

The AIDS Ribbon

Out of red make green ?

Artemisia and moringa - and/or ARV drugs - the debate



The following discussion has been put together from several conversations in Musoma, Tanzania in June 2006. Those involved were Maïke Ettlîng, German leader of the health division of the Diocese of Mara in the Africa Inland Church of Tanzania, Dr Peter Feleshi, doctor and state registered AIDS advisor, Philip Mateja, Evangelist and link person for *anamed* Tanzania, several HIV positive people (named person A, B, C etc – we have their full names) and Dr Hans-Martin Hirt, pharmacist from Winnenden, Germany.



Martin: Peter, no other disease and no sermon has led to so much debate, nor to so many changes in lifestyle, as AIDS – would it not actually be dangerous to find a treatment for AIDS? Thousands of AIDS advisors earn their living from this disease, not to mention the pharmaceutical industry....

Peter: And don't forget that traditional healers and fetish healers also earn a lot of money from AIDS.

Person A: I have taken the herbal medicine of the traditional healer John for the last 18 months, but it has done nothing for me.

Person B: I must contradict that. My father was a traditional healer and he gave me a lot of knowledge. In 2002 I was chronically ill, and had abscesses over my entire body. The clinic tested me and said I was HIV positive. I followed the recipe of my father for venereal disease, mixed the bark of 10 different trees, regularly drank tea made from this bark and now, three years later I am strong again, I no longer have any abscesses and, yes, I never drank artemisia tea or took moringa, and even so I am healthy (laughs).

Martin: I don't want to be nosy, but would you be willing to give this recipe to us?

Person B: No way, not even for all the money in the world. That is a secret, that God has given me through my father. I can only pass it on to my own children.

Martin: Our co-worker Innocent Balagizi has told us about AIDS patients in Bukavu / Congo who were completely at rock bottom. With secret recipes of the healers the patients put on weight again, developed an appetite, lost their feelings of sickness, and female patients began to menstruate again. But, still, these recipes remain secret. For this reason, we are going public with our research into artemisia.

Patient E: How did *anamed* actually first get onto this plant?

Martin: In 1996 we heard that the ingredient artemisinin was patented for the treatment of malaria. So we tested the tea, and quickly discovered that the tea is just as effective as the tablets. Later we heard that artemisia is also patented for the treatment of cancer. We tested the tea, and, sure enough, we found that at least the lives of some patients were lengthened. In 1998 Mr Xuande Luo patented artemisinin for the treatment of AIDS. He claimed that artemisinin is an antiretroviral drug with very low toxicity. So the obvious thing to do was to test the tea again, this time with AIDS patients. You have done that.

Maïke: Yes, with about 100 patients, with great success.

Person C: We stick together in our Kaza Roho group here.

Martin: What is that?

Peter: Kaza Roho means, "Be courageous and strong" and is a self-help group of HIV positive people, about 35 in Musoma and about 15 in Bunda. They meet twice a week, or even more.

Martin: Eleven of you have come here today to make a report in the seminar. Could one of you tell us about yourself?

Person F: I am 20 years old. I married when I was 16. After my second child died, my life went downhill. Tuberculosis, malaria, abdominal pains.... I did not want to eat anything. My mother carried

me to the hospital, because I could not walk any more. I was given medicine for my tuberculosis, but nothing for my AIDS disease, because I was too weak for it. Of course, my husband (a driver) left me and found a new wife. Then someone told me about the Kaza Roho group, and I joined it about a year ago. Now I can walk again without a stick, and feel strong again. I use artemisia tea, moringa leaf powder, artemisia ointment and so on. I do not need any ARVs (Antiretroviral Drugs, usually tablets), I know I can get them for free, but I don't need them.

Martin: You look a big mixture of people. What have you got in common?

Person C: We are all HIV positive. When we joined this group, we were all very seriously ill, but today you can tell no difference, or hardly any difference, between us and the rest of the population. Some of us are working again at home, some of us have taken a job. What else holds us together? We are no longer angry, rather we live in hope and in thankfulness to our Creator, who has given us such wonderful plants and possibilities. What else? Yes, we have moved from being AIDS patients, to being AIDS tutors. We hold seminars for both ill people and healthy people!

