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## René QUINTON

### Ocean Plasma

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[P. Margo: Introduction](#)

[Quinton Hypertonic & IsoTonic Solutions](#)

[A. Passebecq & Soulier: \[ Untitled, 1991 \]](#)

[D. Thompson: Seawater --- A Safe Blood Plasma Substitute?](#)

[Success Cases](#)

[Animal Experiments](#)

[Quinton's Therapeutic Protocol for Ocean Plasma](#)

[Quebec Therapists](#)

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### René Quinton -- Ocean Plasma

*by*

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Have you ever heard of René Quinton? Probably not. Yet this man saved several thousands of children's lives in France and in Egypt at the beginning of this century by using a serum which now bears his name.

René Quinton "was the first person to discern and to investigate the similarity between sea water and mammalian lymph and blood plasma systems. He endeavored to solve the mysteries of sea water and its compatibility with living organisms by proceeding to carry out several scientific experiments in hospitals.

The results he obtained were dramatically unexpected, since several people who were dying regained their vigor. Rene Quinton worked in collaboration with Drs. Potocki, Mace and Jarricot, and for four years he labored at perfecting his techniques and adjusting dosages. In 1904, he released the results of his hospital experiments in a book entitled, 'L'eau de mer, milieu organique' (Sea Water: Organic Medium). The book was re-issued in 1995 because of the timeliness of its well- researched contents."

In 1921, Dr. Jarricot brought out "The Marine Dispensary" which contained the results of his therapeutic experiments in the treatment of childhood diseases using Quinton's formula.

Hospitals everywhere became aware of René Quinton's new therapy and were favorably disposed to its use. Twelve centers for the application of his methods were subsequently established in France, Belgium and Egypt. Unfortunately, the war in Europe put an end to his research and his theories were temporarily set aside. Exhausted by his work, Rene Quinton died in 1925. It was not until the 1980's that French doctors and therapists once again started to investigate his therapeutic approach.

This century-old approach is now widely used in France, Germany, Spain and Italy. A Study and Research Centre has also been established with the aim of making available earlier and current research carried out using Quinton products. Extensive studies are also being made, especially of injectable Quinton Plasma for use in the treatment of severe or advanced diseases, many of which are now on the rise.

## **METHOD OF PREPARATION**

Sea water is extracted from a particular location which is situated between 10 meters from the bottom and 30 meters from the surface. This location is called the zone of solar penetration, and is known for its exceptional purity. Isothermic vehicles are used to transport the sea water to the laboratory for processing in less than 48 hours. The bottling in vials and packaging is completed in less than 24 hours under sterile conditions in the absence of any metallic contact or raised temperature in accordance with the original sampling techniques laid down by the physiologist and biologist René Quinton and in conformity with present day pharmacological standards as well as those of the G.M.P."

"Sea water tends to maintain its characteristic biodynamism and the molecular balance of a 'living medium'. The entirety of trace elements contained in sea water are to be found in the solution in their active states.

## **SOURCE AND AUTHENTICITY OF QUINTON PRODUCTS**

After several years of research, René Quinton deduced and proved that sea water could not be extracted from random locations.

The composition of sea water varies as a ratio of its distance from the coastline, according to climate and presence or absence of specific marine vegetation.

He also proved satisfactorily that sea water, which is a colloidal solution, differed fundamentally in its therapeutic effects from the artificial saline solution (water plus salt) currently used.

In addition, he proved that the drying out or desiccation of sea water destroyed it permanently. He showed that it was experimentally impossible to reconstitute sea water out of its dried extract.

Another important factor which he brought to light was that the equilibrium of its pharmaco-dynamic action was totally destroyed in desalinized sea water, that desalinized sea water had no valid therapeutic action. The same goes for artificially isolated trace elements whether as single units, double units, or three at a time. Their action was noted to have minimal effect.

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**[ *This part of the report was in the original copyrighted article.* ]**

### **René QUINTON's Patented Process : ---**

After several years of intensive research, Rene Quinton assembled his results and had them patented.

The patent designates the following: --- The only area suitable for extracting the quality of sea water which is completely compatible with the mammalian organism; --- The methods and techniques for maintaining all the nutritive elements found in sea water in their active state without using chemical additives;--- Bottling and packaging methods.

Quinton International Laboratories SARL is the sole proprietor of this patented process. It is the only laboratory to obtain a permit from the French Ministry of Health for marketing sea water prepared according to Rene Quinton's formula. Only vials and bottles originating at these laboratories may bear the mark "QUINTON" on the glass containers.

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### **QUINTON HYPERTONIC // QUINTON ISOTONIC**

Quinton Hypertonic Solution is pure unadulterated sea water in its natural form with its oceanic components. It is extracted and stored under the strict conditions described earlier. Its mineral and trace-element concentration is thus superior to that of universal blood plasma, making it the most concentrated form of Quinton solutions, hence its name: Hypertonic Solution.

Quinton Hypertonic Solution may be taken orally with a little water.

Quinton Isotonic Solution, on the other hand, is produced from Quinton Hypertonic Solution. It contains exactly the same concentration of minerals and trace-elements as blood plasma but its sodium content matches that of blood, hence its alternative name: Quinton Plasma.

Quinton Hypertonic Solution is reduced to isotonicity with the addition of Aqua

Fontana (Mont Roucou Spring Water) which has no mineral or medicinal content and is guaranteed to be naturally sterile and free of bacteria.

Quinton Isotonic Solution may be taken orally, injected or used in transfusion. Injections may be administered subcutaneously, intramuscularly or intravenously as required.

To recapitulate, Quinton Hypertonic Solution is the most concentrated form. Quinton Isotonic Solution or Quinton Plasma is equal to blood plasma in its mineral and trace-element concentration. Quinton Plasma can thus never be hypertonic.

### **PROPERTIES OF QUINTON HYPERTONIC SOLUTION**

Quinton Hypertonic Solution promotes cellular nourishment to a noticeable degree. It is to be used as a regenerating and remineralizing factor, a life-giving essence when there is a need for a concentrated natural supply of all the minerals and trace-elements for the optimum functioning of any organism.

Quinton Hypertonic Solution is recommended for use in order to produce a therapeutic shock effect on the organism, and to induce an almost immediate reinvigoration of depleted organic systems. It is also recommended for use prior to an anticipated drain of energy whether physical, intellectual or emotional.

### **PROPERTIES OF QUINTON ISOTONIC SOLUTION**

Research carried out by Rene Quinton and his successors has shown incontestably that, from a scientific and clinical standpoint, Quinton Plasma is identical with the indispensable fluid which sustains the development of life.

Rene Quinton's successors were: - Professor Alexis Carrel (Nobel Prize in Neurophysiology) - Professor A. Bogolometz (Cytotoxic Serum) - Doctor Jean Jarricot (Marine Method) - Doctor Alfred Pischinger (Basic Regulation System)

They all came to similar conclusions, that is to say, that sea water (as is contained in Quinton Plasma) is identical with the liquid inner environment of humans and mammals. This makes it possible, under certain optimum conditions, for isolated cells, tissue fragments and whole organs to survive in this medium.

Modern analytical techniques used by A. Pischinger in 1994 have confirmed what Rene Quinton could only intuit in 1904 in the absence of appropriate technology:

Quinton Plasma expedites the regeneration of the organism either by the speedy or by the gradual substitution of a depleted inner medium by replacing it with a natural and identical equivalent, thus promoting optimum cell development and activity. This Plasma is, par excellence, a physiological serum.

### **QUINTON PLASMA IN CASES OF CANCER, LEUKEMIA AND MULTIPLE SCLEROSIS**

Quinton Plasma may be considered as a valuable adjunct in the medical treatment of these diseases.

4 to 6 vials must be taken regularly every day over a period of many months.

In certain cases, the Plasma should be administered by injection for maximum efficiency. Injections of 30 to 60cc (3 to 6 vials) may be given every second day throughout the first two months. Advanced stages of the disease may require higher doses. Subsequent treatment, when appropriate, may be tapered off from a single injection twice a week to once a week."

### **HYDROTHERAPY OF THE COLON USING QUINTON PLASMA**

Modern advances in Physiology and Molecular Biochemistry ... have proven the similarity in mineral content of the mammalian inner environment and sea water.

This similarity makes it possible for any organism to select or reject what it needs in a natural way.

The assimilation or elimination of marine ions is made possible through cellular receptors with a high degree of accuracy by the identifying polarity derived from biocenosis.

Cold-sterilized Isotonic sea water is usually eliminated through the kidneys. This eliminated sea water tends to be twice as concentrated and twice as voluminous as artificial physiological serum.

### **TOTAL OSMOSIS OCCURS BETWEEN THE PLASMA AND THE INNER FLUID ENVIRONMENT**

The advantages of Quinton Isotonic Solution in colonic hydrotherapy: ---  
Physiological irrigation and cleansing of the intestinal membranes. ----- Anti-anaphylactic action of sea water. - Reabsorption of micro-nutrients and minerals through the portal vein. --- Physiological stabilization in case of insufficient potassium. - Anti-inflammatory and anti-spasmodic action as required in adjustable doses. - In cases of infection: optimum absorption results ---  
Strengthens the immune system."

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**Excerpt from an 1991 article [ Title unknown ]by:**

**Dr. Andre Passebecq, M.D., Ph.D., N.D.**

**&**

**Dr. Jean-Marc Soulier, Ph. D., pharmacist**

To maintain a healthy body, homeostasis must be kept constant. Thus a dynamic

equilibrium is continuously reconstructed in the face of modifications due to the surrounding metabolism. A healthy organic terrain is the basis of health and conversely diseases develop on a depleted or congested terrain. *Upstream of most diseases there is an unbalanced terrain."*

## **Mineral salts**

The four most abundant cations in the body are sodium, potassium, calcium and magnesium from which phosphorus cannot be disassociated. Sodium is the monovalent cation characteristic of extracellular fluid (ECF) and, conversely, potassium is that of intracellular fluid (ICF). The composition of salts present in the ICF greatly differs from that of ECF but directly depends on the composition of the latter. Their relations are ensured by the ion pumps of the cell membrane.

## **Interaction and balance of mineral salts**

Magnesium can only be used if a balanced calcium-phosphorus ratio exists. Magnesium acts as a regulator of the calcium fixation and serves as a phosphorus carrier. It is therefore an integral part of the calcium-phosphorus complex.

Any calcium-phosphorus imbalance reduces the resistance to illness and therefore enhances susceptibility to diseases, increases fatigue, weakens intellectual faculties and leads to premature ageing.

In addition, an abnormal potassium rate produces a magnesium and sodium imbalance. No salt is independent of the others as they all interact directly or indirectly with the other electrolytes.

Much more than an isolated salt, it is the general equilibrium of the saline matrix of the internal environment which will ensure proper functioning of the organism.

For example, the influence of the different salts on cardiac automaticity evidences their separate involvement: sodium through volemia and its relation to calcium, potassium regulating cardiac automaticity, calcium and magnesium governing muscular contraction, etc.

## **Seawater**

Seawater is an extraordinarily rich and complex matrix that still possesses numerous unexplained features.

Note first that *the structure of seawater remains incompletely known*. Indeed, to this day, no model encompasses all its physico-chemical properties. In addition, the elements that compose the marine saline matrix also exhibit specific properties: for example the coefficient of dissociation of salts present in the seawater is higher than that observed in salts dissolved in distilled water, in spite of the simultaneous presence of other salts in seawater. A 33% solution of sea salts, redissolved in distilled water does not exhibit all the properties of natural seawater of the same salinity.

Additionally, most of the constituents dissolved in seawater (except for  $\text{CaCO}_3$ ) are far from saturated, irrespective of the importance of the external inputs or the availability of these elements in submerged rocks.

Dittmar's laws show that whatever the total saline concentration, the relative concentrations of the different ions present in the ocean waters with respect to that of chlorine can be regarded as constant. The complex mechanisms governing these concentrations have not been fully explained yet.

Also the issue of artificial seawater reconstitution remains highly complex: chemists have to introduce certain dosage modifications associated with the stability of the elements present at a very low concentration.

The wealth and diversity of mineral salts and trace elements present in seawater are exceptional. Gregory and Overberger have shown that the marine saline matrix contains the 92 trace elements of Mendeleev's periodic table.

It includes all vital nutrient salts and trace elements at concentrations ranging from 1 mg/L and 10 mg/L.

It exhibits an important buffering capability, with a pH comprised between 7.9 and 8.3 and a mean saline concentration of 33‰.

Note in particular that all the minerals contained in seawater are at a concentration close to that at which they are usually found in man's internal environment.

The joint study of seawater and internal environment highlights the similarity between the mineral compositions of human plasma and seawater. In addition, the results of treatments involving correctly elaborated water preparations demonstrate the amazing therapeutic efficacy of seawater. How can this be explained ? What are the links between seawater and the vital internal environment ? As a result what is the influence of seawater on the ionic and mineral balance of the organism ?"

Rene Quinton addressed these questions with certain theories about the relationship between seawater and the internal environment of mammals, including man. He concluded that the human organism maintained this rich, life-giving internal environment so closely related to isotonic seawater for the full development of cells.

"He postulated that from the mineral point of view, human and marine plasmas are environments of the same nature. In other words, there is physical and physiological identity between seawater and the internal environment of the organism. Not only do they exhibit very similar mineral compositions, but the particular form, organization and synergy of trace elements and mineral salts that make up the saline matrix of seawater closely resemble those of the internal environment constituents."

After a documented body of scientific observations, Quinton surveyed the

possible medical applications of his findings.

"Together with a medical team, Quinton developed for more than 25 years the so-called "marine method" based on "Quinton's Plasma," a marine plasma in the form of an injectable isotonic solution.

