

SUNDAY SCHOOL MONASTIC MEDICINE 21st CENTURY

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MONASTIC MEDICINE AS A 21st CENTURY SCHOOL & MODALITY

There is a growing recognition of the value of integrating traditional healing modalities, including those derived from monastic traditions, both East and West, into mainstream medical practice. This is particularly evident in the fields of holistic and complementary medicine. Practices such as herbal medicine, therapeutic bath, fasting, dietary reform, meditation, sun gazing, and prayer which have roots in ancient monastic traditions, and have gained acceptance as effective adjuncts for various conditions.



Members of the Sacred Medical Order, in particular those that have embarked on the pilot Monastic Medical training program, have settled on the term “monastic medicine” as a descriptor for our particular school or modality, given its clear historical and tangible roots:

MONASTIC MEDICINE (CHURCH OF HOPE)

Definition:

Historical: Monastic Medicine: charitable medical services rendered to the poor using natural agents such as food, herbs, air, and water; and supernatural agents including spiritual counseling, prayer, divination, worship, fasting, and exorcism. As a medico-religious art it encompassed health care through a system of beliefs that are based on treatment of God given functions through solace, hygiene, fasting, and the promotion of the body’s own inherent healing powers.

Contemporary/Modern: wellness services in ecclesiastical, private practice using natural, God-given agents such as food, herbs, minerals, air, hygiene, and water; and supernatural agents including spiritual counseling, prayer, divination, worship, fasting, and exorcism. As a medico-religious art, today it fosters wellness through body-mind-spirit principles as understood as today’s concept of homeostasis, encompassing a system of beliefs that are based on treatment of God given functions through achieving balance of mind-body-spirit, the removal of internal congestion and the promotion of the body’s own inherent healing powers.

(Author’s modern definition, 2008)

AI in Medicine & Medical Administration

The advent of AI in medicine is expected to overwhelm medical administration and have a drastic economic impact, and admittedly reduce patient choices and but advocated to improve quality of care.

There are worries that AI recommendations will limit treatment options covered by insurance providers, potentially reducing doctor and patient choices. Far from eliminating alternative and complementary medicines, AI is said to be actively integrated into these fields by developing prescription decision support systems for traditional medicines and “explore the efficacy of herbal extracts”. However, one only needs to read mainstream and legacy media reports and wiki pages about the uses of herbs and supplements while continually branding of alternative modalities as “pseudoscientific.” Since AI resources these sites, what databases AI will draw upon for prescriptive choices and alternatives is clearly evident. Proponents of AI claim a combination of AI and complementary/alternative medicine (CAM) is expected to address weaknesses in existing traditional medicines, such as helping doctors prescribe the most effective herbal medicines. AI it is said can “analyze” a patient's comprehensive health profile to recommend treatments that combine conventional medical approaches and drugs with complementary therapies, tailored to the patient's preferences and needs. From this, a seasoned alternative medical practitioner can only wonder, trying to understand how a machine generated code is going to “analyze a patient’s comprehensive health profile,” and derive a prescriptive and therapeutic course of treatment, with drugs and herbs in combinations, ignoring the patient’s diet and lifestyle, and devoid of human intuition, touch and care?

The fact remains, the covid (so-called) epidemic has left a large percentage of the public skeptical, if not avoiding or abstaining, from formal medical care. Increasingly, the complementary and alternative medicine (CAM) market, already thriving, is expected to experience even more significant growth in the coming years, due to not only the COVID-19 pandemic, but the oppressive challenging and costly medical-insurance industry. The global CAM market is projected to reach \$437.9 billion by 2031, growing at a CAGR of 15.6% from 2022 to 2031. In the United States, the market is estimated to hit \$229.12 billion by 2033. [<https://www.alliedmarketresearch.com/complementary-and-alternative-medicine-market-A11182>]

There's a growing awareness and acceptance of CAM therapies, with healthcare providers integrating them into their practices. The rise in chronic diseases and an aging population are driving demand for alternative treatments. Many people are turning to CAM due to side effects of standard medicines and their notorious lack of effectiveness; and their inability to induce remission for chronic conditions with conventional care. While the COVID-19 pandemic disrupted CAM providers' practices and finances, it also highlighted the efficacious role of CAM in supporting overall health and well-being during times of crisis which today we are still in today. The pandemic has led to a dramatic increase iatrogenic illnesses while surging interest in natural remedies, including immune-boosting and stress-reducing therapies offered by CAM.