Person A: And sometimes we actually earn something through our teaching (laughs)

Martin: What do you recommend in your teaching?

Person D: We say, go and have an HIV test, and if you are HIV positive, start immediately the therapy with artemisia tea and moringa. The sooner you start, the greater the chance that you will not need any ARV drugs.

Martin: So what is so bad about ARV drugs?

Person E: In the year 2002 I had diarrhoea and vomiting, fever and AIDS. I was given ARV drugs and antibiotics, and, as a result, became very weak, I lost a lot of weight – I was a mere 37 Kilo. Now in 2006 as well as ARV drugs I take artemisia tea and moringa. I have no fever any more, my vomiting has completely stopped and I weigh 56 kilograms!

Martin: What is your programme in the group?

Person C: We give each other courage, we pray and eat together, we give each other tips about how to live better, and of course we make medicines together, artemisia tea, moringa leaf powder, rheumatism ointment with chillies, ointment for haemorrhoids and so on.

Martin: Are you able to sell your medicines also to people who are HIV negative?

Person C: Why not? It gives us a bit of income. More important though, we can make our own medicines and that helps us to remain cheerful. When desperately ill patients see us being healthy and happy, that gives them hope – most of us were on our knees when we first came here.

Person D: Today I do the jobs around the house for my family, but before I was a burden for them.

Martin: The local authorities must be congratulating you. Maïke and Peter, you should be awarded the Nobel Prize!

Maïke: The reality is quite different. The local hospital tries to discredit us. They tell people that to say that one's life can be made longer with artemisia and moringa is a lie.

Philip: The clinics are much too proud of their ARV tablets to be able to work together with us. Still, a doctor in the hospital did recently send me a patient, but at night of course (laughs).

Martin: In our named projects deep inside the Congo Republic 100% of the AIDS patients drink artemisia tea, because ARV drugs are just not available. But with you it is different. The patients are free to decide, because in your group both the "chemical" and the "natural" treatments are free of charge.

Maïke: At the moment we have 35 AIDS members in the group. Each can decide the treatment for him or herself. This is how they have decided

- 7 people: artemisia and moringa



Artemisia annua

- 2 people: artemisia, moringa and aloe
- 2 people: artemisia, moringa and Septrim (an antibiotic)
- 15 people: artemisia, moringa and ARV
- 3 people: artemisia, moringa, aloe and ARV
- 5 people: artemisia, moringa, pawpaw and ARV

A further person previously took only ARV, but has today started with artemisia, after he had overcome the doubt in his mind that the hospital had created. In other words, a third of the patients are doing very well with the anamed treatments alone, whereas two thirds of the patients prefer to take ARV drugs as well.

Martin: Last year many fewer patients took ARV drugs.

Peter: That is true. In the meantime, ARV drugs, at least here in Tanzania, have been made free of charge, and people do not want to miss out on this opportunity.

Patient D: But there are regions where ARV drugs are not available. And in other African countries there are no ARV drugs at all, or only counterfeit drugs, or if they are available they cost a lot of money.

Patient C: But we get ARV drugs only when our CD4 count is less than 200. If a patient comes to the clinic and has a CD4 cell count of 201, then it is bad luck for him. And that is the advantage of artemisia. We can always take artemisia, whatever our CD4 cell count.

Patient E: For several years I did really well, only with artemisia and moringa. But recently my health deteriorated, and since then I take ARV drugs as well.

Martin: One organisation in Germany criticises anamed. They say that if we give “unscientific” artemisia as well as the “scientific” ARV drugs, the treatment will take longer to be effective, and so we are risking the life of the patients.

Peter: Rubbish. Many patients are so bad, so undernourished, so emaciated, that if one were to give them only ARV drugs, they would quickly die of the side effects. For this reason we nourish them with moringa, strengthen their immune system with artemisia, and then we decide together with the patient, whether or not in fact they require ARV drugs.

