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A Case of Lupus Nephritis that Healed Completely after Repeated Intradermal Injections with a Non-Specific Antigen Preparation

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Introduction

It is well established that the etiology of allergic diseases is that combinations of mast cells and allergen-specific antibodies cause allergic symptoms when the patients meet allergens. Similarly, the etiology of autoimmune diseases is that combinations of cytolytic T lymphocytes and organ-specific antibodies cause injury of the organ. A most plain idea would be that break down of the above-mentioned combinations must bring about disappearance of causes of the diseases. It seems to me that few, if any, contemporary Immunologists have such concepts. To work out the above-mentioned concept, it is necessary to have the patients make non-specific antibodies for themselves. In order for the patients to do so, they need to receive intradermal injections with non-specific antigen preparations. Consequently, non-specific antibodies accumulate in the patients' bodies, which may replace specific antibodies from respective cells bringing about eliminations of causes of the diseases. Needless to mention, where there is no cause, there is no disease. The conceptual basis of antibodies' mutual replacements is existence of equilibrium state among antibody molecules in the vicinity of receptors, which theory was first proposed by Porter in 1959 [1].

Case 1

A 34-year-old woman(H.O.) visited the author's clinic on March 30, 2015. She said that an edema on her both legs and feet had begun in May 2012. A Nephrologist in The Tokyo Women's Medical School Hospital diagnosed her as lupus nephritis with Fe-deficient anaemia and infertility. She was admitted in the hospital and received a semi-pulse therapy of steroid by means of intra-venous drip-infusion along with oral administrations of daily 3mg of Tachlorimus and daily 15mg of Prednisolon, etc. I injected her intradermally with 0.1ml of 10 to the 30-fold with saline diluted Neurotropin; a product of Nippon Pharmaceutical Company(Osaka) consisting of an extract of rabbit skin inflamed by inoculation of Vaccinia virus, at 2~21day intervals at her navel-edge 87 times before July 10, 2017. On July 21, 2017, I changed the extent of dilution of Neurotropin to 10 to the 41-fold for the following reason: As accumulation of non-specific antibody proceeds, the patient's synthetic capacity of non-specific antibodies decreases. Consequently, excessively injected non-specific antigen would attract some of the previously produced non-specific antibodies, which are attached to receptors. The attraction mentioned above comes from the affinity between antigen and its specific antibody. The same is true between non-specific antigen and its antibody. Nine more intradermal injections have been given at 9~42-day intervals before the beginning of December 2017. Her infertility was completely cured approximately

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