In conclusion, the future of modern monastic medicine appears more than promising.

FROM THE BEGINNING

Some of the earliest Christians, Gnostics, Essenes, and Therapeutae were involved in herbalism and healing practices:

- **Essenes and Therapeutae:** These groups were knowledgeable about medicinal plants and treasured ancient texts on their uses. They practiced communal living, veganism, ritual bathing, sun gazing, and cared for the sick using their medical knowledge.
- **Early Christians:** Figures like Luke, a physician, likely used herbs and natural remedies in their healing practices. The Church built gender-separated bathhouses near monasteries and pilgrimage sites to promote cleanliness. Pope Gregory the Great also advocated bathing as a bodily necessity. Christians always placed strong faith on hygiene, the use of water, and bathing. Christian monastic communities throughout history have emphasized cleanliness and hygiene as part of their spiritual and health practices. One noteworthy aspect of the work is his anticipation of [microbiology](#) and [epidemiology](#). Varro warned his readers to avoid swamps and marshland, since in such areas "...there are bred certain minute creatures which cannot be seen by the eyes, but which float in the air and enter the body through the mouth and nose and cause serious diseases."
- **Christian Gnostics:** Healing was part of their spiritual practices, with some traditions incorporating plant-based diets or psychoactive plants for expanded consciousness

Monastic medicine, practiced during the 6th through 15th centuries in Europe and the Levant, being based on Hippocratic and Galenic theories combined with Christian theology. This form of medicine contributed significantly to the preservation of ancient medical texts from authors like Hippocrates, Galen, Ibn Buṭlān, Al-Rāzī, and Dioscorides. Monasteries became the only reliable repositories of medical knowledge during the Dark Ages, as the Church was often the only place where study could occur. While naturopathy draws from various healing traditions, including Indian (Ayurvedic), Chinese (Taoist), Greek (Hippocratic), Arabian, and Egyptian practices, monastic medicine played a crucial role in preserving and developing natural healing methods. During the Middle Ages in Europe, natural healing was conducted by monks and nuns, herbalists and wise-women; and these practices were later incorporated into the naturopathic philosophy in the 19th century.

Nature Cure of Christendom, beginning with John Wesley's "Primitive Physick", first published in 1747, and what became branded and defined as Naturopathy by Benedict Lust in America (1902), clearly was rooted in monastic medicine. Wesley practised a vegetarian diet. Wesley wrote on physics, electrotherapy, and medicine, such as in *The Desideratum*, subtitled *Electricity made Plain and Useful by a Lover of Mankind and of Common Sense* (1759). His famous and widely published work in several languages - *Primitive Physic, Or, An Easy and Natural Method of Curing Most Diseases* - became a handbook of nature cure.

Vincent Priessnitz (1799-1851): Considered the father of modern hydrotherapy, Priessnitz popularized water cure treatments in Gräfenberg, Austria. His methods gained widespread recognition and attracted followers from across Europe. **Johann Schroth (1798-1856)**, a contemporary of Priessnitz, contributed to the development of natural healing methods. **Vincent Priessnitz (1799-1851)**, bow

considered the father of modern hydrotherapy, Priessnitz popularized water cure treatments in Gräfenberg, Austria. His methods gained widespread recognition and attracted followers from across Europe. **Father Sebastian Kneipp (1821-1897)**, a Dominican priest who further developed hydrotherapy techniques went on to tutor Benedit Lust. Kneipp's approach combined water treatments with herbal remedies, exercise, and nutrition. A film in German was eventually produced about the wide contributions he made in the field of health.

In its day, monastic medicine was neither complementary nor alternative. In fact, monastic medicine through the middle ages was the only formal schooling in medicine generally available. Monasteries served as centers of medical knowledge and practice for more than one thousand years, between 500 and 1600 CE. Monks had access to historical medical documents and provided care to various groups, including monks, pilgrims, paupers, and nobility. Monastic libraries built up medical collections that were used to train monk-practitioners and nurses which schooled them on theological and philosophical writers. Other practitioners existed alongside monastic medicine, especially surgeons and herbalists. Local wise-women and midwives skilled in herbal remedies, priests, and barber surgeons who performed various medical procedures were also active in medieval healthcare. By the 12th century, medical knowledge began to spread beyond monastery walls. Cathedral schools and emerging universities started to offer medical education, and upon decades of closures of the monasteries, monk physicians went to the communities for private practice.

