

A New Pain Relief System

Ida's story of help from Farabloc

They said Ida had six weeks to live so they sent her home to die. She was 77 and five years earlier had had a radical mastectomy. The wounds never healed and bled when bathed. She suffered phantom limb pain in her non-existent breast.

For 18 months Ida fought the cancer which went on to attack her pelvic bones, her liver, stomach and lungs. Now, after unsuccessful cobalt treatment on her right collar bone, she was sent home once more.

Prognosis? Unbearable pain. Treatment? None. Medication? A morphine based prescription — three teaspoons every six hours. To add insult to all these injuries, her arthritic hands were now so swollen and painful that she could no longer crochet and, at times, had to be spoon fed.

Ida's niece, Joan, had nursed Ida for eighteen months. Ever watchful over Ida's physical and emotional needs, even Joan was running out of ideas. One day she learned of a textile called Farabloc which offered drug free pain relief and decided to try it. She fashioned a high collared jacket from the fabric and used the offcuts as handwraps.

Joan was astonished at the results. Within five days Ida could crochet and feed herself. The pain was under control and she stopped taking the morphine. After two weeks, a fragile skin covered the chest wounds which no longer bled. Strangely, the "burn" area of the neck and shoulder which had been exposed to cobalt, remained charred only where not covered by the collar of the Farabloc jacket.

What was this new textile; this drug free pain relief fabric; this Farabloc which had so changed the quality of Ida's life?

In the early seventies in Germany, a young student, who had grown up in a household full of pain, had intuitively applied his knowledge of electricity and the Faraday cage effect to the central nervous system



to produce an efficient method to control phantom limb pain.

Frieder Kempe's father had suffered war wounds resulting in amputation and the burden of Phantom Limb Pain. Frieder related the severed nerve endings in an amputee's stump to an electrical cable which has been cut. He reasoned that electrical signals travel from the brain to the severed nerve ends and beyond. Incoming signals are picked up from the electricity in the air and create a false circuit which tells the brain that the limb and the pain, are still there.

Frieder further reasoned that if a barrier could be placed between the outgoing and incoming signals, the pain would be eliminated. It was a difficult, lengthy and expensive series of experiments which led to Farabloc, a fabric of fibres spun with stainless steel and nylon and woven into a complex geometric pattern. The fabric, in theory, creates an electromagnetic field between the severed nerve ends and the exterior electrical disturbances.

"The theory is not important," says Frieder today. "It only matters that it led to an answer. My father was the first amputee to use Farabloc and after twenty-eight years of suffering he was overjoyed to be pain

free. Farabloc worked. Here was pain relief without drugs, without machinery or batteries or wires. It was non-invasive, perfectly safe and without side effects. For us it was a miracle."

When Frieder moved to Canada he brought Farabloc with him and began experimenting on a wider scale, with the assistance of Frank Watts. What became immediately apparent was that Farabloc had much wider applications than the relief of Phantom Limb Pain. During a survey of amputees, it was found that Farabloc was also relieving arthritic pain and reducing swelling. This news prompted a survey of arthritics and it was a 41 year old female, using Farabloc for arthritic pain relief in the hip, who first suggested that Farabloc also eased the discomfort of menstrual pain.

Work with the War Amputees in Europe and Canada led to further surveys in West Germany and Britain. In Germany, the agency charged with providing services to the handicapped (VDK Landes Verband) now supplies Farabloc ordered by amputees. Dr. G. L. Bach, a noted German rheumatologist has recorded positive results in a preliminary assessment. There is also reason to believe that Farabloc could be of help to burn victims and its definite effect on musculo-skeletal pain makes Farabloc a natural in the field of sports medicine.

A final point on the quality of life. Yes, Ida eventually died from her illness. Farabloc in no way could claim to have delayed the inevitable or changed the course of her illnesses. What Farabloc did do was to make Ida's last six months on this earth worthwhile. Farabloc worked superbly for this lady who deserved the best. □

For more information on Farabloc, write to 2002 - 1055 W. Georgia St., Vancouver, B.C. V6E 3P3.

We wish to express our gratitude for the opportunity to make use of the Farabloc.

Ida Cameron came to live with us when she was 77 years old. She had had cancer in one form or another for many years. She had a radical mastectomy 5 years prior to coming here and had developed skin cancer on the wound area. This was spreading and extremely itchy and uncomfortable. Ida frequently spoke of pain and itch in the nonexistent breast. The center area of the wound never healed and constantly ran lymph and bled while being cleaned.

Ida also had bone cancer in her left pelvic bone and hip area which spread after cobalt treatment to the right hip area. (The reason she came to live with us was that she could no longer negotiate the stairs at her son's house.)

