



WHAT ARE “DISEASES”?

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German New Medicine (GNM) is based on the findings of Dr. med. Ryke Geerd Hamer. Dr. Hamer received his medical degree in 1961 from the University of Tuebingen, Germany. He is specialized in internal medicine and practiced at different University clinics in Germany. Dr. Hamer also shared a medical practice with his wife, Sigrid. Together they raised four children.

The 18th of August 1978 was, in Dr. Hamer's own words, the darkest day of his life. On that day, Dr. Hamer received the shocking news that his oldest son Dirk had been accidentally shot. Dirk died four months later in his father's arms.

Shortly after Dirk's death, Dr. Hamer was diagnosed with testicular cancer. Since he had never been seriously ill, he immediately assumed that the development of his cancer could be directly related to the tragic loss of his son.

Dirk's death and his own experience with cancer set Dr. Hamer on an extraordinary scientific journey. At the time head internist of a German cancer clinic, Dr. Hamer began to investigate his patients' histories and soon learned that, like him, they all had suffered unexpected emotional distress prior to their cancer development. But he took his research even further. On the basis that all bodily processes are controlled from the brain, he analyzed his patients' brain scans and compared them with their medical records. This was an entirely new approach. Until then, no studies had examined the origin of disease in the brain and the role of the brain as the mediator between our emotions and a diseased organ.

What Dr. Hamer discovered was startling. He found that when we suffer unexpected emotional distress, like an unexpected separation, a loss of a loved one, or sudden worries or anger, the brain triggers a biological emergency program to respond to the exact conflict shock being experienced. He established that the very moment the conflict occurs, the shock impacts a specific area in the brain causing a lesion that is visible on a brain scan as a set of sharp concentric rings. With the impact, the shock is communicated to the corresponding organ. Whether the organ responds to the conflict with the development of a tumor (cancer), a heart condition, or tissue loss as we see in osteoporosis or stomach ulcers, is determined by the exact type of emotional distress.

Let's take for example colon cancer: The biological conflict linked to the intestine is, as Dr. Hamer calls it an “indigestible morsel conflict”. Animals experience these morsel conflicts in real terms, when, for example, a chunk of food is stuck in the intestinal canal. In response to this potentially life-threatening situation, the intestinal cells immediately start to multiply. The biological purpose of the cell augmentation is to produce more digestive juices so that the food morsel can be broken down and can pass through. We humans inherited this biological response program. For us, an “indigestible morsel” can translate into an insult, a difficult divorce, a fight over money or property, or a court case that we cannot “digest”. Dr. Hamer found that when we experience such an “indigestible morsel” conflict, the same process of cell proliferation is initiated, controlled from the part of the brain that controls the colon.

As long as a person is distressed about the “indigestible issue” the cells keep multiplying, forming what is called a colon tumor. Conventional medicine interprets these additional cells as “malignant”. Based on thousands of case studies, Dr. Hamer shows that these additional cells (the tumor), are, in reality, “disposable cells” that are only useful for the time being. The moment the “indigestible morsel” can be digested, the superfluous cells are no longer needed and are removed with the help of bacteria or fungi.

Dr. Hamer also discovered that every “disease” runs in two phases. During the first, conflict-active phase, we feel mentally and emotionally stressed. Typically we are totally preoccupied with what happened, we have cold extremities, little appetite, suffer sleep disturbances, and lose weight. If we resolve the conflict we enter the healing phase, during which the psyche, the brain, and the affected organ undergo the phase of recovery. Since conventional medicine fails to recognize the two-phase pattern of every disease, many symptoms of the repair phase such as inflammations, fever, painful swelling, pus, discharge, blood in the stool, in the urine or in the sputum (particularly when a cancerous growth is broken down), or infections, are labeled as diseases although they are, in fact, manifestations of a natural healing process.

The therapeutic aspects of GNM are manifold. The first step is to determine whether the person is still conflict-active or already healing. If still in the active phase, the focus is to identify the original conflict, develop a strategy to resolve the conflict, and prepare the patient for the healing symptoms. During the healing phase it is important to support the patient psychologically and, if necessary, medically. But above all, it is essential to understand the nature of the symptoms. Because understanding each symptom in its biological and biographical context allows us to free ourselves from the panic and fear that is often triggered with the onset of a disease.

Dr. Hamer’s research radically upsets the central doctrine of standard medicine, namely that diseases are a result of a malfunctioning organism. By providing clear scientific evidence that diseases such as cancer do not occur by chance but as a result of survival programs that have been successfully practiced for millions of years, Dr. Hamer shatters conventional medicine (including the medical industry) at its core. With GNM, questions like “Why me?” or “Why cancer?” are no longer a mystery.

Source: www.LearningGNM.com

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