurt. Most of my doctoring is plants and animals and they can't tell you where they hurt or what's wrong with them. You must find a system that you can pinpoint the problem without them saying anything to you. He said, "You're the fortunate one." Laughter. Well maybe so, but this is the way this system was developed and proven. Is by people who could not tell you anything, I mean by animals, who couldn't tell you anything, or plants that couldn't tell you anything. You had to do it by cold analysis, cold analysis. And naturally I did this for plants and animals. People said if you could do this for my trees and plants, and my animals, then why can't you do it for me? I said, "I can." All you have to know is the difference in frequency. When you know the frequency, you know the diet. So it's that easy.

I'll tell you a funny, humorous story that really happened. I had seen about 50 or 60 patients that day besides making my rounds through the sanatorium. We had

about 200 or more patients. And looking at their cards and numbers, I was just ready to go home one night at 9 o'clock. The telephone rang. This lady, they lived about 35 miles away, she called me and she said, "Doctor, I have a friend that's here at my house that's seriously ill and I've got to see you, because if you don't see them, they won't be alive in the morning." I said, "Well what you need is a hospital. You don't need me. You get that patient to a hospital." They said, "I will not. I will either see you first. And if you say take them to the hospital, I will. But, I've got to see you first." So what do in a case like that? You got a person partly beside themselves well you got to do the best you can. So I said, "Bring that patient on in."

It took her about an hour to get there. But when she came in she had a pillow like this and a kitten about half grown, three fourths dead or nearly dead. And there it was 10 o'clock at night and that cat was so near dead and I gave that cat every attention that I would a human baby. I wouldn't let her know for a moment that I was a bit surprised, but I was. I was surprised and I couldn't even hear a heartbeat. But yet he was still partly warm and he was flexible. Generally you can take a straw and rub it along the ear and irritate the ear, but he wouldn't flip an ear or nothing. I pinched his tail. Nothing happened. So, all that gave me any clue to his life at all was that he was still warm. So I went into the lab and I made up a stimulant with a little bit of alcohol and a little bit of K-Min, very little. And I put some on the cat's tongue and I put some of the drops to his straight K-Min and rubbed it all over the kitten, all between his toes, everywhere. I really gave that cat a real massage.

Because the problem was he was eat up with worms by all appearance. I mean just eat up with them. Then I went back into the laboratory and I made up another little salve and I said now, a little devil got on me at that moment. It wasn't really necessary. But you know he gets in the best of us. And I said now, "If you take this salve, in this little container, and I want you to put some in this cats mouth every hour on the hour until 10 o'clock tomorrow. And I don't mean two minutes before the hour and I don't mean two minutes after. I thought this cat will be dead in a couple hours. You should just throw him out and forget about it. I never heard a thing for about three days. She called me up about 3 o'clock in the afternoon and she said, "Doctor that cat is bouncing all over the floor like a rubber ball." So the point is, sometimes people provoke you with the little things they do, but you can see from overall knowledge sometimes the thing that needs to be done and do it. Just go ahead and do it.

**Student:** What did you say you used on it? For his worms?

**Reams:** K-Min (K-Mine). You just be told about it about on Wednesday. You'll be told about it on Wednesday. But anyway, things like this is cause and effect.

And while we're on this subject, there's quite a few things that happen to people that also happen to animals. You see animals hair, if it loses its sheen and not waxy anymore they have worms. They have worms if it loses its sheen, but people don't have a tail, but animals do. But you can also tell by the way that animal holds it's tail how it feels. Because, you take a goat and if his tail sticks right straight up, that goat feels good. You better watch it. But if his tail begins to angle lower, angle lower, angle lower, the further down the worse the goat feels and that's true of deer also. And if you see a cow and she's got a good kink in the tail up at the top, she feels good. But if that tail hangs straight down, you've got a cow that don't feel so hot and the energy is too little. So these are tell-tail symptoms.

Now you'll find people that don't wash their hair everyday with soap and their has no oil in it, no sheen in it. It's a good sign that they got worms, provided they don't wear a wig. Laughter. The wig isn't any criteria. Another thing that's going to be amazing to you about this of which you don't make any claim or publish or anything else. But when you get the body chemistry correct, many bald heads are going to grow hair again. They never said a word about it but they always tell us. You will be amazed. Now the cause of bald headedness is a loss of oil in the skin. And when the oil goes back into the skin, hair will grow back on there again. You can aide that by rubbing any kind of oil gently into the scalp. Johnson's baby oil is one of the nicest. But Mink oil is very good. Any kind of oil is alright. Rub it gently into the skin and get the oil back in and hair will grow again. I have never seen it fail. There will be a very fine fuzz when it first comes out. And it's very brittle, so it breaks easy, so you have to handle it very gently. But I know many, many, many baldheaded men that now have hair. They were bald and have hair because they got their diet correct. I make no claims and no promises. I'm just telling you it's amazing how God can restore the desert.

**Student:** Who is the ---- have anything to do with the worms also?

**Reams:** I wouldn't know.

**Student:** It could.

**Reams:** It could. It could, yes, it could.

We're talking about cause and effect tonight. And you need to know these things as you begin to see these numbers. And 10,000 times in the next couple of months you're going to say, now what did Doc say and you'll go back to your tape or get your secretary to type the tape and then classify it so you can find what you want quickly.

**Student:** Maybe you used to work at ----

**Reams:** Which you write on Wednesday. This is coming up on Wednesday. Any questions at this point?

**Student:** You were going to discuss the lemon juice this afternoon, but we got away from that. Will that be coming later?

**Reams:** No. We just might as well do it right now. Make lemon juice. Lemon juice is a hydrochloric acid, God's own natural hydrochloric acid. It is not a purgative. It is not a cleanser, as far as cleaning the colon or anything of that nature. It's simply an agent that the liver can convert into some 6 billion different enzymes with less chemical change than any other natural substance known to man.

There are some principles in giving lemon water that you want to be very careful about. Modern chemistries get patterned in the wrong direction. And as sure as you get that liver corrected it's going to repattern that body chemistry into some kind of pattern whether it is desirable or undesirable. And what you need to do is to be sure that it patterns it into a desirable pattern. Many times you will have to have tests two or three times a day or then once a day and then once a week and once every two and once a quarter and so forth or whenever it's needed. But it's very easy to follow your progress and you can hasten the progress of your patient by having these tests. You have to be very careful in giving lemon water to different people. People with ulcers, either duodenal ulcers, when you hear a doctor say duod'enal it means you never had any Latin. It's duode'nal, meaning twelve. In Latin, twelve little ulcers in a cluster is a duodenal ulcer. And in other ulcers in the stomach or in the digestive tract. Most people will tell you about 24 to 36 hours after they start drinking lemon juice that it burns so badly that they can't stand it any longer. Take them off of it immediately and have them make fresh cabbage juice with their juicer and start drinking about an ounce every two hours, but you must make the cabbage juice fresh every time until their body begins to accept it. And in three or four days be drinking 6 to 8 ounces of fresh cabbage juice a day, three times a day, 6 to 8 ounces three times a day of cabbage juice and you will have an ulcer completely healed within a very, very short time, probably three weeks.

Also, it makes an excellent thing to have them to chew honey and the honey comb. That wax that's in honey comb also is an excellent thing for ulcers. Then as soon as you get the ulcers under control, then you can start getting the liver going. Use fresh cabbage juice only because the cabbage juice will lose its vitamin, begin in 20 minutes and after an hour you have sauerkraut even if it's in the refrigerator. It'll do a little bit of good but it also will cause some burning. Most of the time when you tell a patient that has bad ulcers [about] cabbage juice, he'll think you are crazy because the very moment that you mention anything about cabbage, just try

to eat Cole slaw, and it's caused them so much pain and misery, until he'll think the cabbage juice will do the same thing. It won't. It is the most soothing thing that you can do for an ulcer.

**Student:** And it won't bounce?

**Reams:** Praise the Lord if it does. Put some more down. I have never known it to bounce unless it was mental but after two or three times it'll stay down. And you can heal the persons ulcers with it.

**Student:** No, I was thinking about burping it.

**Reams:** That's alright. I was thinking about upchucking, but that kind of thing, that's great. If you'll start off with only a tablespoon full at a time, or an ounce or two at a time, it generally doesn't. But if you jump into it heavy, it probably will.

**Student:** How do you feed them?

**Reams:** You should eat very lightly for the two or three days on cabbage juice if you want it to do the ulcer the most good, very light.

Then go back on your lemon water systematically. Now, talking about people ten years old and older, start them on four ounces of lemon juice every hour for a certain number of hours per day. Now go to their weight. People weighing less than 100 pounds or 110, 32 ounces is enough. Three ounces of fresh lemon juice in 29 ounces of water. For people weighing 110 pounds or more, use four ounces of lemon juice to 36 ounces of water. It must be freshly squeezed lemon juice. The canned lemon juice will not work at all. There is no effect at all. Only the fresh will work.

**Student:** Would you give those over -----?

**Reams:** 3 ounces [lemon juice] to 29 ounces [distilled water] for people weighing 110 lbs or less. Fresh lemon juice. For people weighing 110 pounds or more, 4 ounces of fresh lemon juice to 36 ounces of [distilled] water. It is best to use distilled water.

**Student:** 4 oz of freshly squeezed to 36 ounces of water?

**Reams:** Yes, distilled water.

**Student:** And then they just drink this all day?

**Reams:** They drink 4 ounces every hour on the hour. Then to people that weigh less than 110 pounds, drink 4 ounces of ounces of plain distilled water on the half-hour between and people that weigh more than 110 pounds, drink 4 ounces of

[distilled] water on the half hour between until they drink 40 oz water. Never, never, never, double up on the lemon water. Never drink the lemon water at the same time you drink the water. If you do, it flushes out too quickly and doesn't get all through your body and it leaves your laundry half done, internal laundry.

One very important factor to do is that if their sugar level is dropping too low, please have them put either honey or maple syrup in their lemon water or lemon aide and drink it just the same. That is the people with low blood sugar. You will need tests daily, a couple times a day, on people with extremely low blood sugar.

**Student:** Is there any amount of distilled water that you use for under 110 pounds?

**Reams:** 32 ounces, yes. You can expect a patient that is ill to go through a change in body chemistry when you put them on this program and absolutely no food for the first three or four days. Go by your numbers in which you will learn more about those numbers as you do them. And a person who has an extremely lot of weight, fat on their system, sometimes goes 6 days without food. But anytime a patient loses excessive energy they'll become a bit weak. Don't get excited about that. But excessive in extremely great loss of energy, then increase the sugar content of the lemon to pick up the energy to accomplish what you need to accomplish.

**Student:** Do you recommend that they have a colonic at the same time? Or does it vary with the individual?

**Reams:** That varies with individuals. You will learn by your test who actually needs colonics and who doesn't.

These are factors to remember in this lemon water. If the patient lives too far away, and can't get back daily for a test, and you want to change the body chemistry or try to change the body chemistry, do not put them on lemon water. Just put them on plain water. Divide their weight by 2 and let them drink 4 ounces of ---

[end of tape]

**Tape 4 – Side A**

Hospital and they called up with a doctor bill, ambulance bill, hospital bill, and you know who they are going to blame? You. The diet you gave likely killed them. I had a lady come into me one time and said, "Doctor, I've been on your diet three months and I'm nearly dead." I looked at the card and I think to myself, "What's going on here?" I said, "Isn't this your first time that you're in my office?" "Oh yes", she said. Well I said, "How could you be on my diet?" She said, "I borrowed my neighbors." Well I said, "You wasn't on my diet. You were on your neighbors diet." What I'm telling you that for, is that these things are made for individuals. And if you fail to go by the numbers, you might as well forget it. Go by the numbers. Go by them.

Do what they say to. We'll tell you what they say, as we go through the best we can. You are going to go home with a lot of things that you can put to work right the very next day. It's going to be an excellent thing for you to do, an excellent thing.

**Student:** We've got a lot of people in our group that because our pastor came home drinking lemon juice, you told him to drink it the rest of his life, they thought well, if he feels so much better, I ought to drink it too, so they've been drinking it on their own. So, three months now some of them.

**Reams:** A lot of times they can do that and they're not going to hurt themselves because they are going to quit when they feel like it. But it really doesn't accomplish very much. Oh, when you're young it may do a lot of good. But you can drink lemon juice until the cows come home and it won't change your body chemistry unless you watch it on the instruments. That lemon juice can be just as powerful a food to you as any of the rest unless your body chemistry re-patterns. Here's one of the things that's going to surprise you, really surprise you. And that is you can have a body chemistry pattern completely wrong where everything you do is against you, and you can change that body chemistry pattern and then continue eating the same food you ate before if they were a good variety of foods and it will stay, it will stay. I'm talking about people who are really trying to live up to their health food plan. I've seen that over and over and over again. They got patterned wrong, when they were eating the wrong kind of foods, and they never have changed. They have not changed. And they have not taken steps to change it, they were eating the right kind of foods, but their body chemistry was patterned wrong. So you will find this to happen.

Let me also mention something about withdrawal as an effect on drinking lemon juice. A withdrawal is a complete about face in body chemistry. When the person that is an alcoholic and comes back to being sober again would go through a withdrawal, a complete change in body chemistry. A person that's on pot or dope,

either legally or illegal, when his body chemistry comes back to normal, the deeper his is hooked, the more severe the withdrawal.

One of the very outstanding neurologist doctors in Orlando brought his wife to me about 1968, like a walking skeleton she had been through John Hopkins and also Mayo Clinic. They could not find a thing in the world wrong with her. She was about 37, 38 years old. Had little children. She was not able to take care of them at all. And they couldn't find a thing in the world wrong with her at either of these hospitals.

When we ran the test and it came to me, I was quite surprised because I couldn't really believe my eyes. She was hooked on Irish potatoes. She had to have them three times a day and they were turning to an alcohol in her system, and the alcohol was causing her to be inebriated. The inebriation was causing her food to be preserved and not digested. And she just had to have those potatoes three times a day. And do you know, I have never seen an alcoholic or a person hooked on anything that went through any more severe withdrawal and the craving for potatoes for six months afterward. I said, that after she got through the withdrawal you could tell a terrific change in one week the energy she gained, but two weeks you could make a world of difference, and in two months she was able to do her house work, gained weight, and driving her car, but she would get to craving for potatoes with such a strong power until she just couldn't hardly resist eating potatoes.

I told her, "Anytime you get that craving, you call me, day or night, and I'll help you to get over it." It was about six months before she got where she didn't crave potatoes anymore and then she said, "What was it about potatoes that had me hooked? I don't care a thing about them anymore." I said, "Don't you eat another bite of them because you'll be hooked on them again." This is one case of being hooked. There is not anything that you can't get hooked on. Coffee, cigarettes, Irish potatoes, turkey, beef, you can get hooked on anything. So don't be surprised when you get these tests and find people hooked and that's the reason they go through withdrawal. So, therefore, I want to repeat what I said this morning, the wider the range of the diet, the safer it is. So I'm talking to you of these things to help you, as you see, because you will have other cases very similar to them.

**Student:** You gave up on lemon juice.

**Reams:** I've been hooked on it for thirty years. I was actually born under a lemon tree. Really, I was. Laughter. The house we lived in had a big giant lemon tree, about fifty or sixty feet high spread out over my mother's bedroom. I was born under that lemon tree. I don't know what significance that it has to my life, but I was. I got quite a surprise when I was in Dallas Texas the other day at a motel. I

had not seen you that morning, I was getting ready to leave, I was having breakfast. The hotel clerk came over to me and said, "Are you Mr. Lemon?" I said, "No. Sir. I was born under a lemon tree. Would that help any?" He said, "No." "Then, you can find another fellow in there who's named Lemon." I was wondering if I was beginning to look like one. It might be interesting to know that there's a grove coming in that's called lemon juice apple juice. Laughter.

So, a lemon, wisely used, it would be a good thing in your life. But it is not perfect or claimed to do, but it is to help the liver rebuild. And it will do a marvelous job if used wisely.

Children from four to ten, if you will take that child and tell him that you, suppose he's a diabetic. And you want him to drink so much lemon juice a day, according to his weight, divide it out, by his weight or her weight. And if they want to be big like their mommy or daddy or where it's a boy or a girl or so forth, if you get that child's cooperation, he's going to do a better job with it than his mommy. He's not going to let mommy forget it. It's amazing how they cooperate with it. If a child's problem is low blood sugar, which it seldom is in a child, many time you find it too high, but seldom too low. Then you can have them put sweetening in it, honey, and so forth. And sometimes a child that's very deficient in calcium and highly nervous, you can use the cyclamates then and it's perfectly safe to use the cyclamates, sucraol, sweet and low, all this propaganda about cyclamate causing cancer was only the money contributed to the agricultural fellows in Washington by the sugar people and by the sugar beet people in order to get people to be afraid of using the cyclamates. It's strictly propaganda and there is nothing to it biologically speaking. I've used both of them for years with various people and I haven't found one case of loss of energy because of the use of cyclamates.

**Student:** Can you use the cyclamates with the lemon juice or are you just talking about using cyclamates by themselves?

**Reams:** Probably don't use them by themselves. Use them in cereal. People that has a high blood sugar, but just can't bear the taste of it, then you can try a little of the cyclamates and decrease it.

Many times in starting a child on this program, don't start heavily. Suppose you want the child to take, let's say, 24 ounces of lemon juice. He weighs 48 pounds. And you will start off by giving the child two to three ounces a day for two or three days, then six ounces and then increase it over about four or five days. And they will be taking it all and like it. They like it many times without anything added to it at all.

One more question you're going to have asked, if you tell a person sometimes to drink the lemon water and put honey in it or maple syrup, natural maple syrup, and

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they could say, "Well, I like it best without it." And you said, "I told you to put either honey or maple syrup in it and if you don't do it, forget it." Because they are going to get in trouble. Tell them when it needs to be and tell them when it don't. But don't let them tell you. Okay? Any questions?

**Student:** Yeah, when are you going to know when it needs to be? On this here instrument?

**Reams:** We'll show you tomorrow, not tomorrow. I think it's the day after tomorrow we'll take up the refractometer. Actually, it's one of the easiest instruments to understand, so it comes last and you'll need the least instruction on that instrument about the others. And that's the reason we are starting tomorrow with urea because that's the one that will give you a fit when you get to testing. And you will need a lot more experience with that one than you do with the refractometer. Any questions?

**Student:** It seems like you answered your own question.

**Reams:** Yes sir. On these cards, we find that this size of card, these are some cards that we find are highly satisfactory.

One other thing that you are going to learn very quickly, that whenever you tell a patient to do something, you won't have to write down, did this, take this, take this, take this, you won't have to write it. Because when you see those numbers on the card, you'll know what you told him to do. You will know if that number's there, you told him to do so and so. And therefore it's very easy. It saves worlds and worlds of work. I have seen as high as ninety six patients in a day and most all of them new. And you've got to get them through the office in an awful hurry to do that. Of course, it wasn't an 8 hour day. It was about an 18 or 19 hour day. The reason that I didn't find out is that kind of a method.

The first thing you want on the card up in the right hand corner is the surname. Then the given name or initial. And then Miss or Mrs or Mr., if it's an adult and a telephone number. Try to get all that on the top line.

The next line, the address. Street, maps, route, apartment and so forth.

The third line is the city, state, and zip code. Skip a line.

The left hand side, the left third of the card, you want their age, center their height, and you want their weight at the right. Age, height, and weight. You want them in this order every time. Do not deviate that order. Then under that, skip another line.

Then you put the date there. Some doctors like the time of day, but I don't find it necessary. I don't find it necessary to put the time of day.

Then, the first reading is the sugar reading. The next, which would be the carbohydrate. The sugar reading is the same one. That should read between 1 and 2.

Then your next one is the pH reading.

**Student:** I see, the sugar reading is between 1 and 2 and then your pH reading right?

**Reams:** The next is the pH reading. A little p and a capital H. The little p is a mathematical symbol meaning activity of the hydrogen ions. The pH is compared to the hydrogen ion because it's a simple ion, one negative and one positive. And it's not as simple as it looks because of the variables in the Milhaus units of energy in the anion and cation structure.

The next one is the saline reading, between 6C and 7C, hundred, per hundred pounds of the weight of the person.

The next one is the albumin reading.

The next one is the urea reading. 3 over 3 is perfect. 4 tenths M for the albumin is the correct number.

Always under every circumstance, record them in that order. Do not change. Keep them in that order all on one line. Go across the page left to right. Yes?

Student: The urea reading was 3 over 3 right?

Reams: Yes.

Student: Same line as the date? Then write the year?

Reams: Yes.

On the pH reading be sure the line is straight. 6.40 over 6.40. It is not an angle line. I have more trouble with that with my technicians. They'll make a slanted line and it throws me for a loop still every time. I have to run lab down which. Write me a straight line there. Because as you begin to deal at the higher calculus, you are going to learn more about it. The slant of the line or the way it's written has a lot to do with the meaning of it. And also in the urea. The line is straight 3 over 3. It is not a fraction. When you angle the line it denotes a fraction. When you make a line straight, then you know it's not a fraction, it's a higher calculus.

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Now a first grader, second grader, third grader, they make it straight. But you're not in the first, second, and third grade, so write it like it should be.

**Student:** This in a line with the date or is it the next line below that?

**Reams:** The same line as the date is on.

**Student:** Can you explain the last one? Parasites.

**Reams:** Sir?

**Student:** Would you explain the last one? The 2.3 plus.

**Reams:** Urea?

**Student:** No. The one with 2.3 plus. Parasites.

**Reams:** Oh. Oh. Oh. Yes. Under the microscope, we will have about an hour and twenty minutes with the microscope in which you can see the worms actually in the urine. You can tell whether they are tape worms, or pin worms, or round worms, or flat worms, or what not. About the only two you have to distinguish, or only one you have to distinguish is pin worm or even tape worms or sometimes you have both. But that's done by a microscopic test. It's the easiest test, but you can very quickly learn when there's a loss of energy that's tested and tried. When there is not a carcinoma condition, advanced or not advanced, even minor, or whether it's nocolitis, you can depend on its worms.

**Student:** On this pH, is the top number the one that's done on the urine, and the bottom number the one that's done on the saliva? Is that the way it ---?

**Reams:** No, that's the urea. The urea is both urine.

**Student:** Yeah, but I'm asking about on the pH. Is that on the --?

**Reams:** The top one was urine and the bottom one's saliva.

**Student:** Yes.

**Reams:** Please keep them in that order. If you ever need to read one on the telephone to me and they are not in that order, I would be confused.

**Student:** I didn't think, I didn't know you said anything about saliva there.

**Another Student:** Urea, that is on the board---

**Student:** But on the board, but not here did you?

**Reams:** Yes, 6.40 over 6.40. The bottom number of the pH's. The bottom one.

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**Student:** Yes. The pH's. Yeah. Oh yeah. The pH yes.

**Another Student:** Saline at 6.7, what's that? What kind of a reading is that? It's something you read on here.

**Reams:** You read that on the Solu Bridge. Yes?

**Student:** Doctor, would you want us to mail these cards in to you, ah you mentioned earlier we should just keep this in the patients file.

**Reams:** You should mail me a copy.

**Student:** Mail you a copy.

**Reams:** Yes and with your findings out to the right, off to the right. What you found, or on the back of the card, or onto something. It should be attached and fastened to it because we want to put these on the computer.

**Student:** -----

**Reams:** If you have a bunch of questions or patients I'll come see you once a month. Or better too, it's reading the reading. You just write on a sheet of paper people and --- ideas. About how you ran on ten people on a sheet of paper. They come in once a month, or week to week, or the people that comes every day. Then you send those in about every week or ten days.

**Student:** Do you have it written that as sugar above it or do you just know what it is and just write anything?

**Reams:** You just know what it is. You don't have to. You can write it there if you want to. But I don't. I just write the numbers. I don't even put that one is sugar and one is saline or anything else. And if these AMA --

**Student:** I'll deal with that.

**Reams:** false prophets get down there and look at them, they can't figure heads or tails about them.

**Student:** So you don't have them labeled any of these things. You just have the five.

**Reams:** That's right exactly. They can't make heads or tails of them. Dead ducks can't quack.

**Student:** In other words, you don't want us to make a form like this and send it in.

**Another Student:** The doctor said, don't indicate sugar, pH and so forth just put the figures without any indication there.

**Reams:** --- that's right.

**Student:** And that's why it's important to have them in a certain order, so you know exactly what you have ordered.

**Reams:** That's right. So anyone looking at your card that's trained in this field it would be completely clear to them what that card says. Whenever you approach the math, you won't even have to write down what the problem is. You'll just look at the card and see the picture that you finally get that far up to do it, you just see the picture.

**Student:** I can see one reason for doing time of day sometimes especially if you're doing it three or four times a day.

**Reams:** But you don't write the first one, only on the rest of them.

**Student:** You can just put data in like AM or Pm or something like that.

**Reams:** Yes mam. That's true.

**Student:** I'm trying that.

**Reams:** I would like for you tonight to read that dolomite, that treatise on this page on dolomite, because there's so much false information about dolomite.

