Live Blood Analysis: Science or Quackery?

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We receive enquiries from time to time about the scientific basis of live blood analysis. Many people are concerned by the many sites on the internet claiming that live blood analysis is pseudoscience and nothing more than a gimmick used by quacks to sell you something. It is criticised for not being scientifically tested like other medical tests and the conclusion is made that therefore it can not have any real value as an investigative tool.

The internet is a platform through which people can express their views and opinions freely. One can find numerous websites dedicated to exposing quackery and pseudoscience that apply these labels to homeopathy, herbalism, detoxification treatments, iridology and essentially anything that doesn't involve drugs or surgery. Many of these articles are written by people who have no medical training and who are completely ignorant about the modality they are condemning. I recently came across such a website where the author claimed that a live blood sample will have red cell aggregation in one area and appear normal in other areas, simply because of how the sample is prepared. He then proceeded to explain how a peripheral blood smear is prepared with two slides. Had the author taken the time to look into live blood analysis in more detail, he would have discovered that live blood specimens are not at all prepared like peripheral blood smears. In a live blood specimen a single drop of blood is placed on a small cover slip, which is then placed on the slide, allowing the blood to spread evenly. If red cell aggregation is observed in specimens prepared this way, there are large open areas (plasma) visible between the aggregated cells, in contrast to the naturally aggregated areas of peripheral blood smears where only large masses of red cells can be seen.

Most of the criticism of live blood analysis arises from the basic misconception that live blood analysis is a diagnostic tool. It is not in any way a tool used to make a medical diagnosis of any specific medical condition and therefore its findings can not be easily correlated with conventional medical diagnostic tests. The real strength of live blood analysis lies in its ability to assess the state of a person's biological terrain; to determine its level of toxicity, acidity, oxygenation, nutrition and ecological balance.

We are able to see the effects of free radical toxins very easily by looking at live blood. Red blood cells travel throughout the body and because they are anuclear (they have no nucleus), their ability to repair their cellular membranes after being damaged through oxidation is limited. They are therefore very susceptible to damage by free radicals and offer a very sensitive marker for toxicity / oxidation. Most normal specimens will have some damaged red cells, but a much higher number of damaged cells is clinically significant. Conventional blood smears ignore the finding of damaged red cells because the blood cells are damaged by the process used to prepare and stain the slide.

There is a real challenge in designing a study that will test the reliability and accuracy of live blood analysis. Which conventional tests can be used to confirm the findings in live

blood analysis? There is no medical test that can be used to accurately measure the level of free radical damage in the body. The same problem exists for most of the findings in live blood analysis. Intestinal dysbiosis from Candida albicans overgrowth is mostly diagnosed clinically, based on the client's symptoms and history. There is a laboratory test that can detect Candida antibodies, but the presence of antibodies may also just be a sign of a previous infection. Conventional medicine doesn't accept Candida overgrowth as a real condition in any event.

Another finding that is quite common in blood analysis, over-acidity of the terrain, is also largely discredited by conventional medicine. Aside from the life-threatening states of acidosis, the effect of latent tissue acidosis is not an accepted medical condition. There are also no conventional tests that will accurately determine the pH of the extracellular fluids. The pH of urine and saliva may be measured, but the acceptable ranges are so wide that there is no real value in these tests.

The difficulties in designing a suitable study and the lack of sufficient funding have resulted in there not being much scientific research into the accuracy of live blood analysis. One study, however found a strong correlation between live blood analysis and conventional tests, on points such as iron deficiency, vitamin B12 deficiency, liver disease, neutrophilia and high cholesterol (Masamitsu Oshima, Nobuyoshi Tsuruoka, et al. "The Correlation of Blood Chemistry Laboratory Testing and Darkfield Microscopic Examination of Wet Film Blood." Applied Darkfield Microscopy for Clinical Assessment of Human Physiology. The Haematologic Physiologic Research Institute. 1989. Chap 15.)

What we should perhaps do is question the value of analysing the blood in the medically accepted way. Is it is not perhaps more logical to look at the blood in its natural, unadulterated form. Is it not obvious that there will be great value in observing the blood cells behaving just like they do within the body? Will we not be able to obtain a great deal of information about a person's state of health by observing their blood in this natural state? In conventionally accepted blood tests, the blood is drawn into a tube, often mixed with an anticoagulant and only analysed hours later after the sample has been preserved and killed through staining. Although a number of medical tests can be performed on blood in this way, a large amount of potential information is lost by doing this.

I have been doing live blood analysis in my practice for almost 10 years now. I have personally seen how accurate this test is, not only in being able to correlate specific findings in the blood to specific lifestyle factors in every case, but also observing the improvement in the blood once those factors have been corrected. I believe it is testament to the reliability and credibility of live blood analysis that every abnormal sign observed in the blood, which is connected to a specific internal condition or imbalance, improves once the appropriate, indicated natural treatment is given. I have also found that people whose condition improves after following the recommendations based on their blood analysis results do not care whether the test is medically accepted. The majority of these cases have already tried the conventional, scientifically proven route, which failed to improve their condition.