



A Case of Rheumatoid Arthritis that Healed Completely

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Abstract

A traditional and irrelevant concept that all antibody molecules rigidly adhere to their receptors on cell-surfaces still seems to be taken for granted to be relevant. The irrelevancy of the concept is evident from view-point of equilibrium state present among antibody molecules in the vicinity of their receptors. Applying the latter and relevant concept to clinical medicine, those diseases that have been regarded as incurable, namely, autoimmune and allergic diseases can join the group of completely curable diseases. Explanation in detail and a case are presented below.

Introduction

It has long been taken for granted that every antibody molecule rigidly adheres to its receptor on cell surfaces. Needless to say, to take something for granted is not very scientific. Indeed, another concept that an equilibrium state exists among antibody molecules in the vicinity of their receptors has been established since a half century ago [1-4]. These two concepts obviously disagree with each other. Needless to say, again, the latter concept is more scientific and relevant than the former. It follows that every receptor of antibodies keeps changing antibodies. It still follows that the ratio of certain kind of antibody occupying receptors equals the ratio of that kind of antibody existing in the vicinity of the receptors. Accordingly, antibodies' substitution should take place immediately after a new type of antibody appears. Hence, pathogenic antibodies could be detached from their receptors by producing sufficient amounts of non-pathogenic antibodies in the patients' bodies. In order to let the patients produce non-pathogenic antibodies, the patients need to receive intradermal injections with non-pathogenic antigens. In conclusion, sufficient time of repetition of intradermal injections with non-pathogenic antigens should bring about complete cures of all of immunological diseases, i.e. diseases which are caused by pathogenic antibodies, i.e. autoimmune and allergic diseases.

Case Presentation

The case that I wish to demonstrate is that of a 69-year-old woman (K.Y.), who had had rheumatoid arthritis since May, 2006. She visited my clinic on March 27, 2010. Her main claim was pain in the left knee upon kneeling. Her other claims were slight pains at her right musculus triceps brachialis at midnight and in early morning and consistent slight pains at her left musculus quadriceps femoralis and the first joint of her left thumb. She started receiving intradermal injections with 0.1 ml of 100 fold diluted (saline) Neurotropin (a product of Nippon Pharmaceutical Company consisting of extract of rabbit skin inflamed by inoculation of Vaccinia viruses) at intervals of 2~4 days. Injection doses were increased by 40% after every 30 repetitions of a same dose. However, after 240th injection, which was that of 0.56 ml of 10 fold dilution, she claimed pains at her left elbow upon expanding, at her right shoulder and musculus gastrocnemius, and at left side of her left thigh. I decreased the injection dose to 0.28 ml of the same solution. I resumed the starting injection condition, namely, 0.1 ml of 100 fold dilution, at the next injection. Next time, she again claimed of various muscle pains after injection. I again decreased the injection dose to 0.1 ml of 10,000 fold dilution. Next time, she still claimed of pain at her left brachial muscle in the morning of the day after the last injection. So, I again decreased the dose to 0.1 ml of 1,000,000 fold dilution. Then, she had no complaint immediately after injection, but on the next day and on the day after the next day, she had pain at her right leg. I reduced the dose to 0.1 ml of 10 to the 8-dilution. She kept claiming that she had dull pain during the period of 12~72 hours after the last injection. I again reduced the dose to 0.1 ml of 10 to the 12-dilution. She still kept claiming that she had worse pain during the period of 12~80 hours after the last injection than before it. I reduced the condition to 0.1 ml of 10 to the 19-dilution. She finally stopped claiming. The injection was repeated 45 times and she became completely free of symptoms. The total number of injection was 404 and the total duration of the treatment was approximately 47 months. The injection sites were the inner sides of her upper arms.

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Discussion

There are hundreds of other cases of complete recoveries from autoimmune and/or allergic diseases in the author's clinic. It is quite evident that autoimmune diseases could be cured completely if the patients are intradermally injected with non-pathogenic antigen preparations repeatedly. It is rather puzzling why few contemporary immunologists recognize the irrelevancy of the traditional concept, i.e. all antibodies rigidly adhere to their receptors. In addition, very few contemporary immunologists must be ignorant of the concept of equilibrium. Therefore, it is obvious that they conceive a great contradiction. Hopefully, this short communication will help them remind themselves of the great contradiction.

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