

Multiple Sklerose (MS) und Neuroborreliose Multiple sclerosis and neuroborreliosis

Virusarten, viruses

Perron H, Perin JP, Rieger F, Alliel PM (2000), Firouzi R, Rolland A, Michel M, (2003), Christensen T. (2005), Levin LI et. al. (2005), Perron H, Bernard C, Bertrand JB et al. (2009), Cossu D, Masala S, Cocco E et al. (2012), Djelilovic-Vranic J, Alajbegovic A. (2012), Tselis A (2012), Olival GS, Lima BM, Sumita LM, Serafim V, Fink MC, Nali LH et al. (2013), Mameli G, Madeddu G, Mei A et al. (2013), Angelini DF, Serafini B, Piras E et al. (2013), Garcia-Montojo M, Dominguez-Mozo M, Arias-Leal A et al. (2013), Mancuso R, Saresella M, Hernis A et al. (2013), García-Montojo M, de la Hera B, Varadé J, et al. (2014), Sutherland S (2014), Mameli G, Cossu D, Cocco E et al. (2014), Lossius A, Johansen JN, Vartdal F et al. (2014), Mechelli R, Manzari C, Policano C (2015), Campbell A (2017)

→ Virus triggers <http://www.erlebnishaft.de/virus triggers.pdf>

→ Anderson SM, Klinken SP, Hankins WD. (1985) A murine recombinant retrovirus (MSRV) containing the src oncogene transforms erythroid precursor cells in vitro. Mol Cell Biol. 5(12), 3369-3375. <http://www.ncbi.nlm.nih.gov/pubmed/3939314>

→ MSRV http://ac.els-cdn.com/S0042682299997921/1-s2.0-S0042682299997921-main.pdf?_tid=1a58bdc4-4f9a-11e3-99d6-00000aacb361&acdnat=1384701083_7c037e9ebe7e39bd42b0ab26be8610a1

→ MSRV

[http://hal.inria.fr/docs/00/06/66/67/PDF/Rolland et al Journal of Immunology In Press.pdf](http://hal.inria.fr/docs/00/06/66/67/PDF/Rolland_et_al_Journal_of_Immunology_In_Press.pdf)

Bakterien, bacteria

Spirochaeten im extra Kästchen unten,
spirocheta see below, extra box.

Rostasy K, Reiber H, Pohl D et al. (2003), Cossu D, Masala S, Cocco E et al. (2012)

→ Mycobacteria http://www.kabilahsystems.de/atypical_mycobacteria.pdf

http://www.ncbi.nlm.nih.gov/pubmed?LinkName=pubmed_pubmed&from_uid=23439580

→ Chlamydien, Chlamydophila http://www.kabilahsystems.de/chlamydia_pneumoniae.pdf

Protozoen, protozoa

Kissler H. (2001)

Apicomplexa <http://www.kabilahsystems.de/toxoplasmen.pdf>

Mikrofilarien, Nematoden, Microfilaria, nematodes

Innes JR, Shoho C (1952, 1953), Fleming JO, Cook TD (2006), Correale J, Farez M (2007), Correale J, Farez M, Razzitte G (2008, 2009), Correale J, Farez M, Razzitte G (2008), Correale J, Farez M (2009), MacDonald A (2016)

→ Eosinophilie <http://www.xerlebnishaft.de/eosinophilie.pdf>

→ Mikrofilarien <http://www.xerlebnishaft.de/mikrofilarien.pdf>

Spirochaeten, spirochaeta

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Bullock WE (now Gye) (1913) MS agent in Rabbits Lancet 1185

Steiner G (1917) Spirochetes The Cause of MS. Med Klin

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Gye F (1921) MS Agent In Rabbits Brain 14, 213

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Ichelson R (1957) Cultivation of Spirochetes from Spinal Fluids of MS Cases with Negative Controls. Procl. Soc. Exp. Biol Med 70:411
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Marshall V (1988) Multiple sclerosis is a chronic central nervous system infection by a spirochetal agent. Med Hypotheses (1988 Feb) 25(2):89-92
Liegner (1990, 1992) Lyme encephalomyelitis and MS
Smielewska-Badora J (2000) Lyme borreliosis and Multiple sclerosis: Any Connection? A Seroepidemic study.
Fritzsche M (2004) Chronic Lyme borreliosis at the root of Multiple sclerosis - is a cure with antibiotics attainable?
... 2005 – 2017 see the listed literature below

