Advertise your products & services here
Advert Rates

Bye bye to Staphylococus,the unconquerable?

Note: This article was published by Mr. Femi Kusa sometime in 2001 when Health Forever Products Limited was developing BENABIOTIC. It has since been packaged and available for sale. Health Forever Clinics has used the product to reverse several cases of infertility.

Femi Kusa (FNCP), FNAMN

Believe me, this is not a joke! A herbal remedy may be on the way which, in only one month, could rid the body of all the colonies stacked up by staphylococcus over several years to inflict all those unbearable aches and pains from which sufferers desperately seek deliverance! I would like to lift the veil off this remedy in all seriousness, perhaps prematurely, to help open a health gate, but careful not to be a harbinger of false hope for all those hundreds of thousands, if not millions, of people in this country who live under the siege of staphylococcus.

The editor worked me up into lifting this veil, I must confess, when he asked me once or twice last month what Staphylococcus was all about. He had received letters from some readers making enquiries and had even published one or two of them. To be frank, I am aware Staphylococcus is not like Anchor butter. It doesn't yield easily under pressure. As a matter of fact, Staphylococcus defies several pharmaceutical remedies, except perhaps Vancomycin. Even then, only rarely is Vancomycin the Staphylococcus waterloo. It walks away majestically free from all traps, causing destabilising internal heat, which may be confused with the hot flashes of menopausal hormonal imbalances; literally, it lives on the sperms in men, subjecting them to not only low sperm count, but taking away their libido as well and creating erectile dysfunction problems for them. For women, the monthly cycle is disarranged, if not desparaged, and they itch severely in the secret place. For men, occasional physical reminders that they still live with Staph, as Staphylococcus is also called, could be pinching pains inside the tip of their organs. Many sufferers speak of feelings of "something walking up and down" in their bodies. This may very well be effects on internal tissue of the protein toxins secreted by this bacteria, against which the body fails to produce effective antibodies. The body would have been partly incapacitated by a weakened immune system, creating gaps in its defences which the bacteria exploited to start with. And to worsen the situation, Staphylococus secretes enzymes which depopulate the fighter white blood cells.

Bad news as it is, there is no running away from Staphylococus. It is in the air we breathe and in the food we eat. What is more... it lives on our skin. About three in 10 healthy people are believed to carry the bacteria in their noses. In any case, Staphylococus bacteria have been growing on our bodies since we were about one week old. We do not suspect anything amiss is going on because our

skin secretes chemicals which kill them off. And they cannot survives the outermost layer of the skin which is dead material. Besides, there are friendly bacteria on our skin which kill off the Staphylococus bacteria. But we harm these good bacteria when we apply antibiotic cream to the skin, thus unwittingly giving Staphylococus free passage into our bodies at the slightest opportunity.

Such an opportunity may come when we shave, barb or when the skin is bruised or broken. It may come, also, when we eat cold food not hygenically prepared and into which Staphylococus has found its way.

On our bodies as babies, Staphylococus causes the well known Scalded Skin Syndrome (SSS). It usually begins as a localised infection. But, soon, the bacteria produce poisons which in time affect the whole body, producing, fever, rash, blisters, burns and dislodgement of the top skin layer.

When contaminated food is eaten, the result is food poisoning evidenced in diarrhoea and vomiting.

It is when Staphylococus gets into the blood stream that the house really goes on fire.

There are about 30 types of Staphylococus which, clinically, are divided into two broad groups: aureus and non-aureus. The Staphylococus aureus (S. aureaus) is at the root of soft tissue infectious and toxic syndrome (TSS). Of the non-aureus category, S.epidermidis is the most prominent clinically. Opportunistic, this one resides on the skin infecting babies and the elderly and people who use artificial implants such as cathethers, tampoons and such other artificial devices, especially plastics.

