

F O C U S

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F. Kramer: INFORMATIONS FOR PATIENTS WITH FOCI IN THE DENTAL
AND GUM AREAS.

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The surgical removal of all foci in the dental and gum areas must not be completed in one single work-process, because otherwise the defense systems of the organism become over-stressed. A process by stages is required. Usually, one quadrant (that is, either the right upper jaw or the left upper jaw, etc.) becomes sanitized during one treatment-stage.

For anatomic and functional reasons, one begins as a rule with the focus removal in the side-teeth in the upper gum. The daily after-treatment takes at least 4 days for upper-gum surgery and one week for the lower-gum. During this after-treatment period, physical aggravations and stress-situations would disturb the healing process. Surgical patients, therefore, must be able to free themselves of occupational duties.

After that, a twice-applied wound-control, one week apart, with individual adjustment of required healing herbs is indicated.

Between the single treatment-stages, the organism requires a

period of at least six weeks for reactivation, preferably longer. Therefore, the needed surgeries cannot be executed quickly, one after the other. During the sanitizing period, one can instal only provisional tooth replacements. The final tooth replacement should be installed only when the surgical sanitization is completed and the success of the sanitization has been confirmed by the control-test.

During the after-treatment phase, it is possible to care for the tooth-gap by an interim prothesis.

Six months after completion of the sanitization, a control test should be undertaken.

In the case that you go to other dental practices for treatment, be it for the removal of amalgam or for the preparation of firmly seated tooth-replacements, pay absolute attention so that your teeth do not get ground with high-speed turbines. Our research has established that the highest speed of the grinding-tool must not go beyond 20,000 turns, or the tooth might become damaged.

Attention please:

Foci in the dental and gum areas belong to those chronic illnesses which do not cause local pains, as a rule. Their effect is based on the permanent overstressing of the defense regulation in the organism, as it operates in the basal-system, which has been lucidly defined by Professor Alfred Pischinger, Vienna.

According to the type and location in the dental and gum areas, a focus can release diversified distant effects. Frequently observed distant effects are summarized in the schema of the final page. An elimination of a particular distant effect through dental

focus therapy succeeds only:

- a) when the surgical focal-therapy happens lege artis
- b) when an adequate after-treatment is executed, which does not additionally stress the body - that is, with the utmost possible avoidance of chemical means, using natural means
- c) when the basal system is still functionally competent, and
- d) when the distant, damaged organs and tissue-systems have not been ~~mutated~~ ^{mutilated} irreversibly.

Therefore, a focus therapy promises to become successful, the sooner the therapy begins. Frequently, one may count on the healing of manifold difficulties through focus therapy.

But if the prior damages have gone beyond a certain measure, the proposed therapeutic measures are still justified for mitigating or even stopping a progressive worsening.

In case that the examination has revealed a poor regulatory capacity, a pre-treatment with homeopathic remedies for medication should first be applied (Mesenchyme-Reactivations Cure, Intestinal Sanitization, etc.). As a general rule, this cure-attempt is implemented right at the home-location through a doctor of general medicine.