The works of physicians Jarricot, Robert Simon, Lacheze, Mace and Quinton rely on the principle of regeneration of the depleted internal environment, on which cells live, by means of purified seawater preparations exhibiting a balanced and complete composition, so as to allow the patient to globally reconstruct his terrain and the cells to find once again the elements they need.

Given the particular period in which these works were published, they mainly cover various types of cutaneous disorders, neurovegetative asthenias, anorexias, acute cachexias, infant diarrheas, deep dehydrations, gastroenteritis, pulmonary tuberculosis, cholera, typhus."

"Exceptional results were obtained and the findings of these precursors should now be supplemented by numerous other investigations. Their writings and the listed clinical cases demonstrate the great therapeutic attractiveness of Quinton's assumptions and the efficacy of his method.

Marine plasma is a living medium. It is worth pointing out that, basically, living matter differs from mineral matter in its organization and not in the nature of the atoms that compose it. A living cell is much more than the sum of its elements. The mere dosage of components does not suffice in itself to account for the therapeutic effect of marine plasma.

A good illustration of this can be found in the therapeutic mineral waters; except for the elements that are abundant in them, many waters develop their curative power essentially when drawn from the mineral water spring. Due to the preservation methods and conditions used, these waters lose their properties although the constitutive elements remain present.

Hence is there a specific state of these waters when they are drawn? Numerous theories could be devised, starting from the "homeopathic dynamization" whose most probable substratum would be a particular state of the solvent, in this case water.

As a result, how can we envisage the specific therapeutic gain that could result from the use of the trace elements present in marine plasma? The assumption of physiologic identity between human plasma and marine plasma supposes a form of availability particularly well-suited to the needs of the organism.

Resulting from the mineral balance, pH should be restored by marine plasma. German physician Ropffer thoroughly investigated the evolution of body pH in patients to whom he had prescribed hydromarine treatments. He concluded the following:

'For normal and alkaline organisms, an increase in acid values has unequivocally been established. Similarly for hyperacid organisms, a dramatic decrease in acid



values has been recorded. No case has remained the same.

It can therefore be stated that in case a global inconstant acidity, a cure of drinkable seawater causes the normal acidity to be recovered. In particular for gastritis due to dietary errors or alcohol and nicotine abuse remarkable results have been obtained.'

*Dr. Jarricot wrote:*

'Marine plasma is not a serum against such and such illness, but it is designed for the living cell.'

In other words, it is a product which by its very nature primarily contributes to the restoration of health and the suppression of disease and its symptoms.' "

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## **"Seawater --- A Safe Blood Plasma Substitute?"**

by

**Dianne Jacobs Thompson**

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From the web page: <http://www.truthquest2.com/oceanplasma.htm>

***Diluted ocean water is so similar to mammalian blood plasma that it has been used successfully in animal tests as a blood transfusion substitute. Historically, it could also remineralize the body, normalize pH levels, balance electrolytes and heal diseases.***

My long-time fear of having a blood transfusion or anything else injected directly into my unprotected bloodstream has grown stronger over the years. It's not a religious issue, but rather an occupational hazard. Being a health researcher, terrible visions of what could go wrong haunt me, with good reason. I feel like the meat inspector who becomes a vegetarian. I know things that forever destroyed my innocent faith in all things medical. I no longer worship in "The Church of Modern Medicine" nor tithe to its pseudo-gods voluntarily.

"They," the health (read: disease) industry specialists, check blood better these days to catch unsafe blood supplies contaminated with HIV, Hepatitis, and other disease components, but blood products still aren't completely safe, even with modern technology. They can't sterilize blood any more than they can sterilize vaccines to kill all the unwanted "bugs" without destroying the nature of these products. They test blood and separate blood components through centrifugal action and other methods to purify it as much as possible, but it remains impossible to promise or deliver a completely safe blood-related product. Blood

is 'alive'—it cannot be sterilized or rendered antiseptic.

There are countless transfusion horror stories dating back many decades, but we rarely ever hear about them. For example, a neighbor down the street lost her husband about four years ago. He had cancer, but became infected with viral hepatitis from a blood transfusion and died from liver failure, not the cancer. Many people know someone who suffered from the effects of a blood transfusion gone bad. That's just a fact of life and one of the known risks of surgery, no matter how minor.

Unfortunately, I've run across too many stories of this nature. I've spent most of my adult life doing research and writing in the field of alternative medicine ([truthquest2.com](http://truthquest2.com)) with an early focus on viral and bacterial diseases and problem vaccines, some of which are still made from pooled human blood products, or with "attenuated" vaccine viruses created by "serial passage" through contaminated animal cell cultures. That means they take human viruses and put them in layers of animal cells over and over again which forces them to adapt to the foreign cells to survive. This "adaptation" requires an exchange of genetic material between virus and host cells. When monkey kidney cells are used, the exchange of genetic material that takes place forces the human virus to become a little bit 'monkey-like', supposedly so it cannot initiate full-blown disease, which doesn't always work. In the process, native monkey viruses become a little bit 'human-like', giving them greater compatibility with human cells.

Such may be the case with the infamous Epstein-Barr virus which is referred to as "human" while many scientists believe it originated in monkeys, infected humans through contaminated vaccines in mutated form, and then became associated with Chronic Fatigue Syndrome and other maladies. But then, there is less of a species barrier with monkeys than with other animals, which gives us less protection from their pathogens. The bio-hazards of monkey viruses are well-known in certain scientific circles, but little-known by the general public.

In the course of my research I came to study the subject of recombinant virology—the combining of unlike viruses into new "tribes," usually with more dangerous characteristics than the "parent" viruses, by men in white coats playing God. Recombination events can also happen in nature under certain conditions, particularly when helped along by bad science. For example, a monkey virus called SV-40 (Simian Virus 40, after becoming the 40th virus found in monkey tissues) was found to have unique properties. This "naked virus" can penetrate any kind of cell without the problem of a "species barrier" and it allows unlike viruses to attach to it and ride piggyback into the genetic material of a cell where they can take over the "machinery" and replicate new recombined viruses on their own. The discovery of this virus gave rise to the field of recombinant virology with many dire consequences. SV-40 became a well-documented but unpublicized contaminant in polio vaccines, made with the use of monkey kidney cell cultures, when it was given in 1955-1963 to 95 million unsuspecting recipients.

The first official claim was that SV-40 viruses "do not have any significance in

the safety or efficacy of polio vaccines", but when the virus was first tested on guinea pigs after its discovery, they developed salivary gland tumors and immune deficiency symptoms. The corresponding organ in humans is the pancreas. Deadly pancreatic cancer has since become epidemic in numbers. SV-40 is now associated with numerous cancers, including human mesotheliomas, osteosarcomas, brain tumors, epdnyomas, choroid plexus tumors and others. These same monkey cell cultures, used to make vaccines, contained other viruses such as SIV—Simian Immunodeficiency Virus—and that figures prominently in the makeup of another recombinant virus we know as HIV. There's no proof offered publicly whether HIV resulted from a naturally occurring recombination event, but the sophistication of this virus and some documented government requests for the creation of a similar biological weapon suggests otherwise, although a study generated at the request of the WHO, and then suppressed, linking African AIDS to the WHO vaccination campaign theorized that viral vaccines "activated" dormant viruses, so this is a possibility supporting natural recombination, unless HIV was intentionally added to certain vaccines.

The London Times printed this story on May 11, 1986, but the story was withheld from the American media. This kind of information seldom reaches the general public in my country, like one of the most horrific scientific "errors" ever made and hushed up involving "HeLa Cells," the most aggressive cancer cell culture ever known which made its way into science labs all over the world for research and then contaminated many cell cultures used for vaccines... by accident. Think about human vaccine viruses being grown in cancer cells and exchanging genetic information with the cancerous host cells before being injected into millions of unsuspecting victims.

That's just part of what a person potentially faces when receiving blood from another person or persons with undetected infection. Sam Bizer, a researcher in the field of alternative medicine, interviewed Dr. William Donald Kelly, D.D.S., M.S., who related a conversation with Drs. Friedman and Burton from the former Immunological Center in Great Neck, New York, that did cancer research. They maintained from their findings that a blood transfusion may destroy your resistance to cancer. Dr Burton believed, as many religious groups do, that blood transfusions can cause cancer. "'He says it works something like this... A tumor, in its natural drive to sustain its own life, secretes compounds called blocking factors which prevent the body's natural defense system from destroying it.' He believed that when you give a transfusion, you pass on the blood donor's blocking factors and that this can suppress the recipient's own immune system sufficiently to allow a tumor to develop. Then this new tumor in turn secretes its own blocking factor, which inhibits the immune system further. So, while cancer is not contagious, its blocking factors can be transmitted. In this way, a blood transfusion may increase your susceptibility to cancer." [4]

While possible "blocking factors" and contamination from human and animal microbes in blood supplies worry me somewhat, there are other factors that keep me awake at night... Someone I knew in college just happened to mention in passing that a blood transfusion changed his life. He described coming out of surgery after an accident and waking up with a changed personality. He blamed

his condition on the blood transfusion he was given. Since I only knew him after this event, I can't say whether the change was good or bad, but who wants something like that to happen while under anesthesia?

But something far worse than a personality change affected my opinion in 1981. That year I gave birth to my only child in Alaska—a much anticipated arrival by me at age 34 and by the baby's godmother, Ceci Clark, an artist and gallery owner of some renown in Alaska. Ceci developed bone cancer which wasn't diagnosed immediately. Before they found it, she had surgery for something else and was given a blood transfusion. When she woke up, her "brains" were scrambled, so to speak. She recognized me, but thought I was her sister, and she grew confused trying to figure out where that newborn baby came from? They eventually found the cancer. She died soon after.

In recent years my research turned to alternative cancer treatments and remedies for chronic/degenerative disease, particularly after becoming desperately ill and having my health, and that of other family members, restored without drugs or surgery by an unusual naturopathic physician in Spokane, Washington, the late Dr Harold Dick, whose extraordinary diagnostic and healing skills were both passed on to and added to by his daughter who completed a 3 year residency with him, became his partner, and then took over his practice after his death, Dr Letitia Dick-Watrous, N.D. Dr Dick not only turned my health around with a little-known diagnostic "tool" and an updated treatment modality with roots in the old "water cure" of Germany's famous Father Sebastian Kneipp—the O.G. Carroll Food Intolerance Test and Constitutional Hydrotherapy—but mentored me and lit a research fire in my belly that won't go out, and Dr Watrous fanned the flames.

In the course of researching natural healing methods, I joined a membership website that featured little-known alternative treatments for cancer and infection and these included "The Marine Treatment" based on the work of French biologist/physiologist, Rene Quinton. He proved that seawater, properly formulated and under certain conditions, is virtually identical to mammal blood plasma. With the assistance of many eminent physicians, he successfully used seawater as a healing agent on thousands of patients in France and Egypt in the early 1900's. Cancer was almost unknown in those days, but many other disease conditions responded to injections of the diluted ocean water, a true "marine plasma", which could re-mineralize a sick body, normalize the pH (acid—alkaline) level and balance the electrolytes, thereby correcting the underlying cause of many disease conditions by regenerating the 'internal terrain', as Quinton called it. The report included before-and-after photos of patients. Like most people, I was drawn to the shocking 100-year-old photos first, and the science came in a distant second. Babies near death from cholera and other causes, cadaver-like bodies filled out to healthy plumpness, raw, weeping skin from eczema made smooth and lesion-free... many early 20th century scourges, such as tuberculosis, were shown— healed by something as natural and plentiful as sunlight or the air we breathe.

How important is the mineral and trace mineral balance in the body? Many researchers, including Dr. Joel Wallach, author of the best-selling audio tape,

"Dead Doctors Don't Lie", claim that the absence of one single mineral needed by the body can give rise to as many as ten different disease symptoms. Of course, much of modern medicine still blames germs and genetics for most human disease, so the "mineral deficiency" theory is generally ignored. But Dr Wallach believes that a common heart condition—cardiomyopathy—a condition that has killed countless victims, from professional athletes to heart specialists, or made them candidates for heart transplants—is caused by nothing more than a selenium (a trace mineral) deficiency and can be cured or prevented by a few cents worth of selenium supplements a day.

Enter seawater—the missing link to deficient elemental nutrition! It contains every mineral and trace mineral known, in organic form, in the proper ratios needed by human tissues, and it's been there all along as a healing and life-giving agent, hidden in plain sight. While the website where I first found "The Marine Treatment" information had a good report and impressive photos, a more complete website on the subject was under construction. There, I discovered Dr. Juergen Buche, N.D. was in the process of translating a large body of ocean water research and supporting documentation from the original French into English on his academic [oceanplasma.org](http://oceanplasma.org) website.

What I found on that site hit so close to home that I'm still reeling! Besides curing many diseases of the day in the early 1900s, my eye caught something that resonated with my transfusion phobias. It turns out that trials were run on stray dogs to test the Ocean Plasma (diluted, cold-filtered ocean water) as a transfusion substitute. In one experiment, Quinton and his medical team drained a dog of all of its blood and replaced it with isotonic (diluted) seawater. The dog should have died immediately, one would think, but the dog lived. On day 2 after the transfusion, 50% of the blood components had reappeared. By day 4, almost 100% of the missing blood components were restored in what appeared to be proof of biological transmutation (change from one element to another). Not only did the blood completely regenerate, but soon after the procedure, the dog bounced around like a puppy with greater vitality than before the procedure and it lived for many years afterwards. Just think what a safe, effective, plentiful substitute for blood transfusion would mean to the world? No side effects, no blood type matching needed, no pathogen screening required, and it would be a true plasma with proven healing properties in itself!

