

PSYCHO-SCIENTIFIC FRONTIERS

Selected publications from a variety of subjects of psycho-scientific research. Editor: Rolf Linnemann (Certificated Engineer) * Steinweg 3b * 32108 Bad Salzuflen * Tel. (05222) 6558

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Professor Dr. Ph. D. Werner Schiebeler

Paranormal healing methods in the Philippines

Werner Schiebeler, diploma physicist, Professor Dr. Ph. D, born in Bremen in 1923. Studied physics in Göttingen and in 1955 graduated from the Max Planck Institute, Göttingen with his thesis on fluid dynamics. From 1955-1965 worked in the electrical industry at Standard-Elektrik-Lorenz AG in Pforzheim, seven years as head of a development department for electronic teletext technology. From 1965 lectured physics and electronics at the then State School of Engineering, now University of Applied Sciences, Ravensburg-Weingarten. Appointed professor in 1971 and retired in 1983. In addition to the subjects of natural-science and technology, he also taught para-psychology and para-psychophysics from 1969 onwards at regular special lectures at the University of Applied Sciences, Ravensburg-Weingarten and continued to do so the ensuing years.

The author published numerous articles in journals as well as brochure and four books on various para-psychological topics. In addition he also released a film about the "Paranormal healing methods in the Philippines" at the Institute of Scientific Films in Göttingen. He received the "Ernesto Bozzano Price" from the Associazione Italiana Scientifica Metaphysica in 1974 and the "1st Swiss Price" from the Swiss Foundation for Parapsychology in 1988.

1. All bout the assignment and the films

Healers from Christian-spiritual communities in the Philippines are carrying out paranormal healings of damage to bodies and illnesses. Next to *healings through prayers, laying on of hands* and certain forms of *naturopathy, quasi-surgical treatment methods* were developed that consist of gory encroachments into the previously externally intact body of the patient. The body is thereby not opened with a scalpel, but the incision is made through the kneading movement of naked hands or with one healer, through the movement of a finger through the air. The patients are not narcotized, they feel no pain or only bearable pain in spite of this. The wound created by the hands of the healer generally closes by itself after the hands are removed and this without a visible scar being apparent. The presented treatise is the result of recorded films that were procured during two study trips to the Philippines in February/March 1973 and February 1980 under Professor Dr. W. Schiebeler.

The tour group consisted of:

1. *Professor Dr. W. Schiebeler* (Director) University of Applied Science Ravensburg, FB physical technology.
2. *Professor Certified Engineer B. Kirchgässner*, University of Applied Science Ravensburg.
3. *Dr. H. Naegeli*, Physician, Swiss Parapsychological Society, Zurich.
4. *Katharina Nager*, Swiss Parapsychological Society, Zurich.
5. *Certified Engineer Manfred Kraus*, University of Applied Science Ravensburg.

The films were published in 1974, respectively in 1981 by the *Institute for Scientific Films*, Göttingen (Director: *Professor Dr. Engineer G. Wolf*). They are 16mm colour films with magnetic sound in German and optical sound in English, length about 500m, running time 46 minutes, respectively 48 minutes at a projection speed of 24 pictures per second. These films can also be rented from the Institute for Scientific Films, Nonnenstieg 72, D-37075 Göttingen and purchased for scientific research purposes. All commercial film rights are the property of Professor Dr. W. Schiebeler.

The first film was awarded the *Ernesto Bozzano Price* on the 9th of June 1974 for being the best parapsychological documentary film at the *6. International Congress for Parapsychology* of the *Associazione Italiana Scientifica di Metapsichica* in Genua under the presidency of *Ettore Mengoli*. *Professor Ernesto Bozzano* (1862-1943) was the most eminent Italian researcher in the field of parapsychology. He wrote around 25 books and a number of hundreds of newspaper articles.

Bad Salzuflen, February 2002

2. Introduction

There have been healers amongst native tribes and civilised nations that treat people and animals in a manner that is far removed from our school taught medicine and also from our accepted forms of naturopathy. They utilise paranormal healing methods in the process. One also talks about so-called “*spiritual healing*”. Processes reveal themselves thereby that can also be observed with other paranormal events, partially experimentally triggered, partially appearing spontaneously. These processes are nowadays classified as part of the science of parapsychology or its sub-discipline parapsychophysics.

Parapsychology is of special interest to scientists, because forms of transformation of energy and changes to the physical are observed within its range of occurrences that do not appear in common physics. The paranormal changeability of physical matter also makes a visual appearance in forms of extreme so-called “*spiritual healing*”, like for instance in the religious arena, something that can at times be observed in Lourdes¹ and other places. There are well researched cases wherein larger missing bone or tissue pieces were replaced within seconds and large open wounds closed.

In order to fully comprehend the processes shown in this work and on film, comprehensive prior knowledge of the physical phenomena within parapsychology, of spiritual healing in its various forms and the so-called spiritistic hypothesis² as an explanation of certain parapsychological processes, are a prerequisite. Those that do not have this prior knowledge or think that the whole subject is a lot of nonsense anyway, will possibly find the content of this treatise and the films incomprehensible or simply regard the presented processes as fraud or trickery. These observers

¹ See references 5; 19; 23

² See references 16; 17

and readers may see the presented as a strange, ethnological event, something that is and has been observed in a similar form with many native tribes.

A few general considerations in regards to so-called *spiritual* healing or *faith* healing to begin with, before we deal with the healers from the Philippines in more detail. With what's about to follow, we want to understand spiritual healing to be the healing of damage to the body or the healing of illnesses whereby none of the usual healing methods are applied, methods that do not run according to known medical experiences and that can also not be explained as being the result of suggestion or autosuggestions. The spirit of the human healer or the patient or a non-terrestrial personality comes actively into play instead and in successful cases, often effects a complete or partial healing of the illness in a very short period of time. Just how this effect takes place on a physical level is unknown, what is also unknown is whether further factors are significant or of importance. It however seems to be an advantage - but not necessarily a requirement according to existing experiences - if the patient has an open mind in regards to spiritual healing, ergo if the patient thinks it's possible if he or she co-operates, namely by setting additional healing processes in motion through autosuggestion. The latter is basically speaking not necessary.

- *Spiritual healing is also successful with infants, animals and people that are unaware that they are subjected to this method of treatment.*

I know for instance a lady doctor from the Rhineland who in difficult cases, when her own therapy doesn't seem to help, telephonically engages the English healer *Harry Eswards*³ without the patient's knowledge and is then able to ascertain a sudden change to the process of the illness. I am naturally aware that one can object to the subjective observations of the lady doctor. But these objections can, if no serial experiments and comparable experiments are at hand, be also brought against every medicament. This is why one should not dismiss the observations of this lady doctor without commentary, but rather use it as an occasion to analyse this phenomenon in more detail.

Spiritual healing has almost exclusively established itself in the religious arena, ergo there where one assumes, or at least thinks, that extraterrestrial or divine energies are involved. In ancient nations or present day natural tribes⁴ the priests often simultaneously also deal with the treatment of patients on a naturopathic or paranormal level. This is particularly manifest with peoples that engage in the religious practices of what is called *Shamanism*. Shamanism is a markedly spiritistic religion, one that assumes one's immediate survival after one's terrestrial death and one that practises contact with deceased members of the tribe, nature spirits and the tribe's idols. The mediator in this is the shaman, selected due to his calling because of his access to the region of the sacred, something the rest of the members of the community do not have access to. Using our European terminology we have to say the shamans are paranormally gifted. Ethnologists, without the required parapsychological training, on the other hand often talk about neuropathy, arctic hysteria, epilepsy⁵ etc.

- *Shamanism is the form of religion practised by the peoples of Central and North Asia. It is however also widespread amongst the peoples of North and South America, South-East Asia and Oceania.*

The shaman, but also the medicine man and priest of non-shamanistic religions, for instance in Africa, utilises paranormal practices when treating patients, something the western physician cannot do at all or not as quickly or only with the help of medication. For instance, the instant knitting

³ See references 3

⁴ See references 1

⁵ See references 4, Page 33

together of broken bones without splints⁶ are sometimes achieved or the instant healing of a bite by a deadly poisonous snake⁷, naturally without antivenins. Parallel cases can also be found in the Christian⁸ and Muslim sector⁹.

The treatment of patients was still a religious activity during Early Christianity. The letter of James states:

James 5, 14-15: “Is there anyone who is sick? He should send for the Church elders who will pray for him and rub oil on him in the name of the Lord. This prayer made in faith will heal the sick person; the Lord will restore him to health and the sins he committed will be forgiven.”

The Catholic Church transformed this directive into the sacrament of the last rites and the Catholic Church’s dictionary states: “With the sacrament of last rite, the near death Christ is consecrated so that voluntarily sacrificing his life will finally be realise through the performed Eucharistic co-sacrifice of Christ own death. If this sacrament also happens to effect a physical healing amongst other things, God will have accepted the sacrifice because the decision over life and death is God’s responsibility”. The Catholic Church only recently renamed this spiritual assistance for the dying by calling it “anointing of the sick” thereby turning it also into a source of help for those that are not at death’s door.

Paranormal healings within the Catholic Christian arena also take place at so-called healing centres like Lourdes in the South of France for instance, without there actually being a specific healer present or recognisable. The portion of physically healed amongst the huge number seeking help is indeed small, but it must not be ignored. The interested thing about this is that very specific illnesses like diabetes, severe kidney diseases and diseases of the vascular system are excluded. Diabetes and kidney diseases are however illnesses that the healers in the Philippines heal relatively often.

If remnants of spiritual healings are still apparent within the Catholic Church, for instance also within so-called charismatic communities, all reformed and evangelical Churches proclaim such things only in special cases.

But spiritual healing is on the other hand very pronounced within a number of Christian sects and other Christian fringe communities, for instance with *Christian Science* and with all Christian-spiritistic or spiritualistic communities that exist all over the world. In Europe, they are heavily represented in England. London alone already had over 50 spiritualistic communities 1965. Such smaller communities also exist in Switzerland and Germany. Furthermore, there is the Christianity based *Deutsche Vereinigung für Geistheilung e.V.* in Germany with its headquarters in Bonn on the Rhine. It incorporates a large network of healers that heal through prayers and it conducts annual seminars to develop people’s healing capabilities.

I believe that the apparitions and healings produced by the healers in the Philippines, their surgical processes attracted a lot of attention, are genuine paranormal natural events and I am convinced that they are generally not produced through technical trickery. I came to this conclusion after three trips to the Philippines (1972, 1973 and 1980) during which I observed numerous so-called interventions and other treatment methods of 16 different healers. I recorded over 2,000m of 16mm film and took

⁶ See references 4, Page 204

⁷ See references 1, Page 202

⁸ See references 5; 8

⁹ See references 15

200 slides. I analysed the recoded films in detail (looking at individual pictures) and had them examined by a Swiss trickery expert. Neither this trickery expert nor I discovered even traces of deceptions. This naturally doesn't mean that some healers will, if they are pressured into producing phenomena that are not instantly obvious, sometimes take refuge in deceptions. But they will probably not attempt this when a camera is recording. I certainly never observed anything like this.

I furthermore also talked to lots of patients that in some cases were healed from severe long-term illnesses.

A number of doctors and scientists from various disciplines, who had observed these healing processes with their own eyes, also confirmed that they saw these events as genuine and not as trickery.

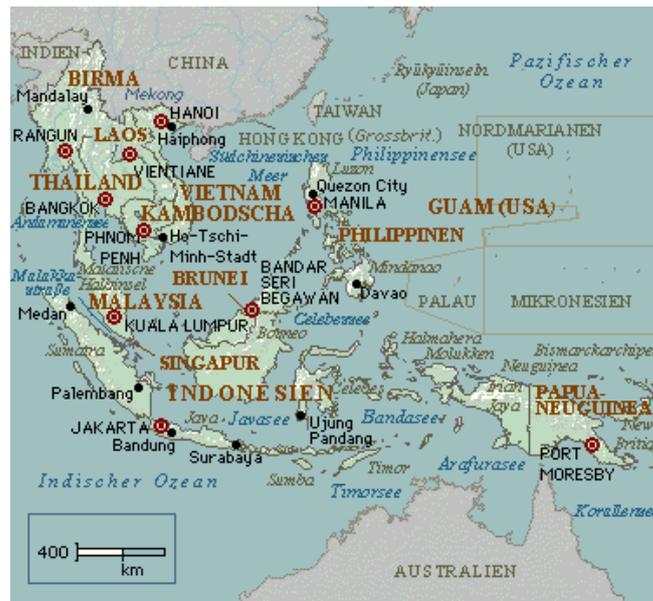
But one should not regard the “surgery” performed by the healers in the Philippines as an extension of our school taught medicine, because only a few rare cases exhibited genuine surgery (The penetration of the abdominal wall) as in Western surgical procedures. I myself see them as parts of an archaic medical science, one that has an effect on our world from a different plane of action, ergo one that runs along laws of nature still unknown to us.

Because these laws of nature have not yet found their way into our present day sciences, these paranormal processes do not seem credible to a lot of observers. They do however overlook the fact that today's known laws of nature only represent a section from what goes on in Mother Nature and that not everything that we cannot explain at this point must be fraudulent. This is why the conclusions based on school taught medicine are often wrong.

The natural sciences are however called upon to look for the legalities hidden behind these healing treatments.

2. Christian Spiritism in the Philippines

The Philippines are a tropical empire situated in South East Asia, in the Pacific Ocean, consisting of more than 7,640 islands and an area of almost 300,000km². About 104 million (2017) people live in the Philippines and one million is added to this number every year.



The original inhabitants from prehistoric times are the Neritos, short statured forest dwellers and simple hunters. From the Neolithic onwards (circa 8,000 years ago) Indonesians of Mongolic-Caucasian origin migrated by sea for the next 6,000 years. From 200 BC to 1,500 AD, they were followed by Malayan tribesmen. Around 80 different dialects are spoken in the Philippines and six of those are of special importance. The majority of the inhabitants of the Philippines therefore stem peoples that have a religious background based on Shamanism.

When the Portuguese seafarer *Ferdinand Magellan* discovered the Philippines in 1521 on behalf of Spain and admiral *Legaspi* conquered Cebu in 1565 and Manila in 1571 for his king *Phillip II*, the Christianisation of large sections of the Philippine population began, a population that had already been converted to the faith of Islam to a large degree. An impressive cathedral was built in Manila and a monument depicting *Legaspi* and the Spanish missionary *Urdanetta* still stands in Manila today.

Christendom wasn't just superficially adopted over the centuries, it became deeply entrenched in the religious feelings of the population. Some of the southern islands (Mindanao etc.) however remained Islamic. At the end of the 19th century the books by *Allan Kardec* introduced Christian Spiritism to circles of the Philippine's intelligence. Kardec's doctrines say amongst other things that immediately after their terrestrial demise, people will continue to live in another, ethereal world and that manifold interactions and specifically information exchanges are possible between our gross material world and this ethereal world.

Due to a lack of religious freedom under Spain's dominion, Christian-Spiritistic groups only formed in secrecy. The common society called *Union Esperitista Cristiana de Filipinas* only came into being after the Americans introduced religious freedom in 1905. It presently encompasses over 500 communities throughout the land and some of its church services are held in the tiniest, humblest of chapels, whilst other services are held in quite respectable, churchlike buildings. Sunday services are often framed by solemn singing. The religious speeches are partly held by leading members of the community, but partly also as trance-monologues by mediums, ergo by people who talk and act under the influence of otherworldly entities.

3. Paranormal healing in the Philippines (Film 1)

A lot of members of spiritistic communities practise spiritual healing to a high degree, that is to say, paranormal healing of damaged bodies and illnesses. This happens as part of the church service but also as a normal treatment of patients under the axiom of providing a service to one's fellow men. The attitude of the leaders of the Union Esperitista Cristina de Filipina that the *treatments should basically be free of charge* resulted from this, according to the New Testament wherein it states:

Matthew 10, 8-9: "Heal the sick, bring the dead back to life, heal those that suffer from dreaded skin diseases and drive out demons. You have received without paying so give without being paid."

Professor Tolentino, sculptor by trade and long term president of the Union Esperitista Cristina, stringently guarded against healers asking for money whilst he was alive (died 1976), he asked them to only accepted voluntary donations towards maintaining their source of livelihood. He also didn't shy away from excluding healers that trespassed against this rule from the union. This however led to a situation where such healers formed their own churches.

With the spiritual healings performed in the Philippines we are dealing with healings through prayers, laying on of hands and, from a certain point in time, with quasi surgical, that is to say, surgical-like treatment methods that sometimes consist of gory invasions into a prior externally intact body of a patient. The body is in such cases not opened like in general surgery procedures with a scalpel, the opening of the body happens either through kneading movements of bare hands or with one specific healer through the movement of a finger through the air. The patient isn't even narcotized with deeper penetrations and they suffer very little or no pain at all in spite of this. There are also no appreciable disinfection methods applied. No infections were observed in spite of this. Blood vessels are indeed opened up during these invasions, but they are not blocked or tied up. No considerable bleeding takes place in spite of this, not even when one gets the impression that blood-soaked body tissue is removed from the patient. The wound made by the hands of the healer is not sutured up after the operation, it generally closes by itself after the hands are taken away and this without leaving a visible scar. During the invasion, no visible edge of the wound, something one would see in normal surgery, is generally observed, because the skin and the tissue parts of the patient and the hands of the healer are always touching and the wounds immediately close the moment the hands are removed.



Picture 1: The healer Tony Agpaoa 1971 whilst removing some tissue from the body of a patient. Observe the small curvature radius of the stomach wall near the index finger of the right hand. (Arrow) If the skin was only depressed the curvature radius would have to be larger. Photo by the healing practitioner Sigrun Seutemann.

Blood-soaked tissue is often brought to the surface during these invasions and a blood-clotted liquid becomes visible. The healers are of the opinion, and they also intimate this to the patient, that the removed tissue parts that are removed from the patient's body are either tumours or pathological or other harmful substances. By making this visually perceptible for the patient they also trigger an additional, powerful impetus of the healing process next to the paranormal healing effect. No sleight of hand is visible and it can be largely excluded. This is why the question about its scientific, medicinal and parapsychological nature is doubly important.

What also has to be examined is the nature of the tissue parts that appear and what coherences they have to the illness. In which cases is the body of the one that is asking to be healed really opened up in a medical sense?

The films show that the hands of the healer often do not really penetrate the skin and the abdominal wall of the patient. The tissue and the bloody liquid that appears under the hands of the healer do not necessarily stem from the body of the patient. This can be brought into play in a paranormal, ergo invisible fashion from somewhere by unknown forces. One talks about so-called materialisations in regards to this and one means that in parapsychology known phenomena that were not perceptible before, can become temporarily or permanently visible and tangible through a paranormal process. Something like this is also called an *apport* (a material object supposedly produced by occult means, especially at a *séance*).

The so-described so-called paranormal surgery only shares an external similarity with the usual, school-taught medicine. The active mechanism used to heal illnesses is probably a different one most of the time. Medical surgery mechanically, ergo physically removes causes of illnesses thereby restoring the normal functions of the body. The paranormal surgery performed by so-called spiritual surgeons on the other hand does not always mechanically remove the cause of an illness, but sets a yet unknown healing process in motion instead, one that often leads to a partial or a complete recovery in a very short time. The paranormal surgical process appears, from the standpoint of a school-taught physician, only as an accompanying addition.

When a healer (*Marcelo Jainar*) for instance removes obviously visible varicose veins and their associated discomforts from the lower legs of a woman with his bare hands and they are no longer visible after the procedure and the discomfort is no longer there, one must see a certain parallel to the surgical measures of a physician that mechanically removed the cause of an illness. The same applies when a healer (*Juan Blance*) removes fibroids and atheroma from under the skin, the way it is shown in the film. The pulling of teeth through the slight touch of a finger is part of the everyday activities of a healer from the Philippines and offers a parallel to medical actions when removing the cause of an illness. But when for instance an indifferent tissue part is removed from the body through a quasi-surgical process with diabetes or a piece of the liver the size of a thumb (*Agpaoa*) is removed because of an infection of the biliary system within the liver and both cases record an immediate, permanent objective and subjective healing of these afflictions, the school taught physician can only stand there with a lack of comprehension. Such interventions must seem senseless to him from a surgeon's point of view. He might only evaluate it as an impressive application of psychology, something it could possibly be in regards to supporting the treatment.

But one has to say that a final judgment is impossible with our present day knowledge. All the processes recorded on film are not completely new and completely isolated, but have been observed by psychology, ergo the sciences that delve into these things, earlier and at other locations in similar or different coherences and rated as natural processes. By the way, these quasi-surgical invasions by the healers from the Philippines are not always carried out with bare hands, but with tweezers, forceps, scissors and spoons often are utilised as tools after the opening of the body has been facilitated. All of these instruments are however unsterilized and an anaesthesia (numbing of pain) or narcotization of the patient never takes place. Something I further observed when visually reviewing the filmed observations was that during a series of invasions, the removed tissue was not extricated by the healer from deep within the body, but seemingly emerged to the surface of the body of its own accord, quasi grew out of the body to then be removed from there.

4. The commencements of paranormal surgery in the Philippines

The healers from the Philippines do not dispose over appreciable school taught medical knowledge. They also do not feel that there are the actual doers, but hold the opinion that they are instruments and mediators of and for otherworldly powers and entities. They mention *Holy Spirits* in the process. These are the ones that guide, direct and control their hands during their invasions and healing procedures.

One should however not think that all patients can be healed in this way. Just as with normal medicine, numerous failures also happen with spiritual healing and paranormal surgery. But spiritual healing shows such momentous, yet unexplored activities that they can expand our own scientific view of the world considerably after they have been judiciously investigated.