**Student:** There is more than one kind isn't there?

**Reams:** Yes but whenever you get at 99%, that's pretty close because that's what it will tell you in this article. There is many kinds. You get at 99%, about 35% or 34.5% of magnesium oxide, 65% calcium oxide, you know where 99% of it is. And then you've got some moisture content. A small amount of carbon is in natural dolomite. And that's the up. Yes?

**Student:** But some of these people say about the arsenic.

**Reams:** There isn't in any of it that I use. While you mentioned arsenic, it reminds me of a case I had some 24 years ago. I was servicing this man's orange grove. He had about 200 acres. If I was to describe him, he walked on his bad feet, but he had two walking sticks for his bad feet, bent about half over. About half over. He couldn't straighten up. And he was bent about half over. And whenever he sat down he had to just fall back. He was just like an L. He couldn't look up at all. He couldn't lift his head up. And this is the way he had been for three or four years. Very, very thin, and no one had been able to put a finger on

anything. When I run a test on him, and by the way, he was 80 years old then. And when I run a test on him I said to him, "Where on earth did you get all that arsenic that's in your system? I have never seen anyone who was this high in arsenic. You have enough arsenic in your system to kill ten people. And it was given out in doses. And yet, you're not dead because it was given to you over a long period of time or you got it over a long period of time and you've built up a resistance to it." He said, "I haven't the slightest idea where I got it from."

So I made him a diet to bring the arsenic out of his system. And within six weeks he had lost his walking sticks and walking straight completely, but the odor of that arsenic coming out was kind of rough. It come right out through the skin like salt. And then he said to me, he said "Now I remember where I got the arsenic from." He said, "When I was a boy between ten and eleven years old, I had a heart murmur and at that time it was advisable to give high amounts of arsenic." He said "It was then that I got arsenic in me and I've been sick all my life." He said, "I'm feeling better now than I've felt in 25 years." He had been in the hardware store business for most of his life, then he retired and he bought an orange grove.

It might be interesting to know that the man is still living. 104 years old and still runs his organic farm and still drives his jalopy truck that he has down to the auction in California. He said that he was born on Christmas eve. His wife was born on Christmas day. And they're both the very picture of health. Happiest two people, look about 66 and 62 years old and a joy to be around these people. And they are wonderful, wonderful people.

So most people die young because they plan to. I plan on all my patients living to be 100 and I give them diets to live to be 100. If they'll do it, they probably will, but one of the minerals that I give them is MinCol M-i-n-C-o-l. And on that one particular mineral, it builds the bones and the structure of the body. I give them that mineral and whatever their age is, I subtract it from a 100 and tell them to take so many of those tablets for so many days and then one a day until whatever that number is that makes them 100 years old. And you know, a lot of people start working towards it. They begin to work to live to be a 100 and therefore, it makes them a lot healthier on their way whether they make it or not. But the best diet on earth, as I said this morning, It's not an insurance policy for eternal life on earth, but it does make the journey a lot more pleasant, a lot less expensive, a lot happier, and one thing that I want to do when I leave this planet to take my vacation in heaven, I don't want to leave here sick. I want to leave in good health. It's terrible to take a vacation when you're sick.

**Student:** Just think about an ark of the land, one time I went on a grape fast, you know. When I got arsenic and lead poisoning from a grape fast, that's right and it took me almost two years to get that all out of my chest.

**Reams:** Well arsenic and lead, arsenic is two different things. It makes you all yellow. That's right.

**Student:** But what we pick might go faster.

**Reams:** Yes?

**Student:** How about dolomite upsetting the calcium phosphorous balance? I've understood that it doesn't. We may have stiff legged animals ---- .

**Reams:** Let me tell you something about dolomite. Have you read that article yet?

**Student:** I plan to.

**Reams:** Well read it. Read it closely. Because there's an awful lot of dollars in research in that article there. Dolomite is not available to your system. And magnesium is the greatest enemy proteins ever had. And many times, it is not the phosphate – calcium balance that it upsets. It is the protein balance which the phosphates can't operate without it because the proteins are electrolytes. So place the blame where the blame belongs not somewhere else. Now dolomite is a catalyst that causes the proteins you eat to turn to energy and not to urea. That is the why and wherefore of taking dolomite. You will find a few people who will convert that dolomite into the agent to, the magnesium in the dolomite to a salt, and therefore it will visit them until it's almost impossible to get any food to stay in their stomach any length of time, then just take them off of the dolomite. You will also find a few people that dolomite keeps them awake at night. So therefore, you'll have to use it in the early part of the day. So they are very rare and far apart. But it is the finest thing in the world that I know of to break the urea down when it's too high and to keep it down whenever you are in the zone where heart attacks take place.

**Student:** unintelligible.

**Reams:** Yes, it does. ----- Any questions up to here?

**Student:** In other words it's not doing ----

**Reams:** Sir?

**Student:** In other words you don't use it as a calcium.

**Reams:** No sir. Now the next question which is the final question tonight is, where do we go from here? Tomorrow morning we start on the urea.

**Student:** unintelligible.

**Reams:** I would have to have a test to see. I mean a lot of other factors could be involved.

**Student:** He feels a lot better. It's something. I don't know.

**Reams:** It's probably in the calcium's somewhere. Does his finger nails look normal?

**Student:** What do you mean ridges or ?

**Reams:** The fingernails or the toenails is one of the best indications of whether your phosphates are short or not, phosphates of calcium. Brittle finger nails. Cracking or ridges. Or a lot of white spots in them and so forth. That's a sign of phosphate of calcium deficiency.

**Student:** You said divide lemon water by two or three if you are working with a diabetic person on insulin. You mean instead of four ounces at a time?

**Reams:** Instead of dividing, in other words, yes. Suppose they were having four ounces of lemon juice in 36 ounces of water. You would only give them two ounces of lemon juice in 20 ounces of water.

**Student:** Oh, mm mm.

**Reams:** A ratio of 1:10.

**Student:** You said something about a hypoglycemic, a whole different area, you'll cover that later, by just using high sugar for a hypoglycemic.

**Reams:** Yes. You can on their, let me just say it this way, I'll discuss it. It'll be better later when we have some facts at our fingertips because right now it would be out of place and on your lecture in the chart denote it somewhere else. It will be a lot easier after you see these numbers on a card because any one number without the number, that person has to be there extremely low blood sugar or normal. It will denote high blood sugar right quick, real quickly.

One thing I would like to tell you about this sugar test, carbohydrate test. There is a zone between 2.00 and 4.50 or 5.00 sometimes 5.50. Let's take it straight 2.00 and 5.50. We call that zone, the zone of misery. We call the zone between 2.00 and 5.50 sugar reading, reading in percentage, zone of misery. And people who's sugar levels stays in that zone, just feel terrible all the time. They just don't feel good. It gets a little higher and they feel wonderful and they think they are well. Or it gets down between 1 and 2 and they feel wonderful. But in that zone, they're just not up to par.

**Student:** What do you do for them?

**Another Student:** Are you talking about his (unintelligible)?

**Reams:** Well, you will get this when we get into high blood sugar and how to bring it down.

**Student:** All the way from 2.00 to 5.50 or do you mean 2 to 5.5?

**Reams:** 5.5. We say 50.

**Student:** Yeah.

**Reams:** And the last thing I'm going to tell you tonight well be getting us a little closer.

The last thing I want to call your attention to tonight is found in the Eleventh Chapter of Leviticus. There you will find a list of the clean and unclean meats. And one of the most common unclean meats that are used today according to the health plan found in the Bible, is the eating of pork. When I was a young physicist scientist I wondered why God said that pork was unclean. Yet I realized that in his day, the diet in which Moses wrote this, hogs were truly a scavenger. Often feeding with lepers, illness, graves, dead people or one thing and another, and so forth, dead animals, but today I reason that, I mean today I'm talking about when I was a young scientist. I reasoned that man knew how to raise hogs and he fed him on grains and he lived on mats, and he kept him in a pen, and in fact we had music in the pen, and they had ribbons around their neck, and it was thoroughly cleaned, and it was different from that day but sill, the bible said, that pork was unclean and I was going to find out why, if it could be found out. I began to do research, not only on pork, but I did it on shellfish, I did it on rabbit, catfish, and some other unclean animals.

I found that in a pound of lean meats there is practically the same number of calories, very little difference. Then, I knew there was something else, and I worked for seven years before by accident, I stumbled upon on the real true reason of why God said for us not to eat pork or hog or the unclean meats.

I had a client in the engineering business that was very ill and he insisted that I give him a diet. Well, before I put him on a diet I said that, "I want you to write down everything that you eat every day and I want a test every day. And I want you to do this for thirty consecutive days and I'll give you a diet." Every day that man had pork, ham, bacon, sausage, the energy went down. Every day he didn't, it went up. And then I found out by more tests, that the unclean meats listed in the bible, digest in an average of three hours. The clean meats average about eighteen hours. The meats that are unclean, took or release too many calories of

heat too quickly and therefore burn up too many good cells, and therefore causes aging at a too rapid a rate.

You can also say, disease is growing old too fast. Loss of energy, same thing, just in different words. So, I then took him off of those things that caused his energy to go down, and gave him the foods that caused it to go up and in just a couple of months, he was in perfect health. This is one of the things that I did research on. I didn't generally do it that way, I can't imagine today why I did this particular man this way, but I was working on the framing that way it makes. I guess God just told me to do it that way. I don't remember, but I did it. So this is why God said, "Don't eat the unclean meats."

I have people come into my office now in their late thirty's and late forty's that look like they are seventy or eighty years old. And I take them off the high calorie foods, and in just six months' time, they look even younger than their age. So it's remarkable what you can do with diet. And this is why that God said that, "These meats are unclean."

Also, in your Bible, if you will turn to Isaiah 66:17 and read that, it will also be quite interesting about why you should not eat the unclean meats.

**Student:** List all those clean meats.

**Reams:** They are written in the eleventh chapter of Leviticus.

**Student:** Alright, can you think where they'd be?

**Reams:** Sir?

**Student:** I said even Rabbit's written there.

**Reams:** Yes.

**Student:** Web feet animals?

**Reams:** Yes.

**Student:** And fish with no scales.

**Reams:** Skin fish.

**Student:** Cat Fish is no problem.

**Reams:** Tuna Fish is a skin fish.

**Student:** And what about salmon?

**Reams:** Salmon is a scale fish.

**Student:** Sturgeon?

**Reams:** Sturgeon is a scale fish. There's two sturgeons. The American sturgeon is a skin fish, but the Japanese one is a scale fish.

**Student:** Are the scale fish the unclean ones?

**Reams:** They are the clean. Fish having scales and fins are clean. But some of those we can't eat like the gar, and the carp, and so forth.

**Student:** Some people consider carp a good food, a very good food.

**Reams:** Fresh water carp is, but salt water carp, you can't eat it.

**Student:** I have a patient who would rather eat carp than salmon.

**Reams:** Well fresh water carp is very good. It's a very bony fish. It has scales and fins, the fresh water carp. We call them suckers. It's what they're named, they suck their food. Something like a mullet. A mullet is a vegetarian and so is a carp. They suck their food and they have a very small mouth.

**Student:** No problem if they're a scavenger?

**Reams:** No, no, carp is not a scavenger and neither is mullet. Mullet are not a scavenger. They're vegetarians.

**Student:** If you ever went around where a sure line is in this river coming where these catfish and all these things are, you would see why you may not eat them, you know.

**Reams:** Right.

**Student:** chatter --- But then that energy is not dependent upon that counting on real timing times the Milhaus.

**Reams:** Yes.

**Student:** And an area I'm a little confused on too is that the Milhaus units can vary, for instance, different calciums can have different Milhaus units.

**Reams:** Yes.

**Student:** Other elements the same?

**Reams:** Well you're asking questions ahead of the whole thing. We'll come to that and show you. You're approaching it from a too high a place. You're going to have to approach it down here and get up to that okay?

**Next Morning Devotions:** Father, we thank you this morning for coming again to study more about life and health and the rules You've made. Help us to open our minds and to twitch us with Thy understanding to give us wisdom to handle and control people by teaching them the divine law so that they could be healthy. You want all of Your children to be in good health. Help us to help them and we shall give You the glory throughout eternity. This we ask in the name of the Messiah, the King of Kings. Amen.

This morning we're changing the evening lecture with the morning lecture. The morning exercise at least with the morning lecture so that we can keep all of our equipment here. At the time this chart was made, I felt confident we would be over in the other building, but since this is impossible we'll just change the lecture and make it final.

This morning we are going to start studying something about urea. I'm going to have a little bit of a review this morning. What is Urea?

**Student:** Undigested protein.

**Reams:** Undigested protein and in how many forms do you find the undigested protein? What are those two forms?

**Students:** Nitrate and ammoniacal nitrogen.

**Reams:** Ammoniacal Nitrogen and Nitrate nitrogen. That is exactly right. In what form do we find those two in the body? (no answer) In the form of a salt. You might bring that bottle from my desk of those urea salt that we have extracted from urine. It will be interesting for them to see. So this morning we're going to start a test that you will take this bag and pass out the specimen bottles. The first thing we'll do is to get a specimen. Now I figured it would be a very excellent idea we trade specimens.

No, that not the ones. That's not the specimen bottles. We're out of – I know, but that's not the specimen bottles. Everybody needs one of those. Where are our specimen bottles? Maybe over here. No. All they have bring them--- I don't know where they are. There's supposed to be a box of specimen bottles and I bet we forgot them.

We'll have them over in a matter of a few minutes, but anyway in the meantime, no sir, I'll tell you what you do with these bottles now. Take these bottles, open them up and fill them about half full of rubbing alcohol. In this bottle, I want to show you something, every bit of this is highly kind of technical. Now, these pipettes are kind of expensive. They cost about a dollar apiece or right close to it. They are not

just ordinary soft glass. They are a good glass and they're hard glass so they can clean them. The softer glass coats and coats and coats and you can't use it. One of the first mistakes that you can make. Is by dropping this pipette glass in that into the bottle. Whenever you put this pipette back in the bottle for cleaning and sterilizing, please put it down easy. Because if you don't it's going to chip the end of it and a chipped end pipette is worthless. I have a way of teaching my technicians not to drop them in there. I accuse them of chewing the end off. And that's all you have to do one time. Is to accuse the technicians of chewing the ends of these pipettes that they dip in urine with. And I want to tell you that they are embarrassed to the nth degree because the ends are broken and then they remember to put it back easy. And then you won't have a great group of broken pipettes. I have seen them astounded to the nth degree when I was a going and finding a group of pipettes with their ends chipped off and I generally looked at it the first day I have a new technician. Tell them because it doesn't register until you find a pipette broken. So, that is one way to help them remember.

We will start working with the bottle in the cellophane wrapper. You may open that bottle but be very careful with it. Before you do that, we'll put about six layers of towel down on your desk, so this will not get through to this table. If you do we're going to have to have some damaged day tables because you're dealing with a highly concentrated sulfuric acid with some other ingredients in it. Where are the pipettes with the caps on them for putting in this? The little short pipettes, where are they? Well you better call for them. Better call for them. With the little short pipettes with the caps. The bottle cap pipettes. They should be here. Also, be sure to open your soda box. So if you get any of this on your finger, you can touch it on the soda quickly.

You'll be using that one pipette. Now what I would like you to do after you put about six layers of towel down, as soon as this comes, I'm going to tell you the process that you follow. You get a personal extract solution. You must have a special pipette. I beg your pardon, the reagent number 1. Reagent number 1. You will take six drops of that reagent number 1. Universal is for soils. The reagent number 1 and put those, see those little cups? Those little porcelain cups? You put six drops of that reagent number one into one of those cups. You drop one drop of urine into that cup. And when the pipette that you put one drop of urine into the six drops of reagent number 1, you concentrate that either for 120 times or for one minute. Just concentrate it gently, but be sure there's only one drop in. Be sure that the pipette is comparatively free of any other excessive urine. Concentrate that for one minute or mash the pipette and suck it in and out gently for 120 strokes.

Then you take one drop of that solution and put in your well plate, in one of your well plates. But today, during this test, I want you to put in while you're learning,

one drop in three of the well plates on one side of the well plate, but put them on the opposite side from you. Put it in the opposite side from you. For instance, this side is opposite me here. So always put the nitrate nitrogen on the side opposite to where you are. Put it on the opposite side. There's a reason for that because then when you record it on the card, it's the top number. It is the top number on the card and it's the top number in your well plate. Then in about three minutes, this depends upon the temperature a color will begin to appear in this well plate, and it would be a very good idea during this beginning period, or for the first two or three months, or until you get the same reading in both wells every time, and you should get the same reading if you've got the plates clean, and you're pipettes clean, you'll get the same reading in all the plate. But if you do not get the same reading, then you should do it all over again in a plate that you know is clean.

Now in cleaning these plates, you put these plates, you dip them in soda water, I put soda in them first, and then be sure that it is thoroughly clean. Nothing will clean this any better than soda. With the baking soda. So this is the principle you use to keep your equipment as clean as possible. (Reams talking to an assistant: Also, work on this with the lights on, work on this with the lights on, turn them on. Well we just won't have them do it until we turn the lights on. It's a little dim with the lights off. That's all spread it, that's with this, that's just.) So, these are the principles. Now these will come up in colors. There are no charts at the present time on these colors. And we are going to teach you to memorize those colors as they come on. It's a rather easy thing to do. It's not a difficult thing to do. So I'm going to draw some pictures here on the board and give you a little idea of what to expect when you see these colors. I wrote this on the board if anyone wants a copy of it, got to get it quickly. Why against me, you can't be sure, go by the numbers. Go by the numbers.

[end of tape]

**Tape 4 – Side B**

Welcome, that this brings up that he's an alcoholic and he doesn't drink a drop, no whiskey, no alcohol at all. What is happening is his pancreas is manufacturing too much alcohol. Therefore, he is so tired and so sluggish, he has got a hangover, he just wants to go to sleep. And this is what's happening and the finest thing in the world to do for this condition is to drink some ordinary, I would suggest Maxwell House coffee that is black with no sweetening in it whatever. Caffeine is the greatest enemy alcohol ever had. And it will cut that alcohol down to normal and he'll just feel completely rejuvenated, but he should drink it in the morning so it will be acting at the time that the alcohol is becoming available through the day. His body temperature is a little bit above normal. He is warmer than normal and you are going to find many people with this condition.

So, on these kind of cases, recommend a small amount, or a very weak form of coffee and it will be amazing the fine result that you will get. But as soon as the body drops back to normal, according to the instrumental readings that you have, then you won't need the coffee any longer. This is one reason also why colored people live a more relaxed life than the ordinary average white person is because the black skin picks up more heat having a tendency to convert more of the sugar or the glycogen manufactured by the liver going into the pancreas. Instead of becoming insulin, it becomes alcohol and therefore he is relaxed and happy go lucky, easy going fellow. So, this is one of the factors that we will study when we get into the study of sugar readings. Question?

**Student:** Yeah, will you say again what the pancreas is doing? I missed it.

**Reams:** The pancreas is manufacturing too much alcohol, probably not enough insulin. Yes?

**Student:** --- black man in a cold climate would not pick up as much heat and therefore would not have that problem?

**Reams:** That's true. That's right. The northern colored man is generally much more active than the southern.

**Student:** None of them like the cold.

**Reams:** They don't like it. They tolerate it, but they don't like it, no.

**Student:** Actually, his food is actually fermenting in order to make alcohol.

**Reams:** No sir. No sir. In our bodies food does not have to ferment in order to make alcohol. It is made by a direct process of manufacturing done by the Islets of Langerhans in the pancreas. It does not require fermentation.

**Student:** That's a good question because everybody thinks it would ferment, but it doesn't.

**Reams:** It does not. It's a manufactured product.

**Student:** It's the food isn't it in the stomachs of cats and dogs that will cause gas to come out.

**Reams:** If you did, you would blow up with gas if anything like that was happening. No, it's a manufactured product. But some of the later books on biophysics is making this now as positive statements. I've been telling it for thirty-five years now. And it's in some of the books now. It's been accepted and proven by others, other than myself.

**Student:** What's he going to do? ----- To reverse that.

**Reams:** Yes. Yes. Any person that is too hot all the time, and everybody else is normal, has a pancreas manufacturing too much alcohol.

**Student:** Most of the people are religiously opposed to alcohol and coffee. Can we give them caffeine tablets or something?

**Reams:** I don't know. I've never tried that, never tried that.

**Student:** We've doctored the coke with a ---.

**Reams:** It does it, but it doesn't do it near so well. I have not had any problem with this with people regardless how religious they were providing it was given to them as a deficiency in their system. And it was no more than a medicine that was given to them.

I have had people that were freezing to death all the time, who's pancreas did not manufacture enough alcohol. That I have given them substances like zest tonic with a preservative alcohol in it and they refused to take it because it said alcohol in it. Then I made them up another drink in the lab that had the same thing in it, but it just didn't say alcohol on it, and they took it and didn't know it and it worked beautifully.

**Student:** Dr. Reams? It should be black coffee and not the decaffeinated coffee right?

**Reams:** No. It should be regular coffee. Yes, and they also say this, most of the decaffeinated coffee's today are not decaffeinated. No body's checking on them and there isn't any difference. Occasionally, you'll get one that is.

**Student:** Once the FDA checks that baggie.

**Reams:** I don't know. But a lot of decaffeinated coffees are not decaffeinated. About the Coco Cola, it used to have caffeine in it, but it doesn't have any more than the caffeine from coffee. About 15 years ago when Harry Truman was president the chemists learned how to make a synthetic caffeine and the Coco Cola companies quit buying coffee from South America, the price went to nothing. And many, many coffee farmers in South America went bankrupt, or were going bankrupt. So the governments down there, told the United States government that they would not buy anymore radios, washing machines, televisions and equipment from this country unless we took their coffee. And then the government started to sell the coffee they get the Coco Cola people to go back to the caffeine that was in the Coco Cola and the Coco Cola people refused.

So Uncle Sam is buying up a lot of coffee he doesn't know what to do with, in order to keep up the trade between the countries and today the synthetic caffeine in Coco Cola, is not harmful near so much as the stagnant caffeine used to be. Coco Cola is safer to drink today than ever. If you must have a stimulant, the caffeine substitute today does not give the effect that the old caffeine in Coco Cola brought about. The main thing you get out of Coco Cola today is not caffeine at all. It is the sugar content that gives you the lift and the carbonated flavor. However, there are some Coco Cola plants yet, in this country that insist that they have the real caffeine and are still putting it in. It is against the law of this country to ship Coco Cola across the state lines because of the caffeine content in the Coco Cola. That is why each state must have its own Coco Cola plant in cities and then the company can ship the ingredients to these companies. And there are some of these independent companies that yet insist on the caffeine, the old kind, but most of the Coco Cola sold in this country today has the synthetic caffeine in it because it is cheaper.

**Student:** Synthetic quite harmful?

**Reams:** A synthetic will not keep you awake. You keep on sleeping. You are just making its flavor and that's all there is to it. But you get ahold of one of those that has the real caffeine in it, and it'll keep you awake, if caffeine keeps you awake, just like coffee will.

**Student:** Speaking of coffee, whenever I stood at Dr. Gerling Hammer Clinic in Amherst, New York.

**Reams:** Yeah.

**Student:** He told me that the reason he wouldn't allow a person to drink coffee was because it has either in it.

**Reams:** Well, it has a little bit, but that's not going to matter a whole lot. Even the air we breathe has got a lot of either in it.

**Student:** He told us that if we had a cup of coffee, with either is practical if we put two buffer in it.

**Reams:** Well yeah, but who's going to live on that much coffee? Let me also explain something else to you about caffeine and coffees. Fresh coffee, freshly parched, the caffeine in it is not stagnant. It does not become stagnant until after it is parched. It is then that it becomes dangerous. Question?

**Student:** What becomes dangerous then?

**Reams:** The caffeine becomes stagnant about two or three days after it is parched. And that's when it becomes dangerous.

**Student:** After the bean is roasted.

**Reams:** That's right, after the bean is roasted, that is correct.

**Student:** What is the action of the caffeine being what ... ?

**Reams:** Well, caffeine is only a narcotic. It's a type of opium. It's a habit forming drug. But caffeine, the real caffeine, is an enemy to alcohol.

**Student:** Well is the synthetic caffeine as good as the --- for the treatment of these people that manufacture too much alcohol?

**Reams:** No. It won't work at all.

**Student:** They have to use the real stuff.

**Reams:** They have to use the real stuff, yes.

**Student:** Well what about a person that can't sleep? They have a horrible time going to sleep at night. What do you do for those kind of people? I'm married to one of them.

**It's the worry about sleep that does the harm and not the lack of sleep.**

**Reams:** Well I say this, never worry about sleeping at all, because lack of sleep does not hurt anyone. And when your body needs sleep, it's going to take it and you cannot stop it. What you do need is bed rest, but sleep is not important. It's the worry about sleep that does the harm and not the lack of sleep. One of the

finest ways in the world to go to sleep is to try to stay awake. Open your eyes wide and relax. Have you tried any of the relaxing exercises on going to sleep? Maybe the last day, just before you leave, I'll try it, but I don't want you going to sleep on me here. It's time for a break.