So, what became of this wondrous marine treatment? World War I got in the way of medical research as well as drafting Quinton into the war. He died in 1925. These events somewhat interrupted the continuance of "Marine Treatment" hospitals and clinics, of which there were many. However, it was carried on by his medical co-workers and ardent followers and experienced a resurgence after World War II in several countries. Animal trials using seawater as a transfusion substitute were repeated with the same results in 1969; but as a therapeutic agent, "The Marine Treatment" has since then been used on people mostly as a foundational treatment for chronic/ degenerative disease. Also, it became known as a complete and readily-assimilated liquid mineral and trace mineral supplement for remineralization, for detoxification, for energy, and for anti-stress.

No human trials for transfusion have ever been attempted. As for the healing properties of seawater, in today's restrictive medical atmosphere, seawater can only be referred to as a "mineral drink". If the word "cure" was uttered or written in relation to a brand name, the "offense" would be legally actionable. Only a DRUG, toxic by its very nature, can be called "curative", and no FDA-sanctioned studies will be funded or reported on the efficacy of seawater treatment for disease, because a supplement can be studied only in relation to its disease "risk reduction" factor as defined by the government agency, and not as a treatment for actual disease.

Why haven't we heard of Rene Quinton and his marine treatment? This country, the North American continent in general and the USA in particular, has the worst national health of any industrialized country in the world—in spite of spending the most money on health research and health care. This country lags sadly behind in many areas of medical science, particularly when those who profit from bad science are called to arms for their own self-protection by safer, more effective and less expensive remedies and methods such as Quinton's modest but living ocean water. Look at the international pharmaceutical industry. It has such wealth and power that it controls not only the FDA but American health-related legislation and policies. Take for example the case of the "cholesterol" caper. In the past, the federal guidelines for managing cholesterol were this: Someone with 300 mg of dietary cholesterol per day, with an HDL (good cholesterol) level of 35 mg per deciliter (dL) in the blood was considered unacceptable and in need of treatment. However, under the "guidance" of the powerful pharmaceutical industry, those federal guidelines were recently changed. Now, less than 200 mg of dietary cholesterol per day is considered "acceptable" and an HDL (good cholesterol) level of anything less than 40 is now unacceptable. (JAMA 01; 285:2486-2487)

Translation: Under the old guidelines, 13 million people were pushed into using cholesterol-lowering drugs. Under the new guidelines, 36 million people are now buying those drugs, and that means billions of dollars of additional revenue to the pharmaceutical companies. At the same time, these same drug manufacturers have been particularly hesitant to publish the effects of drug-induced low cholesterol, which includes depression, violent behavior, suicide, aggression, increased risk of stroke and poor immune function, according to certain studies. It's looks like we're being brainwashed by some kind of drug mythology into believing that diseases are caused by a drug deficiency and that they can only be cured by increased and expensive drug consumption.

What would happen to these international drug cartels if an actual cure for cancer suddenly came on the market outside of their control? Since they exist financially only for "treatment of symptoms" (disease management) rather than curing anything, it is possible that our entire financial/medical infrastructure might collapse as a consequence. The stockholders of pharmaceutical companies want profits, not a cure to end human misery and stop the flow of profits. We hear similar stories about fossil fuel substitutes and other life-altering discoveries and inventions that never made it to the open market due to intervention by the competition.

Likewise, a safe blood transfusion substitute might threaten too many rich and powerful areas of the medical market to ever see the light of day...but one can visualize the possibilities. However, "Vision without action is only a dream." [7] Consider this article the start of action—maybe YOUR action?! Harvesting seawater for consumption (it can be ingested orally [by drinking] or be injected) is not easy and it requires knowledge, care, and the right equipment. First, the weather, tides, and other conditions need to be right. Secondly, ocean water is harvested far out to sea (35 miles or more) to ensure purity. Then, since nutrients are depleted in surface waters, where plants and algae grow, and are found in higher concentrations in deep waters, ocean water is pumped from 100 feet below the surface. During the entire processing operations, from ocean to bottle, the seawater cannot touch metal and must be kept cold. Heating kills the invigorating living properties of seawater. It has to be transported and kept in glass or food-grade plastic containers. Then it has to be tested and cold-purified in a manner that protects it from alteration and preserves its state as a living solution.

Seawater, in its original and primal state, once had only 1/3 the saline content it has now, and this fact is still mirrored in the saline content of blood and tears. The oceans became more concentrated through the ages, and are now far too salty to drink in large amounts. To use ocean water as blood plasma, it must be diluted with ultra-pure water to the same concentration as blood plasma, namely 9 grams of salts per liter. As the perfect mineral supplement, it can be consumed orally in dilute form or full strength by those with no sodium sensitivities—but only in small amounts, like an ounce at a time, several times a day if necessary. However, it's extremely important to dilute it with pure spring water for home use, because chlorinated water has the same kind of damaging effect on ocean water as it has on the human body, according to several studies. The French got it right. They ozonate their drinking water instead of adding cheaper bleach to it.

The exact properties of seawater remain a mystery to modern science. In spite of our great technical expertise, the complete nature of seawater defies analysis. It has some living quality beyond the sum of its parts. It can't be dried and reconstituted, or synthesized in a chemistry lab. The great French scientist Antoine Béchamp looked at blood as a kind of flowing tissue rather than just a liquid. Seawater also has something about it that makes it more than "just water." It sustains life, as proven by Nobel Laureate Alexis Carroll, who kept a piece of chicken heart tissue alive in it for over 26 years, needing only to change it daily to dispose of metabolic wastes. In fact, one could factually say that we have internalized the ocean within ourselves, and in that rich nutrient medium is the source of life. Every cell in the body bathes and feeds in it. It picks up and carries away the waste products of cell metabolism. It has a life force, unlike the familiar bags of saline solution seen in every hospital, which is nothing more than table salt and plain water. Processed table salt bears little resemblance to the raw, unprocessed, mineral-rich sea salt we should be using, and our depleted bodies suffer the consequences.

If I have surgery, I want to see "Ocean Plasma" in a drip bag above my head before the lights go out. The world needs someone with courage and vision willing to initiate the first human trials; the world needs someone to extend Rene

Quinton's dog trials and to make that leap into the future that signals true progress.

## References ---

1. Attkisson, Sharyl. *Bad Blood Transfusion?* CBS Evening News. WASHINGTON, May 7, 2004. CBS Broadcasting Inc.  
<<http://www.cbsnews.com/stories/2004/05/07/eveningnews/main616279.shtml>>
2. Baskin, G.B. & E.D. Roberts, D. Kuebler, L.N. Martin, B. Blauw, J. Heeney, C. Zurcher. *Squamous epithelial proliferative lesions associated with rhesus Epstein-Barr virus in simian immunodeficiency virus-infected rhesus monkeys*. J Infect Dis. Aug. 1995;172(2):535-9. Department of Pathology, Tulane Regional Primate Research Center, Tulane University, Covington, Louisiana 70433, USA.  
<[http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list\\_uids=7622899&dopt=Citation](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=7622899&dopt=Citation)>
3. *Better Blood: Heart of America Radio reports on a new technology is being developed to kill viruses in donated blood*. ACFNewsSource. Heart of America Radio: A Project of ACF. December 10, 2005  
<[http://www.acfnewsSource.org/science/better\\_blood.html](http://www.acfnewsSource.org/science/better_blood.html)>
4. Bizer, Sam. *Cancer Signs: An Interview With Dr. William Donald Kelly, D.D.S., M.S.* (no longer available online) <<http://www.sambiser.com/>> Sam Bizer has a new book out, "*Resurrection: For Souls in Broken Bodies*" that looks to be exceptionally good for those who have "slipped through the cracks" and found no help from either conventional or alternative medicine so far. Information on the quoted Dr. Burton, Ph.D about tumor factors in the blood provided by Rose Z. Smith:  
<http://www.mnwelldir.org/docs/history/biographies/burton.htm>
5. *Blood transfusions or injections of factors from pooled-human blood*. <http://www.tuberoze.com/Vaccinations.html>
6. *Bloodbook.com: Information For Life*. November 10, 2004  
<<http://www.bloodbook.com/>>
7. Buche, N.D., Juergen. *Private correspondence* 2006
8. Buche, N.D., Juergen. *Seawater*. 2006 <<http://www.oceanplasma.org>>
9. Buttram, M.D., Harold E. "Live Virus Vaccines and Genetic Mutation." *Health Consciousness* April, 1990  
<http://www.truthquest2.com/http://www.oceanplasma.org>
10. *Cancer Strategy #7: Toxins (Including GMOs And Chlorine) Underlying Cancer Cause...*  
*Reducing Toxic Overload Vital For Successfully Fighting Cancer*.  
<[http://www.cancer-prevention.net/?engine=adwords!800&keyword=%2Acancer%2A&match\\_type=](http://www.cancer-prevention.net/?engine=adwords!800&keyword=%2Acancer%2A&match_type=)>



- 11.Cantwell, Jr., M.D., Alan. *Are Vaccines Causing More Disease Than They Are Curing?* 1999  
<<http://www.whale.to/v/cantwell.html>>
- 12.Cantwell, Jr., M.D., Alan. *Are Vaccines Causing More Disease Than They are Curing?* New Dawn Magazine: A Journal of Alternative News & Information. New Dawn No. 63 (November-December 2000).  
<[http://www.newdawnmagazine.com/Articles/Vaccine\\_Genocide.html](http://www.newdawnmagazine.com/Articles/Vaccine_Genocide.html)>
- 13.Cantwell, Jr., M.D., Alan. *Dr. Alan Cantwell. M.D. quotes.*  
<<http://www.whale.to/m/cantwell9.html>>
- 14.Carper, Jean. "The Race Against Rubella" *The World Book Year Book. A Review of the Events of 1969.* 1970:104. Field Enterprises Educational Corporation
- 15.Carlsen,William. *Rogue virus in the vaccine: Early polio vaccine harbored virus now feared to cause cancer in humans.* San Francisco Chronicle.  
<[www.sfgate.com/cgi-bin/article.cgi?file=/chronicle/archive/2001/07/15/MN193825.DTL](http://www.sfgate.com/cgi-bin/article.cgi?file=/chronicle/archive/2001/07/15/MN193825.DTL)> July 15, 2001. reprint  
<<http://www.vaccinetruth.org/sv40.htm>>
- 16.Caspari, Gregor. "Are inactivation procedures for blood products good or bad?" *BMJ.* 2002 November 9; 325(7372): 1116. Head, transfusion unit *Institut für Transfusionsmedizin*, 14770 Brandenburg an der Havel, Germany
- 17.Cavanagh, Tom. Research Manager, Boehringer Mannheim. *Cell Biology (Re: Where can I find out more about HeLa cells?).* April 7, 1997.  
<<http://www.madsci.org/posts/archives/may97/860431113.Cb.r.html>>
- 18.DELALANDE Medical Research Center (France) under the directorship of Dr. B. Pourrias and Dr. G. Raynod. *EXPERIMENT ON A DOG WITH OCEAN (Quinton) PLASMA DURING A STAGE OF HEMORRHAGIC SHOCK.* May 1969 <<http://oceanplasma.org>> 2006
- 19.FRANKEN, MICHAEL,<sup>1</sup> ODILE DEVERGNE,<sup>1,2</sup> MICHAEL ROSENZWEIG,<sup>3</sup> BETHANY ANNIS,<sup>1</sup> ELLIOTT KIEFF,<sup>1,2</sup> & FRED WANG,<sup>1</sup>. "Comparative Analysis Identifies Conserved Tumor Necrosis Factor Receptor-Associated Factor 3 Binding Sites in the Human and Simian Epstein-Barr Virus Oncogene LMP1." *JOURNAL OF VIROLOGY*, Vol. 70, No. 11. Nov. 1996: 7819–7826. *American Society for Microbiology Department of Medicine, Brigham & Women's Hospital-1 and Department of Microbiology and Molecular Genetics, Harvard Medical School-2 Boston, Massachusetts 02115, and Department of Immunology, New England Regional Primate Research Center-3, Southborough, Massachusetts 017723*
- 20.Gillon, Raanan. *A startling 19,000-word thesis on the origin of AIDS: should the JME have published it?*

Editorial. Imperial College Health Service and St Mary's Hospital Medical School, London University  
Journal of Medical Ethics, 1992, Volume 18: 3-4. BMJ Publishing Group.  
<<http://www.uow.edu.au/arts/sts/bmartin/dissent/documents/AIDS/JME92.html>>

21.Giradi, A.J., F. Jensen, & H. Koprowski. "SV40-induced transformation of human diploid cells: crisis and recovery." *J. cell. comp. Physiol.* 65, 1965: 69-83

22.Gold, Michael. *Conspiracy of Cells: One Woman's Immortal Legacy-And the Medical Scandal It Caused*. State University of New York Press, Albany, NY 12246, 1986

23.Hecht, Jeff. *Chimps are human, gene study implies*. NewScientist.com news service. May 19, 2003. Journal reference: Proceedings of the National Academy of Sciences (DOI: 10.1073/pnas.1232172100)  
<<http://www.newscientist.com/article.ns?id=dn3744>>

24.Ho, Dr., Mae-Wan. *AIDS-Vaccines Trials Dangerous*. ISIS Report (Institute of Science in Society). July 29, 2001 <[http://www.i-sis.org.uk/AIDS\\_virus.php](http://www.i-sis.org.uk/AIDS_virus.php)>  
November, 2005

25.Horvath, B.L. & F. Fornosi. "Excretion of SV-40 virus after oral administration of contaminated polio vaccine." *Acta Microbiologica Scientaria Hungary*. Vol. 11:271-5, 1964-65 <http://truthquest2.com/sv40sneedaids.htm>

26.JARRICOT, Dr. Jean. *Le dispensaire Marin*. Ed. Mason 1921 (out of print)  
<http://www.oceanplasma.org>