The oldest healers, reportedly performing these gory invasions, are *Francisco Sarmiento* and *Eleuterio Terte*. Both of them have passed away in the meantime. *Sarmiento* lived in San Manuel near Tarlac in the Province of Pangasinan on Luzon Island. According to his own details he was born on the 19th of October 1901, had been a Spiritist since 1922 and performed quasi-surgical

invasions since 1945. *Terte* last resided in San Fabian, also in the Province of Pangasinan on Luzon Island. He was born on the 25th of February 1905. He married a Spiritist in 1925, but was initially not a Spiritist himself. The year he was married he became very ill and doctors couldn't help him. He fervently prayed for divine help during one night. This brought about a vision of two angels who told him: "Brother *Terte*, if you accept the power of healing and if you are willing to help other people out of brotherly love, you will be healthy in the morning." *Terte* provided this promise and soon recuperated. He then joined the Spiritistic Community of his wife and at once began his activity as a faith healer. One can see that *Terte*'s self-reported "calling experience" is similar to the calling experiences of shamans, founders of religions (Mohammed and Zarathustra) and prophets.

Terte performed his healing activities until WWII. This was only interrupted because he became a soldier. After the war he once again became very ill and he once again had a vision of angels who encouraged him to once more perform his healing activities. This is when *Terte* performed his first gory invasion in St. Fabian in the Province of Pangasinan. Opening the body was initially only possible with a knife. This was however soon followed by accusations and the charge of illegally performing medical practices, because as it is the case with us, performing medical procedures is only the prerogative of qualified physicians in the Philippines also. But one generally turns a blind eye, because due to the lack of a statutory health insurance, a large section of the public cannot afford to see a doctor and are therefore relying on healers. The healers therefore fulfil an important social assignment because they usually work gratuitously or only rely on very small donations of 20 cents to 50 cents. This is why *Terte* was acquitted by the court. The ability to open the bodies of patients with his bare hands soon developed whereby the body closed itself after the invasion without leaving a scar.

Terte practised his healing activity until he died, whereby the blood-producing invasions, compared to the bloodless invasion, became far less pronounced. He was also the teacher of a number of younger healers.

5. The healer Juan Blance

The first healer introduced on film is *Juan Blance*, he was 44 years old when the film was recorded in 1974. He died on the 13th of March 1986. He lived and worked in the city of Pasig near Manila. A little shop provided for his livelihood. According to his own statements he started his healing activities in August 1957. Blance healed through prayers, laying on of hands, often in conjunction with massage-like movements, through cupping treatments and he also removed smaller and also larger growths of various genesis from under the skin.



Picture 2: The healer Juan Blance on the 26/2/1973 in Pasig healing through prayer.

The paranormal aspect of this was that he didn't use a knife to make the incision on the skin of the patient, but that he accomplished this with a symbolic cutting gesture in the air with his index finger being about 30cm above the skin. The healer made this cutting gesture with the index finger of a visitor whenever a visitor was present.

Picture 3: The healer Juan Blance performs a cupping treatment on a patient with heart problems. The author placed a sheet of clear plastic on the chest of the patient. The healer grabs hold of the author's index finger and performs a symbolic cutting gesture in the air. This results in producing a cut beneath the sheet of clear plastic.



The finger gesture was repeated if the resulting cut was not large or deep enough. The skin underneath burst open to a length of 1cm to 2cm and a depth of few millimetres as if cut by a sharp knife. Certainly no physical knife and no razor blade was used to accomplish this manipulation. I was able to observe this from a very short distance and on numerous occasions saw how the untouched skin simply burst open.

The edges of the wound were initially completely white. Only after a few seconds did little droplets of blood appear. Blance sometimes created the wound by placing a finger loosely on where the opening was going to be. The wound could be seen after the finger was lifted. A Swiss reporter was able to record such a case from up close on film. These wounds, those that did not immediately close, empirically healed within 6 to 8 days without becoming infected.



Picture 4: The cut produced by the healer Juan Blance without a knife after the cupping treatment..

In order to test the formation of the wound in more detail I had placed a sheet of clear plastic onto the yet intact skin. The healer kept both hands above the sheet of plastic. He grabbed my index finger (Picture 3). There was hardly a hint of my finger moving. We could see through the sheet of

plastic how the skin on the left side of the chest burst open. The sheet of plastic was removed and, something that was now very pertinent, when it was later closely scrutinised it turned out to be untouched, evidence that the cut was not made unobserved with a razor blade.

The so produced wounds were used by the healer to remove tissue parts from the body of the patient. The film, amongst other things, shows how a growth, a fibroma, was removed from a roughly 25 year old female patient. According to the patient's statement, this growth had existed for around 10 years and caused her a mild pain when pressured. Picture 5 shows the removed fibroma.



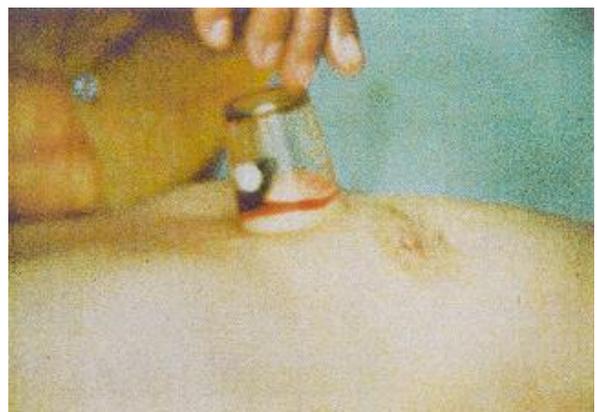
Picture 5: The fibroma removed by the healer Juan Blance on the 26/2/1973 from a female patient near her knee.

The forensic physical examination revealed:

Slice preparation without a natural definition, consisting of bundled fibres with centrally located elongated oval cores; the bundles are intermeshed with one another. One occasionally finds the tiniest vascular branches that are solidly filled with red blood cells. No cell agglomerations. No inclusions of fatty substances. **Diagnosis: Fibroma.**

The healer *Blance* used the small paranormally produced skin wounds to also carry out cupping treatments. A cupping glass (Picture 7) was used and a burning piece of cotton wool placed inside the glass created the negative pressure (Picture 6).

Paradoxically as it may seem, blood didn't always emerge from the wound, the healer would sometimes use his fingers to squeeze a rose coloured, finger-long, toothpaste like object from the wound at the end. This was for instance visible at the end when a Swiss reporter had a cupping procedure performed on his thigh. This process was unfortunately not captured on film, because the camera had run out of film.



Picture 6: A coin lies on top of the wound and a ball of cotton wool soaked in alcohol in top of it. This ball is lit and the healer places a cupping glass over it.

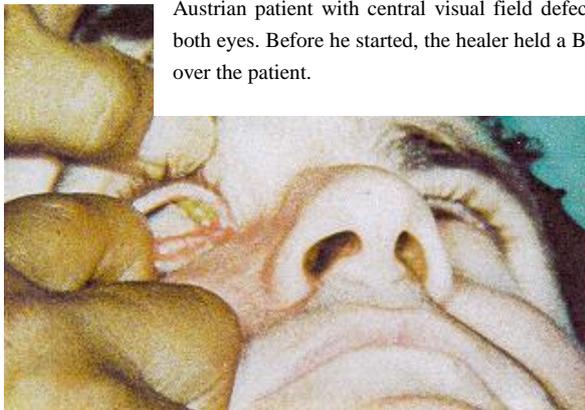
Picture 7: The burning cotton ball runs out of oxygen and the thus created negative pressure draws the blood from the “wound”.

What seems impossible to me is that it is possible to squeeze a finger-long object from non-inflamed skin under normal circumstances. This must once again be a paranormal process, one that was observed in its different variations with most healers, namely that tissue parts or other materials were conveyed from the body of the patient that were with the greatest likelihood not present or only present in another form in the body. It looks like as if these materials are only paranormally collected or formed at the moment of the invasion into the body, whereby these materials are invisibly transported to the scene from near and far.

Such processes in coherence with other things have been known by parapsychology for a long time and also often examined and given the names of apport and materialisation.

The treatment of an Austrian patient with central optic atrophy by *Blance* is also to be assessed in this direction. The healer began by praying (Picture 8), he then lightly massaged both eyes with his thumb and squeezed a doughy, bean-sized, greenish brown mass from under the eyelids of both eyes. A close up of this process is recorded on film (Pictures 9 and 10). Most of the squeezed out substance dissolved in the formalin solution so that a closer inspection was later no longer possible. The patient felt the strong pressure applied to the eyes by the hand of the healer during the treatment, but felt no pain and no discomfort after either. An improvement of sight could actually not be established after, but it might have been too much to ask after just one treatment.

Picture 8: The healer Juan Blance treating an Austrian patient with central visual field defect in both eyes. Before he started, the healer held a Bible over the patient.



Picture 9: The healer Juan Blance massaged the eye of the patient with central visual field defect and squeezed a doughy, bean-sized mass from under the eyelid.



Picture 10: The bean-sized mass is completely free, but largely dissolved in the formalin solution and could therefore not be investigated further.

Because of the subjective sensations felt by the patient and because of the intensive scrutiny by four

observers, namely myself and my three travel companions, we thought that it was impossible that the healer could have placed this mass under the eyelids a priori for deception purposes. But it also seems impossible that a European doctor could have massaged such a mass from an eye when confronted by the prevailing medical condition. Therefore only one hypothesis remains, namely that this mass was paranormally produced under the eyelid during the attempted healing treatment.

Besides, a Japanese researcher by the name of *Dr. Motoyama* also made and described a similar observation.¹⁰

6. Possibilities of deception

When the interventions by the healer *Blance* give the patient and probably also the healer the impression, after only superficial observations, that the squeezed out, doughy substance stems unchanged and directly from the body, we found that this impression can certainly not be maintained with a series of other healers, particularly when they retrieve parts of plants (Picture 11), stones or pieces of plastic from their patients.



Picture 11: The healer Josephine Sison from Barangobong pulls plant pieces from the neck of a patient's body, 5th of March, 1973.

Such processes take place with healers from rural communities and they are demonstrated in all innocence and openness in front of any observer and any movie camera. The parapsychologically untrained observer will immediately see these phenomena as prepared deceptions and sleights of hand and accordingly express his indignation. He will also see the removal of tissue parts that could stem from the patient as clever trickery, particularly when for instance blood tests show that there is no analogy between the blood type from the operation and that of the patient.

My three travel companions and I knew about these suspicions and therefore kept an eye on possible attempts of deception.

- *At the end of our study trip we were convinced that it was impossible to create all the phenomena that we observed and filmed only through sleights of hand, ergo through trickery. The phenomena took place at too short intervals and a lot of the patients were unknown to the healers.*

Observers can intimately examine the treatment room and the treatment table before and after. They can stand at a minimum distance from the patient and also behind the healer. A trickster would never allow this. The removed tissue parts are completely innocuously handed to the observers. To store

¹⁰ See references 10, Page 6

such large amounts of tissue parts and blood (Partially human blood, partially animal blood) under the prevailing tropical conditions seems completely out of the question without somebody noticing something or without an odour becoming noticeable. One should also read the comprehensive expositions of exposed alleged deception processes by the Swiss physician *Dr. Naegeli*¹¹ (He observed things with me) and the German Chemist *Professor Dr. Stelter*¹², as these two authors observed and investigated considerably more cases than myself.

Nobody can naturally completely exclude the notion that a healer will sometimes, somewhere help things along a little when the opportunity arises. The danger and the temptation for this are indeed so near, because paranormal processes cannot be demonstrated with complete certainty at any time and on any subject.

But this is exactly what a lot of European and American patients expect from healers as they arrive in the Philippines on a weekly basis by the plane-load since around 1970. After having had relatively high travel expenses they want to see something and are highly disappointed when things do not function the way they imagined. This simply overtaxes the healers. Europeans should pay a visit to their own doctors and leave the Philippines's healers to deal with the poor amongst their own people. This is easier said than done if one places one's own last hopes in a Philippine healer.

- *I do indeed have to admit that many a hopelessly and chronically ill European has been healed by a Philippine healer.*

To tell them that they shouldn't have done so would be rather presumptuous. This dilemma therefore remains, namely that some healers are overtaxed, that the cure rate drops and that the temptation to commit fraud increases.

I experienced this on the 10th of March 1973, the 31 year old rice grower and healer *Juanito Flores* from Nancayasan near Urdaneta interrupted his treatments after he had publicly treated around 80 patients in a bloodless and two in a gory fashion in his chapel. The healer ended up lying completely exhausted and apathetic face-down across a table in the living room of his house. Some of his helpers tried to get him back on his feet through prayers and by holding a Bible over him. They tried this for one hour, but it was in vain. The helpers said that things were too loud and too unruly in the chapel: In spite of having been warned, the women talked too loudly, a Coca Cola bottle had fallen down and smashed with a loud noise and a European observer (My travel companion) had fainted after seeing the gory invasion of a patient's body, when the healer pushed a soup spoon with considerable force into the body of a female patient. A trickster would not have reacted to this by collapsing on a heap. This reaction comes as no surprise to those that are versed in parapsychology. They know too well that the healer has to deliver a considerable amount of the required energy to accomplish these processes himself. The ability to deliver this energy is however not limitless, it also depends on environmental conditions and moods and an extra supply from otherworldly helpers.

One female patient told me that how she had observed the healer *Tony Agpaoa* entering the abdomen of her mother. The healer initially did not succeed in penetrating the body with his hands. This had made him quite fidgety, he then used the edge of his hands to rap the body, blew into his hands and finally requested that little ice cubes be placed on the body. He only then succeeded in opening the body. A trickster would not fall prey to such a mishap.

¹¹ See references 11

¹² See references 22; 23

7. The healer Tony Agpaoa

After the healer *Blance*, the already mentioned healer *Tony Agpaoa* can be seen in the film. He was born in 1939 and he tells us that he noticed his healing capability at age 9, namely when a playmate fell out of a tree and sustained an open wound to his testicles.¹³ Placing his hands on the young boy brought about a cure. *Agpaoa* was at that time the most famous healer outside the Philippines and the whole conflict of opinions focused around him.

Journals, entertainment magazines and television reporters accused him of committing fraud on numerous occasions without ever furnishing proof for this.

Agpaoa died relatively young of a heart attack, namely on the 30th of January 1982, whilst watching a cockfight. Next to his healing activities he also bred gamecocks.

Agpaoa was probably the most educated amongst the healers in Philippines, but certainly not the most humble amongst them. He no longer belonged to the *Union Esperitista Cristiana*, but had created his own Church. He was the only one amongst the healers in the Philippines in those days to have reached a certain level of affluence. He was the first one that became known in the western world in 1967 and this mainly due to a book by the American *Herold Sherman*.¹⁴

Agpaoa lived in Baguio City in the mountainous Province of Benguet, 250km north of Manila. He lived there in a park-like garden, in a house that would even be considered luxurious by European standards. In 1973 he did however treat his numerous European patients at a hotel in Manila.

He performed an operation on the body of a 47 year old female patient from Switzerland in front of a camera. She had suffered for 29 years from cholangitis, an inflammation of the bile ducts in the liver. Her gallbladder had been removed in Graz in 1952 because of shrinkage and almost daily colic attacks. No gallstones were found. The gallbladder operation brought about an alleviation of her complaints, in particularly in regards to the frequency of her colic attacks. But considerable discomforts remained just the same, for instance the liver's sensitivity to pressure, indigestibility of fatty substances, cabbage, beans and pure coffee, a feeling of fullness in the upper regions of the stomach and the occasional colic attack with associated pain in the right shoulder blade, particularly after mistakes in her diet and taking intolerable medication. Heart attacks and metabolic complaints were also a part of her problems.

This patient's car had been hit from behind in an accident in 1953 and this led to severe trauma to the spine. The patient suffered from constant back pain from then on and she had to stop working because of this. The healer had already performed two operations on the patient the day before and he now prepared for an operation on the liver in front of a camera.

A specialist surgeon made the following comments about the treatment performed by Tony Agpaoa (Pictures 12 – 17):

“We see here an intervention by a healer that can however neither be explained nor interpreted by conventional medicine. I deliberately speak about an intervention and not an operation, because it is fundamentally different from the preconditions of such a manipulation. We presently see a covering piece

¹³ See references 21, Page 147

¹⁴ See references 21

of tissue. I would like to interpret it as a part of the intestines with mesentery¹⁵ (Picture 13). The black spots within the mesentery represent bleedings that were the result of a strain.

Biopsies from the liver are almost always only take for diagnostic purposes in conventional medicine. The purpose of this intervention is therefore not interpretable by a conventional physician. But this doesn't mean that this type of treatment is therapeutically speaking senseless. Apart from a little remnant on the spine, this patient has indeed been completely healed from all her complaints.

Ever since her treatment in Manila she no longer suffers from heart complaints, she can once again eat everything, even fatty and difficult to digest food and also coffee made directly from beans and alcohol.

The conspicuous thing about these manipulations was that once the hand was removed, no edge of a wound could be seen. What can also not be recognised is where the blood flows from.

Something I cannot interpret is why these individual manipulations (The kneading movement of the hands) take place?

The healer once again pulled out a piece of tissue. I assume that it is a section of the small intestines. After it had been cut, a helper removed a piece of liver with a clamp (Pictures 14 – 16). To proceed like this is unthinkable from a conventional medical point of view, because all rough injuries to the liver can lead to major bleeding, something that is then difficult to stem.



Picture 12: Tony Agpaoa on the 26th of February 1973 in Manila during a gory intervention with a Swiss patient with cholangitis.



Picture 13: The healer pulled a piece of tissue to the surface, probably a section of the intestines with mesentery.



Picture 14: The tip of the liver lobe emerged between the hands of the healer. A helper reached for a clamp in order to nip off a piece of the liver.



Picture 15: A helper nips off a piece of the liver. Food vessels, nerves and lymphatic ducts converge.



Picture 16: The separated piece of liver is removed from the “field of operation”,



Picture 17: Front and back view of the piece of liver the healer Tony Agpaoa removed from the Swiss patient.

The patient had this to say to Professor Schiebele:

Patient : I never felt the actual opening of the stomach, only once it was open. I felt his hands go under the ribs and that he did something or other.

Schiebeler : This was surely painful?

Patient : This wasn't painful. It wasn't even painful when he cut something off.

Schiebeler : Did you feel that something was cut off with an instrument?

Patient : I felt after, once it was somehow separated, that he was taking something away. I somehow felt that it must have been a larger piece from deep within. And I already said: “He is now taking something away” and the people standing around confirmed it: ”Something is coming out now!”

Schiebeler : Do you think it possible that the whole sensation you felt could have come from somebody pressing down on your intact skin?

Patient : No, this is hardly possible. One would certainly feel the difference between somebody pressing down or actually being inside the body. Something I felt above everything else during the stomach operation was it came from relatively deep down. But I did suffer severe pains after this operation. After this piece had been removed he began to count, something the spectators also heard: “One, two, three”, he then closed the wound so quickly that I felt very severe pain.

Schiebeler : And the feeling you had whilst this was going on, how was that?

Patient : This feeling was like an undertow. It sucked itself in and quickly pressed on the liver. A lot of pain was involved as the skin was closing. I unfortunately also suffered a lot of pain during the night after.

The following has to be said about how this intervention progressed, namely that *Agpaoa* performed

it in intentionally slow manner and that he spread his hands a number of times to allow the camera a look at where the operation took place. He normally doesn't do this, an intervention is usually performed a lot faster so that the observer hardly sees anything but the moving hands. The extended intervals during the process are due to the fact that *Agpaoa* elaborately explained the process to around eight onlookers. Due to a technical problem, these explanations were unfortunately not recorded on tape. The removed piece of liver is depicted in picture 17.

A forensic test provided the following results:

Sample 3: "Slice preparation from a liver with numerous, periportal fields of various sizes, they are interspersed to a larger or lesser degree with round cells of a lymphocytic type. Sprouts of connecting tissues can also be seen here and there. Because of the progressive autolysis, the regular structure of lobules can only be seen incidentally, the clearances of the central veins are very narrow. Most liver cells are separated from the formation, isolated or assembled in small; their boundaries are faint, the plasma consists of small lumps. Small-grained, yellow-brown pigments can be seen almost everywhere. Besides, numerous liver cell areas are predominantly and centrally interspersed with fine droplets of fat. The cores of the cells show no considerable differences in size and no mitotic figures are recognisable.

The gaps (Sinus) are small and occasionally contain some loose, coagulated excretions and relatively numerous small round cells of the lymphocytic type. Tiny individual nodular concentrations of small round cells are found next to them."

Diagnosis: "The liver shows signs of a chronic inflammation with a predominantly central adiposity. Small nodules are also found and they remind one of a past bout of typhoid."

The pathological findings of the removed piece of liver therefore coincide with the patient's medical history. The autolysis of the liver tissue discovered during the forensic tests is probably due to a lack of preservation of the sample.

The question of whether one was histologically dealing with a piece of human liver could not be verified later, because the piece of liver had been preserved in formalin and this in turn destroyed the serum protein bodies. The visual inspection during the forensic tests and the tests performed at a University Institute for Animal Hygiene could not determine a positive and reliable difference.

The question about the origin of this piece of liver is not of complete subordinate importance, because there is a distinct possibility that the piece of liver could have been produced through a paranormal apport or materialised. A lot of healers remove things from the bodies of patients that can certainly not originate from them.

The possibility that the piece of liver was introduced through a sleight of hand can be ruled out. *Agpaoa* did not have the opportunity to prepare himself for this intervention. The decision to select this patient had only been taken minutes before the camera started rolling. The selected patient happened to be there by chance and the essence was that she allowed herself to be filmed. Furthermore, some of the observers present there stood visibly to the side of the healer and not only observed the procedure from close proximity but also from a different angle than that of the camera. Everybody could clearly see that something from the body lay in the open, something that looked like the lobe of the liver, that a part of it was separated from it and that the rest disappeared back into the body. When looking at individual frames of the film one can see that the liver quasi *grew* out of the torso and that one of the helpers tore a piece off with a clamp (Picture 15).