The medical school in Malta, founded by the monastic Order, Knights of St. John, was an important institution with a rich history in the Hospitaller services that would later inspire Henry Dunant to eventually form the Order of the Red Cross. The medical and naval schools were established after the Order was granted the island of Malta in 1530 by the King of Spain, and the Knights immediately began building the Sacred Infirmary Hospital in Valetta, still standing today as a monument. The school gained prominence, producing talented surgeons and attracting students from nearby regions. However, due to their observance of the need for cadaver anatomy, the schooling was not strictly monastic in nature. While the Order of St. John had religious rules, their medical school transformed into more of a professional training institution than a traditional monastic school of the times. The medical school in Malta continued to operate well into the 18th century. Monastic schools in general had begun to decline much earlier. It's worth noting that the transition from monastic schools to universities was a gradual process that occurred across Europe over several centuries. The University of Bologna which included medical studies, was founded in 1088.



The Order of St. John, established around 1070 in Jerusalem, was one of the earliest organized efforts to provide care for the sick and injured. Their hospice, which later developed into a large hospital, was dedicated to caring for pilgrims of all faiths, demonstrating an early commitment to inclusive healthcare as part of Christian faith. In Rhodes, the Order's hospital had separate wards and beds for infectious diseases and maternity care, showing an early understanding of the need for hygiene and specialized medical attention. Patients were served food and water on silverware as a form of hygiene. On Malta, the Order established a renowned



school of anatomy and surgery, contributing to the advancement of medical knowledge. The Order's hospital in Malta boasted the longest ward in 18th century Europe, showcasing their commitment to large-scale patient care as they had done in Jerusalem since the 11th century. The Hospitaller activities of the Order of St. John indeed played a significant role in the development of nursing and surgery, and were pivotal for the formal institution of nursing as we know it today.

Distinctive Educational System

Monastic medical education differed significantly from traditional schooling as it aimed for lifelong learning and formation of tangible skills, both in care for the sick, preparation of medicines, and growing herbs necessary for pharmacy. Scholar monks were expected to balance deep study with meditation practice, physical fitness, and service to others. During periods of cultural decline in Europe, monastic schools became centers of learning and manuscript preservation. Monastic scholars were instrumental in preserving Greco-Roman classics, as well as Arabic, Jewish and Christian works.

Monastic learning demonstrated remarkable openness and showed features of inclusiveness and fluidity. The curriculum extended beyond religious texts to include a diverse range of subjects including metaphysics. This unique approach to scholarship and education made monastic academics a distinctive and influential force in the preservation and advancement of knowledge throughout history.

However, as a re-emerged formal medical school, monastic medicine remains an adjunctive subject. The Sacred Medical Order has embarked on this quest and over the last two years has arrived at a unique curriculum herein outlined.

The Monastic Method, The ‘Big’ Questions in Scientism

Monastic education has historically been a distinctive approach to learning, characterized by its integration of spiritual practice, communal living, physical and intellectual cultivation. This method has evolved across various traditions, including Christian and Tibetan monasticism, each with unique practices but sharing common underlying principles. Monastic education is not limited to youth; it promotes lifelong learning as medicine should. Monks engage in continuous study and reflection throughout their lives, integrating new knowledge with their medical and spiritual practices. This contrasts with conventional educational systems that often focus on formal schooling during youth.

Scientism today is being defined as an exaggerated belief in the efficacy of the scientific method, while ignoring a long traditions of study at the expense of other disciplines such as natural science, philosophy, ethics, and the humanities. This perspective has led to the perception of “science” as a “cult” due to its perceived dogmatism and the dismissal of other forms of knowledge, bolstered the failing legacy media and corporate supported academic publications. In today’s society, there is a growing tension between science and other domains like philosophy, independent thinkers and innovators, alternative energy and healing advocates, and of course religion. Many scientists have adopted a dismissive stance towards philosophy and innovation, claiming it is irrelevant in light of their scientific advancements. This has led many to argue that such attitudes reflect a form of scientism—an unwarranted elevation of hard, academic science above other forms of knowledge, methodologies, and

lifestyles. This has been especially evident in medicine during the 20th century, where alternative healers and medical scientists (who thought “outside the box”) were persecuted, imprisoned, and some, it has been said, even murdered for their beliefs and practices.