27.JARRICOT, Dr. Jean - Practice and Results of the Quinton Marine Method in Cases of Infantile Athrepsia and Cholera - Extrait de la "*CURE MARINE*" Revue Internationale de Thalassothérapie - année 1938, No. 1., Imp. Graphica, Rue des Pelletiers, 16, Bruges, Imprimé en Belgique <http://www.oceanplasma.org>  
*Translated from the French by the Ocean Plasma Team*

28.Kalter, S.S., & R.L. Heberling. *Biohazards and simian viruses*. Bibl Haematol. 1975;(40):759-69 <[http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list\\_uids=169837&dopt=Citation](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=169837&dopt=Citation)>

29.Maiden, M.C. "Population genetics of a transformable bacterium: the influence of horizontal genetic exchange on the biology of *Neisseria meningitidis*." *FEMS Microbiol Lett.* Sept.15,1993;112(3):243-50 *Division of Bacteriology, National Institute for Biological Standards and Control, South Mimms, UK.*

30.Martin, Jamie. *Experts Cite Health Clinics as Source of HIV/AIDS in Africa (Potentially high infection rate is "preventable")*. Washington File Staff Writer. August 1, 2003 <<http://usinfo.org/wf-archive/2003/030801/epf512.htm>>

31.McRearden, Bengamin. *What's Coming Through That Needle? The Problem of Pathogenic Vaccine Contamination*.  
<[http://www.newmediaexplorer.org/chris/vaccine\\_contamination\\_mcrearden.pdf](http://www.newmediaexplorer.org/chris/vaccine_contamination_mcrearden.pdf)>

32. "New storm over polio vaccine?: Research detects 'strange viruses' causing animal cancer in monkey kidneys like those used in making Salk vaccine; there's no link to man but scientists are uneasy." *Business Week* June 17th, 1961: 27
33. Nullis, Clare. *German scandal stokes AIDS fears; Tainted blood imperils third world*. San Francisco Chronicle November 6, 1993 Associated Press  
<<http://ww2.aegis.org/news/ap/1993/AP931102.html>>
34. O'Malley, Jaclyn. Hep C from transfusion: "Strong will, sense of humor keep Reno mother going after 10 years waiting for liver transplant" *RENO-GAZETTE JOURNAL* Nov. 7, 2005
35. *Outbreak: some other examples of cross-species virus transmission*. PBS Organ Farm Frontline. 1995-2005 wgbh educational foundation.  
<<http://www.pbs.org/wgbh/pages/frontline/shows/organfarm/risks/outbreak.html>>
36. Parsons, Vic. Book Review: *Bad Blood: Tainted Blood Scandal (Bad Blood: The Tragedy of the Canadian Tainted Blood Scandal)*. Author E. KAYE FULTON. The Canadian Encyclopedia. Maclean's June 26, 1995  
<<http://www.thecanadianencyclopedia.com/index.cfm?PgNm=TCE&Params=M1ARTM0010440>>
37. Pastian, Timothy. 8-3 *DNA transfer by conjugation*. *Microbiology and Bacteriology: The world of microbes*. 1999-2006  
<[http://www.bact.wisc.edu/Microtextbook/index.php?module=Book&func=displayarticle&art\\_id=128](http://www.bact.wisc.edu/Microtextbook/index.php?module=Book&func=displayarticle&art_id=128)> November, 2005
38. Peters, W.P., "Biological and biochemical evidence for an interreaction between Marek's disease, herpes virus and avian leukosis virus in vitro." *Proc. Nat. Acad. Sci. (Wash.)* 70, 1973: 3175-3178
39. Pingel, Sabine 1, and Horst Hannig 1, Kerstin Mätz-Rensing 2, Franz-Josef Kaup 2, Gerhard Hunsmann 1, Walter Bodemer 1 \* 1-Department of Virology/Immunology, German Primate Center, Göttingen, Germany  
2-Department of Experimental Pathology, German Primate Center, Göttingen, Germany. *Detection of Epstein-Barr virus small RNAs EBER1 and EBER2 in lymphomas of SIV-infected rhesus monkeys by in situ hybridization*. *International Journal of Cancer*. Volume 72, Issue 1: 160-165. December 1998. John Wiley & Sons, Inc. <<http://www3.interscience.wiley.com/cgi-bin/abstract/41933/ABSTRACT?CRETRY=1&SRETRY=0>>
40. *Polio*. Thinktwice: Global Vaccine Institute, New Atlantean Press 1986.  
<[http://www.thinktwice.com/s\\_polio.htm](http://www.thinktwice.com/s_polio.htm)> November, 2005
41. *PRECAUTIONARY MEASURES ANNOUNCED FOR BLOOD PRODUCTS*. The Scottish Office, Press Release. February 26, 1998  
<<http://www.scotland.gov.uk/news/releas98/pr0382.htm>>
42. QUINTON, René. *L'eau de Mer milieu organique* (1912: Ed. Masson)  
Reprinted: Ed. ENCRE 1995 <http://www.oceanplasma.org>

43.QUINTON, René & Dr. Robert SIMON. *Seawater: injected subcutaneously in the treatment of pulmonary tuberculosis*. Paris, Éditions de la Revue des Idées 1906 Translated from the French by the Ocean Plasma Team  
<http://www.oceanplasma.org>

44.Redden. *The Nazi Flu Interview With Dr. Leonard Horowitz*. December 3, 2005 <<http://bc.indymedia.org/newswire/display/8085/index.php>>

45.Reitz, M.D., N.R. Miller, F. Wong-Staal, R.E. Gallagher, R.C. Gallo, & D.H. Gillespie. "Primate type-C virus nucleic acid sequences (woolly monkey and baboon types) in tissues from a patient with acute myelogenous leukemia and in viruses isolated from cultured cells of the same patient." *Proc. Natl. Acad. Sci. USA* 73, 1976: 2113-2117

46.Sneed, M.D., Eva Lee. "AIDS-IMMUNIZATION RELATED SYNDROME." *Health Freedom News* July, 1987, *National Health Federation*  
<http://www.truthquest2.com/sv40sneedsaids.htm>

47.Stary, A. & A Sarasin. "Simian virus 40 (SV40) large T antigen-dependent amplification of an Epstein-Barr virus-SV40 hybrid shuttle vector integrated into the human HeLa cell genome" *Journal of General Virology*, Vol 73, 1992: 1679. *Society for General Microbiology*

48.*The Canadian Red Cross Used Blood Contaminated With the HIV Virus*. Press Interpreter. May 31, 2005 <<http://www.pressinterpreter.org/node/168>>

49.Wang, M.D., Frederick C.S. *Epstein-Barr Virus*. Channing Laboratories. Brigham and Women's Hospital /Harvard Medical School.  
<[http://www.channing.harvard.edu/wang\\_f.htm](http://www.channing.harvard.edu/wang_f.htm)>

50.Wong-Staal, F., D. Gillespie, & R.C. Gallo. "Proviral sequences of baboon endogenous type-C RNA virus in DNA of human leukeamic tissues." *Nature* 262, 1976: 190-195

51.Wright, Pearce. "Smallpox vaccine 'triggered Aids virus.'" *Science Editor. London Times* May 11, 1987

52.Xi'an Works To Keep Its Blood Supply Safe. U.S. Embassy Beijing. April 2000  
<<http://www.usembassy-china.org.cn/sandt/xian-blood.htm>>

53.Youngner, J.S. "Poliomyelitis" *The American Peoples Encyclopedia Year Book. Events of 1955*. 1956: 883-84. *The Spencer Press, Inc., Chicago, Ill.*

54.Zacky, Elaine. *AIDS/Ebola Author Defends Embattled African Presidents: Reports Outbreaks May Be "Man-made" and CIA-linked*. Lightstream Productions Press Release. October 19, 2000  
<<http://www.lightstreamers.com/Horowitz/PressAIDS.html>>

**DISCLAIMER: This material is for informational and educational purposes only. Consult with your health care provider for treatment advice.**

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## **Some Success Cases :---**

### **Case #: 1**



**Synopsis: Infant - 3 months, 10 days old  
40% of normal weight  
Plasma therapy - complete recovery**

### **Case #: 2**



**Synopsis: 40 day old infant with advanced athrepsia  
50% underweight - veritable skeleton  
Plasma therapy - complete recovery  
Was followed for a long time.**

### **Case #: 3**



**Synopsis: Athrepsia (faulty assimilation)  
Infant - 2 months, 14 days  
Plasma therapy. Complete cure.  
Was followed for 20 years.**

### **Case #: 4**



**Synopsis: Athrepsia -poor assimilation  
Infant - 4 months, 10 days  
Plasma therapy - complete recovery  
Was followed for 20 years**

### **Case #: 9**





**Synopsis: Cholera of 10 month old baby caused by Coleriform bacteria - immobile, upturned stomach - upturned eyes.**

**Case #: 10**



**Synopsis: Cholera due to Coleriform bacteria  
Almost 10 months old baby - terminal stage with 24 hours to live.  
Received Ocean Plasma followed by a complete cure.**

**Case #: 14**



**Synopsis: Colitis  
4 years and 9 months old child.  
Chronic colitis, Weight of a young boy of 2 and a half years.  
Treatment: Ocean Plasma - Complete cure.**

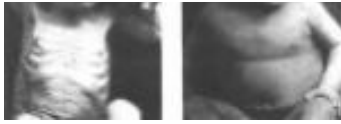
**Case #: 15**



**Synopsis: Dyspepsia, chronic enterocolitis and terminal cachexia (Extreme weight loss etc.) - 20 year old woman - 5 year problem**

**Case #: 25**





**Synopsis: 3 month 26 days-old girl - normal at birth, weight at 2 months 3kg 600g.**

**Chronic enteritis - almost a hopeless case**

**&c, &c...**

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## **The Animal Experiments Using Isotonic Seawater**

*conducted by*

**Rene Quinton**

These experiments have been described, in detail, in Quinton's book :---"*L'eau de Mer - milieu organique*" ; 1912: Ed. Masson) Reprinted: Ed. ENCRE 1995".

The experiments shown below were repeated, successfully, 50 years after Quinton's daring exploits

### **INTRODUCTION ---**

The earliest experiments were made in 1897, with [abandoned] dogs, at the laboratory of Etienne Marey at the "Hautes Etudes du College de France" for the study of physiology and pathology, where René Quinton had begun to work.

All references to "seawater" infer that ordinary filtered and unheated seawater was reduced (diluted with [then] distilled water) to the isotonic 9‰ state of human plasma. Today, the dilution is accomplished with sterile but 'living' spring water.

### **GROUP 1 EXPERIMENTS (pages 165-168) ---**

Partial drainage of blood - Intra-organic injections of seawater, via saphena vein, using normal adult dogs.

A first group of experiments was conducted where a volume of 66% (EXPERIMENT 1 not related here), 81% (EXPERIMENT 2 not related here) and finally 104%(EXPERIMENT 3 - see below) of a dog's body weight was replaced, over a period of fixed time, with a corresponding amount of isotonic 9‰ seawater.

Finally, (EXPERIMENT 4) a small dog was injected with 9‰ Marine isotonic plasma at three varying rates and reactions were observed and recorded.

The main discovery was that as long as the rate of injection kept pace with renal elimination, no traumatic reactions were encountered.

### **THIRD EXPERIMENT OF GROUP ONE (page 167) ---**

An [abandoned] dog, was injected with 10 kilos, 400 grams of 9‰ isotonic seawater. This enormous quantity of water, representing 104% of the dog's [own] body weight, was injected over a period of 11 hours and 40 minutes. This was equivalent to the injection of 62.4 kilos of seawater into a man weighing 60 kilos.

Here follows the account of this experiment in René Quinton's own abbreviated words:

"The dog lay quietly in the morning, covered, his body weight was 6.5 kg, the rectal temperature [was] 39.7 degrees C. The temperature of the injection was about 35-40 degrees C. The rate of injection was 14.9 cc - the same as urinary elimination. During the 11 hours and 40 minutes of the injection, there was no agitation, no diarrhea, no albuminuria, and all the reflexes remained active. The dog kept his eyes on the operator and reacted to every caress. Occasional vomiting of a yellowish liquid (50cc total quantity). The rectal temperature declined in stages to 36.8 degrees C. and at the end of the injection [period] rose to 37.2 degrees C. By this time, the dog had absorbed 10.4 kg of [isotonic sea] water and had excreted 9.4 kilos of urine."

"One hour and ten minutes after the injection, the dog was back on his feet, moved normally except for a slight limp caused by the binding of his feet during this experience. At this time, his rectal temperature was normal at 39 degrees C."

The next day, 14 hours after the injection, the animal was remarkably gay, ran and jumped in the laboratory, ate two portions of meat weighing 600 grams and drank 100 grams of water. His urine, from the night, showed a slight albumin cloudiness."

The day after, and the following days, the dog continued to behave the same way: more energetic than before the injection, no diarrhea, no vomiting, normal albumin, not troubles of any kind."

#### **FOURTH EXPERIMENT OF GROUP ONE (page 168) ---**

A third [abandoned] dog was injected with a large quantity of [isotonic} seawater. A small dog that weighed 5 kilos, was injected with 3.5 kilos of isotonic seawater at injection rates varying from 67.3 cc per minute per 10 kg of body weight during the first 30 minutes, to 5.4 cc per minute (renal elimination) to 58.2 cc per minute in a short period of 90 minutes. The dog's stomach rapidly ballooned and the heart rate slowed perceptibly. The initial body temperature dropped from 38.2 degrees C. to 32.5 degrees, urination diminished. The corneal reflex disappeared.

It was noted that during the slow injection rate the traumatic symptoms did not aggravate but normalized. As soon as rapid injection rates resumed, the re-appearance and aggravation of symptoms reappeared while renal elimination slowed.