- *But apart from the medical problematic of this intervention, one cannot deny the fact that this patient was completely healed from a liver complaint that had existed for 29 years and that her*

10 year old son, who had also had a chronic liver complaint in the form of too much protein secretion, was also healed.

During the filmed procedure to the liver, *Agpaoa* extracted some blood with a syringe and it was also forensically tested. The healer was aware of the fact that we intended to do this. The examination revealed that it was human blood of the blood group O. The patient declared that her blood group was AB +. But we couldn't ascertain this. Something that has often been observed with *Agpaoa* is that the blood groups of patients concur. With similar interventions performed by other healers, one even ascertained that the blood of animals was apparent. Reporters depicted this as irrevocable evidence of fraud.

8. Blood group examinations

Something about the problematic of blood tests has to be mentioned at this point. During the interventions of the healers from the Philippines remnants of blood were produced that were either soaked up with cotton wads or ended up as bloodstains on clothes. Furthermore, the blood that came out during these interventions was most of the time mixed with water, mild acids or oleaginous liquids. This led to a situation where the protein in the blood was completely or partially missing and was no longer soluble in preparation for the determining methods.

To decide whether one is dealing with human blood or a specific animal's blood one usually uses the Agar Gel Diffusion method according to Ouchterlony. A layer of agar with a central hole and numerous holes punched at equal distance is placed on a glass plate. The serum protein is separated from the blood sample (Blood stain etc. if that is still possible) and poured into the central hole. The surrounding holes are filled with so-called antisera, that is to say, species-specific immune-antisera from people and various animals. The serum and the antisera diffuse with the agar gel over time and overlap in the process. There, where the sample serum meets the matching antiserum (For instance anti-human-serum), a precipitation, ergo a so-called precipitation line occurs. It is the result of an antigen-antibody reaction and it reveals the type of the tested bloodserum.

This might sound simple and clear cut, but it isn't always because it is often doubtful whether and where a precipitation line is present or not. This on one hand lies with the great sensitivity of the bloodserum against chemical, thermic and maybe other influences and on the other hand on whether an antiserum that exactly fits the serum was introduced. After all, one can certainly not test the antiserum of all existing animals. This practically means that the researcher has to interpret the achieved result, exposing the process to all kinds of misinterpretations. There is also the possibility that mistakes are made at these laboratories, because such tests are treated as routine and therefore conducted by assisting personnel.

One healer (*José Mercado* from Bacag near Villiasis) produced a small wound on the arm of one of the co-observers, namely *Professor Kirchgässner*, through a so-called magnetic injection (*This is a mimicked injection without a syringe and without a needle at a distance of about 20cm from the patient, ergo without actually touching the skin*) from whence a small trickle of blood emerged. The blood did not get in contact with any water or with any other liquid. I myself carefully collected it on a glass slide and allowed it to dry in the air.

The coagulated blood was initially tested at a forensic test institute in Germany. Result (Literally quoted):

“Human blood, probably blood type O.”

As the blood type of the patient was initially unknown, an institute for medical micro-biology came up with the following result after testing the vital blood:

“Blood type B, Rh + (D+).”

It could have been feasible that the paranormal intervention by the healer could have produced a certain change within the characteristics of the blood. One certainly has to expect something like this. I did however have the rest of the coagulated blood on the glass slide tested at the Regional Bureau of Criminal Investigation. Result:

“According to PEREIRA, the blood type was B.”

These different test results rather amazed me, because such incorrect results could have dire consequences when they occur during criminal investigations. I talked to the administrator of the Ravenburger Police Station after and asked him whether one conducted two separate test during all criminal investigations? He answered: Not most of the time, only once and again and the results do not always concur with one another.

A Catholic priest, *Professor Dr. Andreas Resch*, told me that in August 1972 the healer *Josephine Sison* performed an intervention on his shoulder blades whereby blood ran down his back. He had it collected and later tested in Innsbruck. Result: Human blood, blood type O, Rhesus factor negative. His blood donor card in those days however stated blood type O Rhesus factor positive. When donating blood at a later date a new blood type determination was carried out. The result this time was: Blood type O, Rhesus factor negative. One also has to expect something like this!

In respect to paranormal healing, one has to come to the following conclusions:

1. If the results of blood tests are to be completely trusted they would have to be performed by two independent laboratories.
2. Because of the sensitivity of the blood serum in regards to chemical and physical influences one has always to expect that the paranormal activity of healers could also possibly change the blood to such a degree that another blood type could be feigned.
3. One has to expect that with the interventions by the healers, blood or other tissue from the vicinity (Originating from human beings or animals) can be the result of an apport or be materialised paranormally.
4. Sleights of hand must be excluded through careful observation.

The presently existing test results about the healers from the Philippines do certainly not allow us to recognise whether and when point 1 to 3 apply. More thorough research has to be carried out here.

9. Successful healings

The naturopath *Sigrun Seutemann* (died 1984) who led a few hundred patients to Agpaoa since 1971 and had them treated in front of her, gave the following information about the success rate of the treatments performed by *Tony Agpaoa*:

About 2% were spontaneous healings of severe afflictions, about 10% were healed within 14 days after their return to Manila and about 30% experienced an improvement of their condition. The rest remained unaffected.

This information coincides with my own observations, they were however made on a much smaller number of patients.

With the 2% of spontaneous healings of severe afflictions one has to take into consideration that the majority of the people that fly to the Philippines are a negative selection, namely patients that had unsuccessfully visited one doctor after another and now placed the last hopes in the healers from the Philippines.

The healing of such a case is narrated here. It was observed at close quarters by two travel companions of the author, namely *Dr. Naegeli* and *Mrs. Nager* and this on the 12th of March 1972 in Baguio City.

It deals with a Swiss patient called *Karl Dobesch*, 44 years old at the time (born 1928), who had been totally disabled and confined to a wheelchair for a number of years. According to a medical report, this patient suffered a severe case of psoriasis in 1957. He was treated internally and locally with large amounts of a steroid preparation. This resulted in severe pains in the hip joints and the spine as from 1965. A double sided avascular necrosis was operatively treated in 1967. A general osteoporosis in conjunction of severe skeletal pains ensued. A double sided chondropathy (degenerative changes to the cartilage) of the knee joints appeared in 1968 and it was operated upon. His osteoporosis was treated with medication. Because of his hip and knee joints complaints, the patient however remained confined to his wheelchair and allowed himself to be transported to the Philippines in this condition in March 1972.

On the 12th of March 1972, *Tony Agpaoa* treated him in his hotel room in the presence of *Dr. Naegeli*, *Mrs. Nager* and *Mrs. Seutemann*. Laying on his stomach, the patient's body was opened up on the right side next to the spine at the height of the thoracic vertebra. The observers could clearly see exposed sinews and muscles. The healer removed some indeterminable pieces of tissue with a pair of tweezers. The patient was then positioned on his back and pieces of tissue were removed from the side of each knee. The whole procedure took around 5 to 6 minutes.

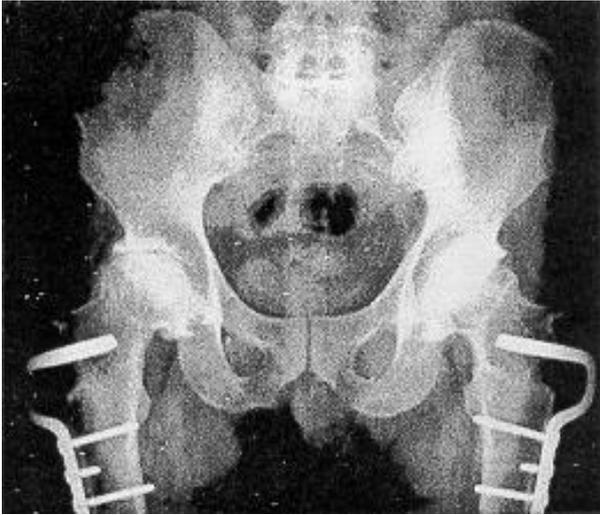
The patient was able to get up unassisted and walk around the room a few minutes after. Half an hour later, he walked unassisted down the stairs into the garden. Still in the Philippines, the patient was able to walk for about 10 minutes at a time without support. Discomfort in his ankles then forced him to rest.

Once back in Switzerland, his recuperation continued. His ability to walk constantly improved over the next weeks. The patient resumed his job and he was able to hike in the mountains for hours. He declared that his physical capabilities had again reached 75%. But for instance skiing was no longer possible.

This condition of improvement continued until 1977 (ergo 5 years). X-rays, which show the condition of the patient before his treatment on March 12, 1972, were unfortunately not made available to me by his cantonal hospital. However, the patient kindly provided me with two x-rays, which he had made privately on 22nd of May 1973, of which one is shown in pictures 18 and 19. These images show that even after successful treatment by *Agpaoa*, *there are still serious destructive changes in the hip joints.*

A specialist surgeon assessed the x-ray images for me as follows, but without being able to examine the patient himself:

"There are two x-rays in front of me showing adduction and abduction positions of the legs. We are dealing here with a sequelae of Perthes' disease with severe deformity of the femoral heads. A subtrochanteric osteotomy was apparently performed to correct the malalignment of the femoral necks. This achieved an optimal correction of their positions. The location of the osteotomy has been fixed with an appropriate nail on either side. The femoral heads as well as the acetabulum show the most severe destructive changes in the form of severe coxarthrosis, stronger on the right than the left, which usually results in severe stress pain with painful movement restriction of the hip joints. As a rule, the ability to work is severely limited, and since it is generally a progressive disease, the prognosis is not favourable."



Picture 18: X-ray of the pelvis of a Swiss patient taken on the 22nd of May 1973 showing severe destructive changes to the femur heads and the acetabulars. The treatment by Tony Agpaoa rendered the patient almost free of symptoms.



Picture 19: Enlarged section of picture 18 (right hip joint).

Thus far the medical findings. The fact is that the patient's subjective state of health and objective physical performance are much better after *Agpaoa's* successful treatment than the x-ray findings suggest.

This gives the following result: *Agpaoa's* treatment has obviously failed to eliminate the destructive changes in the femoral heads and acetabular cups. If however a considerable improvement of the condition has occurred, it is essentially due to the permanent elimination of the regions high degree of sensitivity to pain. But the healing process has not been brought about by surgical-conventional medical measures, as indeed the 1967 made correction to the malalignment of the femoral necks has not brought the patient the slightest relief of his condition either.

- *Here, a healing event of an unknown kind has started, showing very clearly the great difference between the quasi-surgical measures of the Philippine healers and conventional medical surgery.*

It remains up to future research to determine what proportion of these healings, the healers themselves, the patient's inner attitude and others, for instance non-physical factors have.

The question now arises, why did the cure or recovery only last five years?

I telephoned the patient Mr *Dobesch* on the 22th of October 1985 and asked him about his state of health. He proceeded to tell me that *Agpaoa* told him that he must always be aware that he is very fortunate to have been freed from the wheelchair. That he must take care of his damaged joints and that he shouldn't ask too much of them.

He did unfortunately not heed this advice in any way.

In his job he physically took over the construction of a machine factory with 50 employees. Until 1977, he was completely symptom free. He then had a first heart attack in 1977 and nine months later a second. As a further consequence, his psoriasis had deteriorated again and had turned into a psoriasis vulgaris. He once again received large amounts of cortisone and prednisone, which in turn fuelled degenerative changes in his hip joints and generalized osteoporosis. In addition, a colon operation was required. In 1985, he had to undergo the 24th hip replacement surgery in Zurich. He could only walk laboriously on two crutches. But his own fate was his own fault. He had ignored the healer's advice. Tell people that!

10. The healers Placido Palitayan and Virgilio Gutierrez

The next healer in the movie is *Placido Palitayan* who lives in Baguio City. There is a simple chapel next to his house, often the place of his curative treatments. *Palitayan* was 32 years old in 1973 and a healer for 15 years. Twelve years ago in full trance, that is to say, by switching off of his own consciousness, he performed his first gory intervention on a woman with a distended abdomen. Because of the splashing blood, all bystanders ran away. Later and today (1973) he treats whilst full conscious, whereby only his hands are paranormally controlled when performing these gory, bloody interventions. Most treatments are bloodless, for instance as massages, similar to the connective tissue massages we perform. The healer performed a gory operation on a woman with uterine complaints, but no tissue was taken from it. Something that was acoustically impressive above everything else was the splashing noise as if somebody was washing clothes. When asked about the meaning of the procedure, the healer stated that it was a kind of internal massage.

The healer *Virgilio Gutierrez* (Figure 20) lives in Quezon City, the capital city of the Philippines near Manila. He was 35 years old in 1973 and has been a healer for 17 years. He said the following about the beginning of his healing activity:

"The first thing I noticed was that my parents made me pray at the age of 4-5. In my youth I developed the faculty of clairvoyance after prayers in the form of seeing people, their charisma, their aura and also spirit beings. They always came to me. When I was eight, my parents moved to Manila. After this change of place, all of these spiritual things were forgotten, but later, when I was 18, I had some friends who played basketball and suffered ankle strains. I always massaged them and this healed them.

Sometime later I learned something about the spiritual centres here and could hear a medium in a trance would speak my name, even though I did not know this medium, this lady, and I believe that she too did not know me, because we had met for the first time. She gave me lessons about her work, the healing processes and the spreading of God's deeds. And then she told me to go to a certain province, but I did not know how to find it. But spirit guides told me that they wanted to accompany and guide me. Arriving at the destination people were waiting for me. I was very surprised that many people were waiting for my help when I arrived. They said they were waiting according to a transmission from their spirits, saying that someone would come to do spiritual healing.

After doing this work for six months, I got into a full trance and people always said that I operated on

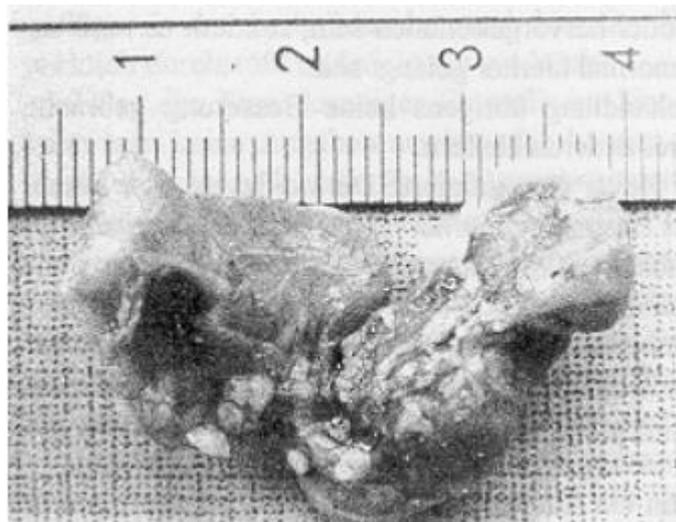
them, that I performed psychic surgery by opening the body and taking their illness away. However later, I no longer went into a full trance but only into a half trance. After that, I developed the ability to hear clairaudient, ergo mentally and also a general sensitivity, telekinesis, intuition and other things. My guide told me later to build some chapels. And I built five. After that, the last two years, my guide asked me to build a bigger chapel, like a church. Furthermore a school for mediums, a healing centre and many other things, because there are many people waiting to learn all about this spiritual work in order to develop their spiritual perfection. "



Picture 20: The healer Virgilio Gutierrez in Quezon City in his treatment room February 1973.

Gutierrez performs mostly bloodless treatments like most healers except Agpaoa. During bloodless treatments, the Bible is often laid on the head or under the head of the patient.

The film features two gory interventions on middle-aged Filipino women. The first procedure, which can be seen in the introduction to the film, takes place on the abdomen. But because of unfavourable location of the camera, one cannot look inside the body. The healer removed a piece of tissue, shown in Picture 21.



Picture 21: Lymph node, taken from the abdomen of a woman on March 25, 1973 by the healer Virgilio Gutierrez.

The forensic examination findings are:

Sample 1: "It is a body of oval, indicated kidney-shaped structure, surrounded by a soft connective tissue capsule that contains fat cells, but also small round cells of the lymphocytic type. The tissue consists of tiny lymph nodes (follicles). These are sufficiently filled with small round cells, but loosely placed in the centres. The reticulum cells are usually adipose in a dust-like manner. The framework is inconspicuous.

The crevices (sinuses) are inconspicuous.”

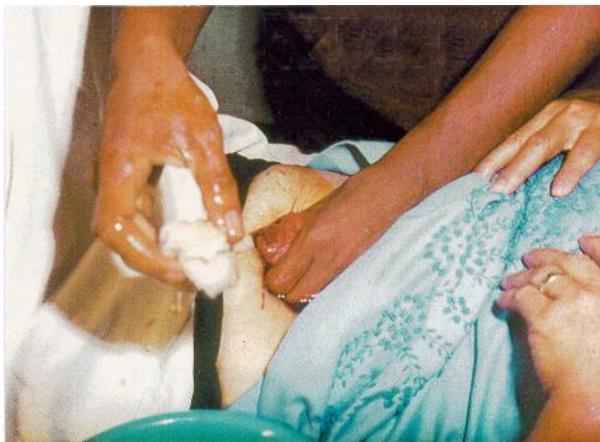
Diagnosis: “Lymph nodes, possibly from a region close to the skin.”

The same piece of tissue was also examined by an Institute of Medical Microbiology. The examination result reads:

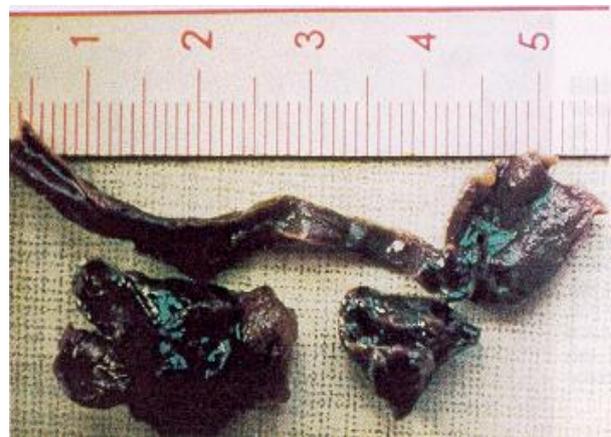
“The presented lymph node reveals a strongly thickened connective tissue capsule and more eosinophilic leukocytes can be recognized in the enlarged sinus and connective tissue stroma. The architectonic is largely preserved. The germinal centres are activated.”

Diagnosis: “Chronic, non-specific lymphadenitis (lymph node inflammation).”

The second bloody intervention performed by the healer *Gutierrez* in the film concerns a woman going through menopause of whom we were told that she had a pelvic tumour. This diagnosis was however not made by a doctor.



Picture 22: On the 27th of February the healer Virgilio Gutierrez pulled out a tissue part from a patient’s abdomen and inspected it. He then immediately removed a blood clot.



Picture 23: Blood clot taken by the healer Virgilio Gutierrez during an operation (See Picture 22) on the abdomen of a patient.

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the surface and that the healer sought something in it. Picture 22 above shows how the healer pulled a piece of tissue or organ to the surface. It then disappeared again under the hands of the healer.

He finally pulled out an oblong and black structure completely out of the body. It is shown in picture 23. The forensic examination report reads:

Sample 4: “Red blood cells packed tightly, partially surrounded by a web of fibrous material.”

Diagnosis: “Blood clots.”

11. Training and effectiveness of healers

Gutierrez’s house also hosts a psychic development program for prospective healers every month between 9pm and 4am following a biblical reflection. The development of psychic abilities takes place in the same way as is the case with European spiritist communities. It’s not about learning a skill, like writing or learning to drive, but about turning off your mind and making it available to a guide from another world. In any case, this opinion is shared by Filipino and European paranormal healers.

The well-known British healer *Harry Edwards* (1893 - 1976, healer since 1935) comments on the

problems in connection with this in the following way¹⁶:

"The first and perhaps most important lesson the healer has to learn is that *he does not* heal. The healer's body has no special ability to pinpoint the cause of another person's illness. His spirit does not have the knowledge to know the healing process and there is no technique to learn it. The healer is merely the tool of the spirit guide who uses him as a 'healing channel' if the healer is ready and able to connect with him.

Every healing is a conscious, intelligent action by a spirit being. Therefore, it is not possible for us to acquire the ability to heal through any type of technique. The healing powers work through us; they do not stem from us.

As the healing comes from another dimension and we have been unable to fathom its correct application to this point, no healer is in a position to predict the result of a treatment in every case. Apart from his responsibility, it is therefore not in the healers hands to make a prognosis.

But the healer should at the same time not set limits in his own imagination in regards to the healing capacity of the spirit guide. I have often been faced with a case of chronic illness. My clinical mind might have thought that 'nothing can surely be done in this case'. But to my surprise and joy I also saw a successful cure under such seemingly 'impossible' conditions.

I list the case of the wife of a Methodist priest here who asked to have her weak sighted right eye healed; her left eye had been blind for 30 years. We thought it highly impossible that the blind eye could be healed and this is why we didn't bother trying to heal it, we placed all our concentration on healing the right eye. But once the treatment had come to an end, she was able to see perfectly with her left eye also. – A short time after this healing a similar healing took place, namely the healing of the hearing of an Anglican priest who had been totally deaf for many years. – An even more impressive case was that of a young man whose spine had been crippled since birth; it was formed like a regular 'S', formed a hump and it was completely stiff. I thought to myself that these afflictions have progressed and are so deep-seated that we could not reasonably expect a change; but we made an attempt. I felt to my surprise that the spine began to yield, turned flexible and straightened itself.

Hundreds of successful healings came about whose successful outcome nobody with a bit of 'common sense' would have dared to predict and they show us just how limited our knowledge about the enormous possibilities the intervention of the spirit and also the world of spirit offer in regards to the structure of the laws of nature.

It might be quite obvious that a single spirit guide cannot possess all knowledge in regards to healing, the way a doctor on Earth can also not know all human pathological conditions and their cures; we would otherwise have no specialists. It becomes quite obvious that there are 'otherworldly specialists' that have studied certain aspects of healing and their associated legalities more intensely than other spirit guides. This is why the spirit guides that are most suitable for the treatment of specific ailments are 'allocated' by the Spirit Organisation in charge to equally suitable terrestrial helpers in order to carry out the best possible treatment.