There are ‘big’ questions and ‘small’ questions in science. Most scientists in their daily life confine themselves to asking and tasking small questions which are supported financially by donor corporation and government grants. These scientists since their school days have already bought into the dogmas of scientism. These perspectives has several key maxims and dogmas that define its framework.

Key Maxims of Scientism

1. **Empiricism as the Sole Source of Knowledge:** Scientism posits that all meaningful knowledge must be derived from empirical evidence, primarily through observation and experimentation. This view often leads to the rejection of metaphysical or spiritual insights as valid forms of knowledge.
2. **Reductionism:** It emphasizes breaking down complex phenomena into their simplest components, usually chemical. This reductionist approach seeks to explain all aspects of reality through physics, chemistry and biology, often neglecting the holistic aspects of human experience and all attendant exceptions, unexplained and parapsychical phenomena.
3. **Objective Reality:** Scientism assumes an objective reality that can be understood through scientific inquiry which is limited to the electromagnetic spectrums: sight, sound, touch, taste, and smell. It maintains that the universe operates according to fixed laws that can only be discovered and described through scientific methods.
4. **Progressive Knowledge:** There is a belief in the progressive nature of scientific knowledge, where advances in science will eventually lead to a complete understanding of all phenomena, including human behavior and consciousness.

Dogmas of Scientism

1. **Nature as Mechanistic:** This dogma asserts that all natural phenomena can be explained mechanically, akin to machines operating according to predetermined laws without any inherent purpose or design.
2. **Materialism:** Scientism often embraces a materialistic worldview, suggesting that only physical matter exists and that consciousness and thoughts are merely byproducts of physical and chemical processes in the brain.
3. **The Finality of Scientific Explanation:** It holds that once something is scientifically explained, further inquiry is unnecessary or irrelevant. This belief leads to dogmatism, where established scientific theories, which may be false, are accepted without question for decades.
4. **Neglect of Non-Empirical Knowledge:** Scientism dismisses intuition, ethics, phenomenology (lived experiences), and other forms of knowledge as inferior or invalid because they cannot be empirically tested or quantified.

5. **The Law of Three Stages:** Proposed by Auguste Comte, this principle suggests that human knowledge evolves through three stages: theological, metaphysical, and finally scientific. In this view, the scientific stage represents the pinnacle of human understanding.

These maxims and dogmas of scientism reflect a dying worldview that prioritizes scientific inquiry above all else while often disregarding other valuable forms of understanding. This perspective has significant implications for how knowledge is constructed and valued in society, leading to debates about the limits and scope of science in addressing complex human experiences, behavior, societal rules, and ethical considerations.

MONASTIC CRITIQUES OF NEO-DARWINIAN EVOLUTION

Neo-Darwinian evolution, also known as the Modern Synthesis, is driven by natural selection acting on genetic mutations. This theory integrates Charles Darwin's concept of natural selection with modern genetics, particularly focusing on how genetic variations within populations lead to evolutionary change.

These conundrums suggest that while random mutation and natural selection by survival of the fittest play important roles in evolution, additional mechanisms may be necessary to fully explain the complexity and diversity of life. Random mutations, however, cannot easily generate the genetic information required for evolution of life's complex structures. The supposed time required for specific mutations to occur and spread through a population evolving exceeds realistic evolutionary timescales. For example, calculations suggest that coordinated mutations in human evolution would take approximately 10^{15} years, far longer than the age of the universe.

Lynn Margulis, a prominent biologist and evolutionary theorist, is best known for her critique of neo-Darwinism, which she argued does not fully explain the complexities of evolution. Margulis pointed out that the fossil record does not support the gradual transition from one species to another as predicted by neo-Darwinian theory. Instead, she noted instances of sudden appearances of new species, suggesting that evolution may occur in bursts rather than through slow, gradual changes. Margulis proposed an alternative theory called **symbiogenesis**, which posits that significant evolutionary changes occur through the merging of different organisms rather than through random mutations alone. She argued that symbiotic relationships—such as those between bacteria and other life forms—are crucial for understanding how new species evolve.