As soon as the injection stopped [after 90 minutes], the body temperature rose,



urination accelerated and the coronary reflex returned. The dog began to stagger about, his swollen stomach was no longer recognizable. He took several steps and collapsed. The shock had been too violent and he found it hard to recover. But by the eleventh day, the recovery was complete. The animal was extremely gregarious and exuberant in spite of his confinement for days in the basement. His body weight was still five kilos.

## **GROUP 2 EXPERIMENTS (pages 169-170) ---**

Complete drainage of blood and replacement with an equal amount of isotonic seawater.

This experiment involved withdrawing a quantity of blood blood plasma of a [mongrel] dog, and replacing it with an equal quantity of 9‰ isotonic seawater. No special precautions were made to prevent infection. The dog was to be placed at death's door, so that this would be a final test for the curative power of seawater and would demonstrate whether the isotonic water was a perfect [replacement] copy of the dog's blood plasma. Here is the report by the observers:

"Dog of 12kg 400g. Withdrawal of most of his blood from the femoral artery, of 491 grams, during 4 minutes, without any [antiseptic] precautions, representing one twentieth of the [dog's] body weight. The corneal reflex halted. Presented with the impossibility of withdrawing any more blood, the injection of seawater at 23 degrees C. began and 532 cc (18.7 ounces) at 23 degrees C. were injected during a period of 11 minutes. The corneal reflex was restored. The untied animal was unable to walk, breathed with difficulty, with short breaths and remained stretched out on a blanket without moving."

### **DAY 2 ---**

"After 21 hours, the dog trots around the laboratory. The red blood cells have dropped from 6,800,00 before the treatment [experiment] to 2,900,000; white blood cell level is at 15,400 from a previous 14,000, the hemoglobin has decreased from 19 to 12. These results are a witness to the enormous withdrawal of blood, yet, the animal eats and drinks."

### **DAY 3 ---**

"The condition of the dog changed: the wound discharged puss, the body temperature rose to 40 degrees C., and the condition looked grave, the animal sad and depressed. Now it was to be seen whether the organism, impoverished by the withdrawal of blood could overcome the infection with the seawater and accomplish leukocytosis manufacture of white blood cells}.

### **DAY 4 ---**

"Although the condition continued to look grave, the red blood cells were now at 3,020,000, the white blood cells at 24,000,000 and the hemoglobin at 16. Leukocytosis had been accomplished at a ratio of 1:484 vs. 1:125 before the procedure. That same evening, the dog ate 400 grams of meat."

Thereafter, the progress was rapid. On the eighth day, the dog became exaggeratedly exuberant, ran about wildly and this continued during the following days. The results showed that the organism had become revitalized by the seawater to a level that EXCEEDED that of the [original] plasma that had been withdrawn. Five years later, Sodium, named after the memory of the experiment, was still alive and well.

### **GROUP 3 EXPERIMENTS (Page 171- 173) ---**

The definitive experiment was to extract white blood cells from fishes, a lizard, a man, rabbit, a dog and a chicken and mix them, each in turn, with varying amounts of seawater (up to 200 times dilution of a unit of blood with Marine Plasma) ) to observe when the white blood cells would cease living. This proved a total success. In all cases, the white blood cells, essentially simulating the cellular life of an organism, presented all the signs of vital normal life: adherence and amoebic movements.

It was found also that white blood cells were able to survive 25+ hours in non-sterile plasma solutions and upwards of a month in sterile solutions. This surpasses by far even the most optimistic artificial plasma solutions.

André Mahe, contemporary of René Quinton and author of the book: *Le secret de nos origines* - 2nd Edition, Le courrier du Livre 1962, writes...

"Now, Rene Quinton is confronted with an impasse, i.e. vis-a-vis the frightening keystone which is of course the experimentation. If my assumption is right, he thinks, while searching for examples of physiological evidence, one must be able to withdraw part of the blood plasma of an animal with impunity and then to replace this plasma by an equal quantity of sea water. In the same vein, one must be able, without danger, to inject the dog [he calls it an 'organism'] with a considerable quantity of sea water. Lastly, one should be able to make white globules, which do not remain alive in any artificial medium, live in sea water...

It is here that many researchers, even courageous ones, even those trustful in the accuracy of their assumption, would have taken some precautions. It had been easy, indeed, to carry out experiments in total insulation in order not to lose face if the experimentation contradicted the postulate. But Rene Quinton chooses the risk, defies it, and in facing the test, which is essential, refuses the subterfuges.

It is at the pathological Laboratory of Physiology of the High Studies of the Collège de France, the laboratory of Marey, where he is assistant, and in the presence of several researchers to whom he will present the proof of the postulates that he advances. We are in 1897.

In the group of experiments of which I will speak of initially, he proposes to withdraw from a dog, by totally bleeding it, part of its interior milieu, and to replace it by an equal quantity of sea water, reduced to isotonicity - I will come back later to this aspect which is also capital.

Then, the total and complete bleeding would cause the death of the animal if it is

abandoned and left to its own resources. Moreover, the experiment withdraws not only a considerable part of the interior medium itself, but also the cellular part that sea water cannot restore to the animal. On the one hand, the respiratory function will be thus be affected gravely for lack of oxygenation. In addition, there will be at the same time depletion of all the white globules inherent in the blood, even at the moment when the operation on the animal, handled without special precautions, has to fight against the infection determined by the intervention itself. The total bleeding thus puts the animal at the door of death, and this represents the most unfavourable conditions to overcome victoriously if sea water is deemed to have the least toxic disadvantage. For the experiment to succeed in spite of so many unfavourable factors, it would be necessary that sea water be indeed a perfect analogy to the interior medium. Can one say that a failure, under such risky conditions, would have really proven an error of concept? Admittedly not, because the difficulties were so significant.

Let us return to the facts in all the dryness of the scientific talk, not without imagining easily pathetic situations, curiosity, the probable anxiety of the young scientist in spite of his competency which made Marey say: "Rene Quinton is a genius in doing experiments, and he knows how to choose the perfect experiment."

Here follows a description of the Group 2 Experiments.

Later, a doctor, Doctor Tussaud, said that he obtained the same results as Rene Quinton while completely bleeding a dog and then injecting it simple physiological salt solution. But by pushing the investigation, one learned that the animal had survived only two months, and in the most extreme state of exhaustion, hardly able get around the laboratory. There is therefore no comparison to the results, the physiological salt solution being only a pale sea water substitute, besides, Rene Quinton will bring more evidence later and others after him will do so as well.

Perhaps I presented a light distorsion to the chronology, this experiment being classified, according to the enumeration of Rene Quinton, in the second group. But he forges ahead more for reasons of scientific exposure, and actually started by totally bleeding the dogs, to then resuscitate them thanks to the injections with sea water.

"I assisted personally, with Doctor Hallion, at the first experiment made by Rene Quinton with the College of France", wrote Charles Julliot later. "And I can still see, some thirty-five years later, the stupefaction of all three of us, when we saw the animal return to life and again standing on its own four feet after having come back from so far!"

I like this assessment of Rene Quinton, always so sure of himself, with this impatiently awaited result, and one imagines so well the amazement of the sorcerer's apprentices to see the unhappy dog fully resurrected!

The first group of experiments, which undoubtedly strikes less one's imagination, is however quite as significant for the biologists and physiologists. One proposes here to intravenously inject sea water, using a superior Vertebrate.

If the interior medium of the animal is a marine environment, the sea water will have to behave in the organization like a vital medium, and not represent any toxic phenomenon there. The injectable quantity planned for the first dog is enormous here: 6 kg and 600 G, for an animal of 10 kg, this being 66% of its weight.

The temerity of Rene Quinton seems really unreasonable, since nothing prevented him from starting with amounts much lower. There is a kind of demon in this man, like a deviant who wants to rape the secret of nature not only by facing it but also by taunting the gods...

It is really not by chance that he stacks thus, once more, systematically all the chances against him. All indication leads one to believe that one will not introduce with impunity into an organism such a considerable quantity of foreign liquid, as vital as it seems to be! One will impose on the system an abnormal overload, abrupt or prolonged, according to speed, strong or low, of the injection. As for the kidneys, by which the elimination of the foreign liquid is carried out, one will ask for them an effort out of all proportions with their usual work.

It is not the experiments of Rene Quinton that I this time refer to, but to the experimentation file of Doctor Hallion, member of the Academy of Medicine, which I reproduce here. Not because of this distinction, but only because Hallion, wanting to know how far one could go in this way proposed by Rene Quinton, injecting a dog with 10 kg and 400g of [isotonic] seawater - 104% of its weight - in eleven hours forty minutes... exactly as if one injected a man weighing 60 kilos, from noon until midnight approximately, 62kg and 400g of sea water! Here is, accurately recopied, the summary of the Hallion-Carrion experiment report of which was communicated, as it had been done for those [experiments] of Rene Quinton, at the Biology Society:

"Crossbred basset hound. Calibrated weight ten kilos. Rectal temperature: 39.7 degrees C. Temperature of the injection: About 35 to 40 degrees C. The seawater injection's duration is 11:40 hrs. It reaches, at the end of this time, 104% of the weight of the animal.

... during the entire period of injection, no agitation, no diarrhoea, no albuminuria, all reflexes. The animal does not cease following the operator with its eyes and reacts to each caress. The rectal temperature, with only slight variations, descends to a low of 36.8 degrees C. At the end of the injection, it is 37.2 degrees C and the animal has received at this time 10kg, 400g of sea water, and excreted 3kg, 400g of urine approximately.

... the animal, put on its legs one hour, ten minutes after the end of the injection, walks around at once with all the appearances of a normal dog, except a light limp due to the binding of the legs, maintained during all the duration of the experiment. One hour, ten minutes later, rectal temperature: 39 degrees C. The following day, fourteen hours after the end of the injection, the animal, remarkably alert and gregarious, gallops and jumps through the laboratory. It eats, in two sittings, six hundred grams of meat and drinks hundred grams of

water. The urine collected during the night has a slight albuminous cloudiness. The following day, 14 hours after the end of the injection, the dog continues to present the same aspect, sharper than before the experiment. Neither diarrhoea, nor vomiting, nor any disorder. Albumin decreases and then disappears."

Pushed by his experimental passion, Rene Quinton widens this first group while injecting a dog, this time abruptly, a considerable quantity of sea water, in order not to give the kidney time to eliminate it and to thus transform the organization into a marine water mass. For the poor animal, the dangers of such an attempt are appalling due to the enormous and abrupt overload which it imposes on the economy. In 90 minutes, one injects this dog of 5 kilos a quantity of 3,500g sea water. Quickly, there is an enormous abdominal distension making the animal unrecognizable, with cardiac deceleration, the temperature, from 38.2 degree c at the beginning, falls to 32.5 degrees C; renal elimination decreases. Then the corneal reflex disappears. Once the injection is finished, the temperature goes up, renal elimination accelerates, the corneal reflex reappears. Detached, the animal staggers. Its distension makes it unrecognizable. It takes some steps and collapses. The shock has been violent, and the animal has trouble to recover! But on the eleventh day, "... the animal, entirely re-established, presents a cheerfulness and an extreme exuberance, in spite of having been in a cellar for five days. Its weight did not vary, it totaled five kilos ".

Rene Quinton now approaches the third group of experiments, so hazardous that his Masters with the Collège de France, Balbiani, Malassez, Hennequy, impassioned by his research, advise him to steer clear of experimentation that could only result in total failure, even though such failure, given the apparently insurmountable difficulties of the task, would have been entirely insignificant. Rene Quinton himself does not believe in success either, he will admit later, but it is those who cheered him on who said: "It is not necessary to hope in order to succeed..."

At any rate, the white globule was the cell of choice, and, if the young scientist could prove its survival in sea water, the game was definitively won. All the other cells of the organism live only a local life, but the red globules, in spite of their appearance of mobility and their diffusion, are limited to a closed vascular system. The white globule primarily only see general life of the organism, in contact with all tissues, in the whole body. But its delicacy is such that it does not live in any artificial medium, and any artificial solution results in quick death. Only the natural liquids of the organism keeps it alive.

The experiment relates to Fish (tench), the Batrachians (frog), the Reptiles (lizard), the Mammals (man, rabbit, dog), the Birds (capuchin of China, hen). A unit of blood is taken from each subject and is diluted in sea water in order to observe either the continuity or the ceasing of life of the white globule in this new medium.

Total success: in all the cases, with all the tested species, the bathed white globules of the marine liquid continued to present the various signs of a normal life, adherence, refringence, and amiboïd movements. Thus, through all the various branches of vertebrates, the experiments of Group III also show the

persistence of the original marine environment like being THE vital medium of the organic cells.

Rene Quinton and his entourage of scientists can now summarize. Into the first group, one injected an organism (please forgive them for calling a dog an 'organism - we know better today but during those days, scientists did not have to be politically 'correct' nor did they have the laws that protect or regulate animal experimentation) a quantity of sea water, equivalent approximately to three times the mass of its interior medium. As the kidneys eliminated at the rate of the injection, and that this elimination obviously related to the interior medium as well as to the liquid of injection, it so happened that at the end of the injection, a very significant part of the medium interior was eliminated and replaced by sea water. The new interior medium, bathing all the organic cells, was thus partly of sea water, introduced in the experiments. However, not only did this substitution not harm the general life of the organism, but the animal then was more alert than before the experiment. [Medical] Renal work can make it possible to appreciate the integrity of cellular life in the presence of sea water, since the renal cells of the Dog, eliminating in a normal state 150 grams of urine in twelve hours, eliminated some 10kg during the experiment, that is to say sixty times more.

In the experiments of the second group, the sea water injection practised immediately after the total bleeding, allowed leucocytosis to be victorious against the infection, namely the fast reconstitution of the [organism's] forces, the surprisingly prompt repair of the red globules. Sea water thus presented all the proof of the qualities which one could expect from the interior medium itself.