The question is now whether the paranormal healing methods practised in the Philippines might be based on centuries old traditions and possibly stem from folk religions and folk medicine. But the people of the Philippines and the *Union Esperitista Cristiana* are unaware of such things. These healing methods only developed during the 20th century on the foundation of Christian Spiritism. But their visual similarity to shamanistic practices is on the other hand quite obvious. One must further consider that the various ethnic groups in the Philippines are related to peoples that practise Shamanism. Their common heritage might be the cause of these closely related paranormal apparitions.

- *It is well-known that paranormal abilities are anchored within one's genotype.*

¹⁶ See references 3, page 37, 28, 54 and 173.

12. Materialisation, dematerialisation and apport processes observed with healers

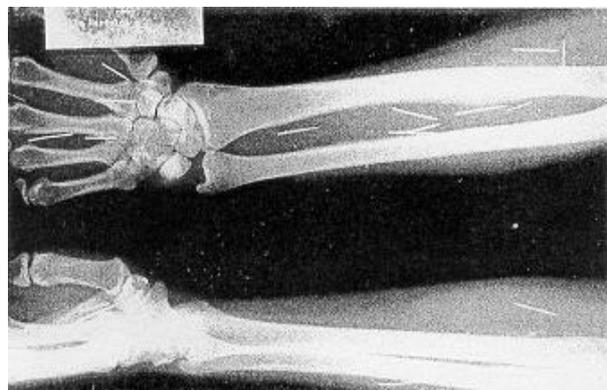
We are now going to deal with one phenomenon associated with healers from the Philippines that has already been touched upon. In rural areas, far from cities, healers don't just extricate tissues parts from patients, but also parts of plants (See picture 11), blood soaked cotton wool and other things. The patient is then told that these things had entered their body through black magic. This is not completely impossible, because this has been observed now and then in severe, individually concentrated hauntings.

The case of *Gottliebin Dittus*, who had been examined and healed by *Pastor Christoph Blumhardt*, is a distinctive, ergo a historical example.¹⁷ The most astonishing things emerged from Gottliebin Dittus and this without her being operated on.

Until recently, a 50 year old woman lived in Brazil who had needles and pieces of wire emerge from within her body ever since she turned 15 years old. Most of them were pulled completely free with a pair of pliers. What is of pertinence here is that these pieces of metal were also detected tightly under the skin on x-ray images, one image for instance showed more than 120 sewing needles. This case was presented by the *Privobis-Filmgesellschaft* in a film in 1970.

The Austrian-German film director *Rolf Olsen* (1919-1998) was able to record the same kind of case in his documentary "Die Reise ins Jenseits" (Journey into the hereafter) (1975) in Brazil. An American mother, whose son had committed suicide because of his unrequited love for a Brazilian of Swiss heritage called *Otilia Bertoldi*, arranged out of revenge a voodoo ceremony to the detriment of *Otilia* year after year. This ritual was performed during the 'night of the evil demon *Eschu*' from the 21/22 of April in front of an altar dedicated to him. A recompensed priestess, murmuring imprecations, pushed a series of needles into the body of an ordinary ragdoll. The ragdoll thereby symbolised the victim that lived in Indaiatuba. *Olsen* was able to film this event without initially knowing what it was all about, he only became aware of the details later.

A tip by pastor *Quevedo* drew his attention to the victim and he found out that the victim had to go to hospital for treatment, something that happened three times before over the years. The original x-ray images instigated by *Olsen* (Picture 24) that I have in front of me show 17 needles or pins of steel embedded in the soft tissue and muscles of the forearms and hands and this in a way that they could not have been inserted by the patient herself. The needles were removed during an operation performed by *Dr. Ramos*, something *Olsen* also recorded on film.



Picture 24: X-ray image taken on the 24th of April 1975 on two levels of the left forearm of Otilia B. from Brazil who had fallen prey to an evil spell. This is the fourth time that an Umbanda priestess had magically introduced needles into her forearms during the night between the 21/22 of April. There were 17 pieces in 1975.

¹⁷ See references 19, page 20f

As was mentioned before, similar phenomena were also observed with certain healers from the Philippines. They not only produced such things from their patients in front of the eyes of spectators, they for instance effected the disappearance of cotton wool inside the body. Anyway, the spectators had the impression that the cotton wool disappeared inside the body. The hands of the healer are empty after.

I was able to record such an event in the 5th of March 1973 with the healer *Josephine Sison* (Picture 25) from Barangobond near Villiasis. *Dr. Naegeli* was the guinea pig. The healer inserted a ball of cotton wool into his chest. The process was painful for him.



Picture 25: The healer Josephine Sison making a diagnosis at her treatment room in Barangobong near Villiasis in March 1973.

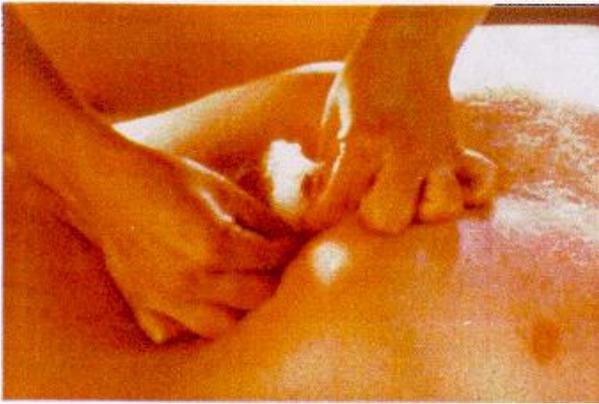
To the spectators, including myself, it looked like the cotton wool was actually worked inside the body. But the analyses of the recorded film later showed that the cotton wool became thinner and thinner and finally dissolved and that this made it disappear. We therefore recorded the process of so-called dematerialisation for the first time on film. One can assume that the healer did not know the exact circumstances of the procedures that she performed. Pictures 26 to 30 show five frames of the film taken 1.5, respectively .5 of a second apart.



Picture 26: On the 5th of March 1973 Josephine Sison seemingly pushes cotton wool into the body of a patient (Dr. Naegeli from Zurich) for healing purposes. The cotton wool does actually dissolve between the healer's hands above the patient's body, it dematerialises.



Picture 27: Dematerialisation of the cotton wool 1.5 seconds after picture 26 was taken. The bottom end of the cotton wool has already materialised.



Picture 28: Dematerialisation of cotton wool with the healer Josephine .5 of a second after picture 27 was taken.



Picture 29: Dematerialisation of cotton wool .5 of a second after picture 28 was taken.

Picture 30: Dematerialisation of cotton wool .5 of a second after picture 29 was taken. The cotton wool is already almost completely dissolved and it hasn't been physically pushed into the body. Nothing of the cotton wool can be seen a half a second later. The healer moved her fingers only sparingly during this process and it looked like she was pushing the cotton wool into the patient's body.



It is now feasible, and I already indicated this, that the reverse process, namely the retrieval of objects or tissue from the patient's body is often just an apparent retrieval, but in reality the reverse of dematerialisation, ergo materialisation itself. Our observations and our films do however not provide us with proper evidence.

The assumption of a process of materialisation comes relatively often to the fore with certain interventions performed by *Tony Agpaoa*. In lots of cases it is clearly visible to observers and on film and in photos that *Agpaoa* didn't open the body of the patient, but that he only pressed down on it with his hands. A shining, often transparent and sometimes colloidal looking deposit appears instead that is often red inflamed, possibly through blood, picture 31¹⁸ below shows such a process.

Superficial observers immediately asserted in those cases that one is dealing with fraudulently placed sheets of plastic and that this furnishes the evidence of a fraud. Accurate inspection of such photos however show that placed sheets of plastic would look entirely different. One can a priori only assume a process of materialisation and this is something that would not be something unusual in connexion with this.

¹⁸ See references 25, page 106



Picture 31: Tony Agpaoa treating a patient. The neck is not opened, but a temporary shining, red inflamed, colloidal looking deposit, a so-called materialisation is visible. (Taken from references 25, page 106.)

The materials required for such so-called materialisations are with relative certainty extracted from the environment. The cotton wool that almost all healers use in abundance during their interventions might also play a role in this respect. It is generally soaked in water. The healers hold and move it between their hands during the intervention.

The healers give different, but not very convincing information about the necessity and importance of cotton wool. They might possibly not know themselves what purpose cotton wool serves or whether it is absolutely required. One must at least consider that cotton wool serves or could serve as a supplier of the material for the assumed materialisation processes.

When observers are suspicious and think that cotton wool only serves the purpose of smuggling tissue parts and blood to where the “operation” is performed, the healer allows the observer to remove the cotton wool from its originally packed packet or bring their own cotton wool and that they soak it in clear water themselves.

Parapsychologically untrained observers of these pictures and films about paranormal, quasi-surgical interventions can often not comprehend at all that the body of a patient could be opened without a scalpel and then close up without leaving a scar behind. Such things are beyond their imagination, meaning that it is outside of their world of experience. These observers have to be told that one can separate a lot of substance in normal physics (Above everything else, metals) not only through sawing or cutting them, but also by converting them through specific physical influences (Heightened temperatures, with ice for instance, or heightened pressure) into a different physical state, namely a fluid or gaseous state. These materials are then separable without a saw in that state. If one undertakes this process very carefully, one can weld the separated parts together again under high temperatures for instance, once the specific physical influences have fallen by the wayside, and this without having a visible earlier outline in specific cases.

It is quite possible that with the phenomena produced by the healers from the Philippines and others, during similar parapsychological processes, physical matter is temporarily changed into a different, for us yet unknown physical state, and that it then becomes separable and penetrable.

The materialisation and dematerialisation processes observed with the healers from the Philippines are, as already mentioned above, not something completely new, they have also often been observed during experimental meetings by European and American mediums. Two reports shall serve as examples. First a report by *Dr. Janos Toronyi*¹⁹, who had been president of the *Hungarian*

¹⁹ See references 26, page 243

Parapsychological Organisation until 1944 to then become president of the *Sociedad Argentina de Parapsicología*. Between 1923 and 1938, he experimented in Budapest with cabinetmaker and medium *Ludwig Pap*. Here is his report²⁰:

“With *Ludwig Pap*, the best Hungarian apport medium, specific periods were noticeable in regards to the nature of his apport items. Items of equal nature were produced during certain periods. These were twigs, leaves and flowers to begin with, stones, sand, icing sugar, mortar, flour, wheat, barley, and semolina followed later and there was a period where beans dropped out of thin air, like rain, and covered the whole room. The grains of corn dropped out of thin air in a similar way. Sand, icing sugar or flour dropped slowly and evenly minute after minute down onto the phosphorescing top of the table. This happened when the medium used an empty, loosely woven basket that had been painted with a phosphorous substance: the sand, icing sugar, flour, wheat, barley or semolina seemed to come out of this basket. The restricted space within the basket might have been conducive to producing the condensation and materialisation of these substances.

There was a period where things did not drop out of thin air, but developed under the hand of the medium *Ludwig Pap* onto the phosphorescent table top. One of the participants placed her right hand onto the table top and when she removed her hand we found twigs, flowers, pussy willow, stones, sugar cubes etc. It looked like these things had emerged from the table under the medium’s hand.

What I think is remarkable is that *Ludwig Pap* once placed the hand of one of the people sitting in his circle, namely *Colonel Zdenko Thour*, palm down onto the phosphorescent table top, then asked three more participants to also place one hand on top of said person’s hand to finally place his own right hand on top. After a few seconds had passed, *Colonel Thour* announced that some hard object was growing under his hand, he thought it was a stone and it continued to grow. When they were instructed to remove their hands by the controller, they found a smooth stone on the phosphorescent top the size of a hen’s egg, one that I later added to my collection. During the same period I became witness to seeing a sugar cube emerge from the phosphorescent table top. Once it had reached its proper size it gradually diminished until it had totally disappeared. But the cube dropped onto the table top after a few minutes had passed. This phenomenon repeated itself quite often in this fashion and all of us were able to touch the sugar cube once it had reached its full size, to then place it back on the table so that we could observe its diminishing act and then see it fall onto the table again. These objects are still part of my collection.”

In regards to the raining down of beans and corn kernels described in the previous report I have to tell you that from a distance of 50cm I observed grains of rice become visible on the uncovered stomach of an older, female patient on the 11th of March 1973, during a healing treatment by the then 71 year old healer *Franzisco Sarmiento* from San Manuel near Tarlac. They didn’t fall from the ceiling in this case and they were also not thrown, they silently appeared on the skin of her stomach. The healer carefully picked them up with his clumsy worn-out hands.

The next report concerns an occasional dematerialisation and it stems from the foreign theology professor *Dr. Haraldur Nielson* (1868-1928) from Iceland. As from 1904 he participated in experiments carried out with the young printer’s apprentice *Indridi Indridason*. The report goes²¹:

We experienced one phenomenon that most would regard as incredulous three times: The left arm of the medium was completely dematerialised. The arm disappeared completely and could no longer be found, even though we switched on the lights and closely examined the medium. Seven people were mentioned by name on the last evening that were supposed to examine this phenomenon. They carried a light around the medium, but the empty sleeve was just hanging down. They were allowed to touch her around the shoulder, but were not allowed to uncover it. Instead of swearing that this was true, all seven member of this examination committee signed a written statement about it. I know very well that this phenomenon is rare, but it is not entirely unknown. I got to hear about it through my correspondence with a psychic researcher from France who told me that it was observed there later and actually also photographed.”

²⁰ See references 26, page 243

²¹ See references 12, page 21

In concluding it has to be said that these so-called materialisations and dematerialisations happening in parapsychology cannot be equated with dematerialisation processes taking place in physics, as these for instance take place in nuclear reactors or solar stars. Matter is here permanently, and not just temporarily, converted into energy, preferably into energy of an electromagnetic nature. The conversion of one gram of matter delivers the energy of 9×10^{13} , ergo nearly 100 trillion watt/sec. Such amounts of energy are however never released during paranormal processes. Besides, the sun loses the mass of 4.22 billion kg/sec through its energy emanation.

When talk turns to the process of dematerialisation one talks about a physical process yet unknown to us, whereby matter, sometimes only temporarily, transforms into an unknown state thereby becoming invisible. This phenomenon, known for over 150 years, is highly important from a natural science's point of view and it will considerably expand our physical view of the world once it's been elucidated at a later date.

Paranormal healing methods, from a collective point of view, still leave a lot of questions unanswered and they require further investigations urgently. But it is unfortunately very difficult or impossible to experiment with mediums. One must bear in mind that filming and all investigations interfere in the first place because of the disquietude setting up the equipment causes. Furthermore, everything takes place during constant consultations whereby patients wait to be treated, but not for being used as guinea pigs. This is why phenomena are difficult to control and get a grip on experimentally. A lot of patient work is still required and it presumes the favourable obligingness of healers. But one can unfortunately not necessarily expect this, because it has been common practise up to now to brand healers impostors.

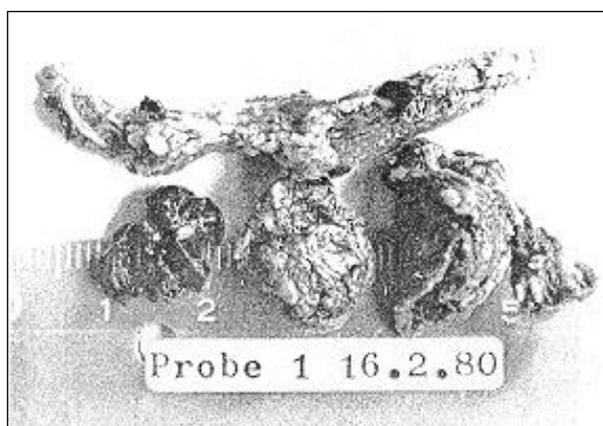
Paranormal healing in the Philippines (Film 2)

This film was recorded in the Philippines in February 1980. It is also a 16mm colour film with magnetic sound in German and light sound in English and it runs for 48 minutes. It shows the work practises of other healers from the Philippines, one for instance sees the healer *Rosa Agaid* from Urdaneta in the lead up.

13. The healers Placido Palitayan and Jaime Pusot

The first part shows the healer *Placido Piltayan* at work in his treatment room in Baguio. He extricated a streak-like substance mixed with blood-like fluid, from a female patient that asserted to suffer from a gastric ulcer and this was however done without showing visible incision on the skin. The healer meant that he was dealing with an artery filled with blood.

Later pathological test on tissue sample 1 (Picture 32) however revealed that one was dealing with vascular-rich, adipose connective tissue with an abundance of nerve fibres in the form of a cavernous vascular conglomerate with signs of traumatic damage to the superficial haemorrhage. But it wasn't possible for the investigating pathologist to classify it within the structures of human or pathological anatomy.

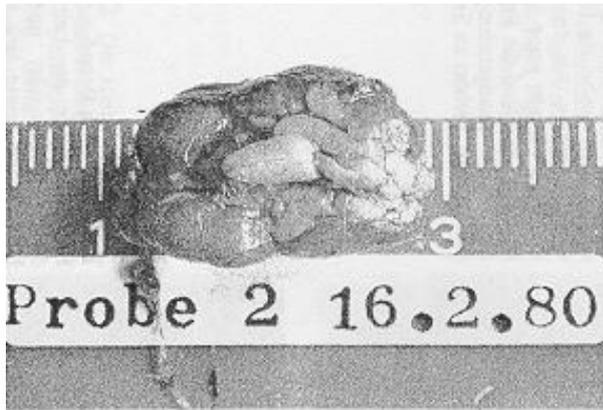


Picture 32: Vascular-rich, adipose connective tissue the healer Placido Palitayan removed from a female patient on the 16th of February 1980.

The next section shows the healer *Jaime Pusot* called *Jimmi*, treating a Filipina. He is a colleague of the above mentioned healer *Placido Palitayan* and works with him in Baguio. He is seen pushing down on the body of a female patient. Some blood emerges from under his fingers and a small blood clot is pulled out.

This is followed by a treatment of the same patient's eyes. A bloodlike fluid immediately becomes visible. The patient is now treated in the region of the kidneys. But a mechanical penetration of the skin is not visible. Only a bloodlike fluid emerges. A small piece of tissue is removed. It later turns out to be a hazelnut sized tumour (Picture 33), but it is something that is not common within the human anatomy according to the pathologist.

This healer *Jamie Pusot*, and also his colleague *Placido Palitayan*, gave the impression of being in a trance. The back of the female patient was wiped after the end of the treatment.



Picture 33: Tumour from the reticuloendothelial system the healer Jamie Pusot removed from a patient from the kidney region on the 16th of February 1980.

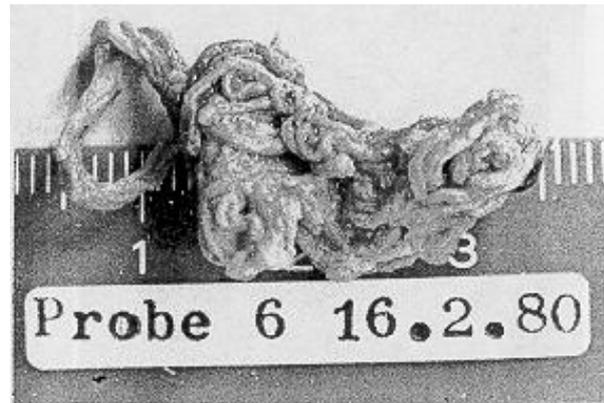
Placido Palitayan afterwards explained the tissue sample 1 (German: Probe 1 + 2) and tissue sample 2 removed from the last two patients that he had placed on a plate:

“These are plugs. This is what we call them in our healing methods. We believe that this is blood in all its states. - This is part of a tumour and this is the tissue. But we usually do not know its name. It would have to be medically examined, because physicians are the only ones that know what it should be called. – And this is, I believe, also a part of the illness that was removed.”

The pathologist regards sample 2 (Picture 33) that he examined in Friedrichshafen is a solid tumour from a lymphatic organ from the reticuloendothelial system. According to its construction, it should however not stem from the human anatomy.

The next patient was from Austria and expressed the wish to be examined and diagnosed. He allows himself to be treated by *Jamie Pusot* for study purposes without actually having any appreciable afflictions. The healer pulls a lengthy piece of tissue from the right groin region. This piece of tissue (Sample 6) was immediately fixed and 4 weeks later pathologically tested. You can see it in picture 34. We are dealing with a structure of intertwining passages furnished with smooth musculature. The examining pathologist is not familiar with any such structure within the human anatomy.

Picture 34: Structure of intertwining passages furnished with smooth musculature the healer Jamie Pusot removed from the groin region of a patient.



14. The healer José Mercado

The healer *José Mercado* lives in Bacag near Villiasis and has his own little chapel there. Here in the film he however treats American and other non-Philippine patients at a hotel in Manila within the framework of the Philippine organisation called '*Christian Travel Centre*'.

You see him push down on the body of an elderly American woman, creating a channel with his hands whereby the point of a piece of tissue appears in its depth. The healer pulls this longish, fattish looking piece of tissue from the body whereby one can however not see an opening of the abdominal wall. One further piece and a blood clot is also pulled out. Emerging blood doesn't coagulate in such a short time under normal surgical interventions as it did here with this paranormal treatment. We were however unable to take any tissue samples for testing with this healer.

This is followed by a similar intervention on another American woman. A roundish piece of tissue with an attached blood clot is pulled out. The healer explained his procedure in the following fashion:

"I cannot explain this because I am in a sleep-like state. I don't know what I do, because spirit beings come to me. This makes me capable of healing patients. This happens through God's power."

15. The healer Virgilio Gutierrez

Virgilio Gutierrez was already introduced in section 10 of the first film (Picture 20). He lives in Quezon City, the capital of the Philippines and the sister city of Manila. A number of Christian-spiritistic healers live there. By 1980, Gutierrez had been healing people for 23 years. The film shows his residential home that also serves as a meeting place for a small spiritistic community.