**Reams:** Today, it's is a lot safer to drink Coco Cola whenever you are traveling than it is to change water from station to station. It's the finest way in the world to have a miserable trip and get dysentery that will just worry you to death, is changing water every time, but it's better to take your own distilled water with you, than even to drink Coco Cola.

**Student:** Doctor, our minister went to Africa and he couldn't handle the water at all, so he just drank nothing but Pepsi Cola. That's all he drank. He got such a back ache that he could hardly walk.

**Reams:** It affected his kidney's there. Therefore it affected his kidneys. Now sometimes, let me also explain something to you, in some of the foreign countries, they put tea as a supplement flavor to Coco Cola, and it was probably that what he got when it gave him such a back ache. When everything else fails to give you a back ache, try Tetley's Tea, or Lipton's Tea. It will generally work. But sometimes, we recommend it when your body does not hold enough moisture. It causes the body to hold more moisture.

**Student:** What is it, smaller kidney's? That what where you'd find it?

**Reams:** Tea contains tannin and tannin forms little spongy particles in the kidney's that plugs it up like corks and makes the body retain too much water. It doesn't let the kidney's take the water out of the blood. I've seen people's arms swell up to be as big as their waist almost and their legs, retaining water. There's nothing real dangerous about it but very uncomfortable. The thing to do is to get the kidney's to function again and I don't know any way finer in the world than hot baths. Hot baths or sweats or anything to create a temperature.

**Student:** You know, we have had so many people come to see us, especially women who are kind of cold just like water, it's just, I always considered it to be a liver condition.

**Reams:** It's a kidney.

**Student:** Now I believe it to be a heart one.

**Reams:** Well, it could be, but the first thing on a case like that is to work on the kidney, and take all chocolate, all carob, all Tetley's tea, all Lipton's tea away from them completely. A sweat machine is excellent for those people to get them to seat. A sauna, sauna baths, are excellent in that case and just plain hot baths with

salt water with Epsom salts in it is an excellent thing. But when you take a bath in Epsom salts water, have the water as near to your body temperature as you can and plan to stay 30 minutes or longer. Be sure you have somebody to help you get out of the tub because you are going to need it.

**Student:** Have them take a quick breath?

**Reams:** What's that?

**Student:** Take a --- in?

**Reams:** No. A salts bath, an Epsom salts bath in lukewarm water. You don't want it hot, just about body temperature. That Epsom Salts will really suck the water out of you and also your energy. And you are going to need help to get out of that tub.

**Student:** How much Epsom Salts do you use?

**Reams:** Five pounds to a bathtub full especially if it's a real bad case.

**Student:** ---- Epsom Salt would it? (many people talking at once). Well that just pulls water through the pores of the skin. What happens if it's hot?

**Reams:** Well it's hot it closes the pores of the skin and it won't come out. You begin breathe (panting noise) you could passing like a dog.

**Student:** That's one place I found the ---- good ---- salt containers.

**Reams:** Yes. Oh yes. Salt doesn't change too quickly in the system. It stores it up in the fat. It stores it up in the muscle. It preserves the food in your stomach. In other words, you become a piece of salt bacon all over, preserved in salt.

**Student:** You don't recommend too much salt.

**Reams:** Whatever it takes to keep your numbers where it's supposed to be.

**Student:** Whatever it takes.

**Reams:** That's right. If it's too low, add salt, and if it's too high use a bland diet. Go by the numbers. Do not guess. Go by the numbers. Why don't you take a break.

**Student:** This fellow up in Red Bank New Jersey. He's 76 years old. I can't recall the name off hand. I'll have to send you his material. I spoke with him over the phone. He was chuckling and laughing. He said, "I haven't been retired 40 years or 30 years. Something like that" That guy made me so jealous over that phone. He uses virgin olive oil. He sells it too. It's green. He said it has the chlorophyll in it and so fourth, first run. You may want to handle that stuff. Maybe you already

do. I don't know. I don't know where he gets it, but it's a first run olive oil, it's a green form. He stressed it for the liver function.

**Reams:** I don't use it and I've got an energy restriction about all the time. If you go by the numbers, you're going to be fine, but go by the numbers or throw the whole thing out. Don't be guessing.

**Student:** But you have to know what to do with those numbers.

**Reams:** We're going to tell you. You're going to know what to do with the numbers. Yes sir?

**Student:** Suppose we go from here to a foreign country, can we get the chemicals to run the tests there?

**Reams:** Oh yes. No problem. I'm going to tell you though, I've been in foreign countries, when I get one foot out of the United States, I'm too far. They are nice to see, but there's no place like this and that's why I'm fighting for liberty here. I fought for it during the second World War and I'm willing to fight for it here until I die. Not just for mine, but for the posterity and everyone else's. Old fashioned liberty, I'm willing to fight for it. I'm not ashamed of anything that I've done. I've been in all kinds of cities. Sometimes, you might reason, well the majority is always right. They're not. Look at Noah in his day. Look at Jesus Christ in His day. The majority is not always right.

**Student:** They may rule.

**Reams:** That's right. They may rule, but they're not always right. The boss may say I'm always the boss, but he's not always right.

Alright, it's time to get back to work again. This is going to be a lecture. It's going to be informative. If you wish to tape it, you may. This lecture is the one we were supposed to give at 11 o'clock this morning and we changed it around for convenience sake. It will be just as valuable one time as another. Probably it will be a little easier to understand since you begin to make these tests.

[Something must have happened at this point while recording this tape.]

I got her on 5,000 units for about three months and then lowered it down to four, then to three and down to two, and then she got off of it completely in about eight months. She doesn't take any now, hasn't taken any for at least 4 years, 5 years.

**Student:** Did that amount seem to burn her much or not?

**Reams:** Yes. Yes she flushed but in a niacin flush you only get so hot whether it's a hundred or whether it's a thousand, it doesn't make a lot of difference. It lasts a little longer but her flush doesn't get any hotter. Yes?

**Student:** In essence how did you know or determine that the B3 was necessary?

**Reams:** In this particular test I would like to pull the card and refresh my memory on it. It would help, but it was plainly written in the card. She couldn't communicate. She couldn't talk. She couldn't carry on a conversation. She couldn't dress herself. She was a complete vegetable.

Niacin works in a number of different ways. But in her particular case, what it did was to lower the estrogen in her ovaries from manufacturing too much estrogen. And it lowered the estrogen down and this is what her particular case. I believe though our limits award and I've almost completed it. I've completed the math on it now I'll have a big overview big picture on it. Estrogen or testosterone is the cause of alcoholism or people getting hooked on cigarettes or anything else. It is a certain amount between normal and high and higher that breaks their resistance to one thing, like a baby, it gets hooked on something, it can't say no to that one thing. Then the power to say no is broken and to get this under control, it makes it much easier if the person can correct their habit and to reestablish their life. Also, the Lord Jesus Christ is a great help, at the same time, to get their eyes on a higher and better way of living.

**Student:** Kind of what you are saying is if the ovaries position is to produce too much estrogen is like a patient that gets too much insulin.

**Reams:** Yes sir.

**Student:** And this is done by a deficiency in the system.

**Reams:** By a malfunctioning of the liver. Yes. Also, sometimes it doesn't manufacture enough [estrogen]. Those people become insane. Their body does not assimilate the calciums and you will get a very good test, but yet the calcium does not quiet their nerves. It's almost one of those perfect cases with the numbers almost perfect, and the calcium is too much here, too much there, and a little bit lacking here. And yet the person will be about as insane and as crazy as a bed bug. And yet if you can get his testosterone or if they have their ovaries removed, get the right kind of estrogen and give it in sufficient amounts, it will park their nerves in a matter of minutes, but most of the time, one of the barriers why estrogen does not take is because the person's body is too alkaline and it can't take. So estrogen works best when the body is slightly on the acid side.

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Also, the amount of estrogen, you must be very, very careful about the amount that you give because it can cause hemorrhaging severely. So too quick a supply of estrogen will cause nose bleeds or hemorrhaging of the lungs or throat, so you have to be awfully careful in the supply of estrogen you give. There is two different kinds of estrogen and some works better than one, and another works better than another. But if you are just guessing at it, I would say that 2/5's of a CC would be sufficient estrogen to give any person at any time to begin with. And then, if you find that it works so many days, you can slowly step it up to 5 CC's and that should last about 28 days. Yes?

**Student:** How many days?

**Reams:** 28. The fact is it will be 5 cc's every 28 days.

**Student:** Doctor prescription item especially a chiropracter, it wouldn't be available approximately then would it.

**Reams:** Yes you can get it. You should have a doctor turn around and cooperate with you. Or send this patient to the doctor and ask him to do what you want done and tell him why you want it done of course in a test. And ask him if he will permit you to do it, or assign you to do it, or be his assistant, or work out some kind of a program like I have for the doctor to do it for patients.

**Student:** unintelligible

**Reams:** Too much salt and also it's generally it's too much vitamin E, then you need more vitamin K. You have to bring the salt down at the same time. And also increases the vitamin A. [students talking at the same time Dr Reams is talking]

**Student:** Well a lot of people thinks that has that problem haven't even taken vitamin E.

**Reams:** Well I understand. A lot of people's system manufactures too much vitamin E too, and no Vitamin K. The liver manufactures every vitamin known and a lot of them will probably never be known.

**Student:** How to help the .....?

**Reams:** Yes sir.

**Student:** Did you ever find any significant findings in people who stutter?

**Reams:** Some of them we've been able to help an awful lot and other's we haven't.

**Student:** Every case is individually mattered.

**Reams:** Start with a child, we can do a world of good. And after they get about 18 to 25 it's difficult. Kind of like multiple sclerosis. When we get started with a child we can do an awful lot of good with it. But if we get them after they are 25 or 30, if they ----- an awful lot of good. We had a lot of them that age that walked away. Conner and William says and walked away. That all depends too, on how long they stay on the diet after words, take of themselves. But I would just roughly estimate that we've had 80% success with MS patients. Yes sir?

**Student:** unintelligible

**Reams:** Barium? That there electrolyte, barium is not carrying the message from the brain down to various parts of the body.

### **About 75% of people classed as epileptics are hypoglycemic's.**

Let me tell you about another thing that you are going to run into. About 75% of all the people that are classified today as epileptics are not epileptics. They are hypoglycemic's.

I'll tell you about a case or two that we've had. Oh, ten years ago before I even retired, this man and woman called me up and I never had heard of them before. And they said, we, it was at some vacation, Easter vacation. They said, "That we could bring up, our neighbor girl over to see you that is having epileptic fits. She's five and eight or ten a day like a little ball with mathematical proofs. "She's in terrible shape and we would like to bring her over and see if there is anything that you could do to help her." They have to have a nurse with her most of the time or somebody that understands her. So I said, "Just bring her over. I'll see what I can do."

So I ran the test and when I ran the test, I had never met the three of them before. The man was sitting on one side and the woman was sitting on the right. The girl was sitting in the middle and this neighbor lady on the other side. And when I got the test brought in to me, I said to these people. I said to the girl, she was 28 years old, and I couldn't believe it, what I was looking at, because she looked like she was 48 because of the fear and the age and dried up look. You would have never thought she was a 28 year old girl. But I said to her, "You think you are an epileptic don't you?" She said, "I am." I said, "You are not. You have low blood sugar. I'm going down into my lab and I'm going to make you something to drink now. Drink it slowly and you will not have any more seizures today."

But the lady spoke up and she said, "Well she just had a seizure and I know she's an epileptic." I said, "No. Let me tell you something. You cannot tell the difference by looks in an epileptic seizure and a hypoglycemic seizure. You cannot tell the

difference. And there's no two seizures alike. And everyone's different". So I gave her that and then I said, "I'm going to give you a diet. And if you follow it, you will not have any more seizures at all." And I said, "I want to see you back in a month." And in a month she came back and she had no more seizures. I gave her another diet and checked her up to change according to the body chemistry.

Eight months later, she got a job working at a store full time. And a year later she got her driver's license. And a year later she got married and as far as I know was happily married with no more seizures. And this was low blood sugar and she had been treated since she was about 3 or 4 years old, for epilepsy and she was a diabetic with low blood sugar.

**Student:** Did she have lemon juice drink?

**Reams:** No, she never got lemon juice. She got some lemon water, very little of it, very little. She needed chlorophyll and she needed other things to build her up. But it's just remarkable what can be done with these diets.

### **A patient with coordination problems learns to crawl.**

Since I've been here, last year about March, here at Copper Hill her mother brought this girl to me. She was 19 years old. Looked like she was about 70, graduated from high school, two years late because of a problem which she then had. She looked like an idiot. And all of her face was an expression of an idiot. And she had been termed as a moron. And she was a straight A student in school but she couldn't put her hands anywhere she wanted at all. She twisted her face and made all kind of facial originature's. And she jerked her head and moved almost wrong haviour. It was something to behold. But when I run her tests they were just almost a perfect reading. Just had one little tell-tale thing in it, that indicated to me that her problem was coordination. She had never learned to coordinate her brain wave with her muscle.

So, I said, "I'm not even going to give you a diet. I'm going to tell you something to do, and I want you to come back in a month and do it. And what I want you to do", now this was a high school girl, graduated from high school, straight A student and a brilliant mind, "I want you to learn to crawl." And the mother, I could see, and the daughter's too, I could see their disapproval written all over. They had no intention of doing such a foolish thing as that. But their father was one of the executives in the copper mining industry and when they told him what happened, he said we have spent thousands and thousands of dollars and everything else it's done no good and they are going to try that too. So he called me up and had a talk about it and he said, "How can I do it?" He said, "How can we do it?."

I said, "If I were you I'd get a culvert about 30 feet long, out in the yard, and I would have her crawl through that culvert time and time again." And that's exactly what he did. He got a culvert and put a rug down and she started crawling through this culvert about 10 or 15 times a day, and still going to school. They came back to see me in a month and I would have never known her. Her whole facial expression had changed, and she was almost perfectly normal. You could still see some telltale signs of it. But the mother said to me, we thought you were crazy. We thought you were a quack. But we were so surprised when we found out that my daughter couldn't crawl. She couldn't crawl. Two months later, I dismissed her, a perfectly normal girl, and all her problem was, she hadn't learned to crawl when she was a baby.

Now this is telling you what you can do. So teach them coordination when the tests almost perfect, yet you can see that if she had been a moron, and had extreme low grades, and a trouble maker and all that, it would probably have done no good, but being a straight A student and still a moron, didn't make sense. So therefore, you are going to sometimes have to use horse sense along with these readings to try to figure out a problem. Cause and effect. Yes?

**Student:** That is actually more common than most people believe. In the field chiropractic analytic with kinesiology, we see quite a bit of that. It's called cross poly mannerism. And it is really quite common. Not as gross a problem as that as you have specked out.

**Another Student:** Or, all I can say about that ----- almost a grand maul seizure --  
-----.

**Reams:** Is it male or female?

**Student:** Male -----

**Reams:** Is he effeminate?

**Student:** No. He's not a big husky guy.

**Reams:** Is he effeminate, a little bit effeminate?

**Student:** I'd say that he was.

**Reams:** Okay. I'll bet you'll say that he's got a uterus and ovaries.

**Student:** I don't know about that.

**Reams:** It happens. I don't know if that will have no effects on the chemistry, but this is very common. Many times they have ovaries and nothing else. But there is something there to represent a cycle. They are generally effeminate.

**Student:** What does that do to them? What exactly is that like?

**Reams:** I'm sorry, the crowd was making so much noise I couldn't hear you.

**Student:** What happens when that, what are you calling a solution for that there? I understand that. I thought you'd be -----.

**Reams:** The problem is the effeminate condition in his body.

**Student:** Why would that condition bother him?

**Reams:** Because of the conflict between the estrogen and the testosterone.

**Student:** ----

**Reams:** Sure, yes. That's the whole ----

**Student:** Seems like the best thing he could do is have an operation.

**Reams:** Well, this happens, there are men that have uteruses and do have to have hysterectomy's.

**Student:** Listen to me. Would this be the kind of a man that you operated on that made himself into a woman?

**Reams:** I don't know. I would have to know a lot more facts than I know now. But you asked me something and that's you do to my attention and I would think that this is habit. Many times women, huge women, grow a beard and have a deep voice have a testicle somewhere in their system. And it's producing – many times when this happens the testicle produces so much more testosterone than the ovaries do estrogen and therefore the testosterone out conquers the estrogen early in life and they become more masculine, and they grow a beard, and a deep voice. This is generally a very common thing to happen.

**Student:** This would be, the testicle would be located somewhere near the female organs, huh?

**Reams:** No. You can't tell where it is. It may be up by the kidney or maybe in the middle of the leg or up in the back, you can't tell where it is without tests, no. In fact, I just had a child brought to me that was born, well originally about five years ago that only had one testicle. And then he complained about severe pains in his back and yet his kidneys were alright. So after running tests on him for about three consecutive weeks, I found out that in all probability, the problem was caused because the pressure of the kidney on the testicle between the kidneys. So he had to be operated on and the testicle taken out from between the kidneys and put back in the right place and he's still normal boy at near 12 years old.

**Student:** If this testicle is located like that, does it have feeder lines running to it just like the other one?

**Reams:** Oh yes. Perfectly normal, except it's up in the wrong place.

**Student:** I guess.

**Reams:** Exactly. That was what the doctor said.

**Student:** What was that?

**Reams:** That was what the doctor said to the boy who had the testical in between the kidneys.

**Student:** Why would ?

**Reams:** My exclamation there, it wasn't in the kidney, wasn't any puss, and yet it was pain in there, and the kind of pain that he had was also was just out of seconds, or just if he had a little sex, nothing else. Anyway, about that, you must look at cause and effects. Please don't look at it normally than expect that it be anything but cause and effect.

**Student:** Would this show it on xrays?

**Reams:** Oh yes, it picked it up on an xray.

Scattered conversation during what sounded like a break.

### **A little insight into Vitamins and Minerals.**

**Reams:** With those word ----- we put them on the diet. The first thing you will want to know is what their body will do by itself without any help. And after two or three weeks after the body chemistry is changed and leveled off, then you supplement it. Then you use a crutch. A vitamin at its best is only a crutch. And if you need a crutch, it's a great thing to have. But you shouldn't be lugging that around unless you really need it.

**Student:** -----

**Reams:** Oh yes, yes. When you need a crutch it's a great thing to have. A question might be brought up: "How do you know whether the vitamin is doing you any good or not?" This is a vitamin now. I'm talking about vitamin's, not minerals, vitamins. When a person starts to take a vitamin, if you can feel a lift in three or four days by taking it, taking it for three or four days and then stops taking it, and feels a letdown, then he should continue. But if you can't tell any difference between when he is taking the vitamin and when he's not taking the vitamin, then it is an excellent sign that you do not need it.

This principle is not true with minerals. Minerals and vitamins work differently. Vitamins are active energy producers right now. Minerals supplies the living cell with hormone to produce the vitamins. So, you keep taking vitamins until your system has enough of the kind of hormones to manufacture its own vitamins so you will not need to take any.

It is easier to detect a vitamin deficiency than it is sometimes a mineral deficiency. I said sometimes. Don't forget that word, sometimes.

**Student:** (not intelligible)

**Reams:** That's right. Sometimes they're not. For instance, it's so easy the right kind of calcium you need. So very easy. And many you can add the vitamin then the liver will manufacture the kind of calcium you need. Therefore, it's a good idea to use your vitamin along with your mineral at the same time as well as your adjustments of food from starches, sugars, carbohydrates, and proteins as well as the rules you memorize, vitamin by itself.

If I had to have my choice of which one I would take either a vitamin or a mineral, I would take the mineral. But I would like very much to use the vitamin for effect. The mineral is never, never a crutch. The vitamin is. It's more complicated than in any vitamin.

**Student:** (unintelligible)

**Reams:** Like a light on top of the house for some reason.

**Student:** (unintelligible)

**Reams:** It's sometimes very difficult to get your liver to accept the kind of calciums and make it available to you that you need. And this can often be done easier by giving the vitamin along with it.

My granddaughter heard the rooster crow the other morning and she his telephone was ringing. That's the way she described it.

**Student:** (unintelligible)

**Reams:** Burn when you urinate? You can stop that in 24 hours anytime you want to. All you have to do is give one level teaspoon full of baking soda in water, twice in one day and it will stop it in 24 hours.

Every time you have burning in the urethra, you have found an acid system. The acid damages or blisters the urethra because it is very delicate and then the salt burns it. And the bicarbonate of soda will cut the acid and will stop that in 24 hours with cooking soda.

**Student:** Baking soda?

**Reams:** Yeah. Just on that baking soda.

**Student:** One teaspoon?

**Reams:** About that yes. About twice in a day.

**Student:** With water?

**Reams:** Oh, water is alright, or take it dry if you want to then wash it down. But it will make an absolute quick change in the pH of the urine. But it won't stay. It will do that job, but don't keep it up because if you keep it up it will displace the vitamin [complement] in your entire system. It's a one shot or two shot affair.

**Student:** It's hard on coffee too.

**Reams:** If you take it long enough it would, but just a little bit every time. Yes?

**Student:** I know a gentleman back home who has taken that. Who did that at least 50 or 60 years. I couldn't see advantage that it left about him. I don't think I could handle it. His fire was so much. I couldn't ----- couldn't believe it. In spite of it he was lucky to be stuck in an old operated food mill. -----

**Reams:** But see you've built up an immunization to it when it is young. And these people had a lot of snakes.

**Student:** Oh really?

**Reams:** Yeah.

**Student:** This would be an acid - alkaline if you follow it through wouldn't it?

**Reams:** Sir?

**Student:** This would actually be an acid – alkaline in their environment wouldn't it?

**Reams:** Yes.

**Student:** You said salt would be involved in that too?

**Reams:** No, just maximum salt in the urine acts like a little salt in a cut and brings a burn quite a little bit. I said, anyhow be a hero. Just go make it up for them and give it to them. That [baking soda] will fit in a capsule. And they rarely think you're a good doctor. People like to take medicine anyway. And if you ever manufacture any pills, instead of one bigger, make two little ones. They think they get faster benefit out of it. They like to take pills by two at a time instead of one.

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In aspirin tablets, many times you can get better results from an aspirin by taking one and an hour later, take the other one if you are not already asleep.

One thing I never do. I'll never fool a patient on what he's taking. I don't really see the pills and things of that nature. I never, never, never try to fool a patient at all. I've never done that.

**Student:** Did you say that in a food practice ----- would double that? Will the urine be over acid or be alkaline?

**Reams:** Acid. It's sour acid.

**Student:** I know at one time they the urethra had good kinds of issues.

**Reams:** Well to dividing it sometimes. Well to dividing it sometimes. It might have made the calcium available. Alright? In other words, the calcium is an oxide. Couldn't turn it loose and it made it available. There are so many things that could happen. But I would have never tried to a loose fastening with tender juice.

**Student:** Just throw it on there do the rest. [might be saying something else]

**Reams:** Yes, no doubt about it. Many times we can take bicarbonate of soda and pineapple juice. And the juice does a lot quicker, a lot faster. It's so quick they don't realize what's happening. And somebody has extended the principle in vitamin C at highly acid. You can take fresh grapefruit juice or pineapple juice, and put one normal ½ teaspoon full in an 8 ounce glass of pickling soda. Half fill that glass with grapefruit juice, fresh grapefruit, fresh orange, or pineapple juice. Let it start and let fiz and drink it while it's fizzing. You'll have a neutral vitamin C immediately available to you.

**Student:** (unintelligible)

**Reams:** Yes. In four ounces. Be very careful about your high blood sugar in this condition. This is not to be used with high blood sugar.

[squeeks on the tape from the recorder bearings going bad]

**Student:** How are we going to listen to the little tape somewhat if don't have any diet instructions until after we have read this trailer track.

**Reams:** I misunderstand you perfectly.

**Student:** I said, how are we going to be able to help someone after we have read this here ----- and then have no diet instructions to help them with?

**Reams:** Well, go by the numbers. If they need acid foods, give them acids. If their system is alkaline, give them things that form acids. If it's too acid give them

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foods to form alkalines. It doesn't matter what it .... That's all there is to it. Or if their sugars low give them high sugars or if their sugars is too high, give them food without sugars.

If they are too hot all the time, give them a little bit of coffee to drink, which cuts the alcohol if the pancreas is over making. If the...

**Student:** This stuff .....

**Reams:** Well, you don't have those people in a problem of being too hot.

There's many, many things that you are going to be able to do when you begin to think about this. This is why you need to get out and get your feet wet. And one of the things that I would greatly suggest to is this. Every time that you have a question, take time to write it down. And then we'll discuss these things or discuss the problems, the pro and con of it when you come back. Now when you come back it is going to be a question and answer proposition. But also, bring your equipment back with you when you come.