Margulis's big question of neo-Darwinism reflect a broader call for a more nuanced understanding of evolution that incorporates symbiosis and cooperation alongside traditional mechanisms like mutation and natural selection. Her work has sparked ongoing discussions about the nature of evolutionary processes and has encouraged scientists to consider alternative explanations for biodiversity beyond the established neo-Darwinian framework and after decades of arguments, are now being accepted in the world's biological academies.

Further, it appears that the entire living world's life forms are at a constant struggle to maintain their homeostatic capacities that are critically controlled by either a state of eubiosis, a **balanced state of**

microbial communities within the body, particularly in the gut microbiota, but also including blood elements; and Dysbiosis, an **imbalance in the microbial communities** within the body, particularly in the gut and bodily fluids, where beneficial microorganisms are reduced and/or mutated and harmful ones proliferate. This condition leads to a decrease in microbial diversity, as state of infection called dysbiosis, which is crucial for generating disease, and if silent, accelerating aging. Dysbiosis can occur in various microbiomes, including those of the gut, blood, skin, and oral cavity (teeth). Yet, doctors today pay scant attention or know little to next to nothing about symbiotic biology. This field easily explains why now we are learning that anti-parasitical drugs for example, have higher remission rates for cancer than does traditional chemotherapy.

The Basis of Life Processes: Metabolism

Metabolism is fundamentally based on biochemistry in medicine, as it encompasses the vast array of chemical reactions that occur within living organisms to sustain life. These biochemical processes can be categorized into two main types: **catabolism** and **anabolism**. However, metabolism is not solely a series of chemical reactions; it is also tightly regulated by various mechanisms including exposure to sunlight, lunar cycles, and geophysical electromagnetic fields, all inconvenient influences for doctors to understand such things as women's menstrual cycles and metabolic breakdown in diabetes.

Metabolism is indeed at the core of life processes. It encompasses all the chemical reactions that occur within living organisms to maintain life, but also electromagnetic and even psychic influences. These reactions can be broadly categorized into two types:

1. Anabolism: Building up complex molecules from simpler ones
2. Catabolism: Breaking down complex molecules into simpler ones.

Metabolism is more than a complex set of chemical chain reactions that occur within living organisms to maintain life. These reactions are primarily catalyzed by enzymes primarily from the breakdown of nutrients (carbohydrates, fats, and proteins) through controlled oxidation processes. Enzymes are catalysts that facilitate metabolic reactions by lowering the quantum activation energy required for chemical bond changes for these cyclical reactions to occur.

Cellular respiration is the process which occurs in the cytoplasmic mitochondria, and is closer to controlled oxidation rather than combustion which is spontaneous and relatively unregulated. Respiration involves the stepwise breakdown of glucose and other nutrients by oxidation to produce ATP through processes like glycolysis, the citric acid cycle, and the electron transport chain. Unlike combustion, metabolism is highly regulated and controlled by various factors, including photon signaling from the nucleus, hormones, enzymes, and internal cellular signaling pathways.

In summary, metabolism is a complex, enzyme-catalyzed process that derives energy from the controlled breakdown of nutrients, rather than being driven by combustion to support enzymes. However, electromagnetic fields can easily influence quantum chemical reactions, yet are never mentioned in medical school textbooks.

Electron Bond Interchanges

The driving force behind metabolism is the constant exchange of electrons in chemical bonds. This occurs through various processes:

1. Redox reactions: Involve the transfer of electrons between molecules
2. ATP synthesis and hydrolysis: The energy currency of cells
3. Enzyme-catalyzed reactions: Facilitate specific chemical transformations

Approximately 1 billion chemical reactions occur per second in a single human eukaryotic cell. Each of these reactions typically involves the breaking and forming of chemical bonds. Therefore, we can

estimate that around 1 billion chemical bonds are exchanged per second per human cell. This incredibly high number of reactions is necessary for various cellular processes, including:

1. Metabolism and energy production
2. Protein synthesis and folding
3. DNA replication and transcription
4. Cellular respiration

For example, in cellular respiration alone, a single cell uses about 10 million ATP molecules per second and recycles all of its ATP molecules about every 20-30 seconds. In the average person, the ATP molecular weight turnover rate from ADP to ATP equals about one entire body weight in a 24 hour period. This process involves the constant breaking and forming of chemical bonds in ATP, ADP, and AMP molecules. It's important to note that these reactions occur at different rates and involve various types of chemical bonds, including:

- Covalent bonds (single and double bonds)
- Ionic bonds
- Hydrogen bonds

These bonds play crucial roles in maintaining cellular structures and facilitating biochemical processes essential for life.