An American patient with a discomfort of the lumbar spine is treated next. A blood-like fluid emerges from the treated area. The patient had this to say about his successful treatment:

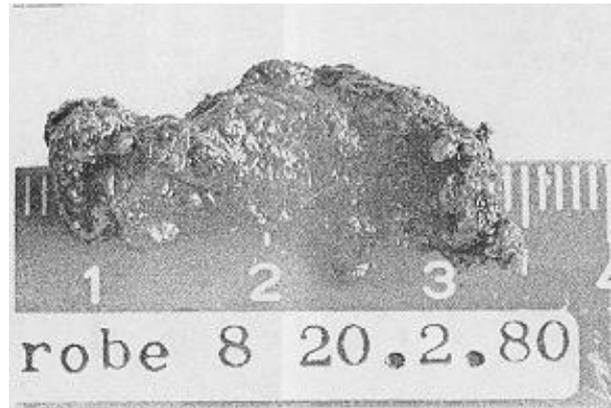
"My name is Theo Drum. I am presently studying at a Philippine university. Prior to that I served in the US marines. It was my task to service diesel engines. I suffered from pains to the lumbar spine, caused by a spinal fusion, for seven years. This is a conventional medicine diagnosis. The spinal fusion was the result of a swimming accident. It caused me constant pain, comparable to a slight toothache. But now, after the intervention, I no longer feel the kind of pain and the muscle cramps I suffered from before the treatment. I have just made an attempt at lifting something. I was able to lift a man in a chair, roughly 80kg, without complaints and without muscle cramps."

An American patient is being treated because of a lump in her left breast. The healer fumbles with

her bosoms. A bloody fluid runs down. He then pulls a dark red piece of tissue from her chest. Our doctor takes this piece of tissue into safekeeping. We had the yielded sample 8 (Picture 35) examined, whereby the examining pathologist didn't know that the sample came from an intervention performed on a woman.

The result reads:

“The microscopic test shows adipose and connective tissue with gland-like structures akin to sweat or milk glands that share the same heritage from a development history's point of view.”



Picture 35: Adipose and connective tissue with gland-like structures akin to sweat or milk glands the healer Virgilio Gutierrez removed from the bosom of an American patient who complaint about lumps in her breast.

I asked the healer questions about his healing activities:

Schiebeler : Mister *Gutierrez*, how do you perform these bloody interventions and in which cases is the body actually opened?

Gutierrez : When we have a medical background, like for instance with x-ray images of a tumour, we can perform actual operations. And then there are cases for instance like that of an American with sciatica whom we could heal for a long time, because we have a collected energy at our disposal here, virtually materialisations. To see something akin to blood might be of some benefit to him. This will make his complaints go away, because they are very specific complaints. – During the healing treatment I just performed I was guided by my spirit guide and this always happens when I heal.”

16. The healer Alex Orbito

Another healer, *Alex Orbito* also lives in Quezon City. He is also the reverent of the local spiritistic community. A small choir always sings before the healing treatments start. The healer enters the treatment room and immerses himself in prayers. He reports about it:

“I concentrate deeply and fervently pray to God asking him to turn me into a channel for his healing energies. I then say the secret mantra my spirit guide gave me and I am suddenly turned into a different being, into a holy person who's only remaining thoughts and feelings are of love, mercy and compassion for the sick. At this moment I no longer feel like Alex Orbito, but only as a transmission path for God's healing energies.”

A Filipina patient who complaint about severe chronic headaches is treated around the neck. Under the healer's hands a larger blood clot with a fatty node hanging off it appears. The healer often performs similar treatments when sick people complain about discomforts in the regions above shoulder height. A sceptic conventional doctor will see no sense in this. He will however ascertain

that under normal circumstances, human blood bleeding from a sick person never coagulates as quickly as it seems to be the case with treatments performed by healers.

This Austrian patient suffers from complaints that stem from a broken neck, the result of a rear-end collision in a car accident. The healer once again performs an intervention on the neck and a larger blood clot with a fatty node hanging off it appears. The physician present ascertained that such a large enclosed fatty node was not present under that person's skin at this location. This node could therefore not have been simply pulled from or emerged from under the skin and must therefore originated from somewhere else, ergo must have got there paranormally. This treatment did actually not bring about an improvement and neither did the treatments he received by three other healers.

The healer popped an identified dermoid cyst on the next patient, a Filipino. This is not a paranormal process. What is exceptional here is that this process does not cause the patient any pain. This process is under normal circumstance quite painful without a local anaesthetic.

The following female patient with undetermined complaints has a sheet of paper placed on her moistened abdomen. A large spot appears on the sheet of paper and it is now examined by the healer in regards to a possible illness as if he was studying an x-ray image.

An intervention on the abdomen is now prepared for this patient, something that is often performed by the healer on female patients with complaints in the middle region of the body. His assistant in the picture on left with a Bible in her hands is a Filipina doctor who completed her studies and received her doctorate. She was once also a patient of the healer and joint him as a helper out of gratitude and her interest in medicine. The following intervention is possibly a genuine intervention whereby the abdominal wall is temporarily, mechanically penetrated, the abdomen is initially kneaded and pressed down upon. The previously introduced wet cotton ball now appears between the healer's fingers soaked in blood. The abdomen is once again forcefully pressed down upon. The hand disappears as if it was sinking into the body. The recorded film with its settings, does however not give us the concreted conclusion that the abdominal wall was actually penetrated. Relaxed female abdominal walls can be pressed down upon to a considerable degree and the blood that appears unfortunately prevents closer inspection. The evidence however lies with the subjective reaction of the patient. With all the treatment methods presented in this film the patients maintained that they only felt external manipulations. But the patients in the following series of interventions maintained that they felt that something was actually taking place inside of them.

The healer thoroughly searches through the lower regions of the treatment area with his hands. He finally pulls out a larger piece of tissue at the end of the intervention. This healer however didn't allow us to take any of the appearing tissue pieces with us for further examination.

A similar intervention to the one before is performed on the next Filipina. At our request the healer *Alex Orbito* shows us his empty hands before he starts. He then grabs a moistened cotton wool ball and begins to knead and push the patient's abdomen. The healer's hands then form a groove on the skin of the abdomen wherein a blood-like fluid begins to collect. The healer then jabs his extended index finger jerkily into the abdomen. He immediately removes a small piece of tissue and once again jabs his index finger into the body. One also gets the impression here that he actually penetrates the abdomen wall and not just presses down on it.

Conventional medicine cannot make any comments about the meaning of such interventions. They can in any case be rated as supportive and impressive psychotherapy, something that makes a

powerful impression on patients and observers alike.

An intervention on a new patient begins. The healer washes his hands and then takes a small piece of moistened cotton wool into his hand. He touches the abdomen. The first sign of blood becomes visible. He then stabs the right index finger into the abdominal wall. One doesn't get the impression that the finger and the hand simply rolls off the abdominal wall.

The question now arises, why do the healers perform such interventions only on women and only on their abdomen? The reason might be that the treated women have slacker abdominal wall than men and therefore are easier to penetrate. The underlying organs can easily evade the penetrating finger as it is being bent after the penetration most of the time. The paranormal effort for such an impressive event is less on a female abdomen. If a similar process with equal impressiveness were to be carried out on the head, the neck, the ribcage or the thighs, much larger and more dense tissues like bones, sinews and muscles would have to be temporarily, paranormally dissolved and then remodelled in order to allow the fingers of the hand to disappear to such a large degree. As these processes happen at 5 minutes intervals, the required amounts of energy must be used as sparingly as possible. The psychic impression on the patient and the successful healing in regards to the utilised energy, called the degree of efficiency in technical terms, is supposed to be as impressive as possible.

The healer introduced cotton wool to the treated area at the end of the process and allows it to disappear from under his hands. This process can be observed with lots of healers. They assert that the cotton wool is introduced into the patient's body for healing purposes, there to attract pathological compounds to then dissolve with them.

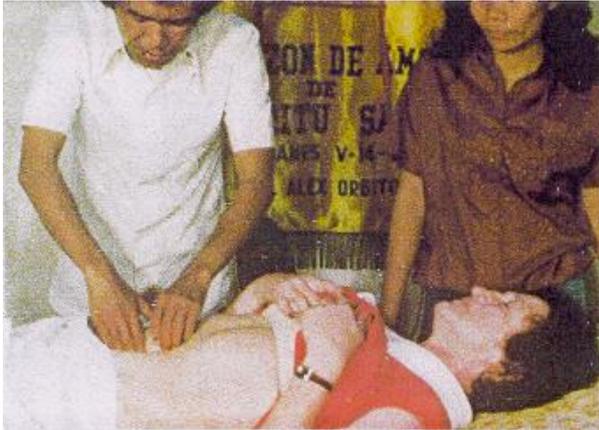
The next patient and the one after were part of our own travel group and could therefore be questioned in detail. The first patient had an arthrosis of the left hip joint. She can therefore not spread her left leg sideways and because the left hip becomes too painful she cannot sleep on her left side.

The healer makes the usual incision with his index finger. This attempt is apparently not successful even at his second try, the finger clearly bends. The patient described what she felt as follows:

“The healer initially felt his way along the left hip and then forcefully jabbed his finger through the abdominal wall. This caused a chirrupy sound and I had the impression that my abdomen relaxed at the same time. I actually felt that he had penetrated through the abdominal wall. The manipulation he then performed within my body felt rather uncomfortable to me, even though there was no pain as such. A small wound about the size of half a square centimetre became visible and could be felt after the intervention and it developed a scab the next day.”

The side-way movement of the left leg remained unchanged, but the patient was once again able to sleep on her left side, because the sensitivity to pain from pressure to the left hip joint had disappeared.

The next patient actually had no intention to be treated because of specific complaints. She was already leaving when, out of curiosity, she turned around and lay down on the treatment table. The healer prepares for the usual intervention (Picture 36). His hands form a groove on the skin of the abdomen and a blood-like fluid appears. He then plunges his index finger into her abdomen (Picture 37).



Picture 36: On the 21st of February 1980, an Austrian lady subjects herself to a bloody intervention by the healer Alex Orbito for experimental purposes.



Picture 37: The healer Alex Orbito stabs his right index finger into the abdomen of the Austrian lady. The skin is severely stretched, something the test person finds uncomfortable.

The patient describes her sensation as follows:

“I felt a powerful pressure on my abdomen. The pressure increased all the time and it was painful to me. Immediately after it felt as if the abdominal wall had burst opened. The spray from it actually hit my face. I had the feeling that he had penetrated right up to the root of his thumb (Picture 38). I could feel his resistance. He then bend his finger inside of my abdomen and this caused me a lot of pain. This pain remained with me for a number of hours.”



Picture 38: The index finger of the healer Alex Orbito penetrated the abdomen wall. This produced a chirrupy sound. The patient had a feeling that her abdomen wall relaxed.



Picture 39: The hand of the healer sank deep within the body of the patient whereby blood sprayed into her face. When the healer bent his finger in there, the patient felt that this was uncomfortable and painful.

Picture 40: The body was superficially wiped after the intervention and the abdomen wall remained unharmed.



The opportunity existed now for us to undertake subsequent trials with this and also the previous patient to see to what degree one can imitate these interventions without paranormal abilities. Film was accordingly recorded at my home in Ravensburg a few weeks later. After the doctor present had observed all the recorded healing processes from close proximity, he tried to imitate this process after a few preliminary exercises. Film and photo recordings were taken from the same distance and angles as with the healer, whereby the original recordings served as a template.

During the simulation the doctor positioned his extended index finger ready to puncture. But as he was unable to penetrate the abdominal wall, he had to bend his finger in order to give the impression that his hand was sinking in. With individual photos, this bending of the finger could be carried out unhurriedly. When comparing these photos with the corresponding stages of the original film recordings, no significant difference could be ascertained.

Both procedures, the healer's original and the imitation by the doctor, are now shown on film side by side:

“You can see the situation as it stands, the original with the healer on the right and left the imitation by the doctor. The still extended finger is pushed into the body to some degree, the original on the right, the imitation on the left. No difference can be seen. – The finger of the healer has sunken into a kind of funnel of the skin. The finger of the doctor is already bent and the ‘funnel’ of the skin is considerably flatter. The next attitude shows both hands had sunk deeper. The first and second joint of the doctor's index finger on the left are completely rolled under. – The doctor on the left now pushes his whole fist down on the abdomen, but the picture shows no difference when compared to the hand of the healer.

The film recordings do however show clear differences. The blood in the imitation is replaced with raspberry syrup. The doctor is unable to imitate the jerky penetration of the healer's hand. Bending the finger onto the pressed down and therefore taut abdominal wall takes more time than the paranormal penetration of the abdominal wall. To compare this we have another look at the original recording of the same patient. We once again observe the powerful pressing performed by the healer and the jerky sinking in of his finger. A blood clot with a fatty nodule attached is removed at the end.

The same examination is carried out on the patient with the arthrosis in the left hip joint. The film shows the beginning of the intervention by the healer. Both index fingers are pressed into the body up to the second joint. On the left the doctor and on the right the healer. No difference can be seen. Both hands have now penetrated deeper. The left however shows the first joints of the doctor's index finger in a crooked position. – The doctor then pushes his clenched hand onto the body. The effect is like the sunken in hand of the healer on the right.

Now to the imitation of the film recordings. The doctor can bend his index finger and push his hand down onto the body only relatively slowly. A jerky pricking of the skin is impossible for him. – We once again compare it with the original process: We observe the jerky pricking of the skin by the healer. But his second attempt with his finger doesn't succeed. The finger clearly bends. The removal of a blood clot then follows. After the completion of the imitation film recordings I asked both patients about their impressions:

Schiebeler : Both of you allowed a healer in the Philippines to perform a bloody intervention on you, we can see it here on film, and you have just had to endure an imitation of this intervention. Did you experience the same sensations during these imitations or were there differences apparent after all?

Mrs. West : The sensation was initially rather the same and the strong pressure on the abdomen felt just as uncomfortable as with the healer. But a different sensation entered the picture with the healer, namely a painful rummaging around inside and the pronounced

relaxation of the abdominal wall during the penetration, something that wasn't there today. And above anything else, there wasn't this uncomfortable feeling inside my stomach that I felt all day after in the Philippines.

Schiebeler : Mrs. Vogt, what were your sensations?

Mrs. Vogt : Well, I can actually only say the same. The pressure was the same, but the moment of relaxation was missing today and this feeling of pain inside was also missing.

Schiebeler : So that you had the impression that something was happening from inside and that not everything was due to the pressure applied outside?

Mrs. Vogt : Yes, I felt at the time that the thing that caused me pain was inside and this was lacking now.

Schiebeler : And you don't think that this is due to the fact that everything that took place here is because a somewhat inexperienced hand slowed the whole process down?

Mrs. Vogt : No, not really. The pressure was the same, actually a little stronger today, that's how I felt it. But the penetration of the abdominal wall wasn't there today and the pain inside also.

Another healing method performed by the healer *Alex Orbito* was the treatment of sinusitis and restricted nasal breathing, for instance because of polyps or nasal congestion.

The next patient has sinusitis. The healer introduces his little finger into one of her nostrils and twists it somewhat. The patient is asked to blow her nose, something she is obviously uncomfortable with. A small piece of tissue comes out of her nose.

This patient is restricted from breathing through the nose because of a chronic swelling of the mucus membrane. It is the result of sinusitis that he has suffered from for years. He had to use a mucus reducing spray on a daily basis so that the nasal passages were sufficiently opened. The patient describes his sensations during the intervention as follows:

“When the healer introduced his finger into my nostril I felt an increase in pressure that was unpleasant, but bearable. After the expulsion of a bean-sized piece of tissue, breathing with the left nostril was good. But the effect unfortunately lasted for two hours only, I then had to once again use the nasal spray.”

The next patient, a German living in Quezon City also suffers from a chronic congestion of the nasal passages. Only the regular usage of nasal drops makes breathing through the nose bearable. – The healer pushes his little finger way into the nostril that is most affected. He twists his finger and this causes the patient moderate pain. The healer then checks to see whether this process brought some relief to the nose. The patient then forces a polyp-like looking piece of tissue from his nose. Breathing through the nose is now free and easy. This successful healing unfortunately only lasted for a couple of days. We were allowed to photograph this piece of tissue, but we were not allowed to take it with us.

An ear, throat and nose specialist assessed the picture as follows:

“The colour and the size of the piece of tissue conforms to the turbinate pieces removed during an endo-nasal operation. The smooth surface and form makes one think of polyps. But an exact statement is not possible without a histological finding.”

And lastly a special kind of intervention, but one that takes place on most days. The healer asserts that due to black magic a foreign substance is located in the abdomen of this female patient. He now wants to remove it. – The healer fumbles with the abdomen. – Our doctor is asked to keep the covering sheet away from the abdomen. – The foreign substance or a part or preformatted form of it that is immediately pulled out, is already visible between his fingers at this point in time. What

catches the eyes is the bright brilliance of the substance, something that is no longer apparent later on.

This foreign substance is now pulled from under the hand. It unfolds into a meter-long plastic ribbon; this is a very impressive event in the eyes of the patient being treated and the spectators present. – Seven years ago, therefore in 1973, I only observed this phenomenon with healers in the rural areas and this quite often, but not with the healers in Manila or Quezon City. I assume that the reason is that the rural population might be more inclined to see such an event as being genuine and that they can therefore react more positively. The people in the cities might possibly dismiss it as a sleight of hand. But things might have changed in the meantime.

One might ask the question here: Are we dealing with a materialisation process under the hands of the healer or was the plastic ribbon actually under the skin of the patient? The first option is more likely, but the second option is not unlikely either. Analogical cases took place in Brazil whereby the magically introduced foreign substances, introduced through black magic to cause harm, consisted of pieces of metal. They could actually be verified through x-rays and removed through conventional surgical means. I already reported about this in chapter 12 (Picture 24).

Alex Orbito still travels around the world these days (1999) as a healer and he regularly comes to Germany, in 1980 he gave me the following information about his activities:

Schiebeler : Mr. Orbito, how do you carry out these gory interventions and in which cases do you actually open the body?

Orbito : You can see it when the body is actually opened and you can hear a noise like this (He produces a noise by snapping his fingers). You can see blood flow when I slide my hands inside. The patient feels something akin to pain when I actually open the body. Materialisations are however a different form of treatment. The patients actually feel nothing. When I place my hand like I do now, it is only on the surface and whatever comes out is a materialisation, anyway that's what we call it, for instance some blood. The reason why observers don't take notice of this is because they only want to see operations. But they must learn to tell the difference between these two processes. On the one hand we are dealing with materialisations and on the other hand with the actual opening of the body.

Schiebeler : Can you tell us something about this magic?

Orbito : The woman I have just extricated the magic object from (The meter-long plastic ribbon) always felt pain. She told me that she had been to see doctors, but that they couldn't find anything. The reason for this is that this magic comes from an evil spirit. All I did was remove the plastic cord. It doesn't entirely stem from the abdomen. A part of it is due to materialisation. Not all of it emerged from the body. But doctors don't believe this. But if they were to recognise some of these facts, the signs of good and evil spirits, they might possibly also understand something about good spirits. Magic (Black magic) fights against good spirits. This is why I removed this magic object, because it stemmed from a malicious spirit.

17. The Swiss conjuror Rolf Mayr

Opponents of paranormal healing and particularly the critics of the procedures performed by the healers from the Philippines always hold the opinion that assessing the question about whether one is dealing with genuine phenomena or trickery, exclusively requires a conjuror and not physicians or scientists. To furnish "evidence" for their assertions they have stage magicians imitate gory treatments of patients that are however so blatantly bad, that everyone who has ever seen a genuine "operation" in the Philippines immediately recognises that they are only dealing with a simulation.

In order to confront these assertions of trickery, I called upon the well-known trickery expert Rolf Mayr from Switzerland and I showed him my films. He won a lot of first prizes in national and international magician competitions and this in the most exacting genre of manipulations. He demonstrated on film how he can make thimbles and cards disappear and then make them magically reappear seemingly out of nowhere. His trick-technological abilities and his successes as a stage pickpocket and hypnotist make him an outstanding expert of perception deception. This is why he represents Switzerland on the PSI-Committee based in Lion, France who took on the assignment to objectively separate deception from genuineness, the art of trickery from the paranormal.

I showed this film to Mayr and I asked him how he would assess the processes recorded on film:

Mayr : After having looked at this film one could hold the opinion that the phenomena produced by the healers are also trickery. All of these processes can indeed be trick-technically imitated so that they look the same to the eye. But I must acknowledge that what I have seen here is genuinely paranormal, therefore not trickery, and this for the following reasons: In the early days I regarded the bending of spoons by *Uri Geller* as a magic trick. But after I personally investigated a lot of spoon benders, *Uri Geller* amongst them, I had to ascertain that such paranormal phenomena actually exist. And the phenomena recorded in this film completely conform to the legalities that I observed. These here simply took place with other substances. Besides, a trickster finds it impossible to showcase this over a longer period of time without having the spectators getting to the bottom of it. No trickster can trust himself to perform the same trick 30 to 50 times a day without being debunked. Some of the processes can indeed be trick-technically reproduced at short notice, but some certainly not. The removal of tissue from the nose for instance cannot be imitated without making changes.

In order to emphasise his opinion, Mayr performed an imitation of a healer's intervention with trick-technical means at my home. The "patient" was his wife and he pulled a roughly 10cm long, colourful gift wrapping ribbon from her abdomen. Mayr performed this three times whereby he reloaded the ribbon in secret every time. I was not able to recognise how he did that. Only after he revealed his trick did I realise that because of the hiding place for the ribbon (A somewhat extended finger joint, only a relatively short ribbon could be conjured up and this in contrast to the healer who had produced a ribbon that was a few metres long. But one can only recognise the hiding place in the film if one knows about it beforehand and if one stops the film at that point.