**Student:** This person was making a bunch of assumptions about a patient but made no mention of doing any RBTI testing and seemed to want Dr Reams to approve of his ideas.

**Reams:** I'd have to have the whole test before me, to answer your questions.

I'll tell you about one case that I had though. I was in a Dr. Hess's office, a chiropractor in Blueball, Pennsylvania. This patient was brought in to me that...

## **Tape 5 – Side A**

### **Low blood sugar, High blood sugar and Urea**

Record on your cards, if you keep a good accurate system, each respective reading as we learned to do it, as it is recorded on the card. Please do not deviate from that system what-so-ever. Always have your sugar or carbohydrate reading first thing on the card after the date.

The sugar readings alone do not tell you whether or not anyone is a diabetic or hypoglycemic or hyperglycemic or not, however diabetes condition is a malfunctioning of the pancreas that can be either too high or too low. But so many people only think of it as being too high. It is much easier to bring a sugar down than it is to raise it, much easier. And right now, I want you to forget all that's in the allopathic book about high protein or low blood sugar, because you see what will happen there, if you have a high urea reading and the high protein diet, they will not die of low blood sugar, but they will die of a pectoris heart attack a lot quicker. You might have cured them of a low blood sugar, but you have sure failed of a heart attack completely.

And never cease to be amazed at the successful operations but the patient died. The operation was a success but the patient died. Well, this is what you do not want to happen. You want anything and everything done for your patients' welfare. And some of the finest ways in the world to correct high blood sugar is by drinking water systematically and also at the same time, you must control the amount of carbohydrates that their eating. If you have a high blood sugar, and a high urea, it's easily handled because both work start coming down together. If you have a high urea and a low blood sugar, you must give carbohydrates while you bring the urea reading down by water or you'll have a comatose patient on your hands.

It is necessary whenever you have anyone with a high urea, dangerously high that must be brought down within a 24 hour period, and also a low blood sugar, you must run the test on sugar at least every hour until you stop that process. If your office hours are in conflict with the hours in which these tests can be moved, about two and a half or three hours before the time for closing at the office, discontinue the program for that day and then check on them for two hours afterword and see that the sugar is holding its own. Recommend carbohydrates to eat after they get home and even at bed time and then start your program again the next morning and in two days or three days you can bring it down to normal.

In the meantime, use as little food as possible because in all probability there will be some change in body chemistry which has a tendency to cause some people to be extremely nauseated. It's a very good idea to tell all patients to expect to be nauseated. To expect to be sick at their stomach. Expect to have a headache.

And when they tell you, "I've got a headache", do a "Thank God! Praise the Lord." Because you are passing the milestone that you should pass, to get this body chemistry where we want it. And it's true when they see that you know what you are doing, and you are telling them that they are passing the milestones that you have already told them that they were passing, they will have great confidence in you and they have a right to have.

If you do not tell them these things until they get into it, then they will have some doubt about it for a while. But tell them what to expect before they get there and believe me you will sew a patient to yourself for life.

I have never seen a case when the blood sugar did not rise through the night. After the water drinking treatment stops, it rises through the night.

Are there any questions at this point before I leave this and take up another subject?

One thing I want to call your attention to is a bottle of a solution here that they put the wrong pipette in it. If you put the wrong pipette in a bottle, you've ruined the bottle of solution. Okay, so please, please, please be sure that the pipette is clean. An absolutely clean pipette goes into every bottle of solution. If you change one it will change in solution. Even the alcohol will upset it because of the pH change in range and so forth. And once this happens it's worthless to you because you cannot read the reading. So if it has happened to you we will give you another bottle because it was allowed poor in method.

**Reams:** (unintelligible words) Please don't put the wrong one in. Okay?

Any questions now about the sugar?

**Student:** You didn't say was there was any other special context with salt.

**Reams:** Yes. What's that?

(unintelligible words)

**Reams:** Now on the pH readings, we will start on the pH readings sometime tomorrow. We will probably start on them at the 11 o'clock hour instead of the 2 o'clock hour.

### **The pH readings – Cause and Effects to look for.**

The pH readings. The pH readings are made with these little bottles. We will use the same plate. Be sure the plate is absolutely clean. Put saliva in the bottom three next to where the thumb is. And then put the urine in the top three. Now when you first start, it's a good idea to use, it's a good idea anytime, to have three

saliva and three urine all the time. Because when you are dealing with these reagents for a pH reading, if you'll look on the bottles, you will see some numbers on the side of these bottles. Look closely and you'll see the range of the pH reading. On the Bromthymol Blue, the range is from 6 to 7.6 of the Phenol Red, it's from 6.8 to 8.40. And on the Chlorphenol Red it's 5.20 to 6.80. We also have another bottle that goes lowers than that one. (do we have it here? Another bottle that goes down below. I'm going to use that one also). We also have one called Bromcresol Green, it starts at 3.80 and goes to 5.40.

If you find anyone with a pH of 3.80, you will find them seriously dead because it don't get that low and still live. I've never seen one that low. No-one knows exactly where the low pH is. Very few of them get below 4.80. I have seen a 4.60 one time, but it was a very, very sick person, very ill.

**Student:** The body is very acid person.

**Reams:** At that phase, yes. They are practically dying with cancer then. It's almost out of control at 4.60.

**Student:** Did the person live?

**Reams:** Yes. So, no one not knows exactly where they died. You stay in long enough, you'll find a few. But those low ones are a long way apart as a general reading. So then, you know, I had one job of these solutions. Start with the lowest ones generally. And use one drop of the urine at the top and one of the saliva at the bottom. And if it turns to yellow it is lower than that reading. If it turns extremely blue, then it is higher than that reading. And the same principle is true. And if it neither at its or its lowest it's somewhere between those two ranges. We will have some pH charts tomorrow. I ordered a dozen charts. I hope they are here. If not, we have two or three we can use until the others come. But you can very quickly learn to read, but when you know the range that you're reading, you can take it step by step to know where you are in a pH range.

There is the very important factor in the pH range, very important factor, because the pH of your digestive track and of your system determines the length of time in which your foods must be of the clean foods, will digest. The urine is a specimen of the pH acidity and the cation activity of your entire system. Any time that you have a pH above 6.50 or 6.70 or 6.80, your food is slowing down drastically in its digestive process. In other words, to the alkali to alkali do not give off energy or anionic foods or anionic substances. To anionic substances does not give off energy and slows down the digestive process. And you can just about as well count on, that any time there is a slowing down of the digestive process, the pH is rising and there is obstruction in the digestive track and off of ability in the colon. At this stage, a colonic is advisable. A colonic can generally clear the obstruction and after

a few colonics it will drop back to normal providing you have the pH dropping down to its normal range. Just because someone has a loose bowel, does not mean at all that they are getting a complete, clean elimination. That's no sign whatever. Many times the very fact that you have a loose bowel, is a sure sign that the bowel is not clean.

## **Effects of Aerobic and Anaerobic bacteria**

**Student:** Do you have bacteria action.....

**Reams:** Yeah, bacteria have a role. Also, remember this, do not. Aerobic bacteria have a range of 20 to about 12. Your aerobic bacteria's. There are about 48 different kinds of known aerobic bacteria's.

**Student:** Aerobic or anaerobic?

**Reams:** Aerobic, aerobic bacteria. And some of them are very highly acid forming and some are very high alkaline forming. And the favorite food of aerobic bacteria is aerobic bacteria. They eat each other up. Whichever one gets there the process with the mostest, wins. And you need aerobic bacteria in your colon. And the aerobic bacteria with a pH of around 6.40 is called uropia bacteria and that is one of the ideal ones to have in your digestive track. One of the sure signs of all aerobic bacteria in your system is that when it is functioning normally, I'm not speaking about the high or low range of your pH, if it's normal this time, I'm only talking about the aerobic bacteria. The stool will practically be odorless, practically be odorless. (unintelligible) it's almost odorless. Many times, no odor at all. Just like the earth the Lord has blessed this earth. But anytime the anaerobic bacteria gets in, and anaerobic, too has different ranges in pH range, but none of them gets above 6.40 or 6.20. Most of the anaerobic are below that number.

Whenever the anaerobic bacteria get into the colon in sufficient numbers, they destroy the aerobic bacteria and the stool has an awful odor to it. I mean it's really obnoxious. It smells like something that's dead and so forth and that's an anaerobic bacteria in the colon.

## **Diverticulitis pockets – and high salt readings**

This all can be determined by pH readings and the pH on your chart. If it's, you are safe to give colonics with anaerobe readings or aerobic readings. But as a general rule, colonics are not needed if the pH no higher than 6.60 or 6.70 or maybe 6.80 at the most, unless there is or exists diverticulitis pockets.

Now you can generally tell when these conditions exist because there will be a high saline reading. Any time you have a very high salt reading, this is a salt made with the solo bridge. You can pretty well depend upon the possibility of diverticula

colon. Generally the older a patient gets, the worse it gets and many times there will be an extended abdomen, especially the lower part. So, these are cause and effects that you are going to look for in your pH readings.

**Student:** (unintelligible)

**Reams:** Sir?

**Student:** How does your (unintelligible).

**Reams:** Retreat the salt content and it'll go back to normal. Now, not even if it is enlarged. If it's a hereditary condition of a small intestine that's never grown, do to nerve problem, lack of genetic structure or deformity, then it's not diverticulitis colon, that is very small the size of a thumb or small finger, then you'll have to have it removed by surgery. A small tube.

### **Salt causes problems with arteries, veins, and colon**

But the salt is the only cause of hardening of the arteries, enlarging of the veins, and the loss of elasticity in the arteries and veins and the loss of elasticity in the colon, so it doesn't go back to normal and it's enlargement and so forth.

Even if a child is born with an enlarged colon and there is no nerve damage, it will go back to normal, but if there is nerve damage there, you may have to live with all your life if it is a genetic problem that was present at birth.

**Student:** About salt vs genetic condition (not intelligible).

**Reams:** Salt without. Salt does displace copper and zinc, yes. Thank you for helping.

Salt displaces copper and zinc which causes the intestinal walls and also the veins and artery walls to lose their elasticity. Your question was?

**Student:** On this 6.4 .... Liver dilution to 6.4 -----

**Reams:** You measure salivas for either above or below. It was below if there was a bad odor, very bad odor. It means that you have anaerobic bacteria in the colon. And if it's above then it's aerobic bacteria. You get into the various other types of bacteria that have a pH higher than seven.

Are there any questions at this point?

**Student:** On the colonics, is there any times it was definitely ----- required in some certain cases?

**Reams:** I would use it anytime they're above 7.00.

**Student:** That's almost a manufacture effect.

**Reams:** Yes.

One of the things you want to be very careful about in colonics is that there is not a puncture of the colon. Be very, very careful about that. We will tell you before you get finished with the course methods and ways to detect that, cancer of the colon. If it is a very predominating thing, and also what may happen is the two ---- things could happen. And that the minor thing that could happen is that the colon would collapse on you. If it collapses there's only one thing to do, is to send the patient the hospital where they got instrument to fill the colon back up with air and hold it there until it holds itself. Extension overnight thing to do. It's not really serious.

Another cause of collapse would be from this cancer went in the spinal column itself and there's no stopping it. If cancer has entered the spinal column, do not give colonics, or anything else. You're wasting your time, you money and building up false hope.

The next thing, they could sign them out on the colonic, and you have cancer of the colon isn't the little extra pressure, if you're not very careful in the pressure, could cause a rupture. If there's any possibility of any rupture, keep the pound tension below two pounds or one and a half and you will not have any trouble with your colonic machine. Do not build up 4 lbs or 4 ½ lbs of pressure anytime in a colonic if there is any serious problem in the colon.

The salt reading also denote the amount of cholesterol that's in the system. The normal salt reading is 600 to 700 [6C to 7C]. This is the normal salt reading. You have nothing to be concerned about until it gets above 10. And anytime it gets above 10 you can expect the beginning of a loss of elasticity in these veins, arteries and intestines. And when it gets to 18 or 20, you can also depend on that range that at that point, there is cholesterol forming in the arteries and veins and that there is all probabilities, varicose veins. At 30, you can pretty well depend on an advance amount of cholesterol in both arteries and veins and also advanced problems with varicose veins in the legs and also a perfect possibility of blood clots. So be very careful when you get in this range. And any range above that. You will find them up 60, 70 and 80 eventually in your readings. When you get up to 80. When you find that kind of a reading you are dealing with a problem that is going to give you some anxiety before you get it controlled.

**Student:** From much salt, you could be a heavier person.

**Reams:** Not necessarily. Sometimes they look like a dried up smoked sausage. Can't always tell. Salt affects some people's weight and some it doesn't. There's

no criteria in the high weight or a low weight. It does in some people. But there's other factors involved besides the salt or weight. Their weight before.

One of the things to be deeply concerned about when find a patient with a high cholesterol, varicose veins, especially legs that are swollen, or possibly the appearance of blood clots in the legs. Start a system of dissolving that blood very slowly by giving very high amounts of vitamin D. Probably 3 to 4 and 5 thousand units per day. This is rather expensive. But it begins to thin that blood until it will not clog up the heart.

Be awfully careful about any diet you give that person because it is perfectly possible for some of this cholesterol in the veins to break loose, clog up the heart, causing it to spasm, and the family will swear that the diet you gave them, killed them, and it did. But they would probably died without it just the same as with it. Just a matter of opinion on it. They were practically dying already.

The thing to do though is to dissolve it very, very slowly. One of the finest ways to do this is not with lemon water at this stage. Planning with distilled water. High amounts of vitamin D. No alfalfa sprouts. No vitamin K. Practically no milk at this stage at all. Because vita-milk also has vitamin K in it too. So be very, very careful about what you do. Also, no ice water. Drink no ice water or cold water. Try to keep hot drinks even though the weather is hot during this time, in order to help that blood dissolve down to its natural viscosity. Get back and circulate where it can be taken care of, handled its own out of the system. These are very important factors to watch whenever you are doing these readings.

**Student:** Which is the same thing in about theory?

**Reams:** When above 18 or 20.

**Student:** It says about 80.

**Reams:** Sir?

**Student:** It we be above 80 from what I've shared.

**Reams:** No. If it gets above 80, you've got a very serious situation on your hands. Be very careful. But anytime it gets above 18 to 20, begin to tread easily. The higher it gets, the more easier you work with it. But up to 80, up to 60 and 80, be awful careful, be awful careful, be performative. Do not try to dissolve it too quickly even after 18 or 20. But at 60, 70 or 80, it's difficult to bring it down slow enough that you can prevent an angina heart attack. It's very difficult because suppose that you dissolve it real quickly. Then the arteries and veins until they couldn't expand in context to bring the blood back to the heart or carry it out to the capillaries. So do this over a period of six or eight or ten weeks, and give the

arteries and veins a chance to come back to normal. Any time over 13 reading, but the higher it gets, the more caution you can use. At 18 to 20 or even 30, it's safe to give lemon water. But above that, go easy, go easy. Just use plain water.

**Student:** You wouldn't use that high at 3 or 4,000 units of E then. You would start them.....

**Reams:** Yesterdays vitamin E or all the way up to the top.

**Student:** Can you start that high? I was under the impression you had to start lower with E.

**Reams:** Well when they have a low one [salt reading], but when they have a high one [salt reading] start high.

**Student:** Can I say something? I had a lady that had (unintelligible)

**Reams:** Use your judgement, and you find a way to the patient and so forth. And things of that nature. Vitamin E is not going to hurt you. I've found that 6 to 8,000, it varies with different people. I just keep stepping it up until I get the right amount. It does the job.

**Student:** Unintelligible.

**Reams:** I was talking about a pretty high amounts, I mean when it [salt reading] gets up high.

**Student:** ----- If it's high then it's high vitamin E. Is there a correlation between the pH of the saliva and the urine?

**Reams:** There is a correlation, yes. On the saliva, the higher the pH of the saliva, the longer it takes to digest your food too.

Let me ask you, what is the main purpose of the saliva, besides keeping your mouth moist and so forth and helping you to get the food so you can swallow it. What's the main purpose of it?

**Student:** The enzymes in it. Tylon.

**Reams:** Yes, but really, just what does that do?

**Student:** Carbohydrate digestion starts with it.

**Reams:** Starts? Just what happens, saliva in the food, that you need it? Yes, you are getting warmer by the moment. What it does, it makes, it builds up a substances that surrounds it, that when the gastric juices of the liver start it, it gives off energy of the perimeter of the food particle rather than turning it all loose

at one time. In other words, it builds a fence around it. If you didn't you would fill up with gas real quickly. In other words, it slows down the process of digestion, by building a fence around it and this makes it digest must slower which is a good thing.

This also brings us to the point about people who say to masticate your food thoroughly. Actually, the less chewing you can do to get it saturated with saliva and swallowing it, the better off it is. Let you stomach break it up. Over a longer period of time it'll do a better job and you'll have less problems in the years to come. A lot less problems. Just one more thing I'm going to take up here and we will get going because the fellas have come for you for supper and then we'll continue tonight and finish the subject that we are discussing now.

The albumin readings. Normal they should be 40,000 parts per quart of water, providing you're taking the normal intake of water that we have already given you in the past. There is 20,000 drops of water, drops at least in one quart. And it takes 10,000 ppm to be 1%. So if you can see in that quart, one or two little floating particles --- let me say it this way, for each floating particle that you see in that urine, whenever you put a light on it, multiply that number by 20,000 and you will have the albumin count.

Now if it is dark cloudy, or cloudy, or quite cloudy, or misty, you have 4 million plus. But there is no use to read any higher than 4 million. If it's higher than that, forget about it. It doesn't matter if it's 4 million or above. What you are interested in is getting it down within a year or so. To down to normal with a normal amount of water taken in. But if it's above 4 million, pay no attention to it.

But suppose you had a person that you know has cancer. And that you've been feeding for two weeks. And she/he has been doing real well. And that the albumin reading has been above 4 million. Suppose all of a sudden it dropped to 1 million. Let's make it a little easier 3 million, and then to 2 million and then 1 million. By the day it is dropping. You are losing a patient. Because those dead cells should be thrown out and they are not. That albumin reading should not drop to normal until that person is well. And the more dead cells they have in their system, the longer it's going to take to get those dead cells out of the system. And these dead cells are high in urea, high in urea. So when you have a high albumin, you got to have a high urea. There are two things there that work hand in hand, a high urea and a high albumin.

If it should drop to zero, that you can't find any in it at all, all healing process has stopped. So, you better get on the ball fast or you are going to have a dead patient on your hands real quick. Whenever this albumin drops when it should be high, that person is losing energy rapidly. Are there any questions?

**Student:** How you .....

**Reams:** Just shine a light on the urine and look on the bottle. It shows you how to do it. Okay?

**Student:** You think the tape recorder is kind of hot?

**Reams:** I don't think so. You just take a piece of paper and copy that and write down. We are going to cover an awful lot. We are going to cover tonight. The unlearning process, what you should unlearn, we are going to learn about facts and fallacies, things that you have known. They are going to be pushed. We are going to do some pushing on go by the numbers. I'm want to ask quite a lot of questions on what you have learned about going by the numbers. And then how to seek perfection. How do you know it's perfect? How do you know these are right? In other words, some of the telltale proofs of this thing like I've just mentioned just now.

**Student:** These particles, what do they look like?

**Reams:** They are like a little ball looking through there. A little cox, a little bit of air or something. They look like a little diamond, a light piece of dust in a something, right. Or something of that order. We'll take a look at them tomorrow and show you what they look like.

Tomorrow morning we will start by doing a test with -----

**Student:** And the urea again ----- where?

**Reams:** Whenever the urea drops, the albumin drops, also the higher the albumin, the higher the urea.

**Student:** They should drop together?

**Reams:** Yes. No. They should remain high. That is when the patient has cancer or a lot of ----- or a bad carcinoma. Or anything like that, they should remain high. You do not want to bring those things down too quickly.

**Student:** How do you control that dropping?

**Reams:** You control it by the diet. We will be teaching you that on Thursday.

**Reams:** Urea and low acid are two separate things.

**Student:** How about blood urea .....

## **Philosophical thoughts to help supply the things needed to help people**

**Reams:** Fads. Roll Aids is a fad. Roll Aids is making a profit. I often say to people, I went to college for two reasons. One of reason was to learn how to stay out of jail. The other one was to live off the charge. And I flunked both courses. But anyway, when you come to think about it, when you are in school, we work on a report card number or letter denoting how satisfactory our work is. But when we get out in life, our kitchen is our report card. And the better you honestly earn, the better you honestly earn, the better the report you get. And the more you do for people, the more you're entitled to half copy so you can help more people, and you're entitled to a workman's compensation. A work managed wage even higher and I am sure you and I are working for the Lord and we are God's steward.

And I want you to use this and the reason I am not telling the maximum price but we are telling the minimum price so that we can be reasonable and fair to all people. Now some of you have bigger operation expenses than others. But what we don't want this to be used for is to take advantage of the weak and the maimed and the poor. The rich think that if you don't pay a big price, it isn't any good. They don't mind what you do to them. But the poor, let's see that they are not deprived of it. This is being a good Samaritan. But they fall out redoubt so that we can really help people with this great thing the Lord has taught us how to do.

Many times, I have seen doctors, they were powerful as doctors but really poor business managers. And many times we need to learn more about evaluating our time so that we can help people without having the problem of finances burning the patient up. Do not hesitate to tell people clearly and definitely what you expect of them, and whenever you do tell them that, they will think more of you. I am not telling you how to run your business. I am just imaginative of a few things that I would like to see some of you do.

In most of the cities today, in this country, there are not any colonic machines whatever. They are not available. And whenever a person needs a colonic and whenever the feces that stood in the stool so long until it's petrified and stuck to the colon, I know of no other way to get it out of there quickly other than a good intelligent person giving a colonic. And many times it will pay you fellas to install a colonic machine if there is none available in the city. It will pay you and you do not have to operate it yourself. You can get a practical nurse or just somebody that doesn't mind doing the work under your supervision, you can do this. There are a few states in the Union in which they are outlawed. Colonics are not permitted because they want everybody to die constipated. So, I could guess that if it's not available that you could begin to put into your future plans ways and means in order to render as complete a service as possible. To many of you, I don't know

whether it has appealed to you or not or have thought of it yet. But to have a young chiropractors or young assistant or whatever you need to train so they could do a lot of the counseling work for you and you would only have to hit the high spot. And this way, instead of seeing two or three or ten or twenty people a day, you could see 40 or 50 a day or more and do a marvelest job with it. And whenever you begin to use this method effectively and the people begin to get results, you are going to be swamped with calls. You are going to have more than you can take care of.

And it is a foolish thing to recommend a colonic to someone and one not available, or not anyone near. So you try, in every respect, to carry on a complete a service as available.

Another thing that makes it difficult, so many times for doctors in this new field is to recommend things that are not available. So many times, you know what they need, but to them it is not available. So try to make it possible for the things that you recommend to be available even if you have to handle those things yourself or get the local health food store or what not to handle it. But you be able to supply things that you are going to need to help your patient recover at the earliest date possible.

Now, here's another problem that you are going to run into, and that is these people that live so far away, that needs daily care, some of you are going to need a home or a sanatorium or a place, where you can take so many of the critical ill and you will not be able to do all the cooking and all the extra work for them, but you are going to need daily kits and they are going to have to be close by and it is a great responsibility to take this on but you are going to need it. Or if you can't supply it, try to get them to someplace where they can have this until they get over the critical caring and then they will be sent back to you to continue the test right on to aid their recovery. And the more people that you can name or advise to early recovery or a complete recovery that is so hopelessly been given up or given out folks, the world will build a path to your door. You will not have to have or see patients.

Also you are going to run into another problem, that you are going to have a lot of problem a lot of people from certain areas will flock in very heavily from an area, because of the wonder results that you've got for the people that went to you. Then, these people 1,000 miles, 800 miles, 600 miles, 400 miles away, and it's going to be 50 or 75 or 100 of them there or more in this area, maybe a 1,000 in some of the areas, and you are going to find it rather difficult to service these people and do your own busy schedule too. And they can't all come piling into you, so it will behove you to help those people to try and get chiropractors in that area, or intelligent people who can take this message high, wide and handsome. And you

will find this, that the more people you help, the more people that will be there to help, regardless of what you do.

Another thing is, the more you can push people upward, the higher you will go yourself. They can anyone, anywhere, of any circumstance, pushing anyone down, they've got to go down with them. You can only go up yourself by pushing people up, regardless of their state of mind or being. So, I'm giving you these little philosophical thoughts in order to help to try to supply the things that are needed to help the most people. It's very difficult to separate the philosophical from the spiritual from the biological. They are so tightly woven together. Until you need to look after the whole man, the whole woman, the whole family, all of it. And don't do what I.

I heard of a family one time that the whole family was sick. And this Scotsman called a doctor to come out, the whole family's sick. So when the doctor got there, he said, "Well Suzie's the sickest one in the family. I want you to just doctor her and don't bother about the rest of the family." The doctor said, "Why?" And he said well what you do for Suzie, I'll do for the whole family. So he's being a Scotsman trying to save some money. Well, the principle won't always work because you will find families that every one of them are quite different in the family.