Lastly, in the experiments of the third group, the white blood cells, a perfect example of the interior medium, proved that sea water, substituted completely for the interior medium of various animals, allows the survival of one of the most delicate cells of the organism.

Was all this just a series of good luck? One can win the first prize in the lottery... but not ten times in a row, the theory of probability is not in agreement! And the identicalness (sameness) of the interior medium of vertebrates and sea water cannot be explained by a combination of circumstances, as certain people sometimes lightly suggest. The bird and the higher mammal do not live exclusively close to the sea or on the sea; they do not eat food rich in sea salt. Their basic food is vegetables, [grasses and seeds,] therefore very far away from the salty composition of the sea. The same goes for temperature. We are dealing here with a phenomenon of constancy with reference to cellular origin, with the conservation by the interior medium, in spite of new conditions, of the original marine environment.

Although he did not yet, at that time, establish the chemical evidence, Rene Quinton thus considers that his assumptions had become a law, the law of marine constancy, and it reads as follows:

Translation: "Animal life, that had originally appeared in cellular form in the seas, tends to maintain, for its best cellular functioning throughout the zoological

species, its fundamental cells in a marine environment similar to its origin".

Original in French - "La vie animale, apparue à l'état de cellule dans les mers, tend à maintenir, pour son haut fonctionnement cellulaire, à travers la série zoologique, les cellules constitutives des organismes dans le milieu marin des origines."

Note: Rene Quinton evaluated the interior medium to be a third of the weight of an organism, and this is a proportion that is much lower than the current more moderate estimates.

See our article "Comparative study of the Therapeutic Properties of Seawater Preparations" by Dr. André Passebecq, MD, ND, Ph.D. and Dr. Jean-Marc Soulier, Ph.D, Pharmacist.

### **THE CONCLUSION ---**

And here it is said slightly differently... "Animal life, having appeared in cellular form in the oceans, tends to maintain, in its highest cellular functioning throughout the entire zoological series, the constituent cells of the organisms in the 'quasi' original marine [internal] environment."

Quinton implies that animal life has maintained within the entire body the original marine environment in its intra- and extra-cellular fluids. It is for this reason, for therapeutic applications, isotonic seawater has been found so incredibly compatible with animal/human plasma - even in exaggerated amounts - without other adjunctive products or procedures.

### **REFERENCES ---**

"Le secret de nos origines", author: Andre Mahe, published by the Courier Du Livre, Paris, pages 39-45 regarding the experiments.

For the primary reference, see: "L'eau de mer, milieu organique" by Rene Quinton, published by Mason 1905, 1912 and republished 1995.

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## **ORIGINAL THERAPEUTIC PROTOCOL FOR THE USE OF OCEAN PLASMA**

*according to*

**Rene Quinton**

**The description in the following page faithfully reflects the original therapeutic protocol as it was utilized by Rene Quinton himself more than one hundred years ago.**

**Here is the ORIGINAL Treatment protocol (translated from the French)**

**" The marine treatment which we have practiced in the Parisian hospital services (St. Louis, Beaujon, Hotel-Dieu, Tenon, Maison Dubois, Pitie and**

the Asylum of Mouleau) consisted of injecting our seawater which we reduced to organic isotonic consistency , per dosage for this mixture, to one hundredth to one hundredth and a half of the body weight.

"The first injections I practiced (July - August 1897) were intra-venous injections. In my absence, in a desperate case of cirrhosis, death being anticipated for that same day, a temporary intern obtained complete success after a subcutaneous injection of my preparation which he administered without any hope. The patient left the hospital on his own two weeks later.

"I don't provide my formula as being final or the best one could use. I thought one had to inject the isotonic way in order to avoid unknown or troublesome factors, however I learned from physicians of the Marine Service who have had excellent results from simply injecting my preparation in its natural form. This practice would have the advantage of reducing by two thirds the volume to inject - a comparative experience would have to be tried. I limited the dosage to one hundredth or one hundredth and a half of the injection volume because it seemed to me that this dosage (same concentration as human plasma) was sufficient to produce the immediate effects of a double or triple dose, however, it is not established that a stronger dose by itself would have any advantages, which I have not had the occasion to observe.

"The quality of the liquid to be injected provided more precise observations which could be summarized with finality. It no use to contemplate the composition of an artificial seawater. It must be treated according to my protocol and reduced to approximate organic isotonicity."

**Minimal injection dose:** This depends on the condition of the patient. Please consult the Success Cases for guidance.

**Frequency of injections:** When the injections must be repeated: every five days, then every six, seven, eight days etc., according to the readily discernible duration of its effects (see details further down).

#### *Effects from the Injection(s):*

"When several injection are to be done on the same patient, it is best to inject at the same place. The local pain of the first injection will only be slightly felt during subsequent injections.

"An injections is followed by a reaction that lasts about twelve hours. At a certain variable moment (one hour, two hours or three hours after and sometimes even while performing the injection itself if it is done slowly), the patient will feel chilly, sometime violently so, with chattering teeth and more or less intense thirst. Body temperature will rise without interruption during four or five hours (about 1.5 to 2.0 degrees C) and then will come down as it came up to finally stabilize below the initial temperature. The thirsty patient will drink 1 to 3 liters of water. He typically has absolutely no appetite, may have some nausea or slight headaches. The more this reaction is felt the more benefit will be derived from the injection. In any case, it is



not to be feared with regardless of the weakness of the patient or his initial temperature. In the case of febrility, when the temperature before the injection is 39.5 degrees C, it can rise to 41.5 C and even remain for six consecutive hours at 41 degrees C without the slightest inconvenience.

"Twenty-four hours after the injection, one finds the patient generally down, not only because of the crisis which just happened but also due to the resulting partial insomnia. The improvement is however evident by certain symptoms that begin to clearly show, in favorable cases, around the 36th hour or the latest on the second day. The improvements are constant and are progressive during the 3rd and 4th days. One can witness sometimes a veritable resurrection of the patient. Striking by its suddenness: all pain or uneasiness that may have been present before the injection have left; strength returns; appetite - non-existent before the treatment - becomes exaggerated with sudden hunger and the patient, bedridden for weeks, arises and walks around for several hours.

"On the fifth day, in the morning --- complete change. The scene is dominated by the same general weakness as prevailed before the treatment, except in acute cases where one injection suffices to produce a definite improvement. A second injection is therefore administered. The described cycle of effects occur once again but with more pronounced improvements.

"The injections are spaced out in this natural manner for five, six, seven, eight days - according to the benefits that are obtained.

"The difficulties which I had to face, when the Arcachon station could no longer send me the seawater that was treated according to my protocol, have successively interrupted many of my [clinical] trials. As a collective group, my preparations nevertheless seem to have proven to be a powerful adjunctive therapy.

"In three particularly grave acute cases, infectious gastro-enteritis of indeterminate nature, oxalic acid poisoning, advanced liver cirrhosis, success was immediate and complete. In the case of syphilis, one early malignant syphillitis and one advanced case, the injection was followed, right from the second day, by very rapid healing of the lesions which covered the patient's body. In one case, healing was mostly complete after seven days. We obtained the same results in cutaneous tuberculosis.

"The therapeutic action of seawater is therefore evident. Future trials should measure and evaluate it further."

*Rene Quinton*

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## Quinton Ocean Plasma Therapy

Because of the striking similarity between Isotonic Ocean Water and internal body fluids, notably the blood, diluted Ocean Water has been called by various names: Marine Plasma, Ocean Plasma, Quinton Plasma, Marine Serum, Quinton

Serum, Marine Matrix.

Hypertonic Seawater is, of course, the pure undiluted solution that comprises our oceans.

Because of the possible involvement of a medical protocol in the use of Ocean Plasma, the following information is meant for Health Professionals only.

**Therapeutic Applications - in the use of the Seawater Marine Plasma**

Historically, Ocean water (plasma) has had, and can have, numerous possible applications. All of these therapeutic uses are based on the same concept of renewing, purifying and regenerating the internal fluid environment, as well as maintaining vital equilibrium. Historically, OCEAN WATER is the best support and regenerator for all cell mechanisms.

**Prenatal Care:**

Fetal underdevelopment, prevention of physiological problems in the fetus due to toxicoses, alcoholism, nicotine and drug addiction. Potential corrective of inherited and acquired immune-deficiencies. See our detailed supporting document, [mace-e.html](#).

*Infant Care:* Undernourishment, underdevelopment, Athrepsia, lactose intolerance, gastroenteritis, vomiting and diarrhea, acute toxicoses, dehydration, premature birth. See our detailed supporting document, [nurslings.html](#).

*Pediatrics:* Asthenia, anorexia, weight retardation, attention deficit disorders, dyslexia, dyslalia, student adjustment, emotional instability and neuropsychic problems. See our detailed supporting document, [pediatrics.html](#).

*Obstetrics:* Asthenia and serious vomiting, gastro-intestinal and circulatory problems, post-partum depression, breast-feeding.

*Gynecology:* Dysmenorrhoea, menopause, utero-vaginal infections and congestion.

*Dermatology:* Burns, psoriasis, atopic eczema, acne, pruritus, prurigo, hives, chronic dermatoses, skin eruptions, abscesses, alopecia and herpes.

*Respiratory Problems:* Chronic ENT infections, tonsillitis, bronchitis, asthma, complications of pulmonary tuberculosis. See our detailed supporting document, [simonroberte.html](#).

*Periodontal disease:* Prevention of caries, receding or bleeding gums, gingivitis.

*Gastro-Enterology:* Gastro-enteritis, dyspepsia, gastric and duodenal ulcers, diarrhea, hemorrhoids, hepatitis, functional colitis, spasmodic colitis. See our detailed supporting document, [cases.html](#).

*Urology:* Recurring cysts, enuresis, kidney stones, sexual frigidity or impotence.

*Endocrinology:* Thyroid and parathyroid dysfunction.

*Bone and Joint Diseases:* Rickets, osteoporosis, healing of fractures, pathological double-jointedness, scolioses, arthritis, rheumatism, gout, athletic injuries.

*Neurology:* Depression, spasmophilia. *Geriatrics:* Stress, problems of senility, undernourishment.

*Intravenous Feeding:* Low blood volume, (bleeding, burns, dehydration, etc,) any emergency accompanied by great physiological fluid loss, dehydration, involuntary vomiting, etc. See our detailed supporting document, [lauture.html](#).

*Colon Therapy:* See our detailed supporting document, [rodetenglish.html](#).

## **Contra-Indications / Side Effects**

ISOTONIC Seawater (OCEAN WATER)

Incompatibility: None

Side effects: None

Contra-indications: None

HYPERTONIC Seawater

Incompatibility: None

Side effects: None

Contra-indications: High blood pressure, kidney disease, heart disease --- In such cases, use Isotonic Seawater. Isotonic Seawater is also recommended for eczema, urticaria and psoriasis.

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## **Some Instructions and Models of Dosage for Seawater Products**

### **HYPERTONIC OR ISOTONIC Seawater SOLUTIONS**

INSTRUCTIONS FOR USE --- The Solution is to be taken orally on an empty stomach 20 to 30 minutes before meals or at least 1 1/2 - 2 hours after meals. The Solution is to be taken pure (hypertonic) or isotonic (diluted in water by 2/3). For children who find the product too salty, it may be taken diluted in some milk or juice. The Solution may be taken on a short term basis, over several weeks or months, or regularly year round, according to individual requirements. This product is not classified as a drug but is considered by traditional medicine an energy-boosting, re-balancing and regenerating nutritional supplement. Seawater Hypertonic Solution is suitable for all except those who suffer from high blood pressure, a heart condition, kidney disease, eczema or psoriasis. In such cases, Isotonic "OCEAN WATER" should be employed for several weeks and then one can switch over to hypertonic solution. "OCEAN WATER" Isotonic Solution is also recommended for elderly people. 10 ml per day is usually sufficient but sometimes two may be needed.

The general dosage is as follows:

From birth to one year of age - 10 ml in the feeding bottle every other day.

From 1 to 4 years of age - 10 ml daily away from meals  
Over 4 years of age - 10 to 40 ml daily according to the severity of the case  
Adults - 30 to 60 ml daily according to the severity of the case  
Elderly people - 10 to 20 ml per day, or as required --- over several months

### *Seawater NASAL SPRAY 150 ml Flask*

Some people mistakenly believe that this nasal spray contains a mixture of water and salt. This, however, is not the case. Salt is highly irritating to the mucus membranes and it has no anti-inflammatory or healing properties. The spray contains Isotonic Solution. It can be used at any age: by infants, children, teenagers, adults and elderly people. Press down the nozzle gently to release the spray.

**COLDS:** From the onset of any nasal congestion or the appearance of runny or stuffy nose, spray 4 to 6 times a day into each nostril.

**SINUSITIS:** Acute sinusitis: see Colds. Chronic sinusitis: Spray 3 to 4 times a day into each nostril. Avoid milk, beer, sweets and junk foods.