18. Conclusion

The attentive viewer of these film might have recognised that they were not showing an extension of conventional medicine here, but the healing methods from a different level of effectiveness, one that operates according to laws of nature we are not yet familiar with. Because these laws of nature have not found their way into our natural sciences, a lot of the observers of these paranormal process do not find them credible.

- *They do however overlook the fact that the presently known laws of nature only represent a sector from within all of nature and that not everything that cannot be explained at this point in time has to be a fraud. This is why the conclusions drawn from the comparison with traditional medicine are often wrong.*

Since time immemorial native tribes have used medical practises that corresponds with the processes shown in this film. Asiatic shamans, African witch doctors, Indio Curandeiros and christian-

spiritistic healers all channel energies into our world that stem from the plane of existence all of us will enter after our demise.

These narrations here should not encourage or request anyone to fly to the Philippines to have any kind of illness treated or to have a Filipino healer come to Europe to treat anyone. And least of all, nobody should be encouraged to forego a necessary medical procedure in the vague hope of a “miracle”. Too many Europeans, Americans and Japanese unfortunately fly to see Filipino healers thereby hindering them from performing their social and religious obligations to their own countrymen. Unlike us, financial reasons stop a lot of them from seeing a doctor or go to hospital. The spiritistic healer is therefore a necessary helpers for many of them.

The Filipino healers, who are actually Christians, see themselves as instruments in the hands of otherworld entities (They talk of *Holy Spirits*) and they perform their healing activities based on a solid religious conviction, because they take Lord Jesus Christ’s assignment literally:

Matthew 10, 8: “Heal the sick, bring the dead back to life, heal those that suffer from dreaded skin diseases...”

And also:

John 14, 12: “I am telling you the truth; whoever believes in me will do what I do...”

The fact is that treatments based on this principle (One also talks about spiritual healings), whether they are bloody or bloodless, patients are often healed from sometimes very severe physical injuries or illnesses or have their conditions mitigated in a fashion that is incomprehensible to us. But the fact remains that a lot of the sick do not experience an improvement and this is something we cannot give exact reasons for. It might possibly be due to a treatment session that was too short.

- *But we here in Europe should remember that we can also employ spiritual healing methods ourselves, but only if we want to and if we find the required confidence.*

James 5, 14-15: “Is there anyone who is sick? He should send for the Church elders, who will pray for him and rub olive oil on him in the name of the Lord. This prayer made in faith will heal the sick person, the Lord will restore him to health and the sins he committed will be forgiven.”

An Anglican priest called *John Cameron Peddie* remembered that healing was once a religious assignment and he practised it and wrote a book about it titled: “Die vergessene Gabe. Heilen als biblischer Auftrag heute.”²² On page 49 of this book he states amongst other things:

“It is my opinion that God’s healing energy does three things. Firstly it places patients into a situation where they can gain more benefits from the treatment by a doctor; secondly it helps to animate the body’s own healing energy and thirdly the divine energy supplies them with everything they need. As Jesus said: “All things are possible through God. (Matthew 19, 26).”

So when you are ill and when you want to do something for yourself that goes beyond your conventional medical treatment, you should take Peddie’s book to your parish priest and ask him to deal with you according to James 5, verse 14 advice. If the priest rejects this idea because he does not believe in its effectiveness, the plea for divine healing can also be complied with by a spouse or a friend. As a supportive treatment next to conventional medicine or naturopathy the laying on of hands and prayers can often have an unforeseen effect. The gory sideshows performed by Filipino healers is certainly not required.

²² See references 14

What is of importance when healing through prayers is that patients do not just change their life superficially by avoiding a pathological lifestyle and by taking medication, but that they also change their life from within. They must abolish inner posturing, ban hatred and envy from their heart and focus their life on God. They must support the healer's prayers through their own plea, their inner conversion and by supporting the healer's trust in God, however with the following in mind: *"Not my will, but thy will be done."*

- *Those that believe that they can buy back their health by paying somebody money or through a superficial prayer without making an effort themselves, will often be very disappointed. Modern thoughts of entitlement are often not fulfilled in nature. One might also consider that an illness can be imposed upon a person by fate in order for them to possibly gain maturity of the mind. If this is the case, endeavours to heal somebody might only show limited success.*

Those that intent to visit a healer, be that here in Europe or the Philippines, ought to try to gain clarity about the healer's ethical and moral character prior to doing so. It is equally appropriate to inform oneself about the reputation, treatment methods and failures of a conventional doctor. This applies to an *even higher degree* to all spiritual healers. The motto: It might not help, but it can do no harm, certainly doesn't apply here.

- *Just like every chemical medication, spiritual healing can also have unpleasant side effects over time. Just where the healer receives his healing energy from is of importance. The antagonistic, demonic world has its own priests and healers too and they can heal their own followers, but one must guard against receiving help from there. A price to be paid later that could turn out to be very unpleasant for the person involved under certain circumstances. This can at best consist of psychic disorders and symptoms of *Umsessenheit*. The consequences can at worst go way beyond one's physical demise.*

This is why one should gain clarity with any healer about whom they see as their Lord: God and Christ or some demon, the way it happens with the Umbanda Spiritualists in Brazil. One should certainly avoid any healer that boastfully jabbars, murmurs secretive or incomprehensible incantations or actually uses the "sixth and seventh Book of Moses". *Because of what benefit would it be for the patients to regain his health but suffer damage to his soul?*

The tissue samples I gathered from both trips to the Philippines (1973 and 1980) have been tested by the Institute for Forensics at the University of Tübingen, respectively at the pathological Institute of a large hospital in Friedrichshafen. Whilst the forensic pathologist couldn't answer the question of whether the samples were of human or animal origin (1973), as the samples had been fixed in a formalin solution, the investigating pathologist from the hospital emphasised that it had been impossible for him to classify the samples within the structures of human or pathological anatomy and that he could therefore not ascertain what he was actually dealing with.

Those that take a deprecatory stance against parapsychology and spiritual healing will immediately construct their own "evidence" from this and say that this clearly indicates a fraud.

But this is certainly not the case.

- *There is actually no explanation for how the healers could procure such specific pieces of tissue from tumours, lymph nodes or fibroids of animal origin, to store them and smuggle them unseen to where they operate by a sleight of hand. Those that have, like myself, seen sleight of hand imitations by first class magicians know how big the difference between genuine paranormal*

processes and sleight of hand imitations is. Besides, magicians only present one case at a time and not five or ten interventions within minutes of one another on anonymous patients, whereby observers might possibly even look over their shoulders. No magician will put up with having somebody standing behind him, Filipino healers on the other hand don't worry about that at all.

But this is just one side of it.

The other side deals with procuring the tissue.

- *The healer cannot buy tumours, fibroma etc. from the butcher next door. He would really have to have a surgical animal hospital at his disposal. But where would you find one of those in the Philippines?*
- *And then there is the question of keeping these tissue pieces from deteriorating. They might not have electricity available in some of the rural areas where most of these things take place and therefore also no fridges. But how do you preserve tissue pieces under tropical conditions?*

A Swiss who lived with her family in Manila in 1975, helped the healer *Virgilio Gutierrez* for around three years in his “surgery” in Quezon City. She kept the patient’s appointment list, assisted in the healing treatments, took care of his correspondence and therefore spent a number of hours at his house and in the treatment rooms. She told me that she quite often defrosted Gutierrez’s fridge and that she had to completely empty it to do so. She said that she never came across anything that looked suspicious. It would absolutely have come to her attention if the healer had dealt with tissue from animals.

The whole affair therefore remains mysterious, because if we talk about apport, materialisation and dematerialisation in this respect we only give it a name to start with, but certainly not a profound scientific explanation. One only replaces one secret with a new one here.

It doesn’t mean that all Filipino healers must be “genuine” just because I vouch for the honesty of the healers that I captured on film. There are certainly some amongst them that sometimes or always use trickery. But just because we find con artists amongst doctors also, doesn’t mean that we can apply this to the whole medical profession and it is therefore not admissible to generalise the misbehaviour of individual healers.

20. The attacks on Filipino healers

Ever since the clarification of the spiritual movement during the 18th century, based on the rationality and general acceptance of the then known laws of nature, apparitions that we call paranormal these days are being severely attacked. This happens most often from within the ranks of so-called materialists, ergo people that base all facets of our existence on the physical world that we’re familiar with. Paranormal events interfere with their philosophy and spiritual healings in their Philippine particularly. This is why something like this shouldn’t exist in their eyes. The belief in the things or even the dissemination of this knowledge is seen an act of superstitious criminality and called a psychic pollution of the environment. The performers of paranormal practices, in particular spiritual healers, are branded fraudsters.

The former director of police in Bremen, *Dr. and lawyer Herbert Schäfer* coined the words “occult offender” (The occult offender as supporter of superstitious traditions) in his book “Der kriminelle

Aberglaube in the Gegenwart” (1963). Another lawyer and judge, namely *Dr. Wolf Wimmer* heads in the same direction. They say that all of parapsychology and the performance of spiritual healing should only be seen from the standpoint of criminal prosecution.

So-called black sheep, that is to say swindlers and fraudsters, can also be found amongst lawyers, policemen and physicians. They must therefore also be found amongst healers. But the question that we are dealing with here is whether all healers are swindlers and fraudsters? The preceding expositions would have shown that this is not the case.

The next chapter will now *shed some light on the methods* used by the Filipino healers that makes their detractors call all of them fraudsters. Large sections of the mass media like the press and television are particularly active here. The healers’ actions are supposed to be elucidated on hand of a few examples.

When the first news about Filipino healers arrived in Europe (And in Germany also) and some of the first patients reported either enthusiastically or disappointedly about their experience on their return, sections of the press dealt relatively quickly with this theme. It mattered not whether their attitudes were for or against, the introduction of the word “miracle” gave the whole an aura of sensationalism or also dubiousness. All reporting journalists only talked about “miracle healers” even though Filipino healers never call themselves that; they described themselves as *faith healers* or *psychic healers* instead.

Using the words “miracle healers” by the press, whether seriously or ironically applied, had the effect that a lot of ill people, those that no longer expected an improvement via traditional medicine, now believed that after a long and expensive journey to the Philippines, they would also experience an instant miracle in the form of an across the board healing of their problems according to the pattern “Stand up, take your bed and walk”. But as things didn’t go according to plan, all lot of cases experienced great disappointments and the notion of fraud sometimes appeared. This was then accordingly evaluated by sections of the gutter press, by television and individual traditional physicians.

The campaign began in 1971.

Mid May, reporters from the German magazines “*Stern*” and “*Neue Revue*” flew to the Philippines with a group of 19 patients and *Professor Bender* from Freiburg and *Dr. Wartenberg* an internist from Hamburg, to see *Tony Agpaoa* in Baguio. This group stayed about two weeks in the Philippines and the series of gory treatments they saw were exclusively those by Agpaoa. Those that show an interest in the details that took place should read the reports by *Professor Stelter*²³ and *Rudolf Passia*²⁴.

Shortly after the return of this group of people a favourable report about their observations with *Tony Agpaoa* appeared in the “*Neue Revue*”.

The “*Stern*” on the other hand, known to report about a lot of things in a distorting and negative fashion, published a completely derogatory description under the title “The Saviour with the dexterous fingers” (*Stern* No. 29 from the 11th of July 1971). *Agpaoa* was depicted as an “ingenious trickster”, one that imitates open wounds with artificial foils and feigns blood with a colourant made from two components. The “evidence” for this was a large, distinct colour photo that allegedly

²³ See references 22, page 223f

²⁴ See references 13, page 144f

showed this foil. (Stern 29/1971, page 28).

As hard as I try, I just cannot see an artificial piece of foil, not even in *Agpaoa's* so often photographed materialised deposit depicted in picture 31 that often led to misinterpretations. All I can see in the photo in the "Stern" magazine is a slightly red fluid, probably blood mixed with water, which flows across the patient's belly into the pressed down fault of the skin. If we were dealing with a piece of foil we would have to see its somewhat raised edges somewhere in this absolutely clear picture. But this is not the case.

The "Stern" has also *Agpaoa's* wealth in its sights (Travel agent, hairdressing salon, dress making studio) and writes: "The saviour doesn't demand money. He takes what's offered." Nothing is mentioned in regards to concrete evidence about the asserted use of a colourant for instance.

- *How the "Stern" reports about the successful and unsuccessful healing of patients can be gathered from Professor Stelter's²⁵ writing.*
- *Rudolf Passian writes: "Fellow travellers who were mentioned under a pseudonym in that report rang me and assured me that essential parts of their statements had been falsified."*

The kind of falsifications the "Stern" is capable of can best be read in the book by Wilfried Ahrens called "Herr Nannes Gewerbe. Der Skandal Stern. Eine Chronik", Ahrens Verlag, Sauerlach 1984.

Television also got involved after the reports about Filipino healers were published by these two magazines. Immediately after the appearance of the report by the "Stern", a group of reporters for the ARD program "Report" guided by *Immo Vogel* undertook a trip to see *Tony Agpaoa*. What happened there was reported about by the already mentioned German naturopath *Sigrun Seutemann*.²⁶ The television crew was exceedingly distrustful and disbelieving. With the help of the German embassy in Manila they found a German doctor by the name of *Dr. Lothar Lissner* who was prepared to help them to "expose" *Agpaoa* from a medical point of view also. Mrs. *Seutemann* reports about his participation²⁷:

"When *Agpaoa* appeared the next day to operate, he acknowledged the presence of the physician without objecting to him being there during the operations.

The first operation concerned a hopeless cancer patient. *Agpaoa* thought he had 4 weeks to live, but he hoped that he could alleviate his severe conditions somewhat.

Agpaoa stepped in front of *Dr. Lissner* before the operation, rolled up his sleeves and ask him to check to see whether he was hiding anything. *Lissner* found nothing. As *Agpaoa* began to operate, he asked the physician to get very close to where the operation took place and to accurately describe what he saw. The doctor described that he saw the wound, the opening of the body, then a piece of the now exposed ureter and above it a tumour the size of a goose egg. *Agpaoa* exposed the tumour, then loosened it and placed it in *Dr. Lissner's* hand. The tumour had body temperature. It also smelled accordingly. The wound was closed again the way *Agpaoa* usually did. *Dr. Lissner* was initially very confused. Both of them checked the urine discharge of the patient later, because it had been blocked by the tumour before. Even though the kidney was hopelessly damaged, it worked.

Dr. Lissner then dared to ask the question of whether *Agpaoa* would also operate on him. He had been suffering from an adenoid in his nose. *Agpaoa* agreed. I assisted. The wife of *Lissner* was also present. The patient had a large hand towel placed around his neck, *Agpaoa* opened the nose from the bridge of the

²⁵ See references 22, page 149

²⁶ See references 22, page 238

²⁷ See references 22, page 240

nose and asked the somewhat shocked wife of the doctor to have a look at the inside of her husband's nose. *Agpaoa* then revealed the adenoids and asked me to twist the now exposed adenoids off with a small pair of pliers, something I did. *Agpaoa* then pulled his hands away and the nose had closed up again. The whole thing had taken about two minutes.

Dr. Lisser was covered in a lot of blood. They washed his face and he remained sitting somewhat surprised and pale for some time even though he had felt no pain. He then tried to breathe through his nose and said in an excited voice that this was the first time in twenty years that he was able to breathe properly again. At the end of the operation *Agpaoa* took a cottonwool ball, dipped it in the bleeding wound and put it in *Dr. Lisser's* hand and said: "Have this examined". The doctor however gave the ball of cottonwool to the reporter and asked him to give him the result after the laboratory tests had been done. *Dr. Lisser* never received the results.

The doctor then went to his room to rest for a while and this is where he had a lengthy conversation with the television reporter and an American. When he came back he told us that there was something wrong with his eyes, that after the operation he could see better without glasses than with them. *Dr. Lisser* wrote to me four weeks later he had obtained a new, weaker pair of glasses from his eye specialist and that to his surprise he found his vision to be the same as fifteen years ago. *Dr. Lisser* had this fact verified by his optician in writing, he also found it completely inexplicable.

The doctor from Manila observed a lot of *Agpaoa's* operations over the next days. We also took a trip to the low-lands where we observed the Rosales-operators *Mardelo* and *Carlos*. The most convincing and sensational operation in the low-lands was one performed by *Mercado*. He is regarded as the top operator within the *Union Espiritista Cristiana de Filipinas* and he had been trained by *Agpaoa* and by *Eleuterio Terte*. He now operates in *Agpaoa's* style. With a number of friends we went to visit *Mercado* without prior warning. He was operating in his chapel and around thirty patients waited in line.

After watching for some time they carried a young woman inside. *Dr. Lisser* immediately recognised the dreaded Douglas abscess (The collection of pus between uterus and the rectum) so prevalent in the Philippines and he said to me that this patient had no chance to survive in his opinion. *Mercado* immediately placed all others at the back of the queue and had them place her on the operating table. She was very weak and unable to stretch her legs; her abdomen was as hard as a board. We had our eyes about 40cm from where he operated and could observe things in great detail. In front of a terrified *Dr. Lisser* *Mercado* pushed his hands into the abdomen of the patient and soon after removed two hands full of bright-green pus. The doctor exclaimed that 'There is only one kind of pus that smells like this – namely the one from a Douglas abscess!' *Mercado* closed the opening soon after and had the patient, who naturally felt somewhat exhausted, moved to the side to recuperate. He ordered her to rest for one hour. She was then allowed to go home.

Dr. Lisser, who had nearly lost his nerve during this experience, because he was specifically experienced in regards to the treatment of Douglas abscesses, now said to me: 'I don't want to see anything anymore, I have seen enough! There is no doubt for me anymore!'

After returning to Baguio – it was Saturday – *Dr. Lisser* asked the gentlemen from television to join him. There were also a number of other people present when *Dr. Lisser* gave his final interview for German television. He summed up his adventures and his experiences during the last few days this interview. He explained that these operations were a phenomenon that defied explanation. He could however say with certainty that one was not dealing with fraud!"

Thus far the report by the naturopath *Sigrun Seutemann*.

The report about *Agpaoa* was broadcast on August the 2nd 1971 during the program called "Report".

It was of a completely negative nature.

Their enlistment of doctor *Lisser* and his statements were completely omitted. Everything was

branded trickery. They did however admit²⁸:

“In spite of it being an obvious fraud, a lot of patients felt a lot better after their sham operation.”

The story about the placed foil was once again presented and supported with recorded film. The reported story states²⁹:

The following pictures show that the abdominal openings are deceptions. However very clever deceptions indeed. He places a taut piece of plastic across the abdomen. When looking more closely one can clearly see how the foil material, that is supposed to represent the openings, slides from his fingers! Clearly visible here under the nail of his index finger!”

I am in possession of this scene on video tape and I looked at it a number of times and also in detail on a fixed image. The reported description is correct. One can actually see the foil-like material, material others have photographed and I have recorded on film. But we are not dealing with a slyly introduced piece of plastic foil, but with a paranormally created (materialised) often red flamed looking deposit that I already mentioned a number of times. That is it not a normal physical plastic foil can be recognised by the fact that this deposit appears and is spread within split seconds seemingly from nothing, that it changes its structure (grain and colour) and just as rapidly disappears without a trace.

No television or image reporter has been able to wring or steal a piece of plastic foil from a healer. *Agpaoa* did indeed give *Immo Vogel* the correct explanation in 1971, but because he had no previous or expert knowledge about the subject, he didn't believe him. The closing comments on television in the “*Report*” program on the 2nd of August 1971 were:

“A group of Germans has once again visited *Agpaoa*. Seriously ill people once again defer vital operations in the hope of a miracle cure!”

On the 9th of August 1971, ergo one week after the “*Report*” program was aired, the “*Gesundheitsmagazine*” program on ZDF also broadcast a derogatory and misinforming film report about *Agpaoa*. They utilised some of the photos *Professor Stelter* had faithfully placed at their disposal. The most impressive sections had been edited out for the broadcast and the rest were falsely commentated on. Details can be read with *Stelter*³⁰.

Based on this initial disinformation, a series of press reports and television programs appeared over the next months and years and they tended to be *predominantly negative*.

A renewed, concerted effort in the fight against Filipino healers was made in 1982. The rumour spread amongst the adversaries that the author and producer of documentaries (Predominantly in the ethnological and ethno-medical category) *Theo Ott*, an approbated pharmacologist, was also working on and almost completed a film about Filipino healers titled “*Der heilende Schock*” (The healing shock). It was supposed to be broadcast by German television in 1982 already and worst of all, he was going to report in a *factual* and *positive* manner about these events. This had to be counteracted.

²⁸ See references 22, page 237

²⁹ See references 22, page 236

³⁰ See references 22, page 243

The Austrian magazine “*profil*” (Comparable to the German “*Stern*”) No. 12, 22nd of March 1982 first published two essays under the title “Miracle? Healer?” that were introduced in the table of content on page 3 as follows:

“Recovery Filipino style. They believe in elves and leprechauns, they believe in the power of healing through psychic energy and in a surgeon without a knife. More and more patients tired of conventional medicine nowadays believe in the faith healers of a ‘banana republic’.”

A number of observed treatments of patients and a number of successful healings were described in the usual flippant and denigrating journalistic jargon. It states the following about *Virgilio Gutierrez* on page 46:

“Virgilio mainly uses a healing massage, he strokes the neck of a French patient only once to then pause over a spot on the left side between the tendon and the larynx, daubs her with the obligatory wet cottonwool ball and drills his right index finger to the middle joint into her neck, performs a few circular movements and pulls it out again covered in blood. No traces of anything on the skin. One cannot recognise a trick from as close as half a meter.”

The overall assessment is in spite of this still: All bogus! For instance with the words (Page 48):

“The hysteria over miracles healings there naturally opens the door to deceptions and lust for money.”

And also on page 48:

“The hand of the eminent healer Alex Orbito that seems to be inside the abdomen of a patient shakes the foundation of our materialistic view of the world. If this is genuine, the edifices of modern science and medicine come tumbling down.”