And learning to work out the diet and sometimes making a diet for a mother to cook for six or eight children is quite a job. And getting the child to accept it. So, you are going to have to do quite a bit of selling the idea of getting foods together. Also, teaching the tongue to like the new kind of foods that they need to eat and to discard the foods that they don't need. It takes a little bit of doing. Yet, the older they get, the more doing it takes to get them to change or to retrain their taste buds to like other food. It doesn't matter how good food is, or how perfect it is even if it is just like manna out of heaven. And if they been used eating like a buzzard to slop, they're not going to like it, because the tongue resists changes. Some of this has to be done degree by degree by degree. So try and service the whole person, the whole man in any way and every way you can.

Many times, it's going to pay you to have a technician and train this technician, or we can train technicians for you and send you a technician and the only request is, there has to be 50 tests a week. And if you furnish the equipment which \$15 per test, we pay the technician. We train the technician. We supply everything to keep a technician of the field and keep him trained. You can train your own technician. Keep your own technician and order the supplies and so forth. They could do all this for you and take a terrific burden off of your shoulders. And try to do as much as you can for the whole person. We like to just as well, we never have supply any technicians. But if you find it impossible, to train anyone or to get

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anyone to do it, not that you want to order them, then we will try to help you out in an emergency.

Or if you want to have a field day in which you have people come in, which some doctors are doing this in areas, and maybe you want to see three a week, to catch for this, this, that, or the other. Or that you give them a special rate that would cost an average of \$150 or something other in many hospitals, which you are going to give for say for \$25 or \$30 or \$40, then we can send a technician to help you out during that period. So, we will help you in every way we can and in any field we can. But we do need to know at least four to six weeks in advance. Are there any questions up to this point?

**Student:** What states are colonic machines illegal in?

**Reams:** Wisconsin and Minnesota, I believe.

**Student:** Now when we go home and do this test, we simply send you \$5 for each test we do?

**Reams:** Each complete test, yes. This pays for putting it on the computer and sending you supplies. We hope than in a year we can begin to get some of it on. This is a very expensive thing to do.

**Student:** Yeah, I've got one. I know all about it.

**Reams:** A very expensive thing to do.

**Student:** What are you calling a complete test, whenever you took the two years or three years or whatever you are talking about?

**Reams:** No, no, a complete test is when you run everything that's on the card, the sugar, the pH, salt, albumin, and urea. That is a complete test.

**Student:** Well we should be able to do that after we leave here this time shouldn't it?

**Reams:** Yes sir.

**Student:** Chemicals that we'll need. You supply them?

**Reams:** We supply them at no charge as long as you pay this \$5 fee for each one.

Now many times, you will only need to run a sugar and urea test. When you do that, you pay us about \$2.50 on those. Even though the ureas are one of the most expensive part of it.

**Student:** You don't run all the tests on every patient?

**Reams:** Not every time, no.

**Student:** Not every time, but on the initial visit you should, shouldn't you?

**Reams:** Oh yes, the initial visit you should have. And the saliva test only needs to be run about once a month. You don't need to run it every time.

**Student:** Well if we all routine it just do this on everybody if your going do it at all. .... if you try a few patients first. If you all try a few patients first, after you are satisfied that it works, you could just make it be a part of your practice.

**Reams:** Right, that's right. If at any time you don't get success, please let me know, because it's somewhere, someone, not necessary ..... end of tape.

## **Tape 5 – Side B**

### **Client to be resting at the start of their program**

----- and then shop every day, and never get it to where with a diet, it can't be done. This is one of the reasons why you will need a place to hold people down, until the diet clearly takes. And one of the things that you can tell, is how the diet is taking. In the first time, and this where I am going to have the most problem with you on this trip is from your first test, is for you to know how many weeks they need to do absolutely nothing until it takes. This can be figured, but I doubt seriously you are going to be able to do it this trip because of the lack of experience in handling the analysis.

It takes a certain amount of experience in handling the analysis for you to comprehend this ah...

**Student:** You are talking about the patient not doing anything.

**Reams:** That's right, the patient.

### **What to do if a client needs to go into a retreat, but won't do it**

**Student:** What if he is working on a job and he won't quit his job?

**Reams:** Just don't give him a diet. Be sure that person is going to do everything you say, or don't give him his diet. Because you will fall flat on your face, unless he does everything you say. Then you can follow any procedure you desire, but leave the diet out of it, unless he's willing to do everything.

When a person needs to come in here or to have certain care for two weeks, or three weeks, or one week, or one day, or four weeks, or whatever it is, unless they come, we do not give them a diet, because it can't be done.

**Student:** You just don't accept him as a patient at all?

**Reams:** No, we accept him as a patient, here. But, if this test indicates that they cannot do it without daily tests and supervision, then we won't give them a test. We will be taking this up in just a little while now. This got a deeper end to that. For instance, any time the diet that you give the first day will only be good for two days. And the body chemistry will completely be changed, and you have to change the diet accordingly. Unless they know that a day and a half, or two days, or three days, the body chemistry will go through another change. And you've got to change the diet again. For instance, suppose somebody needed to be on lemon

water for one day or three days. Or just the water in order to bring the urea down. When the urea comes down, it may affect the other readings, it may not. And then, you want to give them a diet. You won't know how to give them a diet until it comes down. Now whenever you give a person a diet of this nature and so many hours or days that you will expect a change to take place, and this body chemistry will move a little closer to the normal reading, the perfect reading that you want, then you are going to have to change that diet again. And we have diet sheets that we use to guide you, which you'll be introduced to them, before this phase of this program is over, the past is over.

### **The sicker they are, the easier they are to treat**

**Student:** In other words, the way you are talking is that if anybody has got anything much wrong with them, has got to quit work to protect the people.

**Reams:** If their reserve energy is below 25%, yes.

**Student:** We'll be able to figure that.

**Reams:** Oh yes, you'll be able to 25% one. Some of the 50's and 75's you will not be able to do positive and the 25 one's, I don't think you'll have any trouble with those.

**Student:** Will we learn how to put people on this scale? Whether they are 25 or 50?

**Reams:** Oh yes. 25, I think you'll learn the 25. I don't know about the other two. For instance, the more ill anyone is, the sicker they are, the near dead they are, the easier they are to treat. The man that's the hardest to treat is the one that's almost well and got something wrong with him. That's the one that's hard, because he won't slow down. He tested his brother, then he hid. And he's bull headed and he won't listen. He thinks this little bit won't hurt. That little bit won't hurt. And he won't conform until he thinks he's about to die. And then if he thinks he's going to get well, he quits. And therefore, he kind of creates a problem for you. But don't worry about that kind. They're not going to die anytime soon. ----- in an automobile accident.

One of the things I want you to remember is to go by the numbers. Never again guess at the principles of biological life. It's not necessary. Go by the numbers. If your life was at stake, would you want somebody guessing at what was wrong with you or guessing about your energy level? Or would you want somebody that knew? This is what it means as far as energy is concerned.

## **You will find people whose body will not respond to diet**

You are going to find people whose body will not respond to diet. You will find those, and there is nothing you can do about them or anyone else. Those people are a very, very, very small number. I would say less than one in a hundred, even higher than that.

## **Unlearning Fads**

Now, I'm going to start on some things, some unlearning things. Maybe this may not be your problem, but it could have been. Many people heard me in the past, and that is, they have a tendency to believe everything they see in a health book, or especially a new magazine, poverty prevention, or organic gardening, or anything else, they take it as gospel fact. They swallow it hook, line, and sinker without ever bothering to see about by what authority a man spoke, or how much proof he had, or whether he was even entitled to discuss the subject or not. So be careful with that kind of an argument. Bring it out. Do not let that fad interfere with your numbers.

### **Fad: Don't eat fish and milk at the same time.**

There is another fad that I have heard all my life. Don't eat fish and milk at the same time. You've heard it probably. It's perfectly all right. It won't do any harm if the fish is good and the milk's good. It will not do any harm. However, there are people that are allergic to fish. And there are people that are allergic to milk. But if the person is anywhere near normal, it will interfere when they eat or mix any foods they wish in their stomach.

### **Fad: never eat acids and alkaline in the same meal**

Now because you read some of the books, it is a "never eat acids and alkaline in the same meal", well that's just what you should do. This is the way energy's made. It's best to mix them, but don't mix them violently enough to make a violent enough change. That will throw you into withdrawal. So, just make changes in diet run slowly and make them accordingly to your allergies, previous allergies.

As these numbers come near perfect, and stay perfect, you won't have any allergies. There's no need for allergies whatever, if these numbers stay perfect long enough.

### **Migraine Headache – allergy to canned fish.**

The man who is the head computer operator for the winter park hospital, Augusta Wood, has over 1,250 beds, called me on a Monday, September 1971, I believe it was the first Monday in September. And he said to me, "I was the head computer

operator for Martin company, here, and I was about to lose my family because they were demanding so many hours, and I quit that job three years ago, and set up the entire computer program for this hospital." He said, "I took less money, but I have developed migraine headaches. I've just been told today, that I either had to get rid of my headaches or they were going to get someone else to take over this job." That's the almost exact words he told me that day when he was talking to me on the telephone. So I said, "Do you have a migraine headache now?" He said, "Yes." I said, "Get someone to drive you to my office and I think we can have you eased in about 30 minutes." And because of what he said, I blame that he had something about his diet that brought these headaches on without any warning. So I alerted the technician and nurse to take him as quickly as he come. And I was continuing seeing people. I had a very busy program that day. And when he came, they immediately ran the test on him. They brought the card into me. I went into the lab and made up this, about four ounces of ordinary drink that you can make in most homes. And I gave it to the nurse and told the nurse to give it too him and have him sip it very slowly for the next 30 minutes. But when the headache stop, after the next patient came out of my office, to have him come and knock on the door. And it was between 19 and 20 minutes, when the patient went out, and he come and knocked on the door and he said, "My headache is gone." And I hadn't even seen the man at all until that moment. He said, "Doctor, I don't know what you gave me, but I want 5 gallons of that stuff." I said, "You don't need any of it at all." Your problem is that you are allergic to canned fish. Just don't eat any more canned fish. He said, "I love tuna fish sandwiches." I said, "That is probably the cause. It's the canned fish that's causing these migraine headaches." So I said, "There may be another allergy that you have that we have got to kept to date. This is the cause of the headache you have today. Call me in about a month if you do not have any more headaches and let me know how you are doing, but eat no more canned fish. And if you have another headache, come and let's find out what that one is causing." He called me in a month and said, "No more headaches Doc, I'm doing fine."

So, it shows you how easy something's can be handled. What was happening in his case, the fish in his stomach, with the hydrochloric acid from his liver, were storming and ptomaine substance it was creating a terrific headache. It was a very minor ptomaine headache. When the ptomaine stripes by him, he will miss the headache. But become very densely in with very rapid heartbeat and you can get in serious trouble with it if not taken care of. But with this tests, when you thoroughly understand them, you will handle allergies with no problem what-so-ever.

**Fad: acids and alkaline – never eat grapefruit or oranges and milk.**

Another thing, is acids and alkaline. “Never eat grapefruit or oranges and milk with breakfast. It’s very bad.” It’s perfectly alright. Go ahead and eat it. Anyways, stored healthy at all, it won’t hurt a thing. It only makes the foods digest a lot better.

**Fad: eat only one thing at a meal or never eat meat and starches.**

There are people who say you should only eat one thing at a meal, only one thing. Maybe there’s others that say you should never eat meat and starches together. Forget all about it. It don’t any difference as far as the energy is concerned. Even on very sick people, very sick people, it doesn’t make any difference.

**Children shouldn’t have meats.**

I’m talking about adults now. Not children, because children shouldn’t have meats.

So all these fads, throw them over the sandy bank. Go by the numbers, go by the numbers. The more perfect you are in handling these numbers, the more perfect your result will be in handling each case.

**If the body is alkaline put them on a more acid type of diet**

If a person’s body is alkaline, you should put them on a more acid type of diet. Even adding... I like the Heinz sweet pickles and the Heinz sweet pickle vinegar. And the reason I recommend that particular one, is every time it’s exactly alike. And I know what to expect. I know how much to give to get the desired result. And these others, if every bottle is different, I don’t know what to expect.

Also, kosher pickles will not do what the Heinz pickles do and they have a high salt content. They should not be – kosher pickles, unless they are, or contain the star of David and refrigerated. There are pickles on the market, put up in salted brine, that’s called kosher. But are not kosher in reality. There’s no such thing as a kosher pickle except the trade name because kosher means meat that’s been killed by a Jewish Priest. Cleaning is given in the book of Leviticus with the blood and fat removed. That is true kosher meat. And there’s kosher styled meat which is superior to the average meats.

So these are things about foods and fallacies, that you will try to forget your fads and go by the numbers, the better off you will be. Any questions now?

**Student:** Heinz sweet pickles and what else did you say with that?

**Reams:** Well there's a kosher pickle to having the Star of David on the label. And it's a refrigerated pickle. It's very good and it's a mild laxative.

### **Sour Kraut is an excellent food and laxative and foods to lower pH**

Also, sour kraut is an excellent food. It's also an excellent laxative. But don't try to eat it like it comes out of the can. Drain the water. Rinse it. And then eat a little bit on a sandwich until you develop a taste for it. It's a marvelous laxative and a good food if used once or twice a month. It's an excellent food in forming some of the reagents needed by the liver. Any questions at this point? You had a question.

**Student:** Just vinegar --- unintelligible.

**Reams:** Half a ----- of vinegar mixed in half honey is generally very good if they are not diabetic not hypoglycemic. But if it's low blood sugar, it works very well.

**Student:** How often would you use that?

**Reams:** That depends upon how high the pH is. I would use a tablespoon full a day, but I like the Heinz Sweet Pickle Vinegar. It's much easier to deal with. Much easier, much safer. And it can always be bought at the A&P stores all over the nation. Some of the home made pickles are very good too, but they also differ in strength.

**Student:** What kind of dosage do you give them.

### **Citrus fruit discussion**

**Reams:** Well, for instance, if they had a pH we'll say of, 6.80, we'd put about a tablespoon full on their salad, and if it's 7.22, 7.50 or above, 3 tablespoon full plus the pickles. And they eat what they like. Also cottage cheese is an excellent thing. Buttermilk is an excellent thing to bring the pH down. Grapefruit is an excellent thing. Pineapple Juice. Apple juice is excellent. But Grapefruit this time of year has very little acid in them. We need the fall Grapefruit from about October the 1<sup>st</sup> to February the 1<sup>st</sup>. They lose their acids after February – March. Yes sir?

**Student:** Grapefruit doesn't have an alkaline reaction that's in the body?

**Reams:** No sir.

### **Lemons as a food source**

**Student:** But oranges and lemons?

**Reams:** No sir. Oranges don't, but lemons do.

**Student:** They don't all act the same, even though they are citris.

**Reams:** That's right they don't. They do not.

**Student:** You say lemons have an alkaline reaction?

**Reams:** They are alkaline, period. Lemon's is the only anionic natural food that I know of.

**Student:** In the anion, if you were alkaline itself, you wouldn't want to use lemon then would you?

**Reams:** Yes sir, you sure would, because the alkaline in lemon will not make you any more alkaline because it goes into the liver to strengthen the juices of the liver so it will get more acids out of the foods you eat. The reasons your body becomes alkaline is that the liver juices become too dilute, too weak to extract the acids.

**Student:** So the lemon should be ----- of liver function.

**Reams:** They do. That's what they are for. The lemons are not a cleansing agent. They're not a purgagent. They're not a something to get your system cleaned out. They are to build the enzymes which rebuilds your system.

### **Milk should be of the skim milk grade.**

Also, many people think milk for breakfast, milk should always be given in skim milk form, cow's milk, or goats milk. Goat milk, skim goat milk because there's not enough fat in it to really amount to anything, as compared to cow's milk or soy milk.

### **50 days of breakfasts without having the same breakfast twice**

It's a very good idea to drink a glass of tomato juice for breakfast or V-8 juice. Pineapple juice, as small glass. It really sets you up, it gives you more energy out of your breakfast. Really you should make a menu of breakfast's for at least 50 days without having the same breakfast twice. That doesn't mean that would eat anything today that would un fit the day that you ate it. You might have a banana today and an apple for breakfast. Tomorrow you might have a banana and a pear. And the next day you might have a banana and an orange or you might have a pear and so forth. Peaches give an example. Eggs should be limited to about twice per week, that is for the main dish for breakfast. The bread intake should be limited to about two slices of toast a day. On sick people, I'm talking about people that are ill, that really need to be on a diet. And the reason for that is regardless of

whether you have a high or low blood sugar, still have about two, because if their caught up on bread, then they will be leaving other foods uneaten, that they need the nourishment there of, in their problem. So, the wider the range on foods, the safer it is.

### **50 days of dinners /suppers that are not the same**

You should also have at least fifty dinners differently, different combinations, so that you will not get your body chemistry pattern into one deep rut. Also, about 50 different suppers. Your biggest meal of the day should be in the middle of the day. The evening meal should be light. And then eat a hardy breakfast. And if you eat the big meal every day, at the end of the day, you are going to roll and tumble and you won't be hungry at breakfast. And you'll eat a sandwich and tomorrow night you'll be in the same old cycle, feeling like the day before the one horse shay fell apart and you just can't hardly go. So, what you need to do is to get your meals in an order wherein you need the most energy.

### **Those who should eat all of their fruits and sweets before 2 pm**

There is also something that you should do. Anyone having a pancreas that does not manufacture enough insulin should eat all of their fruits and sweets before two o'clock each day.

### **Those who should eat fruits and sweets all through the day**

And the person that has a problem of getting sugar high enough should have sweets all through the day and fruits all through the day.

**Student:** Fruits of all kinds before 2 o'clock?

**Reams:** If you have a pancreas that does not manufacture enough insulin, if you have high blood sugar, when it's high, and you have trouble bringing it down and keeping it down, eat all the fruits before 2 o'clock, and then you burn up the energy. Now if a person works at night, and sleeps in the day, of course you are going to have to change the program a little. I'm speaking about people who take their diet and go home. About 90-95% of the people in most doctor's offices should be able to take a diet and go home with it, without needing to come into any sanatorium or be restricted about washing in one thing or another. It's only the critically ill that need to be restricted and worked and labor and so forth. And also in diet and it's only that small percentage that's going to really need to be tested regularly and often.

**Student:** unintelligible

**Reams:** Hyper?

**Students:** Hypo.

**Reams:** Hypo, it doesn't matter. Low blood sugar, it doesn't matter.

**Student:** unintelligible

**Reams:** It would be alright if they want them through the day, yes. They should have sweets throughout the day. I firmly believe that at least 60% of automobile accidents in this country is caused because of low blood sugar.

**Student:** What percentage?

**Reams:** 60%

**Student:** unintelligible

**Reams:** I believe that the cause is the brain does not get enough oxygen. I will explain this. Doctors already know it what I was telling you. We forget so much of the things that we are trained in. Low blood sugar and high blood sugar have exactly the same physical symptoms by appearance against diagnosis. What happens in this one is the blood has too much sugar in it. It doesn't carry enough oxygen to the brain. And when it doesn't have enough sugar in it, it can't carry enough to the brain. And when this happens, then you become groggy, half asleep, twilight, and you are not aware that you are blacking out. Many times it comes so slowly, and at other times it comes extremely rapidly, and then their car hits another car and all of a sudden, the adrenalin glad flushes and others, and they come back to reality if they are still living, and wonder how it happened. They haven't the slightest idea, they've never gotten, they said I must have went to sleep.

They were not asleep. They were in a blackout. I will rejoice to see the day come in which the low blood sugar test of this nature is made to determine who is in danger of having an automobile accident because of low blood sugar.

**Student:** Why does the medical profession resist the idea of hypoglycemia so avidly? They just are determined there's no such thing.

**Another Student:** That's right, they sure are? That is a prime...

**Student:** You can't get it past your insurance. It really is in a terrible...

**Reams:** Also, let me give you some symptoms about people with low blood sugar. Most of them become irritable. They are fighting for their life, but can't get along with people. And little mole hills become mountains to them. The least little thing

annoys them. They're respected, and most people don't make any ----- if they don't know that they are sick at all.

**Student:** And the medical places says there's no such thing. By golly, if you have it you know there is such a thing.

**Reams:** I've had many of them. I've had a number of secretaries lose their jobs because of them become so crabby they lost their family.

**Student:** I've got five different times I went to the hospital, five times in 15 months and they insisted I didn't have any hypoglycemia. They called it everything from emborth to, oh Lord, name it.

**Student:** Dr. Reams, you mentioned earlier the folly about the high protein diet in treating low blood sugar. Could you elaborate on that?

**Reams:** Yes, because very quickly, it causes urea to go up and up and up. And then you're so tired you can't go. Your heart beats too hard. And already you've got a liver that's not getting the digestive juices to the various parts of the body that it needs. And all you are doing is trading diseases. You've just traded problems and that's all. It's wrong, it's very wrong.

Now many times, people eat too much protein, and they take them off of all sweets. There's not anything that will burn up that excessive insulin any more than sweets until it's been taken. But here's another thing that you need to do at the same time. There are people with low blood sugar that drinks too much water the same as those with high blood sugar. And many times, you have to curtail the water on those, until you get the pancreas to functioning.

### **Green Drink – no broccoli, cabbage, or cauliflower**

Here is one of the key things. One of the finest things in the world to get the pancreas to function normally is green drink. It's made out of spinach, green beans, cucumber skins, onion tops, clover, wheat grass, comfrey, anything green, the greener the better. Green beans. There's nothing that will repair a pancreas any quicker, and the best way to take it, is it to grind it through a sausage mill, or if you can get any juice out of it, through your juicer. Very good. But let me give you one little bit of warning here. Do not mix broccoli or cabbage with your green drink. Do not mix those two, because generally when people have that and mix it, it creates so much gas until they are in so much misery that they can't stand it. They burp a lot or the pressure on the heart causes complication and frightens them but just leave off the, and cauliflower is another that you shouldn't use.

**Student:** How about green pepper?

**Reams:** A little bit of green pepper is alright, but very little. So just try to use these things to help you conquer your problem.

Onion tops, believe it or not, do not create any excessive gas, but the onion itself often does.

**Student:** -----

**Reams:** Four ounces is a minimum. If they are critical ill or very ill, then 8 ounces. If you can't get it out of the, if you can't get the pure, raw chlorophyll out, many times in a food chopper, or sausage grinder, will get it and squeeze it out, until you can strain it through a strainer and make the pure liquid. But generally, in drinking it, you're not trying to see how quickly you can swallow it. Sip it slowly over a long period of time and it will do much more good. Do not drink your green drink quickly. Yes sir?

**Student:** Will a blender be adequate for that purpose?

**Reams:** If a blender works it's all right, but the thing about it is you're so dilute the juice with the water to start with so it's not so effective. The more concentrated the chlorophyll, the better.

**Student:** How about a juiced celery top?

**Reams:** Celery top is very good, but the stalk is more value in vitamin A than it is in chlorophyll.

**Student:** unintelligible

**Reams:** Yes, it can be added. We often take the pure raw clover or wheat grass and just grind it through a mill, squeeze the juice out, about 4 ounces of it. You'd be surprised what a little hand full you can get. Escarole or romaine lettuce is also.

Somebody asked me something about sleeping and I don't know of anything that will help you sleep any better than to just take the juice of a head of lettuce and drink it slowly for half an hour. I mean not only the head of lettuce, but the stalk and all and drink it, a half a head of lettuce if it's a large one. And drink it before going to bed. Many times, it will make you sleep like a baby.

**Student:** --- for breakfast?

**Reams:** Escarole and romaine and that.

## **Dividing Line between low and high blood sugar – 1.5 brix**

**Student:** What's your dividing line between low and high blood sugar?

**Reams:** 1.5. Yes?

**Student:** You mentioned a few minutes ago about the possibility of a person with a pancreatic malfunction drinking too much water. How do you decide what's enough and what's too much?

**Reams:** When it's too much is when you can't get it up to 1 [brix], when you can't get the sugar level up to 1 [brix]. When it's below 1, you may have to restrict it quite a lot. In those cases, it's very safe to give the lemon water, with honey in it or maple syrup, but if they can take the normal amount of water it's alright, but if not, let them take the lemon water 32 to 40 oz on the ratio that I have already given you: 3 oz of fresh lemon juice to 29 oz of water or 4 oz of fresh lemon juice to 36 oz of water.

This has been covered in the analysis. Some of it sounds a lot like fads to you right now, I know. But as you begin to see it on numbers and as you begin to apply these principles, you will see how accurately they work.