Quelle: <http://owndoc.com/lyme/multiple-sclerosis-is-lyme-disease-anatomy-of-a-cover-up/>

Genetisches Risiko, genetic risc

[Sawcer S](#), [Hellenthal G](#), [Pirinen M](#) et al. (2011) Genetic risk and a primary role for cell-mediated immune mechanisms in multiple sclerosis. *Nature*. 2011 Aug 10; 476(7359): 214–219. doi: [10.1038/nature10251](https://doi.org/10.1038/nature10251) PMID: 21876028 EMSID: UKMS36028
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3182531/>

Risiken bei der Therapie mit Immunsuppressiva, Risks in therapy with immunosuppressants

Havla J, Warnke C, Derfuss T et al (2016) ÜBERSICHTSARBEIT. Interdisziplinäres Risikomanagement in der Therapie der multiplen Sklerose.
<http://www.aerzteblatt.de/pdf/113/51/m879.pdf?ts=15.12.2016+13%3A42%3A47>

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<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2021051/>

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« **We conclude that there was an epidemic of MS on the Faroes and that the disease was probably introduced by the British troops (or their baggage). If so, then MS on the Faroes is a transmissible disease, most likely infectious; but only about 1 in 500 of the exposed individuals were clinically affected.** »

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« The diagnosis of MS and NB are diffi cult because of remarkably similar clinical and neuroimaging features. Th e infectious etiology of MS remains probable and in patients diagnosed with possible MS it is reasonable to evaluate B. burgdorferi infection in order to ensure etiologic treatment. »

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Unsere Daten deuten darauf hin, dass das intrathekale Milieu eine **Keimzentrums-ähnliche** Reaktion enthält mit klonaler Expansion und umfangreicher Hypermutation in IgM-produzierenden B-Zellen“.

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[MacDonald A](#) (2016) London Lecture May 15 2016 <https://vimeo.com/166688480>
« Multiple Sclerosis is a Neural Larval Migrants Illness. ... Spirochetes Reside INSIDE of the Worms {Endosymbiont Borrelia} ... DNA transfer between Borrelia and the worm. The endosymbiont RELEASE From The Worm when the Worm dies.»

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https://en.wikipedia.org/wiki/Multiple_sclerosis_research

Immunstimulantien, immune restauration, immune stimulation

<http://www.kabilahsystems.de/immunsti.pdf>

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“Inosine: Inosine is a compound that has shown interesting preliminary results in phases I and II clinical trials.^{[31][32]} Two different mechanisms of action have been proposed. First, it produces **uric acid** after ingestion,^[33] which is a natural antioxidant;^[34] second, it has been shown to induce axonal rewiring in laboratory animals with stroke,^[35] and spinal cord injury.^[36] However it can cause health problems in a long-term treatment,^[37] mainly kidney stones.^[38] It seems that its mechanism of action is **peroxynitrite inactivation**^[39] Other reports point to an immune modulation^[40]”

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Behandle physikalisch-medizinisch und bei vitaler Indikation zusätzlich mit Antibiotika, dann aber gezielt (möglichst kausal), hart und so frühzeitig wie möglich. Treat physically, probiotic and in case of vital indication additionally with antibiotics, but then targeted (if possible causally), hard and as early as possible.

- ➔ **[Therapie – Empfehlungen bei chronischen Multiinfektionskrankheiten](#)**
[Treatment recommendations in chronic multi infectious diseases](#)
- ➔ **Therapievariante 2** http://www.kabilahsystems.de/therap_02_virus.pdf
- ➔ **Therapievariante 8** http://www.kabilahsystems.de/therap_08_protozoen_oder_hefen.pdf
- ➔ **Therapievariante 9** http://www.kabilahsystems.de/therap_09_bei_mikrofilariose.pdf

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