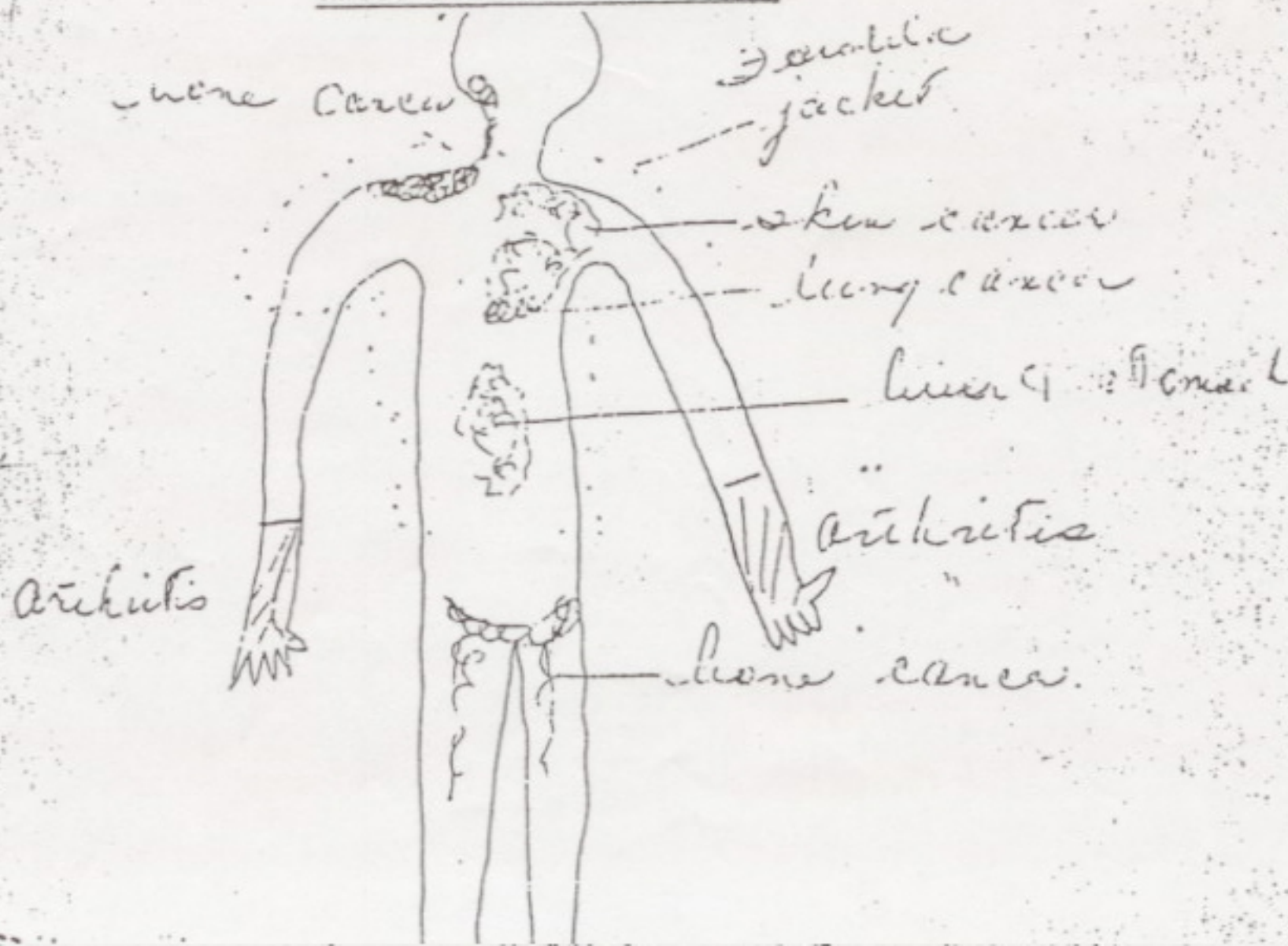
After a year here, the cancer spread to her right shoulder and collar bone and, later, up her neck and into the right side of her brain.

She also had cancer in her liver, left lung and stomach.

Besides the cancer, she had arthritis in both hands which caused great pain and the swelling limited use of her hands severely, at times to the extent that she had to be fed.

We were not apprised of the fact that Ida's specialist (Dr. Burkoueske) had said that Ida probably had 6 weeks maximum to live. She had in fact 2 years here and despite the brain cancer, remained mentally alert and emotionally positive until her death.

Areas of Most Severe Pain



We mentioned Ida's acute distress to you in the second year of Ida's stay here and you gave us a piece of farabloc to try. We made Ida a jacket of it and used the scraps for wraps for hands and wrists. The first evidence we had of the efficiency of the material was a reduction of pain to the point where Ida was able to eat without distress. The skin cancer began to develop skin which, though very friable, did stop the weeping and it no longer bled when being cleaned.

Ida's hands were so flexible and pain-free after 5 days that she could take up crocheting again and made several tablecloths of #50 thread (very fine). She also made baby sweaters and did petit point.

The bone cancer pain abated to such an extent that she was able to use her arm, for the first time in several years, in a normal manner. Ida had cobalt treatments on the shoulder and neck area and the most surprising thing was observed. The "burn" area which develops on treated areas with cobalt did not occur in the section under the farabloc. The line of demarcation between the area covered by Farabloc which did not char and the area directly above which did was very sharp.

We do not in any way try to suggest that Farabloc cures cancer. We are saying that it raised the quality of Ida's last years considerably. The release from pain allowed her to keep physically active to such a degree that she was mentally alert and rational long beyond the time that could be expected.

Proof? In May of 1983, Ida was given a prescription for morphine to be taken every 6 hours because the doctors felt that her pain would be unbearable. Though the dosage was 3 teaspoons, she only took one teaspoon the first day. She did not like the way it affected her mind so decided not to take anymore. We drove her to Alberta in late June and, again she took one teaspoon in case travelling caused pain. In October, after a stroke, she was given morphine to sedate her during transfer to hospital and moving around hospital. None of these doses of morphine were for pain. All were for prevention of pain in special circumstances.

When the ear and right brain area became painful, Ida bunched the material up between her shoulder and ear and the pain lessened to the point where it was only a minor irritation.

During the time that Ida was using the Farabloc, she also had your negative ion generator in her room. Prior to its being there her eyes were stuck shut each morning and she frequently had to get up during the night in order to breath easily. Both these problems cleared up immediately. After a few weeks, there was a reduction in dizziness and heart palpitations at night.