**Student:** unintelligible.

**Reams:** Yes, I've seen both of it. It's something about the amount of it that requires it, or have it, and many other problems involved. Now did you sweat a lot? It can obviously it can be a little calcium, a calcium too low. There again you are going to go by the tenth (attempt?). If your body is alkaline, use your pickle juice, calcium lactate, cottage cheeses, buttermilk, sour kraut, citrus fruit, except grapefruit after the 1<sup>st</sup> of February or March, apple juice, pineapple juice, things of that nature. The sweetness of the fruit accordingly to the sugar level.

Also there is one malady that I haven't discussed here, and that is people that you know that have rice disease or kidney diseases. Use the lemon water if you can. Also use, I took them away from all chocolates, all carobs, all nut butters, all nuts. Limit the oils in their food. And also insist that they eat a lot of water melon, or watermelon seed tea is one of the finest nutrients for the kidney's known to man. Also papaya, mint tea is patchment for the kidneys. And there are a number of other herb teas that many people made a lot relief from in this kidney problems. Be sure that if you use watermelon seed that has not been treated. Be sure that it's Frank seeds, and that the watermelons used is the best of all for kidney problems. Suppose we have a kidney problem and a high blood sugar? Better use the watermelon tea without any sweetening in it, watermelon seed tea.

Any questions at this point? Yes?

**Student:** . . . . I don't know what you mean by giving these people a lot of sugar because it really knots the guts.

**Reams:** That's alright. Fasting the blood sugar doesn't do a lot of damage. It's the overflow. Here's what happens. Really what causes people to die with high blood sugar is this. As long as the kidney's are throwing that sugar out of the blood normally, that sugar is not going to do any harm, but it stacks up, it stacks up, it stacks up in the blood and the kidney's cannot flush it out, finally, they are going to be to the point of no return and no oxygen in the brain and they are going to be in serious, serious trouble, very serious trouble, so don't worry about the junk around in the blood. That isn't of concern because if it can throw it out, within the 24 hour period on the level, you have nothing to be concerned about. It's supposed to jump around in the blood. There's lots of folks that jump around in like manner in the urine.

**Student:** In the hypoglycemic class, these people I've found described here in the . . . . and they'll go up to 200 and something and the doc told me .....

**Reams:** That's right because the pancreas is manufacturing too much insulin all the time. And you put too much in there and it begins to flush, then the sugar runs out and it's still pouring insulin in.

**Student:** Aren't you going to aggravate that thing by giving them solid sugar whenever it...

**Reams:** You don't pile it in. You just keep it a little bit long to keep them going. Until the chlorophyll takes hold. That's what it's for.

**Student:** No problem is indicated with that. You said something about some people can take one form better than another is one.

**Reams:** Of sugar?

**Student:** Yes. Would you say that or...?

**Reams:** Best is from raw fruit, raw fruit that's the best. Yes?

**Student:** Can I ask any question? I was thinking about another condition and getting away from this thing.

**Reams:** Wait a minute, wait a minute. Go ahead, ask your question.

## **Menstrual problems – menstrual cramps**

**Student:** Menstrual problems, menstrual cramps.

**Reams:** Menstrual cramps, right along in this field too, are always caused because of a deficiency in calcium or manganese. Always, there's no exception to that rule. Well, I will make exception to that and that is some people on the pill. It causes

conditions that lead into cancers. Those pills are causing more cancer than anything else in the world. Yet on others, it doesn't. Some of them, there's no biological reason that I find for them to have a highly dangerous infected source, ovaries, except the pill.

**Student:** There's no reason.

**Reams:** No other biological reason, yes. Menstrual cramps can be yeast in a matter of minutes. Out of the spinal column it comes of the upper back bone and the two nerves one's going around the right and in under the arm, round the side of the breasts, and under the breast they go into the ovary track. And somewhere between the arm and under the breasts is a gland there. It can be massaged. It's one of the acupuncture glands and if you massage those glands with a vibrator or teach the person how to do it, I have seen people that were almost screaming in terror with cramps, be practically eased within 15 minutes.

There is also in the tender pelvic the bridge that goes just about to fracks. There's a nerve that comes around each side and goes over that bone up into the vagina and uterus area which controls the circulation of blood. That has a lot to do with it and when you have cramps, those glands are swollen sometimes as large as your thumbnail. A vibrator on those glands will ease the patient in 15 minutes, where a masseuse teaches the person how to do it or the husband of the person or the mother of the girl how to do it.

**Student:** Where is this point between the arm and underneath the breast?

**Reams:** It varies. It's 90% pointed that their nerve comes this way and under the breast. If it's in the exact right place it should be it's right under the breast. And when you touch it, it is as sore as a boil. I mean if the person just [touches it] it hurts. But you'll find that somewhere along in you, they are not in the same places. Sometimes you find it in one place on one side and another place on the other side. But if it's in the exact place it should be, it's directly under the breast, about where the bra goes under the breast.

**Student:** What's this gland called?

**Reams:** It's just a gland. That's all it says, just a gland. There's a lot of glands without any names. It's an acupuncture gland that you work on. But do not bruise it. It must be handled softly and easily.

Also, men with prostrate problems, they have the same nerves going over the same ways. Whenever the prostate gland is partially damaged, massage those and it gives them a lot of comfort, especially if there is very much pain in the prostrate area. And as long as there is no pain and yet these tests indicate that there is

serious trouble present, it is more dangerous than if there is pain. Because when the nerve end dies off ahead of the deterioration, and the flesh in that area decays, that is cancer and that is past the point of being called carcinoma. Whenever that nerve starts to rebuild into this area that has the cancer the patients will complain about pain. And they must be told to expect this pain, and it will be sharp shooting needled pain. It will not be an agonizing pain, like a gas pain or some other thing of this nature. It won't be a throbbing pain, but it is a sign that the patient is getting better. Also, it's something that makes me very happy here and that is I have a patient come in that is seriously ill and they are well, they're just here, everything's all right. What you do is all right. They are the easiest person in the world to get along with. They want to live. They think they are fighting for their life. But one of these days when they start to feeling better, everything in the world is wrong. Everything is wrong. You can't please them. You can't satisfy them. I am so happy when that happens because I know we got it won. We're winning. They begin to care again. They begin to care begins to make all the difference in the world. When they begin to find fault with everything under the sun, we know we're winning. This is one of the sure signs that we find with critically ill patients. We know that we're winning. And we bake into log and them for their suggestion. We are going to do something next. That's all you can do because I don't care what you do, you can't please them. Because they begin to care again.

### **If the tests say there's nothing wrong, then you better believe it**

We also have a type of patient that comes in. Not very much wrong with them. Something, yes. But yet, they think they are terribly ill, terribly ill. They are, actually in a way. They're helpless. They lay in bed. Many of them require a bed pan brought to them. And the their families got to where they don't know what to do them, or we kept them. We find there's nothing wrong with them very much, so we send them down here. We know there's nothing hardly wrong with them. Then after we take them or check them, in every way can think about. Every way we can think about for a week or ten days. They kind of get used to us and used to the place and so forth. I will go in there. I like to have another person with me when we do. And my full intention is to make that person angry. My purpose is to make them angry. And if I can ever get them angry enough, to get their adrenal glands to flowing. Why, you would be amazed what will happen. I've met with them in a few hours.

We just had such a patient here. And she laid in bed and the minute the chiropractor touched her, she'd just go to shaking like this, and it was all quills. There was nothing to it. I mean it was all act. And start to make the least

adjustment she'd go to screaming like a wild cat. The tests show there's practically nothing wrong with her, calcium and everything else. But she was just getting world attention lying in bed. I want to tell you she could eat like a horse and eat anything. It all went to ----- . She'd always go to the bathroom in bed. A few times she laid down on the floor to get everybody help get her up on the bed, things of that nature to show how bad she was. I took the doctor in and went in there to her and I said to the doctor before I went in, "Dr. Prince, my purpose is to make her angry." And she hadn't come to the kitchen once to get food. Hadn't even been over here. She hadn't even tried. So I went in there and I began to tell this doctor about this type of patient. That there was nothing wrong with her at all. They just enjoyed the attention they got. They remembered how happy they were when they were babies. And now they act like a baby to get the same kind of attention. And I went on and on and on about it until I saw tears coming in her eyes and then I stopped. She was an Amish lady and there was another Amish lady in the room with her. And she was outside the door with her ear cocked to the door to hear everything the doctor said, you know. So when I went out, this lady she come as mad as a hornet. I've never met with her. Mad as a hornet. So she caught me at the other end of the trailer and she said, "Doctor I don't like what you said to Minnie in there." I said, "You don't?" She said, "I don't. There's not a word of it's so." I said, "I know there's not a word of it so." My intention was to make her angry. Do you want to help her? "Yes", she said, "I do." Well you go in and tell her the doctor's right. I said, "I accomplished what I went to accomplish." And she did. And that lady went to supper that night and three days later she went home. That's --- she got up and went to the table every time and acted as calm as anybody. So sometime you have to use the wisdom of Solomon and the patience of Job, to know what to do with some of them, but this is just recently happened here.

So, what I'm trying to tell you is that this test says there's nothing wrong, you better believe it. There's nothing wrong, there's nothing wrong. Any questions? Any thoughts?

**Student:** Something about swollen ovaries, a bad liver, and restoring the liver.

**Reams:** That's true. We do that all the time. That's true.

**Student:** Anytime a woman has benign tumors in the liver, work on that liver.

**Reams:** We do that all the time. The liver is the secret of the whole system that we use. But getting the liver to do what you want it to do is an art and a science too.

## **Sinus problems and sore feet**

There's one thing I'd like to call to your attention. Maybe it's not a mold, but this is what I'm thinking of at the moment. Is, so many people complain about having a sinus. Sinus is the mezzanine that catches this. In about 95% of the cases, where you find that people have sinus problems, also have aching feet that hurt, if they stand on them or walk very much. Because benzene is the element that will do away with sinus and aching feet, if you're taking enough. You will find benzene in onions, mustard, horse radish, radishes, hot peppers. Fresh green hot peppers is a vitamin source. Tobasco sauce, canned pickled hot peppers. The red parched pepper made from the fresh hot peppers. There is also a black pepper made from a nut that's grown in Mexico. Something like the nutmeg and that one is very harsh on anyone having any disturbance in the digestive tract and it will cause hemorrhaging of hemorrhoids, the one that's made out of a nut, but the others won't. The effect of the others are healing.

## **Hemorrhoid remedy**

While we are on the subject of hemorrhoid, I'd like to give you something that will take the swelling out of hemorrhoids within 24 hours and that is to take one tablespoon full in water or fruit juice or milk, of Aloe Vera Gel or Aloe Vera Extract. And that will take the swelling out of hemorrhoids within 24 hours, provided they are not cancer or extreme carcinoma. But it will certainly sooth them a lot.

**Student:** How often do they take a tablespoon?

**Reams:** Just once a day until the pain goes away, two or three days. People with hemorrhoids should not eat nuts at all or the black pepper made from the nuts, unless boiled, you can have boiled peanuts, you may have coconut and piaole nuts. And by the way, piaole nuts is an excellent food for the kidneys, piaole.

**Student:** What's another name for them?

**Reams:** Pine tree seeds. Piaole is the name of them. They look like something like rice, about the size of a big grain of cooked rice. Yes?

**Student:** What are good kidney foods? Like that specifically.

**Reams:** Many times dealing with the kidney foods, you are going to have to know about the acid or alkaline end of the system. At least watermelon under most every circumstance, I've never seen it fail. I have seen watermelon put people into withdrawal before. I have seen watermelons given without test by people, which caused the blood sugar to rise too high until they had high blood sugars and severe headaches.

**Student:** unintelligible.

**Reams:** Boiled peanuts, yes. Boiled peanuts is a very fine food.

### **Rice – Information about**

**Reams:** Also on rice. It contains a number of different kinds of calcium. And it's a very fine food and it's an excellent thing to eat rice about twice a week. Not a whole meal out of it, but just a spoon full. And it doesn't matter a whole lot whether it's wild rice, 3 minute rice or what not, it all has the calcium's in it. However, there's a little be more uses in the wild rice's than there is in prepared white rice. But the point I'm getting across content and not exactly the minor mineral content, but if you're eating rice every day and a lot of it like the Chinese, by all means eat the brown rice. But once or twice a week, a little spoon full of it isn't going to make a lot of difference. Now that's one of the reasons that I suggest that you use the three minute rice that exist, but many times you don't have time to fix any other kind. It's better than nothing. Something like Red Skeleton was when somebody asked him, well how is your wife. He said, "Oh she's better than nothing." So that's the way the white rice is. It's better than nothing.

## **Tape 6 – Side A & B**

**Reams:** ... this across to the public before I take my vacation. And I'm glad, I'm happy that it's being accomplished in my lifetime. So, the greatest thing we can do as brother Kelly said, is to get as many people working with us in this field of science. Because the more people we have in it, the more political power we will have. And I expect it very soon by the time you finish this course to be sweeping the nation like a wildfire. It is a great thing and we must keep it going, ok?

## **What is pH**

Today we're going to study pH. We're going to start working with pH in a few minutes. I will ask you a few questions though. I have already told you once, the questions I'm going to ask, and that is pH.

What is the meaning of this symbol here, the "p". What does that mean? Ok it means activity, the "p" means activity, or base exchange or it's a mathematical symbol indicating that there's some math coming after it. However, it doesn't have any specific Milhause unit value but it does have a ratio value of 1 to 1. Now that is the ratio value of a "p".

What does the "H" mean? Hydrogen ion. Why is the pH value based on the Hydrogen ion?

**Student:** What?

**Reams:** It's a simple atom. What is a simple atom?

**Reams:** It's any atom made up of one anion and one cation. Clear? That's what pH is. In other words, this is the beginning unit of calculating energy. And if it were not for this factor it could not be done. This is what pH means.

Do all pH atoms contain the same amount of energy? No! How much can it vary? What is the variable?

**Reams:** What is the variable?

**Student:** Depends on the equation, the cation an anion.

**Reams:** Total, I'm talking about the total Hydrogen ion. What is the variable in Milhause units?

**Student:** 499, 498 ...

**Reams:** I give you, I haven't told you that yet. It is the square of 1 to 499 squared added, just a minute, let me put a plus there to mean added. That's a plus, plus and then this, and this will cause the X factor, that's the answer of that total. And

this one will be, the cation will be 500 squared to 999 squared plus the X factor plus the square of the X factor. Now, somebody tell me what I've got up here now please. I was just if you understand it. I'm not examining you. I'm examining myself to see if I've made it clear.

**Student:** Write that down once.

**Reams:** One square and every number between that and 499 squared – 2 squared, 3 squared, 4 squared, 5 squared, 6 squared and so forth. And then all those squares added together is the X factor. 500, 501 squared, 502 squared, 503 squared, 504 squared, till the end. And then add them together – and X factor that, and then the square of that. Why that the number is so gigantic and so big, you'd have to talk about it in billions of light years. The numbers so big now, this is how great God is in making this universe and he knows the number of it all.

So I just want to get across to you, that when you start with energy, you start with the Hydrogen ion, ok? Anything, any question about it? This is what we learn with the pH, we're learning power of energy, yes.

**Student:** Then you're saying this is the simplest unit of power then?

**Reams:** Right, I'm just showing you the power that's behind it and the variables, ok?

## **He who controls the anions and cations controls the Universe (Everything is made of energy)**

**Reams:** Now, I'm going to erase this, and there's one more thing I'm taking up before we start on the actual doing it. I'm just going to put up "A" for anions. Just "A" mean just anions now. What is an anion? A single anion?

**Student:** It's a negative unit.

**Reams:** It's a negative unit of energy but how large is that unit? What's the power of it?

**Student:** Well it's 400-499...

**Reams:** No, what is the power of one single anion? One Milhouse unit of energy. One Milhouse unit of energy. One single anion is one Milhouse unit of energy. Now, it is a variable and Milhouse units of energy as we have said, from 1 to 499. What is the Milhouse units of energy in a cation?

**Student:** 500.

**Reams:** 500 Milhouse units of energy a single cation. Now everything that is made, is made from cations and anions and there's nothing made that is made without them. An anion is the smallest thing that God ever created. And a cation is the next smallest thing that God ever created. And he who controls the anions and cations controls the Universe. Because everything that's made is made out of energy. Everything that's made will go back to energy eventually in some kind of a cycle. Some kind of a relative cycle. It will all make a circle and then still be back as it was and probably more beautiful than ever after man gets through messing it up.

**Student:** Hey Doctor, will you explain that variable to me, I'm kind of confused about that. How does it vary ---

**Reams:** Well, for instance, let's take a simple anion, the simple anion, the one with the one Milhouse unit. This is written now that's a little m and that's a little h too ("mh"). Let me write it like it's supposed to be written. It's written, that's the way Milhouse unit is written, alright?

What the smallest amount of energy that can be measured is 1 Milhouse unit of energy and it's so small it can't be divided, it can't be quartered, it can't be broken down at all. It's like marbles, like a marble. And you begin to add more marbles and so forth and finally you've got 5 marbles and it's still one anion, but it has 5 Milhouse units of value in energy. You see what I'm getting at?

In other words, it's like a pencil, a little short pencil and then, well it can be a long pencil like this and then only you're going back the other way with it cutting the pencil in two. Down till you can't cut it any more. And when you get it down to the shortest amount that it can be cut and still be a pencil and it would equal one Milhouse unit of energy. I plan to explain it to you so that you comprehend it and understand it. Any questions?

Now, anions plus anions equals zero energy. Equals zero energy. Now this is equal, now there is one more thing I'm going to have to say here is equal. Equal anions plus equal anions equal anions equal zero energy. Ok? Now this is the rule in physics, I didn't make it this is a rule in physics. It's a rule.

Now let's take another problem here. Now it doesn't matter what that number is, it can be any number between 1 and 499. Suppose this we'll say was 300, and this one was 300 and they come together. You'd still have 300, no more, as far as giving off energy. You follow me? You have still 300 units of energy. It would not give off anymore because why, let me ask you why. Why wouldn't it?

**Student:** (Unintelligible)

**Reams:** No, no. How is energy made?

**Student:** Anions and cations.

**Reams:** By resistance. Because there'd be no resistance. There would be no resistance here. (Writing on chalkboard) But suppose now that you had a 300 there and you had a 499 here. Now there's your problem. Ok, you see then you'd have a little resistance until these level off. Until these two level. Clear?

**Student:** What do you have when you add those together?

**Reams:** You don't add them together. You do not add them together. This is a ratio problem here and it would be as 1 is to 300 to 499 as 1 is to 499. That would be your problem it's just a matter of working it out. Ok? Don't worry about this, you will never get into it in a moment I'll show you this here, ok?

**Student:** --- the differentiation between 500 Milhouse in anions and cations

**Reams:** Because at that time the evolutionary cycle comes into existence and it becomes a cation and when you begin to study relative energy, it doesn't go in straight lines it goes in cycles – anions go in cycles. And whenever it comes to 500 and apparently across itself, becomes it becomes a distinct particle of matter. All within itself.

**Student:** If a boys got a pocket full of marbles he can only hold, the pocket only holds 500 marbles and that's it.

**Reams:** That's it, exactly. In other words that the type of --- Let me just show you what happens here. I think I can show you in a relative circle here. I believe I can show you here on the relative circle what happens. Suppose [telephone rings] you have here – this phone.

**Student:** I got it.

**Reams:** Here you have the anions coming like this. It doesn't matter what their power is at all [some talk related to the phone call, tape is shut off while he apparently takes call] ...it will be traveling in this direction as long as they're in any power and this one can be a 1, this one can be 200 or any number it doesn't matter what the number is there's still power in this number up to, up to 499. Now when it reaches 500, they go the opposite direction. They go the opposite direction. Once it reaches 500, they turn around and go the other way.

**Student:** Why do they reach to go the other way...

**Reams:** God made it that way. That's the only way I know. I don't know why but God made it that way all I'm telling you is it does. I don't know why, but it does. God made it that way.

**Student:** ... Doctor?

**Reams:** When it reaches 500, it starts going in the opposite direction.

**Student:** (Unintelligible)

**Reams:** Well this, this is actually what happens. And this is the difference in an anion and a cation is the direction in which they travel. And no difference now let's go...

**Student:** ... 999

**Reams:** There's 2 things happen, the ... rate it reaches well let's just take a simple one. Well what happens 999, it even gives off anions or if it divides or broke down it would still turn in the opposite direction but they seem to attract each other.

Pluses attract pluses, and minuses attract minuses so they either add - increase or decrease in power between 500 and 999. This is a phenomenon of taking a <p>.

Now – here's where we're concerned today. In our pH readings, we're concerned today now in our pH readings in the resistance between the anions and the cations – the anions and cations. It's the resistance. Well let's put it this way,  $A + C = R$ , that's the best way to make it.  $A + C = R$ , all right? Resistance.

**Student:** (Unintelligible)

**Reams:** This? Well that's a plus sign that just means added. It don't mean cation there, it means "added". A plus sign, this is an arithmetic sign here.

**Student:** When it hit 999 and it breaks down and ...

**Reams:** It either breaks down or the others will grab a hold of it at that sign the other like things will package up - like things attract each other. Like things attract each other. I think that God just made so many cations and so many anions to start with I mean, but he made them so that they can change their power somewhat – trade around – there's so much that we don't know.

The only thing that I do know is enough to figure energy on this thing. On this base, this is base – this is acid. Now A [writing on chalkboard] and B... there now – acids divided into the base equals energy. So, the acids, let's take a simple one now. Let's take the very simple one. 1 and 500. That's a variable, that's a variable. Don't forget. Equals energy. There's your equation ok.

**Student:** The base is 1?

**Reams:** No this, I'm just, I'm using the minimums. I'm just using the minimums. I'm just using the minimum powers. Because the energy we live on, now the energy that drives an automobile, the energy you get out of the soil - this is the energy formula. Any time you figure energy, this is it. And of course, you can go from there and get as complicated as you want. All I have done now is to explain to you what pH is. Ok?

Now, let's look at this angle. No two human beings have the same A values or B values (acid or base values). Do you think it's possible then for them to get the same amount of energy out of any given number of calories? It is impossible.

Now, with this system you can tell whenever these values are increasing or decreasing. Now let's get to work well let me ask you one more question – are there any questions at this stage? Yes?

**Student:** The anions rotate clockwise, with Milhaus power from 1 to 499, cations rotate counter clockwise with power 500 to 999 ...

**Reams:** Right. Right.

**Student:** And it's the action between the two that creates energy.

**Reams:** Right. Right. Now one of the things I want you to unlearn is this, that anions do not attract cations and cations do not attract anions. They RESIST each other, and it's the resistance that made somebody say they attract each other. They don't. Yes sir?

**Student:** ... where the cation and anion are taken out of the food what's that term you use mill...

**Reams:** Milhaus units?

**Student:** No, macronage

**Reams:** Macronage.

**Student:** Yeah micron yeah micronage.

**Reams:** Yes.

**Student:** Umm. How's that relate to this now?

**Reams:** Well, the micron, there's two kinds of microns. Micron is actually just plain measure of distance. And there's another micron it's a pattern micron of the construction of a molecule. For instance, if you give 10 carpenters red bricks and

told them to build a red brick house, and didn't give them any plan they'd build a red brick drawing house. You see what I mean? All red brick. And all ... quarters well this is what happens here because they're building them out of red brick and the red brick all represents a frequency which denotes the **kind**.

So, these micronage patterns vary according to the kind. Now, with people, with the different color and height and color of hair and big feet and level joints and all kind of things – fat ones and thin ones, we don't call them a different species. But in plants we do. We call it various species and there's over 200 varieties of oranges growing in Florida. There's about 50 different varieties of grapefruit. There's about 80 different varieties of lemons now and so forth and so on. These are species and all of them are on the log frequency of 9 and plus lemons it's still on the log frequency of 9 and all have a different micronage pattern. But all of them the same frequency. All of us have a different micronage pattern but we're all on a frequency of 24 or 26. Now, there are people who are morphodites that sometimes people say they have a frequency of 28 or 27. It doesn't, they should subtract instead of adding.

I'll give you an example. It's kind of like the 3 fellows during the war that went into this hotel to get a room. And the clerk was out, and the colored bellhop was there and they said "How much is the room?". And he said, "30 dollars". So, each of these men gave him 10 dollars apiece and they showed him the room. When the clerk came back, he said "You've overcharged these men by 3 dollars." Have you heard this story?

**Student:** No.

**Reams:** It's tied in with exactly what I'm talking about here. So he said to the bellhop, no he said "You've overcharged these men 5 dollars", he said "When the 3 have the same room, when the three have the same room it's 5 dollars less". He says "You take this 5 dollar bill and give it to them." So he started out to give them the 5 dollar bill and he couldn't figure out how to divide it. So he gave each one of them a dollar back and he stuck 2 dollars in his pocket. Now, this made the man pay 27 dollars. 3 times 9 is 27 dollars, he paid for the room. The 2 dollars the boy stuck in his pocket makes 29 dollars. Where did the other dollar go? 3 times 9 is 27, and the 2 dollars he stuck in his pocket is 29. Where did the other dollar go? (pause) I see you're not real good mathematicians (snaps fingers) or you would have given me that answer quickly. You subtract, you don't add. (Student laughs) You subtract, you don't add. OK? You subtract the 2 dollars and the 27, because 3 and 2 makes 5. Ok (laughter in voice), so many times it's very confusing to know whether to add or subtract. (More laughter) This gets the point across to you though about figuring energy.