One motive of the opponents of spiritual healing is expressed here: Something like this is just not allowed to be true! - It is certainly not true that the edifice of modern science and medicine would come tumbling down if this is true. It would only be *expanded* upon and some “unteachable” people would have to *learn a thing or two*. But as this requires a mental effort one prefers to simply deny all of this out of convenience.

In order to enhance the sales of the “*profil*” magazine, the Austrian television station *ORF* screened a discussion evening dealing with the faith healers from the Philippines, in its “*Club 2*” program on the 25th of March 1982. Unlike German television it did not take a one-sided stance, proponents of and protagonists against Filipino healers were invited as discussion partners.

The protagonists present were:

1. *Christian Stelzel*, a magician and multiple world champion of manipulation with the stage name of “*Magic Christian*”, a very confident and prepossessed gentleman. His magic was indeed excellent. The tricks he demonstrated to a small circle as a sample before the program certainly amazed me.
2. *Professor Dr. Helmut Denck*, Professor of Surgery at the University of Vienna.
3. The journalist *Stefan Gergely*, one of the authors of the “*profil*” report on the 22nd of March 1982.

The proponents invited were:

1. The film maker *Theo Ott*.
2. The physician *Dr. Walter König*.
3. The physicist *Professor Dr. Werner Schiebeler*.

A former patient who declared to have been healed or that her condition had greatly improved was also present:

The Austrian innkeeper *Rosa Umgeher*.

The program was introduced with a demonstration by the magician present. He imitated a bloody intervention by a Filipino healer. A patient support bed and a table with the required utensils was set up: A dish with very large cottonwool balls (A lot larger than the ones used by the Filipinos), a plastic bowl and a sprayer with a bright fluid. I tried to touch one of these large balls of cottonwool because of the likelihood that the “substance produced during the operation” might be hidden inside. The magician’s assistant however stopped me.

- *The cottonwool used in the Philippines can on the other hand be handled freely and easily or one can even bring one’s own. No healer will be offended by this!*

The “operation” started. The corpulent *Professor Denck* served as the patient and the magician prodded around on his abdomen. After kneading and twisting for an extraordinarily long time (Compared to the time interventions by Filipino healers take, things happen at a rapid pace there) he produced a red-coloured “piece of tissue” whose cottonwool structure could clearly be determined. He then proceeded to pull a piece of red-coloured cloth from another ball of cottonwool and thirdly he freed a small green plastic frog from a new ball of cottonwool with a flipping action. The last act was specifically interesting because the frog sported a nice looking cotton beard around its mouth from the ball of cottonwool it had been packaged it.

I took a close look at these details in fixed images on the television screen. If the Filipino healers would work like this magician, one would also have to always see pieces of cottonwool clinging to the pieces of tissue they unearth. But this has never been the case.

- *The presentations by the world champion of manipulation Christian Stelzel, including those shown on the 31st of October 1982 by the Zweiten Deutschen Fernsehen (ZDF), made me realise that the Filipino healers, some of them simple farmers, could certainly not be conjurors. If a world champion magician, one that practices his craft on a daily basis in order to keep his hand in, can only produce such primitive imitations of interventions by Filipino healers, the Filipino healers must possess different manipulatory abilities.*

The actual discussion followed the magician’s demonstration, it was naturally conducted along completely controversial lines, that is to say, no side was able to convince the other side.

A scene from *Theo Ott*’s latest film and also a scene from my first film from the Philippines were blended in during the program. I had selected a scene where the healer *Juan Blance* opened a large sebaceous cyst on the back of a female patient with a symbolic cutting movement and this without

anaesthesia to then squeeze it with his fingers. This is so impressive that no matter how hard one tries, one could not explain it away as trickery.

The surgeon *Professor Denck* looked at this showing anger on his face (He appeared in one of the scenes). The interviewer asked him after whether he would like to say something about this from a surgeon point of view? *Denck* completely lost his cool and made a scene with the following words:

“What you have shown us here is surgical quackery. A sebaceous cyst is opened with a scalpel, exactly like here and removed exactly as shown. What is so exceptional about what you have shown us here? Not only that he wasn’t sterile and that he smeared the dirt from his fingers into the wound, but nothing else could be seen. We don’t do things different either. Don’t tell me such nonsense. You just can’t show me something like this. – What you have shown me is absolute trickery. I am a patriot and I know from my profession that West German doctors in particular, and you also being a West German judging by your accent, would not believe such nonsense. You have thousands more faith healers in Germany than here in Austria. Thank God we have a law against this. The fact that they believe in such nonsense is a weakness in the West German psyche. I am enough of a patriot to say that we Austrians are a little more sensible. I can’t take this serious.”

The surgeon didn’t realise what he had said during his tirade, namely that he and his colleagues also smear dirt from their unsterile fingers into wounds.

That no consensus was going to be achieved was to be expected. But I encouraged the public to form its own opinion on hand of the presented arguments. To help the public I offered a data sheet with references that could be applied for from the *ORF*. Fifty viewers made use of this offer during the next three weeks.

An Austrian television critique stated on the 27th of March 1982:

“Emotional outbursts and intellectual coolness mixed under the agreeably dissociated direction of *Anton Pelinka* in a program that was more informative and thrilling than all the other reports we have been offered over the last months.”

Half a year later, on the 25th of October 1982, the German television program *Südwest 3* broadcast the film by *Theo Ott* called “Der heilende Schock” (The healing shock). This was the first time ever that some factual and favourable information was conveyed to the German public about the healers from the Philippines.

But its positive effect didn’t last long.

The counterattack by the *Zweiten Deutschen Fernsehens (ZDF)* followed only six days later on the 31st of October. It came in the series “*Querschnitte*” by the science journalist *Professor Hoimar v. Ditfurth* (Died 1989) with the film “Das Geschäft mit dem Wunder” (Making money from miracles). This psychiatrist and neurologist had shown himself to be an antagonist of parapsychology and other fringe sciences in previous programs.

The following can be said about his modus operandi:

In a “*Querschnitt program*” by the *ZDF* on the 14th of November 1977, *Ditfurth* had a go at astrology and declared that it was pure superstition and devoid of any scientific basis. The follow-up to this was screened on the 4th of March 1978 in a debate between *Ditfurth* on one side and three astrologers on the other side. One of the astrologers was *Hartmut Kröncke* from Freiburg. The professor challenged him to the following bet: *Kröncke* should voice his expert opinion of five pairs of people

with the exact same date of birth, subjects selected by *Ditfurth*, and describe their individual career history. The test subjects had to contrast one another, one had to have a physical affliction for instance whilst the other had to be healthy. If *Kröncke's* opinion coincided with the facts, he was to receive DM10'000, but if he was wrong, he had to pay DM1'000. *Kröncke* accepted this bet. But it came to nothing because *Ditfurth* explained on the 17th of May 1978 on Südwestfunk, that *Kröncke* had withdrawn from the contest by giving some threadbare reasons.

The astrologer complaint about this assertion at the *Freiburg District Court* by claiming that *Ditfurth* had considerably change the conditions of the bet after the program went on air on the 4th of March and that he never agreed to continue with the now changed bet.

- *The Professor lost the lawsuit in 1979 and was, according to the adjudication, no longer allowed to assert that the astrologer had reneged on the bet for threadbare reasons.*

I have three newspaper reports in front of me helping me with this case and the details of the bet's condition do not accurately concur with one another, the verdict is however identical.

Early in 1979 *Professor v. Ditfurth* showed two new “*Querschnitt programs*” on ZDF titled “Synthetic miracles”. This was once again about astrology. But the first part of the second program aired on the 2nd of May 1979 titled “*Spielarten modernen Aberglaubens*” (Games modern superstition plays) specifically dealt with parapsychology and the ESP-phenomena as *Ditfurth* likes to call it. Here he took aim at *Uri Geller* and his spoon-bending. To expose him, he dragged the American magician *Randi* in front of the camera, who made a living imitating paranormal phenomena rather badly. *Randi* performed bending metal as a trick on this program also, but under conditions one doesn't usually find with genuine para-phenomena. The magician for instance hid the fact that one of the spoons he brought along had been prepared a priory (By bending it numerous times), but he couldn't bend a metallic object of unknown origin without touching it, something that can be observed with genuine paranormal “spoon-benders”.

But as most television viewers had never seen something like this and were therefore unfamiliar with it, it was easy to give them the impression that all paranormal apparitions are after all just tricks and swindle.

On the 4th of May 1979 I read in a television critique:

“Ditfurth furnished relatively solid evidence against the defensibility of such phantasmagoria, he called it ‘psychic environmental pollution’.”

The professor literally stated at the end of the program:

“Superstition is not a harmless phenomenon and not a private affair, but a danger that has to be taken serious. It interferes with the contact to reality.”

Ditfurth approached the “debunking” of the healers from the Philippines with the same attitude, because their interventions would have to have been a thorn in his eyes.

In May 1982, he flew to the Philippines with a group of film makers from the firm *GEO-Film*. Various people who encountered him in situ told me how he conducted himself there and the kind of problems that arose from his conduct. He was specifically instructed by the former director of the Goethe-Institute in Manila who had been dealing with the events taking place amongst the Filipino healers for a number of years. He for instance staged numerous film forums with healers in the

rooms of the institute that were well attended and well received by the press. I could however clearly garner from all initial information that the new film would portray a severe condemnation of Filipino healers.

The film, a co-production between *GEO-Film*, *ZDF* and *ORF*, was ready for distribution by the end of October 1982 under the title “Das Geschäft mit dem Wunder”.

In order to draw the public’s attention to the announced program on ZDF on the 31st of October 1982, the magazine “*Spiegel*” (No. 43, page 262f) and the journal “*GEO – Das neue Bild der Erde*” (No. 11/1982. Page 44f) simultaneously published an article by *Professor von Ditfurth* about his film. The “*Spiegel*” titled it “Filipino faith-healers debunked, rotten magic”. Hoimar von Ditfurth exposed the tricks used by Filipino faith-healers in the program “Querschnitt” and the caption in the journal *GEO* was “Das Geschäft mit dem Wunder”.

To elucidate the article in the “*Spiegel*” I reproduce a response here by the former director of the Goethe-Institute in Manila that he had addressed in the form of a letter to the editor of the “*Spiegel*” magazine. The fact that this magazine didn’t print it due to “lack of space” doesn’t surprise. Therefore a literal account below:

Dr. G. Bretzler

Director

Goethe House
German Cultural Centre
P. O. Box 2893
Manila, Philippines
Telephone 789378

**“Der Spiegel”
Dep. for letters to the editor**

P. O. Box 110 420

2000 Hamburg 11

Letter to the editor of the “Spiegel” in regards to the article “Rotten Magic” Issue No. 43, 25th of October 1982, (Faith healers from the Philippines):

Please allow me to take a stance in regards to Hoimar von Ditfurth’s expansive report during a program by the ZDF.

Mr. Ditfurth asked me, as director of the Goethe-Institute, Manila, to support him whilst he was making a film about the faith healers from the Philippines. As with any German film project about this region we naturally furnished him this support.

Von Ditfurth unfortunately wouldn’t or couldn’t “exactly know this”, but his permit to film here was cancelled by the Philippines’s authorities after having filmed for only a very short time. What he was able to observe and record with our help had only been atmospheric scenes at a small chapel in Manila as well as the mentioned scenes in a hotel room in Manila and as the tour guide told me, the majority of the patients there were not prepared to appear on film because of his awkward behaviourism. He then travelled to Baguio where his film equipment was confiscated by the military authority. All consequence information stems from his co-workers he had delegated.

Von Ditfurth then tried to compliment his rather meagre material through other people’s accounts and newspaper ads. Almost all Filipinos and foreigners who dealt with von Ditfurth confirmed my impression that von Ditfurth “knew everything anyway” and was there to “debunk”. He actually debunked himself in the process and “Der Spiegel” willing followed him.

And what kind of ancient arguments had “the critical Professor” in store for us? There were apparently balls of cottonwool soaked in two different fluids that produced a red fluid when put together. There were also bladders of fish and one was told that preserved tissue had been hidden away that the healers then conjured blood from. Poor Professor! He should have know that researchers with more experience in this field than himself have seen healers treat people without balls of cottonwool and fluids, respectively they were allowed to bring their own balls of cottonwool and no assistant was anywhere nearby – the phenomena remained the same!

Opening the body, if at all, is an absolute rarity, because we are dealing with materialisations and treatments on the body’s surface in 90% of all cases. He, but not the uninformed public, should have known this even if he had only superficially studied the relevant scientific literature. To then immitate the ORF-Program “Club 2” and Professor Dr. Schiebeler’s film “Paranormal healing methods in the Philippines Part 2” is absolutely fatuous, but understandable because of the lack of material in his possession.

One naturally finds charlatans and greedy and weak people amongst the healers. These people are not necessarily saints. Even though they often possess these unusual powers, everybody in the Philippines knows this. But to assert the nonsense that the healers drive from hotel to hotel in a Mercedes 350 (Orbito actually received a Mercedes 280 from a German industrialist whose daughter he had healed) is ludicrous! Almost all reliable travel agent that I know here charge 100 Pesos (circa 30.00DM) for a treatment at a hotel; the price was about 50 Pesos when von Ditfurth was here. To then proclaim that patients are treated numerous times, so that the healer can earn more, clearly shows that von Ditfurth has not even a rudimentary grasp of the complexity of healing and particularly not the Filipino variant. And how vulgar and simplified is the attempt to “prove” something on hand of a picture of a cemetery where an uncured traveler to the Philippines rests. I am now completely clear about why the *ZDF* decided to include a proviso after this flying visit by Ditfurth, because this abysmal “science-journalism” discredits all of science.

In closing I would like to draw your attention to the fact that a German team under the direction of the Munich film maker Karl Fugunt, the participation of trained physicians and the Max Planck-Institute Munich, just completed a two hour long documentary (Titled “Öffnet sich der Himmel noch?") at great technological expense (For instance by using an endoscopic-like snorkel lense with artificial lighting) and with the help of Filipino experts to shed some light on the Filipino phenomena from a very different angle.

One can only hope that the German television viewers find it possible to inform themselves in a more profound way about the healers from the Philippines.

Kind regards
Signature
(Dr. Gerrit Bretzler)

The prepublication in the *GEO* journal is considerably more comprehensive than that in the “*Spiegel*”. *Ditfurth* gives extensive depictions of the milieu, but the following has to stand in regards to the core statement about the gory treatments (*GEO* 11/1982, page 57):

“But the same is offered everywhere: Kneading hand movements and always with the back of the hand towards the viewer. The flowing blood the healer Labo specifically wallows in. The seeming disappearance of one or a number of fingers inside the body of the patient. The unearthing of blood clots or pieces of tissue.

With close-ups and slow motion pictures we capture on film how the ‘healers’ quickly and skilfully grab the small pieces of tissue from the towels and balls of cottonwool handed to them by their assistants, before they are unearthed in front of the devout and astonished spectators. Also the way they typically use the created pools of blood to make their bend fingers disappear, thereby suggesting that they have entered the body.”

This clearly indicates that *Ditfurth* only observed treatments carried out on the surface of patient’s bodies whereby no actual penetrations of the abdominal wall take place, something one can recognise in his own two film recordings. Only paranormal materialisations of pieces of tissue and bloody fluids appeared. Such explanations are however useless in *Ditfurth*’s eyes. He doesn’t know or believe something like this. He literally states (*GEO*, page 56):

“Such argumentations render all further discussions superfluous.”

Something *Ditfurth* pays specific attention to in his newspaper articles and in the film “Das Geschäft mit dem Wunder” is that Filipino healers immoderately enrich themselves in his opinion. He reckons that the one healer (*June Labo*) he dealt with the most, must have a monthly tax free income of at least 1mio DM and that such healers also exploit underprivileged patients. *Ditfurth* lists as “evidence” the case of the engineer *Max Ulrich Voelter* from Stuttgart who had been suffering from severe multiple sclerosis for years and was therefore in a wheelchair. Through economising and by overdrawing his account by 15’000DM, he managed to get enough money for his trip, his livelihood there and the treatment by *June Labo*. It then literally states (*GEO*, page 58):

“He will leave the greatest amount of that money in the healer’s pockets.”

Mr. *Voelter* vigorously defended himself against this one-sided depiction by giving his own account. His own report follows here word for word:

Max Ulrich Voelker
P. O. Box 220
Baguio City 0201

Baguio, the 16th of November 1982

PHILIPPINES

COUNTERSTATEMENT

The negative report by Professor Hoimar von Ditfurth, be it in the GEO magazine or on ZDF on the 31st of October 1982 in “Queerschnitte”, is so subjective, unscientific and un-German that I get the opinion that he travelled there with already preconceived ideas. This is supported by the fact that Mr. von Ditfurth and his film crew spent most of their time sitting in the most expensive hotel in Baguio because their equipment and their permit to film had been withdrawn and they therefore didn’t observe any healings there at all.

If he asserts that I was living in a shabby private room in a modest part of Baguio and that I couldn’t afford better accommodation I have to say that this is a misinterpretation, well an outright twisting of the facts.

I lived in a three-room apartment at ground level with a terrace, a garden and exit to the city park in the centre of Baguio, this with access for a wheelchair and in a quiet neighbourhood. I would have to pay twice or even more for this in Germany. Taking the man with the taxi and the maid into the equation I can say that I could certainly not afford this in Germany. This and the personal and warm-hearted care I received are the reason why I am here again.

The assertion of this Mr. von Ditfurth that Mrs. Labo ran a bordello in the other half of the Nagoya Inn, this is where the dining room for the guests can be found, verifies the unreliableness of his reporting.

The one-off payment of US\$500.00 that I gave June Labo covered all treatments and there were 43 of them at different points of the body.

One cannot receive an analogical quid pro quo anywhere in Germany. Neither taking cures nor other medical treatments helped me there. On the contrary, my MS continued to get worse. It came to a standstill in Baguio and this for the first time and my digestion was once again in order. I was able to reduce my tablet intake, felt energetic and my improved circulation increased my senses and movability. This is the very reason why I am here and why I feel like a human being and not like an ogled at, pitied wheelchair driver, like in a smog in Stuttgart. The world is still in order up here in Baguio.

Signature
Max Ulrich Voelker

In concluding the case *Voelker* and in regards to the Mercedes car *June Labo* owns, *Professor v. Ditfurth* has this to say in his film:

“The fact that this poor man in his wheelchair finances the luxury coach of this man is really unavoidable.”

I bet you that Ditfurth also drives a Mercedes, one that in the final analyses is financed through the radio licenses of lots of viewers on low salaries. He would certainly not work for nothing.

In 1982 *June Labo* was and still is one of the most impressive Filipino healers. His wealth stems mainly from his wealthy Japanese wife who comes from an affluent family. I myself didn’t see or film him in 1972 or 1980. He was then relatively unknown. I only heard his name once in passing without actually finding out where he lived.

Ditfurth endeavoured to capture *Labo's* work on film. *June Labo* tells us how this eventuated with the following words³¹:

“Dr. v. Ditfurth visited me during his short stay in the Philippines in order to film at my place. I emphasise straight away that:

Dr. Ditfurth did not see one single one of my operation!

He came to my house in company of an American by the name of Nick Nichols and asked me if it was possible to make a film about my work. I allow researchers, scientists, physicians and reporters to observe and to film if they are amiable and honest and come here with good intentions. I am certainly prepared and open minded when such people approach me. A lot of researchers have filmed at my place without me ever taking money from any of them. Dr. v. Ditfurth told me that he had offered healers in Manila 100 Pesos or he didn't have to pay them anything. He wanted to offer me 1'000 Pesos because I was a very well-known healer. His whole manner of appearance didn't seem genuine and as a Filipino I found the condescending way he offered me this money an affront.

His words didn't match his thoughts. This is why I said to him: 'I am sorry doctor, but I cannot accept the 1'000 Pesos for a documentary. You know that I made a documentary with Alan Neumann and Burt Lancaster whereby sums of \$30'000 were involved and you offer me 1'000 Pesos, about \$100!' Dr. v. Ditfurth thought that 1'000 Pesos was good money in the Philippines. This condescending comment offended me, he must have thought that Filipino healers were primitive illiterates and that we would greedily reached for any banknote on offer. This was an affront in my eyes and taking 1'000 Pesos would have damaged my reputation amongst the other healers. I therefore answered him: 'Dr. v. Ditfurth, you offer me 1'000 Pesos so that you can film here, I offer you 5'000 Pesos so that you don't film here'. This made him very indignant and angry and he told me that I had wasted his time. I therefore answered: 'May I remind you dear doctor that I have never taken advantage of any of your time! You came to the Nagoya Inn and you called on me'.

The American companion of Mr. v. Ditfurth returned the next day with a huge bunch of flowers for my wife and apologised for yesterday's tactless behaviour of his companion. He said: 'That man acted inhumane.' The American was then allowed to film and take photos of whatever he desired free of charge for one week. This is all I have to say about why Dr. v. Ditfurth was not allowed to film at my place.”

Ditfurth therefore received a rebuff from *June Labo*. This is probably why he accordingly took revenge in the GEO journal (page 58) and also in his film. He asserted:

“We discovered that 'Reverend' June Labo runs a bordello disguised as a nightclub on his extensive property, this by a man whose hands are personally guided by Jesus Christ according to him, a remarkable combination of businesses.”

Ditfurth also mentions in his film that *Labo* doesn't dispute this at all. We are dealing with an extremely objectionable case of defamation here, one designed to degrade the reputation of this healer. Mr. *Voelter* already briefly touched upon this case in his counterstatement. The background for the assertion of a bordello could be the following: When the *Labo* couple bought an estate called “Puesta del Sol” in Baguio from a Mr. *Blanco* two years prior, a disco had been established there. After six months had passed, the *Lobo's* turned the house into a healing centre they called “Nagoya Inn”, closed down the disco and build the dining room in its place. And this is what *Professor v. Ditfurth* turns into a still existing nightclub with bordello!