**EXCESSIVE DRYNESS OF NASAL CAVITIES:** Spray once into each nostril on a regular basis, morning and evening.

**ALLERGIES:** Spray 3 to 6 times a day as needed.

**EAR INFECTIONS:** Medical treatment can be supplemented by spraying 3 to 4 times a day into each ear.

**SKIN moisturizing:** For tired, dry or devitalized skin, spray on face or other parts of the body. Allow to dry.

### **RECOMMENDED DOSES of ISOTONIC Seawater solution for the treatment of ECZEMA, HIVES or RASHES, PSORIASIS and other related skin diseases ---**

1 - If taken orally (by an adult) First 10 days: 10 ml a day. Following 10 days: 20 ml a day. ; After that, if the skin eruptions begin to fade, continue to take 20 ml a day. Otherwise, alternate between 20 ml a day and 30 ml a day until eruptions begin to fade. If necessary, 30 ml a day may be taken. In obstinate cases of psoriasis, it is recommended that the dose be increased to 40 ml a day. To minimize the influx of toxins it is important to carefully watch the patient's diet for signs of inappropriate choices. When the lesions have disappeared, gradually taper off the number of mls taken until complete healing has occurred. External application of ginkgo biloba cream to psoriasis blemishes will help fade them more rapidly.--- If injected (subcutaneously or intravenously or intramuscularly) First 2 weeks: 20 cc (20 ml) every second day. Following 2 weeks: 30cc (30 ml) every second day. When the eruptions have faded: 30 ml every third day, then 20 ml every second day, then 20 ml once a week. Decrease the dose gradually until healing is complete. Seawater Isotonic Solution is available in boxes of 300 ml and containers of one (1) liter. Rene Quinton's shock treatment for Psoriasis (subsequently used successfully by many physicians) is as follows:  
Subcutaneous administration in the retro-trocharterian area 6 weeks of treatment.  
First week: 30 ml every second day 3 times a week. Second week: 50 ml every second day 3 times a week. Third week: 70 ml every second day 3 times a week. The improvement is spectacular, the lesions fade away without the use of

standard medical treatment. In the light of the results obtained, the dose should be adapted to the patient's individual response as follows: Fourth week: 120 ml every second day 3 times a week. Fifth week: 180 ml every second day 3 times a week. Sixth week: 200 ml every second day 3 times a week. Where there is mild persistence of symptoms, the initial treatment may be repeated after a pause of 2 months. To ensure that adequate and appropriately correct nutrition is obtained, it is recommended that the patient consult a knowledgeable Health Professional (not necessarily nutritionist). From 1952 to 1957, the French physician Jean Montfort studied over 600 clinical cases of this complaint as part of a medical team. Results of his research revealed that improvements tend to appear after the first injection as well as the third week. Dr. Jean Montfort treated his patients exclusively with OCEAN WATER without the addition of corticosteroids or antibiotics. He emphasized the absence of iatrogenic side effects in using OCEAN WATER as well as the surprising results obtained. Many of these patients showed no signs of relapse after 20 years.

### **Depletion of the IMMUNE SYSTEM ---**

In all instances of recurring infections, no matter what type, or in cases of frequent antibiotic administration, regular intake of one of the "OCEAN WATER" Seawater Solutions can rebuild a depleted immune system. In view of the established fact that OCEAN WATER regenerates the internal terrain, without diagnosis, being non-specific, one would be tempted to ask whether this substance would not be of great value in cases of AIDS and related diseases! Historically, an uninterrupted 3 to 4 month course of treatment is recommended. In severe cases, 6 months may be necessary. To keep fit, a twice yearly course of treatment is recommended in September and October - then in March and April. Infants under one year: 10 ml daily in the baby's bottle. From 2 to 5 years of age: 20 ml a day. 5 years and up, children, adolescents and adults: 30 ml a day for the first 3 weeks, then reduce to 20 ml a day. HYPERTONIC and ISOTONIC Solution in cases of ACUTE or CHRONIC FATIGUE

*Acute fatigue:* Where the fatigue is temporary and has only just recently arisen: An intensive course of treatment of 30 to 40 ml a day for 2 to 3 weeks is recommended. If the fatigue is more deeply rooted and has reached a more debilitating phase: 30 to 40 ml a day for 3 weeks, then reduce to 20 ml a day until recovery is complete. Chronic Fatigue: 30 ml a day, 40 if desired, for 3 to 6 weeks, then reduce to 20 ml a day until recovery is complete. In all cases of chronic fatigue, it is imperative to exclude the following from one's diet: peanut butter, alcohol, all forms of sugar (even natural sugars) excepting fresh fruit (i.e. no dates, no figs, no raisins, no prunes etc...). It would be wise to consult a Health Professional who is familiar with a natural and living diet in order to ensure adequate and nourishing nutrient quality and quantity.

### **BONE and JOINT DISEASE: GROWING PAINS in Children, ARTHROSIS and OSTEOPOROSIS in Adults : ---**

"OCEAN WATER" Hypertonic Solution is a powerful remineralizer and is, therefore, particularly suitable in cases of bone and joint disorders. In such cases, however, it must be remembered that wear and tear on bones and joints have

occurred slowly over long periods and, consequently, the remineralization process will also be gradual. Adults suffering from arthrosis or osteoporosis should consider taking the Solution regularly over a period of 6 months to a year. An increase in bone density is observable using densitometry after only 6 months of treatment. Dosage: Growing pains in children: 20 ml daily - 30 to 40 ml daily in periods of crisis Arthrosis and osteoporosis: 20 to 30 ml daily according to the severity of the condition

### **ENHANCEMENT of ATHLETIC TRAINING :---**

"OCEAN WATER" Hypertonic Solution may be taken as an effective supplement to promote endurance in sports. Regular training: 20 to 30 ml a day, 2 to 3 weeks before a sports event: 30 to 50 ml a day. During the period of competition: 50 to 60 ml a day. After any major physical effort: 20 to 30 ml a day.

### **PREGNANCY, LACTATION and REPEATED SPONTANEOUS ABORTIONS : ---**

"OCEAN WATER" Hypertonic Solution is an excellent fortifying supplement and nutrient for both mother and child during pregnancy and breast-feeding. PREGNANCY: 1) With no particular complication: 20 to 30 ml a day for the first 3 months. 10 to 20 ml a day for the 4th, 5th and 6th months. 20 ml a day for the 7th and 8th months. 30 ml a day for the 9th month. 2) Serious fatigue or anemia during Pregnancy: 30 ml a day, 40 if required, throughout the pregnancy.

### **BREAST-FEEDING : ---**

For the first 10 days following birth, 30 ml a day, then 20 ml a day. 3)

### **REPEATED SPONTANEOUS ABORTIONS : ---**

"OCEAN WATER" Hypertonic Solution must be taken continuously for 6 months prior to impregnation by both partners if possible, at a rate of 30 ml a day for the first 3 months, then 20 ml a day for the following 3 months. Continue to take Seawater Solution throughout the pregnancy. In all cases of repeated spontaneous abortions, take a blood sample to ensure that the Serum Fe is normal. The daily diet should be analyzed to ensure levels and quality of optimum nutrition.

### **NOSEBLEEDS IN CHILDREN :---**

Children: 20 ml a day for 2 to 3 months. Adolescents: 30 ml a day for the first 3 weeks, then 20 ml a day for the next 5 weeks.

### **HYPOGLYCEMIA : ---**

*Treatment:* 30 ml a day for the first 3 weeks, then 20 ml a day until a satisfactory state of health is attained. It is imperative to exclude alcohol, peanut butter, all forms of sugar, even natural sugars, excepting fresh fruit (no dried fruits, no dates, no raisins, no figs, no prunes etc...) The dietary habits should be reviewed

with a health professional.

### **MONONUCLEOSIS :---**

Treatment: First 3 weeks: 30 ml a day. Following 8 weeks: 20 ml a day. This treatment should be completed by taking homeopathic remedy 'Spleen 4CH' , 6 drops - about 20 minutes before breakfast for 3 months.

### **VAGINAL INFECTIONS :---**

Treatment: First week: 10 to 30 ml a day. Second week: 10 ml once a day In cases of vaginal infections, hypertonic seawater (10 ml) can be used as a vaginal douche, using suitable traditional douche equipment, from 1 to 3 times daily, according to the severity of the condition. Retain the liquid for about 15 minutes lying down before getting up again.

### **CANCER, LEUKEMIA and MULTIPLE SCLEROSIS :---**

OCEAN WATER and the Seawater therapy itself constitute a valuable adjunctive therapy in the medical treatment of these diseases. While it is certainly not organ-specific, it does normalize cell electrolytes, pH values and mineral imbalances as well as increase overall vitality. OCEAN WATER has a rapid beneficial impact on the entire body system. Therefore, it should not be discussed as a specific cancer cure but be seriously considered for its great regenerating potential. Any therapy for degenerative diseases should always be combined with a wholesome, LIVING, RAW and saltless diet. Any cooked and processed foods would only hinder the process of healing. A competent practitioner in natural nutrition should be consulted even before starting the OCEAN WATER Seawater therapy or any other therapy. 40 to 60 ml must be taken regularly every day over a period of many months. In certain cases, the Plasma should be administered by injection for maximum effect. Injections of 30 to 60cc (30 to 60 ml) may be given every second day throughout the first two months. Advanced stages of the disease may require higher doses. Subsequent treatment, when appropriate, may be tapered off from a single injection twice a week to once a week.

### **HYDROTHERAPY of the COLON using Ocean Water**

Modern advances in Physiology and Molecular Biochemistry make it easier to comprehend the great similarity in mineral content of the inner environment and sea water with their common origin. This similarity makes it possible for any organism to select or reject what it needs in a natural way. The assimilation or elimination of marine ions is made possible through cellular receptors with a high degree of accuracy by the identifying polarity derived from biocenosis. Cold-sterilized Isotonic sea water is usually eliminated through the kidneys. This eliminated sea water tends to be twice as concentrated and twice as voluminous as artificial physiological serum. TOTAL OSMOSIS OCCURS BETWEEN THE PLASMA AND THE INNER FLUID ENVIRONMENT. The advantages of Seawater Isotonic Solution in colonic hydrotherapy: (9‰- this is 1/3 of normal salt/mineral concentration of original seawater ). Physiological irrigation and cleansing of the intestinal membranes. Anti-anaphylactic action of sea water.

Re-absorption of micro-nutrients and minerals through the portal vein. Physiological stabilization in case of insufficient potassium. Anti-inflammatory and anti-spasmodic action as required in adjustable doses. In cases of infection: optimum absorption results. Strengthens the immune system. Using Marine Plasma SLIGHTLY DILUTED (21 - i.e. 2/3 normal salt/mineral concentration of original seawater): An immediate REVITALIZING and ENERGY-BOOSTING effect is obtained. Seawater may be used exclusively for the entire Colonic Hydrotherapy session. Alternatively, the fluid may be used only in the final stages of the irrigation. The almost 100 year clinical history of the OCEAN WATER ensures the high quality and safety of the product.

## **"Ocean Water" and MESOTHERAPY**

Mesotherapy is defined as: "Method of treatment with sub-cutaneous injections from several small needles".

### **MESOTHERAPY USING OCEAN WATER :---**

Dr. Pistor, who created the method of mesotherapy, defined it as: A special means for the intradermal introduction of a water soluble drug into the system. This definition reinforces the theory behind the technique for the administration of OCEAN WATER. The technique advocated the use of cold-sterilized Isotonic sea water for sub-cutaneous administration.

Mesotherapy introduces small quantities of active ingredients usually transported by an artificial physiological serum.

The superiority of OCEAN WATER over synthetic serum has been clearly demonstrated by abundant clinical bibliography. Such a bibliography indicates all the advantages that may be acquired by a practicing "Mesotherapist" in using cold-sterilized Isotonic sea water.

The clinical practice of rehydration has been in existence for almost a hundred years and the best way to carry it out is by "Hypodermoclysis". Nowadays, this application is coming back into use after having been unjustifiably assigned to medical oblivion.

Specialized medical journals reflect this trend accurately.(1)

The aim of Mesotherapy is "to bring the remedy as close as possible to the site of the disease." This method must, therefore, take into account the advantages of using cold-sterilized Isotonic sea water. These advantages include the following:

Use as an active ingredient use as a vehicle for other active ingredients. The topical action of OCEAN WATER has already been demonstrated particularly in dermatology: in the treatment of psoriasis, eczema, rashes and burns. In cases of psoriasis, the clearing up of lesions is significant. It takes only a few days for a distinct improvement in pruritis to be observed. The method involves administering small 1ml doses intradermally around the lesions. Cleansing the lesions with Seawater Hypertonic Solution is recommended as the next step. As



a vehicle for the transportation of active ingredients, the Plasma replaces synthetic physiological serums. Dr. Bernard Guez (2) perfected the technique of "tumescent percutaneous hydrotomy" which was used in 80 000 instances of medical treatment. The technique is the best example of the therapeutic role of water using cold-sterilized Isotonic sea water for its carrier effect. Where Seawater Isotonic Solution is concerned, this method is also directed towards: providing a natural topical liquid similar to interstitial fluid. providing a vehicle for other active ingredients. In articular Mesotherapy, the principal function of Seawater Isotonic Solution is to provide a remedy for "dysirrigation", in particular, processes of bone deterioration such as arthrosis and osteoporosis, or to improve anoxia of the tissues.(2) The topical application of the Solution to the affected areas makes it possible to provide healing elements which will regularize the condition of the lesion.

## **DENTISTRY and DENTAL SURGERY using HYPERTONIC and ISOTONIC**

Saline solutions have been widely used in Periodontal Medicine for many years. Periodontal therapeutic techniques should derive beneficial results from the application of Hypertonic or Isotonic sea water. Such application will eliminate iatrogenically-induced discomfort. Seawater ISOTONIC SOLUTION Root canal irrigation. *Filling dried out tooth sockets*: Prevention of inflamed tooth sockets, e.g. to be used for making alveolar pastes. "Neuraltherapy" (Innovative German Technique) To be used as an adjunct to adrenaline-free anesthesia. *Mouthwashes*: (Allow the solution to remain under the tongue for as long as possible.) Depending on which periodontal disorder is involved, the Hypertonic Solution may successfully be substituted for the Isotonic Solution. Use as a rinsing solution for bone restructuring (or bone grinding.) Disinfection of tooth stumps: Either using the requisite mother tincture or the essential oil. Enhancement of periodontal treatment by means of injecting the solution into the gums.