Quantum electron bond transitions play a crucial role in uncoupling biochemical bonds in metabolism, particularly in the context of mitochondrial uncoupling. This process involves intricate quantum-level interactions that affect the energy states of molecules and chemical bonds.

Vibrational Transitions

At the quantum electron shell level, uncoupling a biochemical bond involves vibrational transitions:

1. **Quantized Energy Levels:** Molecules have discrete vibrational energy levels, and transitions between these levels correspond to specific energy changes.
2. **Energy Absorption:** To uncouple a bond, the molecule must absorb energy quanta equivalent to the difference between its current vibrational state and the state required for bond dissociation to make metabolism to proceed forward.
3. **Infrared Radiation:** These transitions typically involve the absorption of both light (photons) and infrared radiation (phonons), which provides the energy needed for the vibrational transition to occur and allow life to go on.

Albert Szent-Györgyi, who discovered chemical properties vitamin C, proposed that life exists between two energy levels of the electron, emphasizing the crucial role of electronic processes in biological systems. He argued that the essence of life lies in the movement of electrons from higher to lower energy levels, releasing energy that drives vital processes[1][5]. This process defies the



second law of thermodynamics as rather than energy descending to lower levels and ultimately dispersion (chaos), life remains organized with intelligent design.

Szent-Györgyi postulated that proteins act as semiconductors, containing delocalized electronic orbitals that allow electrons to move easily, carrying electricity and energy[3]. This idea challenged the conventional understanding of biochemistry at the time, suggesting that to truly comprehend life phenomena, we must examine the submolecular level where quantum mechanics applies[3]. I propose that life is driven by “soft electrons” (Cater) in the subquantum states, invisible, scarcely measureable, yet palpable and photographable (Kirlian and infrared photography).

According to Szent-Györgyi, the transmitted electron moves from a high energy level to a low energy level, releasing energy corresponding to the difference between these levels (the drums of light), following the second law of thermodynamics. This energy release is what he believed drives life processes[1]. He emphasized that taking out electrons irreversibly results in death, highlighting the fundamental importance of electron behavior in living systems[5].

Szent-Györgyi's theory proposed that living organisms operate in a state of "syntropy" or "negative entropy," counteracting the universal tendency towards entropy and increased disorder[2]. This concept suggests that life processes work against the second law of thermodynamics, creating order and complexity rather than succumbing to disorder[2] and dissolution as it does, for example, in inorganic chemistry.

While initially met with skepticism, Szent-Györgyi's ideas about the electronic basis of life have influenced subsequent research in biochemistry and biophysics. His work laid the foundation for exploring the quantum mechanical aspects of biological processes and the role of electron transfer in cellular functions[3][5].

Citations:

[1] <https://electronicbiology.org/legacy-of-albert-szent-gyorgyi/>

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[4] <https://physics.stackexchange.com/questions/693090/how-an-electron-can-have-different-energy-levels-if-it-is-once-declared-that-the>

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TENETS OF MONASTIC BIOLOGICAL CHRISTIAN SCIENCE

What We Believe

Christian Monastic Biological Science has its main tenets that summarize its core beliefs and teachings:

1. The Bible is regarded as the inspired Word of God and serves as the sufficient guide to eternal Life.
2. Acknowledgment and adoration of one supreme and infinite God, along with His Son (Christ), the Holy Ghost (divine Comforter), and man created in God's image and likeness.
3. We recognize Jesus as the Way-shower, his role as a spiritual guide and exemplar for humanity, demonstrating the path to God and living a life aligned with divine principles.
4. Recognition of God's forgiveness through the observations of the health laws as found in the Bible and the spiritual understanding that we maintain hygiene and cast out defilement as sin, and we are punished as long as these practices persist.
5. The biblical understanding of hygiene encompasses both physical cleanliness and spiritual purity. In the Old Testament, particularly in Leviticus, there are detailed instructions for maintaining cleanliness that serve both health and religious purposes. These include practices such as bathing, washing clothes, and proper waste disposal. Furthermore, the New Testament presents the concept of washing as a metaphor for spiritual cleansing, extending beyond mere physical hygiene but also concomitant spiritual purity, and the concept of the body as our temple of the Holy Spirit. This holistic approach goes beyond the notion of removing defilement and includes active practices to maintain both physical health, hygiene, and spiritual well-being.
6. In the simple, direct words of Genesis, the cause of all cosmic events is ascribed to the all-powerful godly command: "He speaks, and so it comes to pass; He commands, and so it is," what we call the Breath of God. In the primeval myths, the creation of the world is traced back to the magic effect of the powerful letters of The Holy Name. "In the Beginning, God created the Heavens and the Earth."
7. In ancient Greek thought, *pneuma* (πνεῦμα) is a term that carries rich meaning, often translated as "breath," "spirit," or "wind". The term "pneuma" appears 24 times in the Gospel of John alone. It is a Greek word that corresponds to the Hebrew "ruah," and both are used to refer to concepts of spirit, wind, aether, and breath in Christian scripture.
8. *Pneuma* is closely associated with the divine and the creation of life providing the energy to spin the atom; and in the biologic world appears as Mych. the primary nucleus that forms within the first cell, the process of the manifestation of mych from the spirit world evolves into the physical formation of protits, tiniest colloids of life proteins, sized between 1 and 10 nm, of plant origin, the vital basis of all cellular life on planet Earth.
9. We believe the breath of God, through *luminiferous* aether, once hovered over the lifeless void, animating the dark waters and catalyzing life where there was none. This concept aligns with many creation narratives where a divine breath is instrumental in bringing the world into existence. This divine breath in our religious and philosophical contexts, is *pneuma* and

understood as the life-giving force that animates and sustains living beings and is linked to the Holy Spirit, the third person of the Trinity. In the Hebrew Bible, it is related to the breath of life (nēshamah) that God breathes into Adam, bringing him to life.

10. Marcus Terentius Varro (116–27 BCE), Günther Enderlein, Gaston Naessens, Wilhelm Reich, Raymond Royal Rife, and Antoine Béchamp all wrote about theories about microscopic life forms in the body, which have been given various names:
 - minute creatures: Marcus Varro wrote about which “cannot be seen by the eyes, but which float in the air and enter the body through the mouth and nose and cause serious diseases”.
 - "molecular granulations" in biological fluids were actually the elementary units of life. Bechamp named them *microzymas*—that is, "tiny enzymes"—and credited them with producing both enzymes which ferment and cells while "evolving" amid favorable conditions into multicellular organisms. Béchamp discovered they exist everywhere, stones, fossils, and organic matter; are indestructible and omnipotent in nature; also denied that bacteria could invade a healthy animal and cause disease, claiming instead that unfavorable host and environmental conditions first destabilize the host's native microzymas and decompose host tissue and thereby produce pathogenic bacteria and also make one prone to infection.
 - Protits: Tiny colloids of proteins, sized between 1 and 10 nm, considered the smallest particles in Enderlein's theory of life origin which appears and disappears “like lightning.” Enderlein also claimed like Bechamp that unfavorable host and environmental conditions first destabilize the host's native microzymas and decompose host tissue and thereby produce pathogenic bacteria and also make one prone to infection.
 - "nanobacteria": Raymond Royal Rife reported observing tiny, motile entities he named "BX" or "cancer virus" after culturing cancer tissues using specific methods. Rife wrote about ultramicroscopic organisms, he claimed to have observed and studied extremely small microorganisms that were invisible under conventional microscopes of his time.
 - Wilhelm Reich described bions as minute vesicles that exhibited properties such as pulsation, locomotion, and internal vibration. He observed these bions using high-powered microscopes with over 3000x magnification. Reich's research on bions led him to explore their potential role in the origin of life and their relationship to cancer cells.
11. We claim and believe that Life is in the Blood. That the endobiont of Bechamp, Enderlein, and Reich resides in the blood as vital to the host, and unfavorable host and environmental conditions first destabilize the host's native microzymas (life giving enzymes) and decompose host tissue and thereby produce pathogenic bacteria and also make one prone to infection.

These tenets reflect our Christian Monastic Medical Science's unique interpretation of Christianity, emphasizing spiritual healing and the belief in the illusory nature of the material world and one God who eternally exists as three distinct persons: the Father, the Son, and the Holy Spirit. This mystery of God's triune nature is central to Christian theology and worship.