Are there any other questions about it?

**Student:** Is there a energy or a cell, or it can only take so much energy and then it burns up, is that right?

**Reams:** Well it either burns up, or rots or its changed. That is true.

**Student:** .... Either burn up or ....

### **With the exception of bacteria, cells don't divide**

**Reams:** That's right. They divide. They don't divide. They really don't divide. All cells don't divide they're made brand new ones. They appear to divide but they don't. Another one starts, but it's actually an ionization process just like silver plating, nickel plating, and chromium plating. Exactly. We say we grow actually we're built just like a carpenter adds bricks. Or we say that roots grow and trees grow. They're built by the process of ionization with the exact process of silver plating, nickel plating, chromium plating exactly. Any other question?

Let's get on to work on our pHs ok? You may start taking your specimens. Do not throw your specimen away after you have done the pH on it. I want you to do the urea, complete on the urea. After you have done the pH, then I want you to do the urea reading on it.

**Student:** You want to give us a step by step procedure on how to do the pH now?

**Reams:** Yes, yes. Get the sample first. Get the sample first.

**Student:** .... anions and cations taking on that came out of food according to the 9 patterns ...

**Reams:** If you want to go ahead and get the chart of the patterns of the electrons going in rotation in orbit ...

(Student and Reams talking at same time)

**Reams:** ... or in the element, in the element.

(Student and Reams talking at same time)

**Reams:** We're not going to go into all those patterns. You don't need those patterns in order to use it. You probably already have them in there.

(Reams and student continue talking about the patterns/charts)

**Reams:** You know so much of the education we get in life we never use.

**Student:** Well so much of its not tied together like it should be...

**Reams:** You haven't been taught how to tie it together.

**Student:** That's right.

**Reams:** And this is what we are doing here.

**Student:** Well I figure it could take 5 years of biology but nobody's tied that ...

**Reams:** No one has explained it the way life is the way you can use it. Unless you went in to the definitions to run samples or something ... or Edison or somebody else. You haven't been taught how to use the education. This is where I fell right on my face.

(A lot of talk going on at same time. At times was hard to hear but will pull out a few things Reams said during this segment that appears to be a break from everyone talking.)

They gave it to me in math boom boom boom in great big wads and quallups. They give it to me in math, they didn't explain it to me like God has taught me to tell it to you. If you couldn't swallow the math, you missed it. And they wouldn't prove it.... If you didn't understand this, you would think that the whole thing was fads. But this clearly cuts the line between what is a fad and what is a fact. It makes a clear distinction. Absolute distinction. ...

(skip in tape)

If you could sell it you could probably sell it to somebody that's retired and not ask for a billion dollars because I'm not trying to make money on this, I'm trying to get it to the public. In fact, I put a thousand dollars a year into this ... I don't have to do this. I travel a little bit. I want to. ... I choose to do this. God has taught me. I was saved – freely I have received and freely I give. It's a wonderful tool to have. I can't take it with me. ... I've never even considered where heaven is and whether I'd go there. Every day is heaven to me. ...

(skip in tape)

**Student:** I've been thinking about the cells dividing, you know I'm thinking about it starting from the beginning...

**Reams:** Well bacterias do. But eggs don't divide they make chickens. ...

**Student:** What I'm thinking of is a process you see it's really an electronic process the cell division and you're saying you manufacture cells rather than reproducing cells. Is that what you're saying.

**Reams:** One cell does not produce another cell.

**Student:** Well this is a concept we've never had.

**Reams:** I know it's wrong. That's why you can't figure energy. You can't figure energy. There are bacterias that do, but we are not a bacteria. We are not a bacteria. In other words, for instance when a woman has a baby – she didn't divide her cells. Did she? Not at all. Not at all. The sperm and ova form in there. ... They come together. And by the process of ionization ... make a human being. Her cells did not divide. Neither did ... You were taught wrong. That's why I said I've had to uneducate you guys. (Different people talking at once.)

**Student:** Ok then how does this relate to ... and cancer

**Reams:** With cancer cell division it doesn't divide. There again your wrong.

**Student:** I mean that's the way we're..

**Reams:** I know, but it doesn't divide. Let me show you what happens. Have everybody sit down I'm going to show you all ...

**Reams:** Why do cancer cells divide? They don't. They don't divide.

**Student:** They multiply.

### **Difference between carcinomic cells and cancer cells**

**Reams:** No. They don't multiply. They are not rabbits. (Students talking) On this board here, I have one cell blown up many thousand times. A carcinomic cell is the breaking down of the DNA and the RNA factor within the cell. Nothing more than that. A cancer cell is the whole cell is decayed. The carcinomic cell has a tendency to swell. The cancer cell does not. This question don't make any sense but it was the way it was asked to me. Cancer cells don't divide. I'm going to just draw a pattern here of cells – this represents cells. So what happens, let's say that this cell right here dies. Ok it's a dead cell. And we'll say that this one has carcinoma and this one has carcinoma. The only reason that this cell is dead and these two have carcinoma is a mineral deficiency. Nothing else, nothing more.

**Student:** Starved to death.

**Reams:** Starved to death. Eventually this ones gonna die if it doesn't get fed. And this ones gonna die. And this ones gonna become carcinomic and this one and this one. Now they don't divide. Another cell dies. If they divided, a dead man would pretty soon cover the whole earth. Because it's adding something to something to something to something to something.

## How to tell if cells are malignant

**Student:** What causes the growth of the tumor then?

**Reams:** A tumor is the exact same cause. There is no difference in a tumor and a cancer it's just different words it's the same thing.

**Student:** A rapid proliferation of cells.

**Reams:** Whenever the cells are, when the cells are malignant, they are growing very rapidly. Let me draw something here. Carcinomic cells are the same size whenever it's not malignant - but whenever it is malignant - or approximately the same size - because they swell and they all get about the same in any given area.

Now, but, any time that you have cells that are variable in size in the urine, you have malignancy. Any time they all look the same size, they're non-malignant. You can have malignant carcinoma and you can have malignant cancer all it means is its moving at a very rapid rate.

**Student:** Can you say that again?

**Reams:** Malignant means its moving at a very rapid rate. You can have malignant carcinoma, and you can have malignant cancer.

**Student:** You said something about the cells though.

**Reams:** The cells of carcinoma have a tendency to swell and they all are approximately the same size for that particular organ. But whenever it becomes malignant, they decay so fast they don't have time to swell and they're all different sizes. Read this book, it's in the book over there. It's in that book I gave you.

**Student:** What if a person, say has a breast tumor and it grows and grows and grows. What's happened there?

**Reams:** That's determined there is a deficiency in manganese.

**Student:** What caused the change in the size of the breast. If there's no cell division.

**Reams:** They swell. Just the swelling of the carcinoma itself. Of course, they'll get hard, they get as hard as a rock.

**Student:** Because it's all ...

**Reams:** Right, right they do. That's exactly what has happened. This girl that's in retreat house now, her breast was as hard as a rock. I didn't even look at it, but the card said it was. And then I asked her was it hard as a rock and she said "yes".

And then three days later she tells me it began to get soft and its completely soft now. Completely, and it was, I mean it was cancer ... and now it's just a light red color. I saw the color last night.

**Student:** You're saying that cells don't proliferate; they swell?

**Reams:** That's right.

**Student:** They swell and they ...

**Reams:** The circulation and they interfere with the Vitamin C getting in, and the blood and the base exchange and everything else. Yes. I'm telling you actually what happens now. Actually. And I'll bet any one of you if I'm wrong to prove it to me in the weeks to come. But I can prove this.

**Student:** (Unintelligible)

**Reams:** Sir?

**Student:** Including ...

**Reams:** Yes sir. Or glaucoma. A cataract...

**Student:** If a person was deficient in manganese you might keep them from developing the cancer in the breast?

### **Cataracts are a deficiency of an enzyme in the liver that dissolves the cholesterol film over the eye**

**Reams:** Oh yes. Yes. ... you mentioned on cataracts. Cataracts is not a deficiency of a mineral in the eyes it's a deficiency of an enzyme in the liver that would cause the (material that's in the hardening of the arteries) cholesterol. There's only a cholesterol film over the eye. That's what it is. Cholesterol film over the eye is what forms a cataract. That's because the liver is not manufacturing an enzyme to dissolve that cholesterol. You can have a cholesterol in your eye and one in your veins too.

**Student:** Unintelligible

**Reams:** No, no.

**Student:** A liver enzyme.

**Reams:** Yes, it's a liver enzyme. At the present moment it's not named, I don't even know what it is.

**Student:** In other words the livers not handling ...

**Reams:** That's right.

**Student:** Cause the livers not making the enzyme that dissolves the cholesterol film?

**Reams:** That's in the eye, yes. In other words, it has something to do with the Vitamin A deficiency of the eyes and so forth. There's a link there but I'd like to do a lot more research on it.

Before we get on pHs there's one more thing I want to tell you about this agricultural course that's coming up. We now already have the math, like Einstein had the math for the relative energy of the atomic bomb and atomic nuclear power. In (1933?) It was published and he had it even 2 or 3 years before that – it was 6 years before that. I expect to see before the turn of this century, I expect to see if we can get the money for the research to do what it takes, the planting of green beans and harvesting in 4 hours from the time you plant the seed. We have the math now to know how to do that. The process of osmosis in a plant is not limited by time. Because it is not controlled by (?) we are - plants aren't. You can plant a radish and you should be able to harvest it within 20 or 30 minutes. A watermelon in 4 days.

**Student:** Well you can see the alfalfa sprouts grow right in front of your eyes.

**Reams:** That's right but we have the math already completed for this now, and we have the money for the research. Now, I'll give you an example. When I was a boy, it took 56 days to produce beans. But due to all the research I have done and many others, we're producing them on wide scale now in 35 days. The field is plowed up and the harvest is on the 32<sup>nd</sup> day. Now, we're doing it now. And in the last 7 or 8, in the last 10 years, in 18 days. The day you would plant the seed we are harvesting it. We're learning to do it on large, large thousand-acre fields. This is green beans that go to market. And the quicker you produce them, the better they are.

**Student:** You've got to give them more nutrient ...

**Reams:** Right, they've got to have everything they need or else you can't do it. Any deficiency in mineral delays the time. I thought maybe you'd like to know that. And it was done on the principal that I gave you this morning, this pH, the principal of electroplating energy and producing the plant food on the frequency of that crop. Lets get down to business that's enough of that with crops.

**Student:** (Unintelligible)

**Reams:** Yeah, ok. You won't be taught how to do that but you'll be taught how it's going to be done in this course.

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Let's do a pH reading now, ok? Take 1 drop of urine and put in 3 – lets do a saliva and a urine both at the same time. Put the saliva in the 3 next to you, and the urine in the top 3 from you.

(Break in tape)

... the equipment is clean, test your equipment first, before and then wipe it out with a Kleenex. And then you can tell whether your equipment is clean or not. Comprehend?

**Student:** How do you test your equipment?

**Reams:** By dropping a drop of one of the reagents in it. (Student and Reams talking at the same time.)

**Student:** Now I think this distilled water, it just got 7.

**Another student:** Now that's water. How much and how often?

**Reams:** Well that depends on how sick the person is and how bad they needed time for the pancreas ....

**Student:** Did you determine that from experience?

**Reams:** Yes. Generally anywhere from 4 to 16 ounces in a day.

**Student:** 4 to 16 ounces a day. And maybe about 3 times a day?

**Reams:** Well that all depends again. The big problem is getting the patient to take it so I generally start off with 4 ounces and I don't care how bad it is.

(Break in tape)

**Reams:** Two opposite biological problems, and the very kind you need for one is the very opposite you need for the other and make your patient on the PNR line. You really got, this happens, and it has happened. And what you do in that case, you put them on one program for an hour or two, and another one on an hour or two. Switch back in two and then stop for a day or two days until the energy comes back a little bit. And then switch back in two and then you'll get to do where you'll do one day and another day and then switch back in two, back in two. And slowly you'll build them up until you can bring those two things together.

Occasionally too, you're going to find a person that's on dope, either legally or illegally it doesn't make any difference. Be awful careful with that person and put them on lemon water. If they're deep deep in dope, feed them, I would only put them on the lemon water about two hours at a time and then take them off. If you

don't, you will release so much of that stored up dope in their body, it will kill them. And most people you'll want to test about every hour.

**Student:** So say you have cancer patient, and then you give them morphine. ...

**Reams:** Let me tell you, suppose that you got a cancer patient that is near the PNR line, heavily on dope. Try the thing to do is to take them off of all of their dope, all of it and put them on a pure, raw extract chlorophyll. And it will ease their pain quickly. And just a little bit of water, just chlorophyll and water. Do not use lemon at this stage. Just chlorophyll and water. And then nature will release, the chlorophyll will ease the pain and the water then will begin to wash this dope out but also expect this person to go into such a deep sleep. You're almost impossible to wake him. And he will sleep for two or three days, and it's difficult to get them awake enough to take the chlorophyll - about eight ounces of pure raw wheat grass extract, clover extract. Do not use comfrey extract because if you can get just the pure liquid juice out but it's too concentrated - comfrey is too concentrated, unless you can get it, and the stronger you can have this chlorophyll, the better. I mean the nearer the purer raw you can, you can have it the better. And you have to give it to them by teaspoon a few drops at a time, a few drops at a time. And try and keep them awake and get it down to them over a two or three or four hour period it's a job, it's a one persons job to get this done. But in this deep sleep they go in, so many people are so afraid that the patients dying on them - and actually they're relaxing. They're so tired. They're whipped out. The dope is coming out and they're coming back to reality. But keep the water in.

Now, the second day, if they're still living (sometimes they're too near or below the PNR line), the second day begin to add a little honey or fruit juice to their diet to kind of keep their energy up. Also give enemas. Most of the time you're just going to have to give water enemas on the bed - disturb the patient as little as possible. I wouldn't even attempt a colonic unless you had them right in the room where the machine was. Don't take them a mile or two or ten miles because it takes too much energy. Just get water in the bowel and if it comes back, put some more in. If it comes out, put some more in. Ok?

**Student:** Well what about while they're sleeping can you use the chlorophyll and the ... rectally?

**Reams:** It would be alright to give them in that way, you can use some pretty heavy doses in there. Oh yes you can get it in like that. You can sure certainly get them in. Yes?

**Student:** (Asking for clarification)

**Another student:** Rectally.

**Reams:** Rectal, but then do an enema. It's usually about the third time don't use it the first time because it will all probably come back the first time. Its about the third time it generally stays.

**Student:** (Unintelligible)

**Reams:** Yes. Yes.

**Student:** You wash out the colon with warm water ... then the third time

**Reams:** It'll stay.

**Student:** 6 or 8 ounces of chlorophyll.

**Reams:** Right and you can also add in a little honey because it gets into the system just the same that way as any other.

We had a patient come with a cancer from her chin to her left breast, it looked like her breast started at the chin. It went down, and it was all around her neck it was the same side. And she ... a beauty parlor and it took her six months to get around, but it was the ... looking thing you ever saw in your life. And the doctors wanted to operate on it, and well, it would have killed her because it was all through her throat and everywhere else. It was impossible to get. And she refused to .... But she's operating a beauty parlor now today, and that was six or seven years ago. One thing about this, your patients will stay well – you don't lose them in a year or two. ... unless it's an accident. Providing they come back for their checkups. It's very important for them to come back for their checkups. At least two a year if they had been critically ill.

Also, I'll have to talk about things as they come into my mind – people that have had a heart attack – and I mean it's a real – not just people that felt they had a heart attack – you can always tell that a persons had a heart attack because the heart will never again have a rhythm when there's damage to the heart it will never again have an equal rhythm as long as the result of that heart attack lasts. Put that person on asparagus two or three times a week after they go get the lemon water and get their liver functioning, and that heart will grow back to perfect. It will grow back until it's absolutely perfect and the rhythm is perfect.

I had a man about seven years ago that hadn't worked in thirty-five years. He was 78 years old and his heart was skipping so bad it was no rhythm at 35-38 beats a minute. And sometimes it would skip so long that you would think it was the last one. But that man got well in three months. And whether (?) he's about 84, 85 something like that. There's not an organ that the body can't replace providing the nerve to that area is still intact enough for it to build it.

**Student:** (Question about asparagus)

**Reams:** You could, you could, yes.

**Student:** If it was in a can is it all right.

**Reams:** Yes, yes, yes. It's the arsenic in it that does it. (Phone rings.) Two or three cans a week. (Answering phone) Doctor Reams.

(Break in tape)

**Reams:** ... but how many gallons of water do you need ... ok, and what is your water absorbancy of the soil. Now some soils you have to put two inches of water on and others you can put a (1 and a ?) quarter of an inch on and you still reach the saturation point. Six inches deep. (Students and Reams talking at same time.)

(Break in tape)

**Reams:** ... major heart attacks. And about 26 its fatal.

**Student:** And where is the beginning of that...

**Reams:** Twenty.

**Student:** Twenty.

**Another student:** What if they don't have a high pulse with that <?>

**Reams:** They don't have to have a high pulse they'll have a very firm pulse but it doesn't have to be a rapid beat or anything of that nature.

(Their?) heart may be beating the same rhythm maybe 60, maybe 54, 48 or maybe 80. The rhythm has nothing to do with it.

**Student:** What about ...

**Reams:** We're coming to that, maybe tomorrow. ... We're going to deal with that tomorrow.

**Student:** That's the urea total, isn't it?

**Reams:** The total, yes.

(Break in tape?)

**Reams:** The protein doesn't make any difference but how your body handle it (in pounds?) make a lot of difference. Does that answer your question?

**Student:** (Unintelligible)

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**Reams:** That's right. It isn't the proteins, it's the way your body handles it.

**Student:** Will each person's body handle the different kinds of ... differently?

**Reams:** Yes.

(Break in tape)

**Reams:** They're not acid.

**Student:** (Unintelligible)

**Reams:** Urea. All ... You do the same thing all over again.

(Break in tape)

**Reams:** To ... day by day. We will do that as quickly we are able to we will send it back to you to where you can do it. And we are not doing this to solicit business, we are doing this to help you keep a person living. We will give you a report of everything that happens day by day by day, what we did on that patient. A complete record so when the patient gets back you can use this to help you with other patients and with other problems. OK? This will put power in your hands.

(Break in tape)

**Reams:** They don't know anything they forget everything they know.

(Different people talking at the same time)

**Reams:** It will have to be done by word of mouth. Because of the powers that be, it is the best to do it like this.

**Student:** Is it all right to talk to guys on the phone?

**Reams:** Oh yes.

**Student:** (Unintelligible)

**Reams:** It's perfectly all right because I don't think they can do us any harm that way.

**Student:** And they can report us but...

**Reams:** That's right, but still I don't...

**Student:** (Unintelligible)

**Reams:** That's right.

**Student:** ... a personal friend

**Reams:** Yes. But I'm afraid to send anything to the (mayor?) because they could wreck us at this stage. Or any claims, or anything of that nature. In dealing with your friends, tell them they're just going to have to take it on blind faith of your word because we are not going to make any highly advertised picture ... or anything else. We're glad to teach but ... have to make up their minds .... We're doing this to protect .... I feel (under the security?) but they'll still do it.

(Break in tape)

(More talk while doing urea testing.)

(Break in tape)

**Student:** But it wouldn't have a tendency to slow the heart rate?

**Reams:** No. What does slow the heart rate is too much vitamin K. ... high blood pressure, often slows the heart rate.

(Break in tape)

**Student:** Does the rate of heart beat have anything to do with longevity?

**Reams:** No.

**Student:** A few long distance friends have a heart rate of maybe 40.

## **Blood pressure**

**Reams:** No, it doesn't. They die just as quick as anybody else. I'll tell you something, these ..., when we get to studying blood pressure you're, I mean, this is related to blood pressure you're going to learn some things that you never dreams or imagined possible. It will really open your eyes when you get into working with these .... There are people whose blood pressure never gets under 210 or 220. They are actors, their perfectionists I mean they are from the child up but their blood pressure ....

**Student:** Like a high compression engine.

**Reams:** Then they are 80 and 90, ... you know how these guys live? ... They never die old. ...stroke, heart attack, cancer or something else. There is a lot of scare about the blood pressure – some people come and say "I got too low blood pressure". What is it? Oh its 90 over 80, 90 over 70. ... 100.

**Student:** How do you know what is optimal for a particular patient?

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**Reams:** This is by starting with the children and following through with their life. Find out where their normals are. Any time it spurts quickly in one way or another you got to do something about it. Everybody has his own norm.

**Student:** I know but a person comes in who has a reading of say

(Break in tape)

**Reams:** (talks about a patient's blood pressure being higher just because they are in a doctor's office)

...

That bottom number is the blood going back to the heart, the top numbers going away from the heart. So it's the bottom number you gotta put a watch on. You can also – I can take these tests and figure the blood pressure. It'll be a while before you do it yet.

(A few breaks in tape and more general talking during lab time)

**Reams:** I think Dr. Horning is going to be with us before very long. Dr. Horning is now retired and he...

**Student:** Is he a chiropractor?

**Reams:** No, he's a medical doctor and he was for 35 years the dean of agriculture for ... medical college. And he's thrown out all ... now. For about 6 or 8 years...

**Student:** He'll he be teaching here or working here?

**Reams:** No no, he'll be a student.

**Student:** He'll be a student, I mean he won't be working as a group, I mean he'll be on his own as an individual.

**Reams:** Oh yes just like ... For a number of years, I had an invitation to present this to the medical college in Guadalajara Mexico. I kept putting it off and putting it off and putting it off. In '68 they persuaded me to go down and make a lecture on it. Well that lecture shook the entire medical world. I mean, I was supposed to talk for 2 hours and they kept me there for 12 hours. Then I just walked out, and I said that's enough. I had schedules to meet and deadlines to come. But it shook the medical world because students then wrote and told other doctors all over the world about it.

Dr. Horning was the Dean of Medicine at ... University in ... California and some of his students wrote to him about it and then he came, he came in 1970 and I didn't even know who doctor Horning, I didn't know he was a medical doctor. He just

called and said I need an examination, can you do it? He just gave me his name; he didn't say he was a doctor or anything. So I came and tested him and we told him in 30 minutes what he spent three weeks in the hospital for. We also told him he's headed for a heart attack in so many months and we were right on the beam. Right on. I mean we only missed it 3 or 4 days. He should have done something about it, but he didn't. He didn't do a thing about it.

**Student:** (Unintelligible)

**Reams:** Oh now he was terrifically impressed. He resigned then from the college and he began to study food. He has already contacted a friend of both of us. He asked where I was and wanted to know where it was being taught. In the last 2 weeks, 2 or 3 weeks. I just got the inquiry. I also said that you've got a hemorrhoid, and it's right next to a blood vessel. And it's going to rupture that blood vessel, and if it ruptures it quick, it's your end in 30 (or 3?) minutes and if it starts slowly, you're going to have time to get it repaired and I was right on that one. He was quite impressed. He said I have spent three weeks in the hospital, and then he told me who he was after, and he said I have spent three weeks in the hospital and I have been the Dean of Medicine for 35 years and he said you tell me in 30 minutes what it took them 3 weeks to tell me. And he says you haven't ....

**Student:** And we can do the same after...

**Reams:** It depends on how you master it. Some of you will master it, and some of you won't.

**Other student:** (Unintelligible)

**Reams:** Well that's all on the computer. You can depend on that computer. You can depend on it.

**Student:** To master this, should we study any higher math?

**Reams:** Well at your age, I wouldn't advise it. I wouldn't advise it because you've got 3 or 4 years of hard college chemistry. See, the first 4 years in college is rather easy. And I don't know how the 2<sup>nd</sup> year is in chiropractic college. In the chemical field and in the math field the 2<sup>nd</sup> <year?> they try to kill you. It seems that all they <?> is to throw you out of college. I'm talking about in science. It seems it's all they're there for, is to throw you out.

**Other student:** (Unintelligible)

**Reams:** Sir? Yeah, that's right... And the only reason I stayed in, was to best them.

**Other student:** (Unintelligible)

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**Reams:** You're wasting your time, I'd say no to it. And I'm going to tell you the professors (in England?) are a bit different in the classroom than they are here. It seems like they are born to throw you out of college. I'm talking about your 2<sup>nd</sup> (.. year) when you really get into the nitty gritty. There's no mercy, there's no love.

**Student:** Can you study on your own?

**Reams:** You won't have time.

**Student:** You're busy.

**Reams:** No, no I'm talking about when you're in 2<sup>nd</sup> (four?) year of college you won't have time.

**Student:** Right now, in practice...

**Reams:** It won't..

**Student:** And all you would do is study the practical aspects of this...

**Reams:** This is going to help more people in the world than you can shake a stick at. .... I have about 10,000 of them in Pennsylvania and so forth. I'm on top of it now, and send out a letter that so and so can do this work.

