

Therapy of Diabetes Mellitus (Type I and II)

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he metabolism of glucose is very complex. An important part of it is the fine regulation by the pancreatic hormones insulin and glucagon, that keep the glucose level in the blood at values of about 100 mg per ml; values over 120 mg per ml (with an empty stomach) manifest diabetes.

Another part of the extensive hormonal control system is played by the adrenal gland, secreting adrenalin from the core and cortisol from the cortex. Adrenalin stimulates the glycogenolysis in the liver and the muscle tissue, cortisol stimulates the inhibition of the glucose synthesis from protein and inhibits the oxidation of glucose.

Thus the adrenal gland with both hormones raises the glucose level, representing the adrenerg counter-regulation to the effect of insulin. There exist some secondary forms of diabetes, caused by serious disturbances of the hypothalamus, the pituitary, and the adrenal gland.

The primary forms of diabetes mellitus are of type I, mainly affecting children, and of type II, a typical degenerative disease, which under certain conditions can be treated with REGENERESEN. In this case the mechanism stated above should be taken into account; the peripheral resistence against insulin,

sometimes participating, can be influenced with RN 13 REGENERESEN.

Therefore a standardized therapy for a diabetes of type II could look like this:

- 6 ampoules each of *pancreas* and *liver*,
- 5 ampoules of RN 13,
- 3 ampoules of hypothalamus, and
- 2 ampoules of anterior pituitary.

Using this scheme, the best results have been obtained, with a decidedly bettered tolerance against glucose. Of course, with more serious cases higher doses of pancreas and liver, and also sometimes of RN 13, are needed initially, whereas the quantity of REGENERESEN for the hormonal regulation is generally sufficient. In all cases, a regular repetition of the treatment is necessary about once a year.

Because of the slow progression of the degenerative process, only improvements of the disease can be obtained, but it can not be cured. With cases already dependent on insulin substitution, the application of REGENERESEN brings no effect on the basic disease. In these cases, though, it can be useful to treat secondary effects of the diabetes with REGENERESEN, e. g. damaged blood-vessels or retinopathies.

The aetiology of type I diabetes is sup-

posed to be a chronical immunological process, probably with a hereditary disposition. The fulminant outbreak of the disease then is triggered by environmental factors like virus diseases or toxines. At the time of manifestation already 80 to 90 per cent of the Langerhans' cells are destroyed.

The referent presented a selected case of a child five years old with type I diabetes to show the possibilities of a REGEN-ERESEN-treatment. This therapy should only be carried through during a remission phase after the first manifestation, called the "honeymoon phase", appearing in about 70 percent of the cases, because only then a partial regenerating ability of the pancreas exists. The following REGENERESEN should be used:

- 4 ampoules of pancreas,
- 3 ampoules of adrenals,
- 2 ampoules each of hypothalamus, pituitary, spleen, thymus, and lymph nodes.

With older children (9 to 13 years) these doses should be doubled. The same treatment should be repeated not later than three months after the first application.