Once Staphylococus enters the body, it secretes proteins which bind it to the proteins on the surface of the host tissue. There, it begins to grow into a cluster. to protect itself from the host immune system United we stand, divided we fall, it is said. The invading Staphylococus begins to secrete many virulent chemicals. Some of these impede Phagocytosis, the process by which defending white blood cells encircle, engulf and destroy the invader. Other staph poisons damage invaded host tissue, causing disease and conditions. Yet other chemical substances damage the membrane of red blood corposules, causing hemolysis. Even where the body's defence mechanism produces antibodies against these super anti gens, as these poisons are called, there are other Staphylococus toxins to neutralise them before they can damage the guest. The body is forced along the line to release inflamatory substances, which are to facilitate movement of fighter cells to infected sites. But this may facilitate symptoms of septic shock. When Staphylococus poison is at systematic level, toxic shock syndrome (TSS) may result.

Under such a scenario, the Staph bacteria can as well cause anything from hair follicle infection (folliculitis), boil, scalded skin syndrome (SSS), heart damage, deep tissue infection and abscesses, urinary tract infection (UTI), styes, impetigo pneumonia, bone damage (osteomyelitis), phebitis, mennigitis, cellulitis (inflammation of the cell); toxic shock syndrome (TSS), septic arthritis, damage to red blood cells and destruction of white blood cells, among several other health problems.

A last resort antibiotic intravenously administered against multi-resistant bacteria, particularly against hospital-induced resistant strain, Vancomycin is becoming increasingly helpless against Staphylococcus strains now resistant to it. Last week, a Lagos-based pharmacist who has exhausted the wide range of the pharmaceutical arsenal against Staphylococus, which has menaced him for many years, availed himself of the possibility of help from the upcoming new-hope herb. He was encouraged by reports that it had helped a whole family of five entrapped for years. I have not met this family. But I have witnessed the admission of a gentleman who claimed to have ended many years of an embarrassing holiday,by which he meant restoration of his virility while he was on this remedy. His menacing symptoms had disappeared as well, he claimed, as has become the refrain in many more inspiring testimonials, particularly in respect of restored energy, but with little or no test tube proof-proofing as yet.

What I believe foreshadows the big bang in this regard is the case of a young couple who married about six years ago. The man suspects he may have infected his wife. For five long years, they have been unable to enjoy the bliss of marriage. The prospects of a baby coming along have been dim. They cannot sit down all evening, legs crossed, arms interlocked, whispering all those Romeo and Juliet sweet-nothings. They are so conscious that they are both infected with Staphylococus. When they talk about their lives at all, it is all centred on how they can get this nasty infection off their back. They are careful, too, not to upset each other. You know, the tendency among immature couples in such situations is fault-finding and self-pity. All their savings go into one prospective remedy or another, including homeopathic medicine, without light at the end of a long tunnel appearing to be in sight. Although she must have been in her early thirties, the woman presents signs easily confused with hot flushes of menopausal hormonal imbalances. She was ever on heat. Her monthly cycle was disarranged. She suffered, besides, from low abdominal pains of the sequence of a urinary tract infection (UTI). She tired easily, slept little and complained of general body pains. Her husband expressed more or less the same symptoms. In addition, his sperm count was low and he often expressed jabbing pains in the inside of the tip of his organ. But when we ran into each other again last Friday, he was full of life. Not only had those nightmarish symptoms disappeared, his energy was speedily returning. He told me he had been out in the sun all day, and he was not fagged out, something he couldn't have dared for 30 minutes without being under the hammer. And his wife? She had had to retire to the village for a while, so they could give each other some breathing space while each one was under this herbal therapy, to avoid re-injection.

The good news, ladies and gentlemen, is that the woman has reported from her village retreat that her symptoms are abating and her 28-day cycle has normalised for the first time in several years. But unlike her husband, she has not returned for a laboratory re-check.

