

## Immunology column

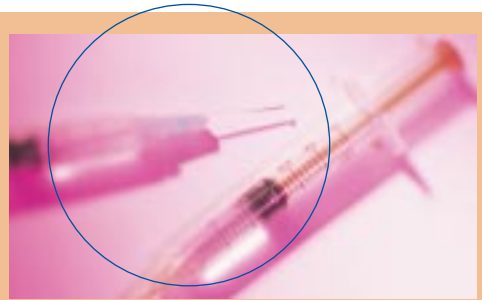
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## Vaccination

## Pre- &amp; post- vaccination with Engystol as adjuvant treatment

About thirty percent of the population suffers from post-vaccinal reactions, which constitutes a serious problem for the medical community, as well as major discomfort for patients. Antihomotoxic preparations can help the practitioner intervene by providing an adjuvant to support the immune system.

Engystol is an immune-modulator, which, according to the Bystander Reaction, seems to prevent the inflammatory response by stimulating macrophages to produce antigen motifs. They in turn activate Th3 regulatory lymphocytes to bind motifs to their receptors and become Transforming Growth Factor, which mediates Th1 and Th2 lymphocytes and consequently quenches inflammation. In the first quarter of the Nature-Link study (*Biomedical Journal winter 2003*) on immune-modulation using Engystol with or without vaccination (in animals), results warrant the following adjuvant protocol, which may optimize the effect of the vaccine and reduce the chances of post-vaccinal reaction.



## PRE-VACCINATION

**Adults:** 1 vial of Engystol 5 days in a row within 10 days of receiving the vaccination

or

1 tablet of Engystol t.i.d. for 3 weeks prior to vaccination

**Children:** 1 drop of Engystol per every year of the child's age, 7 days in a row within 10 days of vaccination

## POST-VACCINATION

**Adults:** Follow vaccination with 1 vial of Engystol 3 x/week for 3 weeks.

or

1 tablet of Engystol t.i.d. 4-8 weeks, depending on the physician's assessment of how much immune support the patient requires

**Children:** Follow vaccination with 1 drop of Engystol per every year of the child's age, 3 x/week for 3 weeks

## TIP

Use a pipette to measure the dosage in drops. Once the oral vial is opened, drain all of its contents into a small pipette and store in a dry place or if no pipette is available, simply cover the vial with a plastic wrap and store in a dry place for a few hours.



# Protocol

## Herpes zoster (shingles)

As an immune modulator that works to curb the inflammatory response, Engystol is useful for the long-term treatment of viral infections, such as herpes zoster.

The following protocol has, so far, proven to reduce the pain associated with the acute inflammation of shingles.

**Hepar sulfuris-Injeel:** 1 vial daily for 5-10 days, then 3 x/week for 4 weeks

+

**Engystol:** 1 ampoule 3 x/week for 8 weeks.

Both products can be taken together and orally.

The above protocol can be repeated throughout a 6-8 month period with a minimum 10-day interval between repeats.



## Mononucleosis

ENGYSTOL in concert with LYMPHOMYOSOT/LYPHOSOT can be a useful treatment for mononucleosis as illustrated in the following protocol

### BASIC PROTOCOL

**Engystol:** 1 vial 10 days in a row, then 3 x/week for 8 weeks

+

**Lymphomyosot/Lyphosot:** 1 vial 4 x/week for 2 weeks, then 2 x/week for 3 weeks

+

**Echinacea Compositum:** 1 vial 2 x/week for 3 weeks.

### MAINTENANCE PROTOCOL (Optional - Following basic protocol)

**Engystol tablets:** 1 tablet t.i.d. for 3 months

+

**Lymphomyosot/Lyphosot tablets:** 1 tablet b.i.d. for 5 weeks

This protocol should be repeated twice throughout the year even after recovery. Intervals between protocols should be between 5-8 weeks.