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## **VETERINARY CLINICS**

**LOSS OF HYDRATION: Vomiting, diarrhea. If non life-threatening: subcutaneously. If life-threatening: intravenously. OCEAN WATER with Isotonic glucose serum (in equal parts at a rate of 5ml per kg of body weight per day.)**

**PIROPLASMOSIS: Specific treatment, hepato-renal symptomatic medication. OCEAN WATER, 30 to 60 ml per day by injection.**

**DISTEMPER: Habitual medical regimen. Usual treatment. OCEAN WATER, 10 to 40 ml per day by injection.**

**LEPTOSPIROSIS: Usual treatment. OCEAN WATER 5 ml per kg of body weight per day subcutaneously or intramuscularly.**

**ICTERUS: OCEAN WATER, 20 to 50 ml twice daily for 2 to 5 days intravenously or subcutaneously.**

**HEPATO-RENAL SYNDROME: OCEAN WATER, 30 to 100 ml twice daily for 5 days, then once daily for the next 5 days. By injection or subcutaneously according to the severity of the symptoms.**

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### **STANDARD PROCEDURE TO CARRY OUT INJECTIONS OF ISOTONIC OCEAN WATER**

**Frequency:** At the start of a series of treatments, injections (subcutaneous, intra-muscular, or intra-venous) are usually given every second day - 2 or 3 times a week. In case of terminal stage patients and cholera, they are given twice a day up to ten days in a row. The injections are then reduced to 2-3 times weekly. As the situation improves, injections are given less frequently, however they should not be abandoned too soon. **Dosage:** For children over five, adolescents and adults, the injections usually start at 25-30cc and are gradually increased to 50, 75, 100 or even 200cc if the response is not entirely satisfactory. In case of eczema, the dosages should always remain low. High dosages will cause strong adverse reactions. Cholera and patients in terminal stage require a high starting dosage, typically 2 x 250cc per day. For children under five, the dosages start at 20cc. When health state improves, the injections may be given only once or twice a week. Even if the illness symptoms have disappeared, the treatment should not be discontinued immediately. According to Doctors Jarricot, Rene Quinton and others, the effect of an Isotonic Plasma injection lasts about 12 hours. In the following first, second or third hour, the patient may get chills, which may be strong reactions or completely absent or anything in between. The body temperature occasionally rises from 1 to 2 degrees Celsius during the 4-5 hours following the injection but it then drops below the original temperature. Thirst is also to be expected and therefore appreciable quantities of water (1-3 liters or quarts) could be consumed by the patient. Lack of appetite, slight headache, or nausea are among the possible after-effects of the injection. However, these reactions should not be of any concern, since the improvements which follows these reactions will be proportional to the time of progressive recovery. Twenty-four hours after the injection, the patient may feel tired but an improvement clearly shows up in the next 36 to 48 hours. This improvement will persist and intensify on the third and fourth day. In certain cases, it may even be spectacular. On the fifth day, the patient might feel a bit down again. That is when the second injection is given. The cycle will repeated again but the adverse reactions will gradually diminish while the improvements rapidly increase. In many cases, important recoveries were observed after the third or fourth injection. Wounds and ulcers start to heal. Eczema stops to ooze, dead skin starts to peel off etc. Although the symptoms of illness have completely disappeared, the injections should not be interrupted at once. They should be continued for one or two more weeks and given again, from time to time, depending on the patient's state.

### **SOME CAUSES OF FAILURE TO SHOW RESULTS**

**An analysis of the failures of Rene Quinton's therapeutic methods shows**

**that: In a large majority of these cases, the therapist did not employ the necessary or commended dosages of the injections. A double (second) injection during a twenty-four hour interval was not attempted. An inappropriate diet was used (particularly in the case of infants and the elderly) The treatment injections were interrupted too early.**

## **ORIGINAL ISOTONIC SEAWATER INJECTION PROTOCOL**

**The above is today's treatment protocol. What follows is Rene Quinton's original Protocol... The marine treatment which we have practiced in the Parisian hospital services (St. Louis, Beaujon, Hotel-Dieu, Tenon, Maison Dubois, Pitie and the Asylum of Mouleau) consisted of injecting our seawater (now available as OCEAN WATER) which we reduced to organic isotonic consistency, per dosage for this mixture, to one hundredth to one hundredth and a half of the body weight. The first injections I practiced (July - August 1897) were intra-venous injections. In my absence, in a desperate case of cirrhosis, death being anticipated for that same day, a temporary intern obtained complete success after a sub-cutaneous injection of my preparation which he administered without any hope. The patient left the hospital on his own two weeks later. I don't provide my formula as being final or the best one could use. I thought one had to inject the isotonic way in order to avoid unknown or troublesome factors, however I learned from physicians of the Marine Service who have had excellent results from simply injecting my preparation in its natural form (now available under the name of Seawater Hypertonic Plasma - a revitalizing dietary supplement). This practice would have the advantage of reducing by two thirds the volume to inject - a comparative experience would have to be tried. I limited the dosage to one hundredth or one hundredth and a half of the injection volume because it seemed to me that this dosage (same concentration as human plasma) was sufficient to produce the immediate effects of a double or triple dose, however, it is not established that a stronger dose by itself would have any advantages, which I have not had the occasion to observe. The quality of the liquid to be injected provided more precise observations which could be summarized with finality. It no use to contemplate the composition of an artificial seawater. It must be treated according to my protocol and reduced to approximate organic isotonicity (available now in the form of Seawater Isotonic Plasma). Minimal injection dose: 700g, for an adult with an average weight of 65 kg. Frequency of injections: When the injections must be repeated: every five days, then every six, seven, eight days etc., according to the readily discernible duration of its effects (see details further down). When several injections are to be done on the same patient, it is best to inject at the same place. The local pain of the first injection will only be slightly felt during subsequent injections. An injections is followed by a reaction that lasts about twelve hours. At a certain variable moment (one hour, two hours or three hours after and sometimes even while performing the injection itself if it is done slowly), the patient will feel chilly, sometime violently so, with chattering teeth and more or less intense thirst. Body temperature will rise without interruption during four or five hours (about 1.5 to 2.0 degrees C) and then will come down as it came up to finally stabilize below the initial temperature. The**

thirsty patient will drink 1 to 3 liters of water. He typically has absolutely no appetite, may have some nausea or slight headaches. The more this reaction is felt the more benefit will be derived from the injection. In any case, it is not to be feared regardless of the weakness of the patient or his initial temperature. In the case of febrility, when the temperature before the injection is 39.5 degrees C, it can rise to 41.5 C and even remain for six consecutive hours at 41 degrees C without the slightest inconvenience. Twenty-four hours after the injection, one finds the patient generally down, due not only because of the crisis which just happened but also due to the resulting partial insomnia. The improvement is however evident by certain symptoms that begin to clearly show, in favorable cases, around the 36th hour or the latest on the second day. The improvements are constant and are progressive during the 3rd and 4th days. One can witness sometimes a veritable resurrection of the patient. Striking by its suddenness: all pain or uneasiness that may have been present before the injection have left; strength returns; appetite - non-existent before the treatment - becomes exaggerated with sudden hunger and the patient, bedridden for weeks, arises and walks around for several hours. On the fifth day, in the morning - complete change. The scene is dominated by the same general weakness as prevailed before the treatment, except in acute cases where one injection suffices to produce a definite improvement. A second injection is therefore administered. The described cycle of effects occur once again but with more pronounced improvements. The injections are spaced out in this natural manner for five, six, seven, eight days - according to the benefits that are obtained.

The difficulties which I had to face, when the Arcachon station could no longer send me the seawater that was treated according to my protocol, have successively interrupted many of my [clinical] trials. As a collective group, my preparations nevertheless seem to have proven to be a powerful adjunctive therapy. In three particularly grave acute cases, infectious gastro-enteritis of indeterminate nature, oxalic acid poisoning, advanced liver cirrhosis, success was immediate and complete. In the case of syphilis, one early malignant syphillitis and one advanced case, the injection was followed, right from the second day, by very rapid healing of the lesions which covered the patient's body. In one case, healing was mostly complete after seven days. We obtained the same results in cutaneous tuberculosis.

The therapeutic action of seawater is therefore evident. Future trials should measure and evaluate it further." Rene Quinton

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## Quebec Therapists using Ocean Water

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**<http://www.youtube.com/watch?v=H26e4L8ipAk>**

**Therapeutic Marine Plasma From The Origins Of Life**

**<http://www.youtube.com/watch?v=-peKzVhG3Ak>**

**René Quinton y su descubrimiento**

<http://www.youtube.com/watch?v=7Guc5gtjm9A>

## **Manufacturing Quinton Marine Plasma**

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<http://www.originalquinton.com/>

### **Original Quinton – North America**

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#### **How to Buy Quinton**

Original Quinton is only sold to certified health professionals.

If you are a health professional, click here to register to be able to purchase Quinton products.

If you want to try Quinton™ Marine plasma, you have several options:

We recommend you take Quinton daily for about three to four weeks to give your body a chance to adjust and begin to see results. You will have to obtain product through a health professional.

### **RICH CLINICAL HISTORY**

Quinton Marine Plasma is a natural marine solution that has 100 years of clinical evidence supporting its therapeutic and health regenerating properties. Since 1897 Quinton Marine Plasma has been harvested from a unique vortex plankton bloom in the Atlantic Ocean. Quinton marine plasma has been applied by thousands of doctors in clinical settings for over 100 years though out Europe. One publication summarized a 2,000 person, 20-year follow-up study that evaluated Quinton™ for both safety and efficacy.

#### **The History: René Quinton (1866-1925)**

René Quinton was a recognized doctor, biologist, biochemist, and physiologist.

René Quinton was committed to answering the profound question, “Where did all life begin?” It was this question that set him out on an expansive journey of

discovery that led him to observe the life cycle that originated from deep within the center of seasonal vortex plankton blooms. There he observed whales and other large marine life converging at the bloom; he later confirmed that the phytoplankton blooms were consumed by hundreds of different species of zooplankton (commonly referred to as “pre-krill”), which, in turn, fed the krill that these enormous marine creatures consumed and on which they thrived.

René Quinton captured samples of this microcosmic ocean environment and began to study its similarities to blood plasma.

His study of the rich bio-active “live” mineral content unique to this plankton-fed ocean water led René Quinton to refer to it as “ocean plasma” and later “Quinton Ocean plasma” in his definitive book, *L'eau de mer milieu organique* (Seawater, Organic plasma).

By the results achieved with his ocean plasma, Quinton was one of the financiers behind the Wright Brothers' race to make air flight a reality. Quinton wanted to be able to bring ocean plasma to Africa. His dream was cut short when he was drafted into the French army during WWI. He later died in 1925 from war wounds.

When René Quinton passed away, he was a French national hero. It is estimated that as many as 1 million people from all around the globe attended his funeral. In fact, in October, 2004, the French Ministry of Science and Health celebrated 100 years of Quinton™ science by holding a world symposium on the historical and contemporary oral use of Quinton ocean plasma.

”The germ is nothing, terrain is everything.” – Claude Bernard (1817-1920)

René Quinton began organizing his theory on the Origin of Life which he summarized in his treatise, “*L'Origin de Mere*” published in 1907.  
Evolutionary Understanding of Original Quinton™ Marine Plasma's Mineral Component

100 years ago, René Quinton substantiated 15 elements of the periodic table were present in marine plasma; he suspected the existence of five more, and concluded that the scientific community should find them all. Gradually, as the forms of analysis progressed, more and more elements were confirmed.

Henry Doffin, Professor of Biology at the University of Poitiers, France in the 1950's, was the first to state that deep seawater contained all of the known trace minerals. Doffin famously defined seawater as a “...formidable fluid mass, enriched by all the cells extracted from the rocks of the deep or delivered by the rivers; each liter is ‘panatonic’; that is, it contains all of the existing elements.” With this definition, he opened the debate that has brought numerous authors to give mathematical formula of such concentrations.

Gregory and Overberger (USA) also stated that Mendeleev's period classification is found complete in the water of the sea. Wanoff proposed 44 elements, Jean Dermey 61 and Laboratories Quinton Laboratories Quinton

International, S.L. gave us 62. These are according to complex calculations of the concentration started from the ml, liter, or km, adapting to each element and the analysis methods of the time. This explains the multiple versions that are given on the composition of seawater in terms of its concentration.

At present we should not refer exclusively to the “weighted chemistry” aspect, but also to this “infinitesimal chemistry” that is difficult to interpret and especially to measure out.

It is evident that we should refer to molar concepts in order to give the most exact definition possible.

The University of Miami (fig. 1) provides us with an indisputable scientific answer giving a molar approximation by “neutron diffraction spectrometry.” At the moment this is the most exact form to compare the qualitative composition of the TOTAL ion-minerals of seawater and its concentration.

This gives us a TOTAL of 83 BIOAVAILABLE elements in NATURAL seawater at biological temperature. Each liter of seawater corresponds on average to 300 milligrams of prebiotic carbon derivatives, such as amino acids, sugars, vitamins, etc. The ions (present in liquid form, missing in solid form) are natural chemical and electronic elements that are transformed by the phytoplankton and zoo-plankton in natural chains.

They act by synergistic effect in a natural symbiosis with our organism whose liquid mineral formula is identical to seawater.

Cold treatment maintains this composition and formula.

Find out how Original Quinton Plasma follows strict guidelines to maintain perfect composition and formula.

Disclaimer: The clinical history of Quinton™ marine plasma is provided for educational purposes only. Original Quinton™ makes no implied claims regarding the health benefits of marine plasma or its use. Quinton™ is not meant to diagnose, treat, cure, or prevent any disease or medical condition.

If you are on a low sodium diet, Original Quinton™ does not recommend the use of Quinton™ Hypertonic (Quinton™ Hypertonic contains the same amount of sodium as that found in an apple).

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