The general revilement of Filipino healers and the specific revilement of *June Labo* led to some very irate articles in a series of newspapers in the Philippines. Besides, *June Labo* made a public pledge on the 26th of November 1982 in the Manila newspaper *Bulletin Today* of US\$50'000 and

³¹ See references 23, III. Forts, page 196.

challenged Ditfurth and his western colleagues to pledge a similarly high amount. *Labo*'s amount was going to go to the *Baguio General Hospital* if he was found guilty of deception. He wanted to organise a public healing session under the supervision of the *National Science Development Board* of the Philippines and by including a group of physicians. If this control panel decided after that the harvested blood and tissue acquired through *psychic surgery* did not fit with that of the relevant patient, *Labo* would admit defeat and give the promised US\$50'000 to the *Baguio General Hospital*. But if the physicians should decide that the blood and tissue stem from the relevant patient, the whole amount of US\$100'000, including Ditfurth's US\$50'000, was going to go to the *Baguio General Hospital*. *Labo* requested that the public demonstration take place before the 15th of November 1983. As expected, *Professor v. Ditfurth* didn't react to this challenge and this demonstration therefore never took place.

But now to the actual film "Das Geschäft mit dem Wunder" that was aired on *ZDF* on the 31st of October 1982. Due to the reasons *Dr. Bretzler* listed in his letter to the editor of the "*Spiegel*" magazine, *Ditfurth* could only present two gory treatments he filmed himself in his movie and this on one single patient called *Walter Lüdcke*. The rest were just descriptions of the milieu, snide comments, variety-like magical tricks performed by *Christian Stelzel* (*Magic Christian* who also performed on ORF) and associated materials, some of it pirated, ergo illegally procured and presented.

The first treatment shows a bloody intervention on *Walter Lüdcke* because of a persistent case of tinnitus behind the left ear. *Ditfurth* asserts that the slightly brown fluid, heavily diluted with water running down the neck of the patient after a while, is an artificial colourant produced by bringing two differently prepared balls of cottonwool together. This is a pure assumption, one without any evidence. The whole thing looks entirely different when *Ditfurth* performs this experiment with two balls of cottonwool. An intensely red fluid appears the moment they are brought together and not a light brown fluid after 10 seconds as is the case with the patient.

During the second intervention on *Walter Lüdcke*, performed by the healer *Romy Bugarin* in the groin region (*The patient had been diagnosed with prostate cancer in Germany*), a thumb-sized piece of tissue is pulled from the patient after some manipulations. *Ditfurth* maintains that the healer had hidden this piece of tissue under a towel near where the intervention took place and that he pulled it from under it at the decisive moment in time. He accurately notices the exact moment and the associated finger movements, but I cannot discover anything that could justify *Ditfurth*'s assertion at that point of the proceedings. The piece of tissue *Ditfurth* immediately grasps without prior approval can be clearly seen on film. The healer energetically demands that it is returned. *Ditfurth* then literally states:

"But why? I would like to wear it as an amulet or keep it as a memento."

This was a blatant untruth, because what he really wanted to do was to have it analysed. The healer was naturally aware of this and asked for it back once again. *Ditfurth* reluctantly handed it back to him and literally stated:

"He fortunately didn't see me take a small piece of tissue from the tray when I handed it back to him."

He therefore stole or pinched as he later called it. *Ditfurth* had this tissue analysed at the *National Bureau of Investigation* in Manila. Result:

Lymph gland tissue, but indeterminable whether of animal or human origin, but human blood of the blood group O.

Ditfurth himself said that the tissue could certainly come from the area where the operation took place, but as the patient's blood group was A, the fraud was surely confirmed. I already explained in chapter 9 that one has to be careful I regards to the results from blood tests and that something extraordinary could certainly happen to the blood during such interventions. But these are hypothesis that *Ditfurth* will not take serious. He doesn't waste time thinking about where the healer could have actually gotten lymph gland tissue from. One cannot just buy it at the butcher's. *Ditfurth* spends a lot of time and effort in trying to explain the alleged trickery. *Ditfurth* literally says about this:

“When one wants to expose any kind of trick one has to turn to an expert. A strange error of judgment is often made here. People send any kind of scientist, mathematician or physicist. Experience confirms that they very easily fall prey to these so-called paranormal demonstrations. No, one has to use magicians. They know how to do these things.”

I could only laugh when I saw the first trick demonstration performed by *Magic Christian*. In a very large ball of cottonwool, much larger than I have ever seen a healer use, the magician breaks a glass ampoule with an audible crunching noise and a red fluid then flows out of it. The now red coloured cottonwool is subsequently crunched up and presented as a “piece of tissue”. *Ditfurth* calls it a “gallstone” and calls it a “considerable intervention”. The healers' patients would not be duped for long with such primitive stunts. The crunching of the “blood ampoules” could not be ignored there either. The rest of the boastfully announced trick demonstrations were performed on a similar level. No similarity with the actual events whatsoever, never for instance the rapid coagulation³² of the blood the way it is observed with most healers.

Something that gave the film “Geschäft mit dem Wunder” a particularly annoying slant was the fact that parts of my first film were used without my knowledge and my permission. This is a punishable offence according to the copyright act, punishable through fines or up to one year in prison. This didn't deter *Ditfurth* one little bit, because I am sure that he factored a possible fine into the production costs. He introduces my film in the form of an *advertising film* (*Something it certainly isn't and should never be*) under my full name and film title and has me say a few sentences in regards to the pictures of a prayer treatment, the nature of spiritual healings and paranormal surgery. He then makes a comment with the words:

“These are naturally promises that exert a magnetic, often irresistible force of attraction on the chronically ill or those that have been declared incurable by their physicians (I promise absolutely nothing in this film and I deliberately draw people's attention on the many failures). And so they come from all the nations of the world. The patients or their relatives have often sacrificed their last Penny in order to make use of, as they think, their very last hope.”

I know of no patient who sacrificed his or her last Penny for a healing treatment in the Philippines. – Furthermore, *Ditfurth* didn't select those particularly impressive scenes that would immediately confute his trick theory, but only the fringe scenes he believed he could interpret in his own way and provide with his own, falsified commentary. The whole tendency of *Ditfurth's* film goes in the following direction: All healers shamelessly enrich themselves through trickery and swindle from their credulous and trusting patients. I didn't simply ignore *Professor v. Ditfurth's* pirating and copyright violations. I first turned to the *Institute für den Wissenschaftlichen Film* in Göttingen reproaching them for having lent my films for commercial purposes unauthorised. According to our agreement, this is only acceptable for non-commercial purposes. This led to the following letter

³² **Coagulation:** Clotting of a substance from a colloidal solution (Chemistry)

from the Göttingen Institute to the *ZDF* television station:

Institute für den Wissenschaftlichen Film (IWF)

Charitable Pty Ltd

IWF – Nonnenstieg 72 – 3400 Göttingen

To the head of the legal department
of the ZFD

Dr. E. W. Fuhr

65 Mainz - Lerchenberg

P. O.Box 946
3400 Göttingen
Tel. (0551) 2030
Teletext: 096691
Telegrams: Forschungsfilm Göttingen

Städtische Sparkasse Göttingen
BLZ 26050001 Konto 7700024

Commerzbank AG Göttingen
BLZ 26040030 Konto 6133789

Postscheckkonto Hannover
BLZ 250100 30 Konto 120961 306

Your identification:

Your message from:

Our identification:

Date:

LU-Pr-II-159

16. 12. 1982

Dear Dr. Fuhr!

At the request of the company Geo-Film Ltd, Hamburg, we sent a copy of the film "Paranormale Heilmethoden auf den Philippinen" (W 1270) on the 25th of May 1982. – We had been advised that they intended to use it in a new "Queerschnitt" program. – We also informed them that the rightful owner is Professor Dr. W. Schiebeler (Torkelweg 2, 7981 Torkenweiler). In a telephone conversation between Mr. Arzt from Geo-Film and our own Mr. Finger shortly after, we pointed out that the Institute could not confer any television rights.

Sections of this film were broadcast on the 31st of October 1982 in the program "Queerschnitte – Das Geschäft mit dem Wunder".

Professor Dr. Schiebeler informed us that as the rightful owner, he had not given permission for fragments of this film to be utilised.

The film fragments broadcast by the ZDF had been copied by either your television station or by GEO-Film in order to broadcast them. According to the delivery terms (Section 8 and 9) the copying of our films is not permitted without prior consent. We include a copy of our delivery conditions as an attachment.

If claims for damages are directed at the IWF because of the copying of the said material, we will have to make the ZDF liable for any damages arising from this.

We regret to have to inform you about this, because our business relationship has been excellent over the past years.

Yours sincerely

Dr. A. Luthardt
(Executive Officer)

Copy:

Delivery terms

1. Orders are to be directed impersonally at then following address by specifying *Title and Identification Number* of any film

**Institute für den Wissenschaftlichen Film
Nonnenstieg 72 * 3400 Göttingen**

2. The price for loaning and buying can be gathered from the current pricelist. The applicable lending fee will not be asked of universities, federal and local research centres, institutes of the Max-Planck Society, publicly and federally recognised schools, adult education centres, museums, hospitals and clinics, if the copies are returned within one week (excluding the transport times).
3. The customer incurs the forwarding expenses.
4. The lender is liable for the loss and any damage to the copies that goes beyond the normal wear and tear.
5. All payments are to be made without a deduction of a cash discount. The institute reserves the right of ownership until the full payment has been received. Possible complaints are to be expressed immediately after the item has been received.
6. S8 Films and K-Films have to be purchased.
7. The purchased or rented copies may only be screened for scientific, education or literacy purposes and only at non-public and non-commercial localities.
8. The purchased or rented copies must be screened unchanged. The copying and transference to other image or sound recorders – even partially – as well as selling or gifting to a third party is not allowed.
9. The granting of a license happens exclusively through the institute, respectively through the rightful owner (apply at the IWF).
10. Acquirer and borrowers declare their acceptance of the delivery terms through their order.
11. Place of judgment for registered buyers is Göttingen. The dunning draft shall be the place of judgment for all other purchasers.

VII

In early November 1982 I wrote a letter to the director of the *ZDF Professor Dieter Stolte* and the then chairman of the Television Council *Mayor Jockel Fuchs*, a SPD party politician (Social Democratic Party of Germany). These letters contained severe reprovals against copyright violations and the across the board defamation of Filipino healers.

I wrote to the director of the Television Council and amongst other things said:

“The requested opportunity to provide a counterstatement I asked of the director of the ZDF weeks before the Querschnitt program went on air was not granted. The requests of numerous television viewers did not induce the ZDF to grant a counterstatement. What kind of people are they? Irreproachable citizens from a far off country were publicly judged and morally executed here on hand of tricked upped and fictitious ‘evidence’. In any half civilised country an accused person can engage a defence lawyer and

call on witnesses for the defence. But here in Germany, television executes the accused on threadbare evidence without any possibility of reply and in the process uses the same kind of methods (namely tricks and swindle) they accuse the accused of using. This is a process in my eyes that can hardly be overtrumped in its abjection and infamy.”

- The director of the *ZDF Professor Dieter Stolte* never sent me an answer to my letters.

The chairman of the Television Council *Mayor Jockel Fuchs* on the other hand energetically rebutted my accusations. He wrote that the ZDF was, according to a judgment made on the 26th of May 1977 by the District Court in Berlin, actually entitled to use clippings of my film.

I immediately phoned Berlin and talked to the judge who had come up with this decision at that time. He instantly remembered the case and he told me that it wasn't dealing with the utilisation of someone else's film, but that the ZDF had shown a photo that had appeared in the “*Spiegel*” magazine. The court had thought that this was permissible.

- *Mayor Jockel Fuchs* only wanted to dupe me in the hope that I wouldn't recognise the real coherency and that I would be satisfied.

In my next letter on the 10th of January 1983 I revealed the actual facts to *Mayor Jockel Fuchs* and closed my letter with the following words:

“In regards to the bias shown in the criticised Querschnitt film, I would like to make the following comments: It is a particularly abject but very popular method in politics to invent sexual transgressions in order to morally destroy an awkward opponent. The Polish nation last used this method in regards to *Lech Walesa*. But the ZDF used this process through the mouth of *Professor v. Ditfurth* by asserting that the healer *June Labo* operated a bordello in one half of his house. The director of the Goethe-Institute in Manila, *Dr. G. Bretzler* investigated the situation in said location on my behalf. He found that this assertion made by the ZDF is absolutely fictitious. You can find the actual circumstances in attachments 2 and 3.

Professor v. Ditfurth further asserts that the healer *June Labo* earns at least 1mio DM tax free. But if one goes to the bottom of these exaggerated numbers one finds that 15 patients an hour, 8 hours a day for 24 days per month at an average charge of DM 100 per treatment only makes DM 288'000. But who amongst the television viewers takes a closer look at these figures? And the assertion of 'tax free' is certainly pulled out of thin air. The Philippine government need money and would not allow the income of the members of this sect to be tax free. Just how these 'exploited' patients feel about the report aired by the ZDF can be gleaned from attachments 3 and 4. There is one thing that I learned from the 'Querschnitt' program and from your letter from the 2nd of December 1982: Defamation and breach of the law were the means the ZDF used to support a materialistic superstition for ideological reasons. They therefore fear nothing more than a counterstatement that could prove the untenable stance that they take. What an abyss is opening up here!”

And how did this situation resolve itself?

I lodged a complaint against copyright violation. After a long path through normal channels and appeals, the chief public prosecutor in Koblenz decided to reject an enquiry into the public accusation due to lack of public interest and because the legal peace of the affected party was not unduly disturbed and that prosecuting was not in the interest of the general public. Copyright violations were not an official offence in those days. Due to the proliferation of such offences things have changed in the meantime through a change in the law. Pirating other people's property must be legally dealt with these days.

Even though the ZDF strenuously supported *Professor v. Ditfurth's* line from an external point of view, there seemed to be certain disagreements arising behind the scenes. Anyway, *Ditfurth* soon dropped out as the creator of the ZDF "Querschnitt" program.

The main editorship in charge of culture now underwent a complete turnaround.

The Filipino healers were indeed never rehabilitated and one also never tried to restore order in my affairs with them, but a number of good and factual programs (29.8.1985; 01.09.1985; 14.11.1985) were screened via programs about *spiritual healing* in Europe and Brazil. On the 9th of January 1986 there was even a program about *reincarnation* followed by a discussion session under the guidance of the relevant head of the department. Some unusual event must have brought about an inner transformation in him during the last years.

Professor v. Ditfurth on the other hand still holds on to his old ways. On the 26th of October 1985 he emphasised during a television interview with *Dagobert Lindlau* on Bavarian television that for four weeks he had wandered from one healer to another and from one disappointment to another. It was plain and simply a fraud. There must be literally thousands amongst all these patients that had been healed. He had not even found one.

"Where are they now? I can tell you where they are. I have investigated individual cases. They are in cemeteries."

In reply to *Professor v. Ditfurth's* statements it has to be said that witnesses from the Philippines reported finding healers within a few days of serious searching and furthermore that it was important for him "to verify" a swindle and not the opposite.

That patients occasionally die also happens with normal doctors. Filipino healer also do not have a safe panacea against death and they cannot produce the kind of miracles fastidious Europeans expect of them. But to say that they have no successes at all is a false statement. Even *Ditfurth* shows a number of patients in his film "Das Geschäft mit dem Wunder" that answer his questions by declaring that they feel much improved or healed. Further impressive cases can be read about under references (7; 9; 10; 11; 13; 21; 22; 23).

During a lecture and film forum about Filipino healers at the *Staatlichen Museum für Völkerkunde* in Munich on the 26th and the 27th of October 1985 the roughly 150 listeners there were asked whether any of them had been treated by a Filipino healer. 18 of them raised their hand and 15 of them pronounced that they felt much better or were healed, only three of them (Me amongst them) declared that their conditions had remained the same. This is certainly not a representative result from whence one can deduce that the healing successes in the Philippines are at about $15/18 = 83\%$. Disappointed patients do actually not come to such lectures and can therefore not be asked. But it shows that there are certainly more than zero patients that were healed in the Philippines. The fact that they do not react to *Professor v. Ditfurth's* newspaper adverts is because they have learned to see him as a hard, biased and generally dishonest opponent of Filipino healers. They are not prepared to place themselves at the mercy and disfavour of him.

Those that are still unsure in regards to their assessment of Filipino healers after these explanations should by necessity read the publications of *Dr. Naegeli* (11), *Rudolf Passian* (13) and *Professor Dr. Stelter* (22; 23). These authors have over the years dealt with the problem these healings represent and this on many trips to the Philippines and not like their detractor for just a few days.

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Books and brochures by Professor Dr. Werner Schiebeler

The translator doesn't know whether any of the books and brochures listed below are available in English.

Der Tod, die Brücke zu neuem Leben

Beweise für ein persönliches Fortleben nach dem Tod
 Der Bericht eines Physikers
 260 Seiten, 21 Abb., 29,80 DM

Aus dem Inhalt:

Der biologische Lebensbegriff
 Das geistige Leben
 Sonderfälle geistiger Lebensvorgänge
 Der Vorgang des irdischen Todes aus parapsychologischer Sicht
 Die sichtbare Erscheinung der Gestalt Verstorbener
 Mediale Mitteilungen Verstorbener
 Die Kundgaben verstorbener Komponisten
 Die mediale Durchgabe dichterischer Werke
 Der Gegensatz Spiritismus-Animismus

Zeugnis für die jenseitige Welt

Eine Darstellung der Erfahrungsbeweise
 Der Bildbericht eines Physikers
 330 Seiten, 103 Abb., 29,80 DM

Aus dem Inhalt:

Die paranormale Bewegung von Gegenständen
 Materialisierte menschliche Gliedmaßen
 Entstehung von Bildern und Lebewesen aus Ektoplasma
 Paranormale Erscheinungen bei Frau d'Espérance
 Die Versuche von Prof. Crookes und die "Psychische Kraft"
 Die Versuche von Prof. Zöllner und seine Erklärung paranormaler Vorgänge

Leben nach dem irdischen Tod

Die Erfahrungen von Verstorbenen
 Der Bericht eines Physikers
 185 Seiten, 3 Abb., 19,80 DM

Aus dem Inhalt:

Das Erlebnis des Todes und das Leben danach.
 Berichte von Verstorbenen
 Erfahrungen in der jenseitigen Welt
 Die Verhältnisse in der jenseitigen Welt
 Der Einfluß der Trauer auf Verstorbene
 Die Zuverlässigkeit medialer Durchgaben und die Gefahren des Jenseitsverkehrs

All of them were published by "Die Silberschnur" GmbH, D-56593 Göllesheim, Steinstrasse 1 and they are available at all bookshops in Germany, Austria and Switzerland.

The scripts by the same author listed below and published by the WerSch-Verlag can be directly obtained from the following address:

WerSch-Verlag, Professor Dr. W. Schiebeler, Torkelweg 2, D-88214 Ravensburg.

Der Mensch und seine Bindung an Gott

Parapsychologie und Religion

319 Seiten, 4 Abb., 19,-DM

ISBN 3-928867-00-8

Ravensburg 1990

Aus dem Inhalt:

Die Entstehung und das Wesen der Religion

Der Jenseitsverkehr in der Mosaischen Religion, im frühen Christentum und heute

Der Widersacher Gottes und seine Helfer

Die Möglichkeit wiederholter Erdenleben

Die Offenbarung Gottes bei Zarathustra

Das Wunder in den Religionen

Die "Entmythologisierung"

Täuschungen und Fälschungen auf dem Gebiet der Religionen und des Spiritualismus

Willensfreiheit oder Vorherbestimmung?

Die Geistige Heilung durch Verbindung mit der jenseitigen Welt

Besessenheit und Exorzismus

Nachtodliche Schicksale

Gegenseitige Hilfe zwischen Diesseits und Jenseits

324 Seiten, 18 Abb., 19,- DM

ISBN 3-928867-03-2

Ravensburg, 2. Aufl. 1993

Aus dem Inhalt:

Warum müssen erdgebundene verstorbene von Menschen aufgeklärt werden?

Die Aufgabe der Helferkreise diesseits und jenseits

Ein jenseitiger Heiler

Der Widersacher mischt sich ein

Tod nach Thrombose und der Schock des Weiterlebens

Ein angenehmer Tod und die Aufgabe danach

Ein Verkehrsunfall mit tödlichem Ausgang

Das Wilde Herr im Odenwald

Der Einfluß der Trauer auf Verstorbene

48 Seiten, 5,- DM Ravensburg 1982/1995

ISBN 3-928867-04-0

Engel als Boten Gottes und Helfer der Menschen

52 Seiten, 5,- DM, Ravensburg, 2. Aufl. 1997
ISBN 3-928867-05-9

Paranormale Heilmethoden auf den Philippinen

94 Seiten, 23 Abb., 7,- DM
Ravensburg 1974/96
ISBN 3-928867-01-6

Aus dem Inhalt:

Christlicher Spiritismus auf den Philippinen
Die paranormale Heilung auf den Philippinen
Die Anfänge der paranormalen Chirurgie
Der Heiler Juan Blance
Täuschungsmöglichkeiten
Blutgruppenuntersuchungen und Heilerfolge
Die Heiler Agpaoa, Palitayan, und Gutierrez Agaid, Pusot, Mercado und A. Orbito
Die Ausbildung und Wirksamkeit der Heiler
Materialisations-, Dematerialisations- und Apportvorgänge bei Heilern
Der Kampf gegen die philippinischen Heiler

Die Geistige Heilung durch Verbindung mit der jenseitigen Welt

47 Seiten, 5,- DM,
Ravensburg 1987

An den Grenzen der Physik

Die Parapsychologie als Mittlerin zwischen Naturwissenschaft und Religion
60 Seiten, 5,- DM,
Ravensburg 1982

Verfahren zur Verbindung mit der jenseitigen Welt

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