(More back and forth with Reams and student about how to interact with patients.)

... and I want to call your attention to on this refractometer, on the side of it. There is a small thermometer. Notice in the middle of that thermometer there is zero. To the right of that zero it's a plus and to the left its minus. Notice now that your reading is on 2 above 0 on there. This is very important. Every time you run a test please know what that reading is. It doesn't change very rapidly. It's quite stable. It is controlled by the temperature in the room that reading on that thermometer on that side of the refractometer. Well that number is the tolerance – this is how much tolerance you have. You don't know what tolerance means know but you will, I'll show you what tolerance means as we learn the reading. That is your tolerance reading.

(break in tape)

**Student:** Jesus never said anywhere "Doctor my people", he said "Feed my sheep".

[Casual talk between Reams and students with other people speaking in background. At 1:16:25 he said go ahead and wash up and I'll teach you the albumin in about 10 or 15 minutes]

(break in tape)

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... I wonder if any of you have ever heard of Dr. Albrecht? ... Dean of Agriculture. About 1956 ... one afternoon I got a call from Dr. Albrecht and he said (I was in the engineering office) and he said, "I'm Dr. Albrecht, can I come out to see you." And I said well Dr. Albrecht I'd be honored to have you come to see me. I knew of his writings and his work; I knew who he was and so forth and he came out to see me and he sat there.

He said Dr. Reams, for 23 years each summer now I have ... in the respective states and I have looked up in each state those people that's in private practice in agricultural engineering in consultation and tried to find out what makes them click. And he said my average time now is 2 hours and I will assure you that I will not keep you any more than 2 hours. And he didn't throw the book at me, I've never had it thrown in this field of ionization. And after 2 hours he said well Doctor I said I'd only keep you 2 hours. My 2 hours is up. But I'm staying in such and such a hotel in Orlando. I want to spend the next week with you, I want you to teach me this system. Not this one, but the agricultural course.

So I spent a whole week with Dr. Albrecht in a hotel teaching him this system of agricultural soils energy but I want to teach him this class at the end of July. And he has taught it now to many students and also to Doctor (Nothrop?) and the Dean of Agricultural College in New York and it is being nibbled at by the ... companies, ... companies ... companies are holding it back with everything they've got. I thought maybe you'd be interested to know it is catching on in the agricultural field and it is an awful lot in the books about calculating the energy in soils in order to improve human nutrition.

From time to time you're going to find people critically ill that their energy level is very low and actually they are in appearance of almost being unable to travel. And you are also going to find people that are critically ill who still have a lot of energy – to the eye it looks like they have a lot of energy left but those people fold up in a hurry they look perfectly healthy and maybe in 24 hours they're gone. They're dead. (For 3 or 2 weeks?) I've seen this happen so many times through my life. I'll speak to somebody on the street and I'll say "Hello, how do you do?" And they go down the street – they knew me, I knew them. And the next day or week I'll read the obituary in the paper where they died suddenly or collapsed one day or another so try to go by the numbers and when a person is seriously ill with cancer every day is precious. Every day is precious. Because we have never lost anyone that we can keep living 30 days.

**Student:** That person ....

**Reams:** They're burning up their reserve energy, yes they're burning up their reserve. So these are things that you cannot impress too much upon people – how important one day is.

**When you tell a person to do something, do not let them talk you out of it**

**Reams:** There's another thing that I want you to remember and that is, when you tell a person to do something, you'll not let them talk you out of it. Because plenty of them will try. Do not let them talk you out of if you tell them what to do – insist that they do it with all the authority that you can muster. And then when they come back the test will show you whether they did it or not. It will be very clearly written whether they did or they didn't. And it's very informative, these tests.

And you're going to find a lot of very surprised people (one?) time when they come back and you know they haven't done what you said. You'll say, "why didn't you do what I told you?" ... They're going to hem haw and they'll have you on the defensive before you can (fix?). But whenever you say "Why didn't you do what I told you?", you've got them already thinking.

I recommended to a lady a diet one time and also a colonic. Three colonics the first week and then two the second and one every week until she took twelve colonics. She was about as stopped up as a high pressured smoked sausage. And I mean bad shape. So I told her to come back in a week. So she was back in a week and I said to her, "Did you do everything I told you?" I was going to catch her, really catch her in a trap. She said, "Yes Doctor, I did everything you told me." I said, "Well why didn't you take the colonics?" She said, "Oh I couldn't bring myself to do that." I said you just now told me you did everything I told you now you tell me you didn't take the colonics. Now you go take the colonics and don't you come back here until you do do it. And ... she went and got them and she said, "Well Doctor if there is nothing else to do and it will satisfy you, I'll do it." She was kind of cocky with me other care, because then I knew she was going to do it.

You should have seen how happy she was a month later. Even her husband was proud of her. So you know a person's getting well when this happens but don't going to dilly dallying around with it, speak positive. You've got the fact on your card before your eyes, and use that authority that you have. You've got the power in your hands, and you know wherein you speak. So use it. The dilly dallying around makes them lose confidence in you. But speak firmly, speak ..., and so what if they get mad at you while in the office. If they head to the door you might say, "I've never seen a person in such a hurry to get to the cemetery as you." And then they'll turn around and come back very ... very ....

Another lady came in one time, she had cancer real badly, had already been given up on by her doctors but still had a lot of ... about her. Very high society lady in Miami Florida. She was in such high society and she walked like the earth wasn't good enough for her dainty little feet to touch. Now I'm not judging her, I'm just telling you what I saw in her walk.

She hadn't been to the lodge (and it was a lot better one than this one), or a retreat place or sanitorium half an hour when she called up and said she wanted to go home. So I went over to see her about an hour and said "So you want to go home?". "Yes, I do, I want to go home." And it was a hot summer day in Florida too. And I said, "What is your problem here?" She said, "It's too smothery here." I said "I got news for you. It's a lot more smothery in the cemetery. It's a lot more smothery."

And she said "Doctor, would you show me my room?" And I did, I showed her her room. In the first week, God touched her heart and saved her. In the second week, she had made so much progress, far beyond anything that we could comprehend. Even God was touching her and doing a miracle in this lady. And she was ready to go home and continue the diet at home. Because she had maids on every side, she was very wealthy.

And she said "Doctor, I don't want to go home I want to stay here." And I said "I'm sorry, you can't stay here. When it comes time to go, you have to go." But she said "I want to stay here, I like it here. I've got the money to pay." And I said, "You've still got to go home. We do not keep people here that doesn't need to stay here because you're taking up a bed that somebody else needs. Now you go back, and get into church work and make yourself useful. And put off those high heel shoes, and get down into earth and enjoy." And she smiled from ear to ear and she has been a very active worker in the church now for the last five years. But be firm with them.

### **Sometimes people need to get mad to get their adrenaline glands flowing**

A lot of people are running from God. And you know it. Just plain tell them, "Your problem, half your problem is running from God. And he's going to spank you, until you listen." And then give them a diet, or give them a diet first and so forth, but be firm with them. And if they get mad, let them get mad! That means their adrenaline glands are flowing.

When I was a boy, I was raised on a ranch. And we had open range there and often times we find a little old scrawny cat (third?) grown and even younger than that that wasn't growing. Just a terrible looking little cat. So what we did, we'd sick the dogs on them but we wouldn't let the dogs catch. We'd just let them run

up and bark and he'd get mad and madder and madder. Finally he'd get so tired he'd lay down and we'd go ahead and call the dogs off them and he'd go ahead.

You'd see that little fellow in about two and a half months and he was about as fat as a butterball. And the flowing of the adrenaline glands had gotten him angry enough that he was determined that he'd live to see the day that he'd rip all the dogs in the state of Florida. Or something like that. But it often helps to make someone angry or to be very (caustic?) in what you say.

### **Asthma is a calcium deficiency**

Now I'm going to take up some respective (?) as asthma. There's only one cause of asthma and that's a calcium deficiency. Calcium deficiency. But the thing that you must find out, which kind of calcium, this test will show you. I will show you in the next two days which kind of calcium's to use. And how much to give to different ages and so forth.

I had a missionary to come from Africa, they had a little girl eight years old that was about the worst case of asthma I have ever seen. And they had been to some of the finest doctors in South Africa and also up into New York and then came down to Daytona and spoke to a doctor there. And see his parents lived at (Deland?) Florida and they came into Daytona and there was a summer cottage there and so they would be with their parents for a while trying to help the little girl to get better.

And one of the doctors in New York had recommended to take her to Daytona beach where she could have a lot of salty and fresh air and they had been there two months and she hadn't improved any at all and they happened to meet this doctor that knew about me and he said to take this child to Doctor Reams.

And when I went to test her, she was terrifically deficient in calciums, three different calciums. And I began to give her massive doses of calciums in three different forms. In two weeks, she had no more asthma. So, she began to gain weight. In two months, you wouldn't even have known the child. You could never tell that she had been sick at all. I heard from them two or three years later after they had gone back to Africa, and no more problem at all because of the calcium deficiencies.

I've often wondered why God made so many different kinds of calciums I don't know why but I know there is and I know how to teach you which one to use. So that should be sufficient for asthma.

**Hives can be a sign of a heart attack (muscle spasm) while calciums may take a period of time to show not normal**

I had been working for most of the day in a hospital in Orlando. It was a Friday afternoon and I had just gotten home about 6:00. The telephone rang and it was one of the doctors at the hospital and he said "We've had a patient in here for the last three hours, 35 years old who has broken out in hives from the top of her head to the bottom of her feet", and said "We can't find out any reason why in the world." He said "Her calcium is normal, and everything is normal. We can't find any reason why she'd break out in hives."

Well I asked two or three questions I said, "Well has she had any family arguments?". "No." "Is her and her husband getting along alright?" "Everything's getting along alright." "Is her husband in trouble in business?" "No, they're doing fine." So, I said, "I'll tell you what you'll do now. You check to see if she's had a heart attack." And they laughed at me. I said, "Go ahead and check." And they said, "Why do you say that?" I said, "Well there's one type of a heart attack", I said "It's not exactly a heart attack but it's something that effects the heart, that gives it the appearance of having a heart attack that causes a person's nerves to go all to pieces and it temporarily upsets the calcium balance and they break out in hives." So I said "Call me back in two hours if this isn't it, or if it is it, call me back and if not, I'll come back over to the hospital."

In less than two hours they called me back and said, "Doctor you're so right she is having a heart attack." So it was a muscle spasm in there forcing this heart rhythm which caused extreme nervousness, which upset her calcium balance whatever it appeared to be normal. But the next time they run the calcium, about five hours later it wasn't normal. But when she first came in it hadn't had time to upset the calcium balance yet, so I told them what to do and I told them I'd be in Monday and I said "Well I think you can dismiss her, uh Monday afternoon she'll be alright". They did, but it was very unorthodox in the hospital and the doctor got on the carpet for it, but the woman went home and as far as I know she had no more trouble.

So what I'm trying to tell you is, calcium is a tricky tricky thing. It can be perfectly normal and in an hour it can be somewhere else at times whenever people get upset or muscle spasm or it gets too tired. What she had been doing, had been doing a lot of driving and the muscles in her shoulder had (expands?) and caused some problems with her heart.

Let's see if we got any ... We got some ...

## Seven different groups of calciums

Calciums are very very important. You can divide calciums into seven groups. Into seven groups, I will name those groups for you. One is the carbonate calciums. Carbonate calciums in the carbonate group. Another is an oxide group. Another is a lactate group. I beg your pardon it's a gypsum group, a lactate's in the gypsum group. Gypsum, it's called a gypsum group. Lactate is in the gypsum group.

**Student:** Can you spell that?

**Reams:** G-y-p-s-u-m. Gypsum group. The phosphate group. How many is that, five?

**Student:** Four.

**Reams:** Huh? Four? Just a minute, I'll come up with the other one.

**Student:** Do you leave lactate out?

**Reams:** You leave the lactate out. The lactate is in the gypsum group. Uh, the tri-calcium group, the tri-calcium group.

**Student:** (Unintelligible)

**Reams:** What's that?

**Student:** What group?

**Reams:** Uh, that comes in the oxide group. And there's a bi-calcium group. Bi, bi-calcium group.

**Student:** You are lacking one.

**Reams:** Yeah, I lack one, I'm just trying to think what it was. Most of the time I can ring them off in a hurry. Sign of old age, I'm forgetting.

**Student:** ...

**Reams:** Just leave it vacant right now. I'll come back to it, I'll think of it in a little while. If not, I'll know it in the morning, I'll look it up. I know it well, but right now it slips my memory.

These are the groups of calciums. So long as you stay in these groups of calciums whichever one that shows a deficiency you're quite safe.

Dolomite, that's the one. The magnesium group. Dolomite. I knew I'd think of it, the Dolomite calciums. There's a whole group of those, some of them are good,

some of them are bad. Some of them are better and some of them are best. Dolomite group, now we've got the seven.

Tomorrow you will be told more about the calcium's and which one you use and when to use it and how to use it and so forth. I just wanted to give you that tonight, and it would be a very good idea to run a thing---

**Student:** ... the chelated one.

**Reams:** Yes. Any of these can be chelated. What does the word chelate mean?

**Student:** You said it means ...

**Reams:** Yes, it means (the atom?) has an extra electron. In other words, the atom has temporarily been split and it's taken on an extra electron. One more electron or more than it should actually have. The atom has been split, that's what chelated is. You made me proud of you, you answered the question I'd already told you the answer to (I'm just telling you?) in a minute.

### **The body uses more calciums than any other element in nature, followed by phosphate and potassium.**

Your body uses more calciums than any other group, than any other element in all nature. All biological life uses more calciums than any other substance. And the second thing that it uses most of is phosphate. And the third thing it uses most of is potassium. Those three things, in that order. And the rest of it comes in infinitesimal, very small.

**Student:** The second one was?

**Reams:** Phosphates. The third is potassium. Potassium, in that group. One of the key elements in plant food biology is phosphate because it holds the key to most of the other elements to get it into plants but this is not so or true with higher animals. It does not hold any key at all. In other words, your system can take in elements in many different forms, but a plant is limited to taking in most of it's elements in phosphated form. Phosphated iron, phosphated copper, zinc, manganese, molybdenum, as you're going through the group.

So this is what actually, uh, actually it means about increasing energy is the greater amount of mineral you take in, the greater amount of energy you should have. And the greater variety of minerals you take in, the greater amount of energy you should have and even so the reserve energy.

**Student:** ... the greater amount of minerals you take in but your body can not assimilate? You're taking them in, but still not assimilating.

**Reams:** Yes. You're so right. You're so right, thank you for helping me. The body must assimilate them. What you take in through your mouth and what you swallow is two different things, but I think it's the body taking them in I'm thinking of them taking in the energy from them and not the mineral itself as we take it in the food. So you helped me to make it much clearer thank you.

### **The cause of terror and agony during menopause is a loss of calciums**

I want to tell you something else about calcium now and I'm going to talk to you about menopause. And in order to understand menopause, we should start with a child, a boy and a girl at least when they are born. If these two children are born normal and remain normal and healthy, each will use the same amount of calciums until the young lady comes into young womanhood or puberty. At that time she will use seven hundred times more calciums per day than a normal man. And any time those calciums drop below that norm regardless of what age she may be, whether it's 14, 18, 20, 40, 50, 60, 70, it doesn't matter. Any time it drops too low for her anatomy, when its completely finished the change in life which sometimes is ten years after the menstrual flow stops, that person is in menopause period.

That is the cause of terror and agony during menopause is a loss of calciums. Keep that calcium up and that person will go through menopause with no ill effects whatsoever. Any time the calciums drop low enough and stay low long enough, it will affect the menstrual cycle. And when the calciums drop too low, they have a feeling that the whole world is dropping out from under them and they become fussy, hard to live with, snappy, uh really hard to live with. Even a child, children and when this happens they're not fighting people, they're fighting for their life.

And you can help keep many couples together to talk to them and tell them what is happening and teach the husband how to deal with the wife because if there was ever a time that she needs this ..., needs this help is at this time.

And sometimes the husband or the man's calcium drops too low too and he gets hard to live with and barky and quite a problem in the house because he's fighting for his life too. He's dropping below normal. He's not in menopause he's just, his calcium's dropped too low.

### **Pastor and wife's marriage saved by correcting calcium deficiency**

Two or three years ago, about three years ago a minister and his wife came to me that were on the verge of a divorce. And I ran a test on them, I didn't know it when they came that they were on the verge of a divorce. I didn't know that until two or three months later. But they came because they were so nervous all the time.

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He had a very nice church and I got their calciums up. And I explained to them what menopause was, like I have explained to you and how men get nervous. I gave them calciums to take. And every time one got the least bit off of the track the other one ran and got the calcium bottle and said, "Here honey, you need some calcium!".

They're a happily married couple now and they are helping hundreds of their parishioners by telling them to take calciums or go to Doctor Reams or somebody that can get the right kind and they're doing a marvelous work in this ministry.

So you can use calcium to help keep the peace and also help to keep couples together. So the more difficulty someone's having, generally the greater the calcium deficiency they have.

That's not the only thing that causes difficulty, but it is one of the major ones to expect and to look for. Are there any questions up to now about these calciums? They are very very important minerals.

**Student:** (Unintelligible)

**Reams:** Yes, yes. They surely are.

**Student:** (Unintelligible)

**Reams:** Well, the kind they don't have. Check to see what they don't have.

**Student:** (Unintelligible)

**Reams:** Yes. You have to find out what kind they got first. And then give them the kinds they don't have. This is very important, these calciums. Any questions?

**Student:** (...when they swell...a lot of water....)

**Reams:** That's generally a dietary problem or eating too much chocolate, iced tea, hot dogs, bread and it's just a lack of plain chlorophyll in their diet generally.

You can control the temper of children terrifically by the proper use of calciums. Children almost become little angels when they have the right amount of calciums. One of the regrets that I have when my children were growing up that I had to travel and be away from home quite a lot. And when I'd come back home and the calcium was low, mother would say to me, "You know what *your* kids did?" And it was bad. I knew they needed calcium. And I'd listen to the story. But when I came home and she said, "You know what *our* kids did?", I knew they had plenty of calciums. They were doing real good. It makes all the difference in the world, you know.

But she didn't realize what she was telling me but I knew what she was telling me. You know when daddy's been away from the children a few days and come back, all he can see is wings. But mother's been there with them and the calcium has been low, and all she can see is horns. So if you're not real careful, mother will be using the horns at you and you will show your horns. And all mother needs is calcium too! She's having a rough time.

So one of the nicest things to do is when peoples having a bad time – don't make the going rougher with them – say "Just be patient, we'll do a test now and your're gonna be all right. We'll help you. I'll help you." And because you've got the key in your hand to pound the sea of Galilee, all you've got to say is, "And you're mine. Peace be still." until you can get the test in your hands. And then you have it, you can do it. You have every power in your hand to control it with. So this is what it means and what it takes.

Many times a patient will become very angry at some doctors and at that time that persons low in calciums. Whether you have a test or don't have a test. And all you got to do is just say "We'll help you. We'll help you. Just be patient." And you can calm them down. Never at any time, never at any time do you ever have to get on the defensive with a patient. Never, never let a patient put you on the defensive. Never. There's no reason for it. You are a highly trained physician and doctor and never let a patient put you on the defensive or anyone else for that matter. There's no need for it because you have the facts at your fingertips. And insist that they do it. And if they don't do it just say, "Don't come back till you do do it". Simple as that. And then they'll know that you're not fooling you at all.

### **You can't fool Dr. Reams with non-human urine**

When I first came up to you last year, I've told some of you this before but some of you have not heard this story yet. Betty, my youngest daughter was doing the laboratory work for me and one day one of the fellows in this area always wants to trial the new doctor to find out what he knows and what he doesn't know. Like they do when a new doctor comes in the neighborhood and they want to take him snipe hunting and so forth or possum hunting or whatever their ways of doing. But when a new doctor comes in they really want to know what he does.

They heard about these tests so ... these two, well they're my patients still. They maintain that they have a right to manufacture their grain any way they see fit. And they do it and make it out their hills and sell it. And they were going to fool the doctor and they told everybody ... and of course I didn't know that at the time.

But Betty ran the test and she ran into me, "Daddy, we got two dead men out here still walking around." And she was as white as a sheet. And I looked at the test and I said... Did I tell you this story already? I looked at the test already, and I

said "Honey, don't worry about it just send them in. What they've done they brought harm to you in here. For us to test." And then they came in, and I said "the test looks pretty bad. You've just got to quit eating all that slop and wallowing in the mud." They knew they hadn't fooled me at all, you know. And they told it all over the country, it was some of the best advertising I'd got since they knew that they hadn't fooled us at all. They didn't think we'd know any difference. But its really really remarkable whenever you see an analysis go above 30, it isn't human or the person isn't living. Urea.

**Student:** Are there various levels with the urea for various animals.

**Reams:** Yes. Yes.

**Student:** Unintelligible.

**Reams:** Oh yes. Always. In fact I can see the analysis of most any manure or urine and I know what animal it came from because the years of experience of working in this field. You don't need that. You don't need to bother with it. Human beings all you're interested in today. Just stick to that, that's enough. That's enough. Uh, it's amazing though what these tests will tell you. So sometimes you can turn a prank into some very effective advertising.

**Student:** You figure the hyperactive...

**Reams:** Calcium is all there is to it. Nothing more or less, calciums. Nothing in the world but calcium. Calcium and constipation. Calcium and constipation. And any other mineral deficiency, there can be other minerals too. There's too many homes today that are not places of nourishment, they're just filling stations. Fill the child full and think that they've done their part.

### **Arthritis**

There's one other thing that I will call your attention to, in calcium's especially, in a person that is underweight can have a very high calcium content and their blood pressure will rise for no apparent reason. And the person doesn't have any inward or outward emotional problems or you can't find any. Or he doesn't have any muscles that seem to have constrictors or swollen or tight or anything else and this is brought about because there's too much calciums generally in the liver. And that is the beginning of an arthritic condition is the liver retaining a higher ratio of calciums than it should retain.

Generally in most every case of arthritis regardless of its kind, a calcium plays a prime problem. Generally the liver stores too much of one kind of calciums and therefore blocks others from being available to the system. The inflammatory type of arthritis always denotes that there is infection, carcinoma or cancer somewhere

else in the system. Always, there's no exception to that rule. It's always somewhere else there's a problem in the system.

But there's three other types of arthritis that does not swell and can be very painful and even cause nodules, crooked and deformed fingers that does not swell but very very painful. These go back to the liver storing too much calciums.

**Student:** So say that again they have too much ... and it's the beginning of arthritis. The livers storing too much calcium. And usually there's some cancer some place else ...

**Reams:** Cancer, carcinoma, emphysema, or something, naming it doesn't make any difference.

**Student:** So there are two things ...

**Reams:** That's right.

**Student:** ... and there's something wrong someplace else ...

**Reams:** That's what causes the swelling yes. That is the easiest one of all of the arthritis' to handle is the one that has the swelling. It's the easiest one to handle. It can be handled the quickest and the most effectively.

Sometimes people have two kinds of arthritis at the same time. They get one down, and then you have to start working on the other. It's perfectly possible, just likes it's possible for a person to have two kinds of heart attack at the same time. Too much cholesterol and too much urea. It's perfectly possible.

**Student:** (Unintelligible)

### **Arthritis can also be caused by body manufacturing too much alcohol – four distinct classes of alcohol**

**Reams:** That's right, that's exactly what was happening. There's another probable cause with one of the arthritic conditions and that is the body manufacturing too much alcohol and displaces some kinds of calcium.

But before I begin to get into this, let me explain to you – there's four distinct classes of alcohol. Four distinct classes of it. I won't go into the nitty gritty part of which one does which, well I can do it but it's not necessary.

One of the alcohols if you become intoxicated on it will fall forward. Another group if you become intoxicated on it, you'll fall backward when you fall down. Another group if you fall, you'll fall to the left when you fall down. I'm talking about high states of inebriation. And the other group you'll fall to the right when you fall.

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Because you lose your equilibrium in those kinds of bases. An ordinary old bourbon you'll fall forward with it. Uh gin you'll fall backward with it. And the other two we need not go into because we'll get into double units of it and then it gets a little complicated and not necessary to know.

But when the body is retaining too much alcohol from any source whether it manufactures it itself or whether it's taken from outward – wine, beer, or any other source, it many times starts cirrhosis of the liver. And many times, when this starts it is the beginning of arthritis.

Many times, they quit drinking and two years later or three years or ten years later the arthritis will start even many times late in life because of conditions that happened earlier. You can go back and trace this to calciums. Correct your calciums and it can correct. And if you can get the patient in time, also when the liver gets to a certain stage of oxidation, or calcification not oxidation but calcification, then the liver cannot receive enough oxygen from the lungs to properly make the hydrochloric acid. And when this happens it's a very very difficult thing to do and a slow process and of the least... [end of recording]