Martin: It is very important that you record all these treatments accurately, whether successful or unsuccessful.

Peter: Honestly our finances are so tight that there is no way that we could employ a statistician. But with an extra 50 to 100 Euro per month we could do it.

Martin: I would like to look for a willing donor. We have the problem that we are always accused by “modern medicine” of having done no proper clinical studies – but of course there is no-one who is prepared to finance such studies. Industry gains absolutely no profit from a plant that we can grow in our own gardens, and even the government has no income from import or value added taxes! Therefore we have to set our sights lower, on “observational studies”, but even so, thanks to the internet, we can share our results worldwide.

Peter, could you briefly describe the anamed medicines that you use?

Peter:

- Artemisia tea, during the acute phase, one litre of boiling water on 5g dried leaves per day, then 250 ml water on 1.5g leaves during the chronic phase.
- Aloe: 1 to 3 times daily a teaspoonful of aloe gel
- Pawpaw: Once daily, 1 to 3 teaspoonful of crushed pawpaw seeds (they may be fresh or dried)
- Moringa: 3 times daily 1 teaspoonful of moringa leaf powder mixed into the food.

All also take additional *anamed* treatments for their own particular symptoms, as described in the *anamed* AIDS book.



Maïke: Last week an AIDS patient came to me with terrible wounds and bronchitis. I recommended that she use “pawpaw-sugar” on the wound, and eucalyptus tea for her bronchitis. Today I met her again, the wound was almost healed, and the bronchitis had almost disappeared – even I was very impressed!

Martin: We always pass your experiences on to others. Now we have received enthusiastic responses from Ethiopia, Malawi, Congo and other places too. An anamed group in South Africa has established an Artemisia AIDS clinic with 20 beds, and they want to increase the size to have one thousand beds! The garden of the clinic consists of 3 hectares of *Artemisia annua*!

Philip: We could also treat that number of malaria and AIDS patients, but how can we do that, when we ourselves struggle, with no salary, to feed ourselves and our families.

Peter: We must approach Bill Gates.

Martin: We have already done that. But Bill Gates does not distribute his money privately, but via large organisations. The “Global Fund” cannot support us, because we do not work as a government organisation, and the “Medicines for Malaria Venture” will not support us because we do not work together with industry. As neither the European industry nor African governments are really interested in the poorest of the poor, nor even, honestly, to see the end of the AIDS pandemic, we have an uphill struggle. In other words, by working through these organisations, Bill Gates is limiting the chances of his own success.

Philip: If it were to support work at the grass-roots, that organisation could save a lot of money.

Martin: I do not understand it either. Thousands of organisations are raising money to buy AIDS medicines, but seldom examine our results, for example that a third of the patients do not want any ARVs, even when they are free of charge, as we have already said. In other words, instead of spending 6 billion dollars each year, if they took the discussion we are now having seriously, they could save 2 billion dollars per year, and then this could be used to establish gardens of medicinal plants and in preventive measures. .But is anybody interested in such an approach – we will see....

Maïke: We certainly have no secrets. Any doctor may visit us and see exactly what we do, and anyone may take part in our anamed seminars in Musoma.

A television team from Germany has just been here, followed by a group of doctors from the USA. Groups that would like not only to see what we do but also to support us would be very welcome! Contact 00255-784-637611, maïke@juasun.net

Peter: But we are also prepared to treat patients from Europe or the USA. They could live here at their own expense in a hotel in Musoma, and receive treatment from us for a fraction of what they would have to pay at home. Contact 00255-784-454778 or feleshipeter@yahoo.com

Philip: And I can offer to run short seminars in Tanzania: Contact 00255-787-996507 or 00255-784-583137, phillysma2001@yahoo.com

Martin: I will gladly pass on that information to others. Many thanks indeed to you all for your willingness to share your suffering and your joys with us.



Photo: Eleven HIV positive AIDS tutors, together with H. M: Hirt and his anamed co-worker Godfrey (front row, right hand side)

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