On May 9, they both underwent tests at Biomedics Diagnostic Services Limited on Adeniran Ogunsanya Street, Surulere, Lagos. And the results of their HVS microscopy were

WIFE::

• Specimen ... HVS MICROSCOPY

• Pus cells ... 1-3hpf

• Epithelial ... (++)

• Red blood cells ... (Nil)

• Yeast ... (Nil)

•Culture ... Moderate growth of Staphylococus A urueas

The pathogen was sensitive to seven antiboitics, including Ampicilin, Chloraphenicol, and resistant to six.

HUSBAND:

• Specimen ... Urine swab

• Direct gram ... Gram positive cocci in clusters

• Culture ... Moderate growth of staphylococus Aureus.

The bacteria were resistant to eight antibiotics and sensitive to six.

It was at this stage that he began the trial test run of this herbal remedy.

Two Mondays ago, exactly two months after the first laboratory test, the husband, who remained in Lagos, returned to Biomedics.

And the results are:

• Specimen ... Urine

• Microscopy ...

• Pus cells ... 1-2/hpf

• Red blood cells ... Nil

• Epithelial cells ... (+)

• Crystal oxalate ... (+++)

• Culture ... No bacteria growth after 48 hours incubation at 37degC

I must admit that this is only a lay kitchen experiment and can therefore, give no more a hint of possibilities. For there are no double blinds and other standard controls, which I have been advised by the folks behind this herbal remedy are to follow in due course. Whereupon I had felt, ab initio, I was jumpingthe gun and could be raising false hopes. But what do you do when a man left off the hsk after five long troubled years lies prostrate right before you and says the only way you can help him express his gratitude to the Source of this herbs is to pass the knowledge on?

So, I am lifting the veil, I said cautiously, hardly able to wait though, in the day of the ,,,,,,,,.

I have been advised by an analysis of the laboratory report of two Mondays ago that the husk and may be on his way to freedom and we may, indeed look up to this herbs to put Staphylococus in the cage. The observations as confirmed by a doctor are that

(1) The pus cells, at 1-2/hpf, are within tolerable limits, although a ,,,,, count, say 0-1/hfp, would be more comfortable,

(2) The absence of red cells is good news as well,

(3) The presence of epitheliel cells suggests, through infection, of outermost layer of internal tissue, this time of the urinary system

(4) The presence of crystal oxalate at TTT level indicates uric acid flooding and the possibility of storres forming in the urinary system. This is warning that kidney storres could be in the making. Thus, oxalic acid-forming foods, such as spinach, are to be avoided and plenty of fluids, say three litres a day at least, would be required to flush the system and dilute the acidity.

The unforgettable news is that, after about one month therapy in this upcoming herbal remedy, moderate growth of Staphylococus has given way to "No bacterial growth after 48 hours incubation at 37 degree C.

Husband and wife were on a lean budget throughout their therapy. So, they could not afford standard herbal therapy. This usually involves the use of berberine-containing herbs such as Golden Seal, Barberry and Organ Grape in addition to Aloe Vera gel, Edhinacea and Tea Tree Oil, to mention just a few. Lately, the Indians have added to these Nigerian imports from Europe and America their own assembled in the forms of Bangshill and fortege, the latter, like L. carnitine, being employed for raising the sperm count after the Steph clean-up by Bangshill.

These herbs work on the basis of certain beliefs about the Staph infection. Barberine is believed to coat the surface of human tissue, preventing adherence to it by phatogens, including the Staph bacteria. Berries are believed to exhibit the same activity, which is why Cranberry juice is seen as a healer of urinary tract infections (UTIs) and why Aloe Berry Nectar is in vogue for such conditions. For the Staph bacteria have been found to be a weakling where they cannot attach themselves to host tissue through not being able to express certain proteins on their cell surface which help bind them to the protein of human tissue. So, coating human tissue to detach the bacteria or prevent them binding in the first place seems to make good sense, as this prevents those metabolic processes which produce toxins that traumatise the body.