# ORGONOMIC DIAGNOSIS
OF
# CANCER BIOPATHY

*Based on a course on cancer given by*

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*Compiled by*

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# Orgonomic Diagnosis of Cancer Biopathy

**Based on a course on cancer given by Wilhelm Reich, M.D., at Orgonon Rangeley, Maine, during July and August, 1950. Compiled by Chester M. Raphael, M.D., and Helen E. MacDonald, Ph.D.**

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## I. Introduction

*Rules to Follow in Basic Research*

1. Your microscope should be as good as the car you dream of possessing.

2. When you start looking into a microscope or doing some experiment you are asking *nature* certain questions; therefore look and listen only to what *nature* has to tell you, and not what the head of your bacteriological department expects you to see. Forget for awhile what you have learned in school. It may be wrong. After having carefully looked and listened, then compare what you have seen with what you have learned.

3. Don't try to be smart and clever. Be *humble!*

4. Do not try being a scientific worker when you are afraid of what your neighbor might say to what you have seen. Forget your neighbor for awhile.

5. Do not try to "control" experiments. Understand them first, then perform them faithfully according to their exact description. Never alter an experimental setup before having understood it and having become capable of handling it well. Later on any change will be only fruitful, but not at the start.

6. Trust your senses fully if you are sure of yourself. But control the results of your sense impressions by devices which are independent of your senses. First rely on your *feeling* heat at the orgone energy accumulator's inner walls. Then use a *thermometer* to confirm the feeling.

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7. Never try to develop ideas about something you have never seen.

8. Judge any thing or process from the standpoint of *its own* existence and functioning. Never try to judge an airplane by what you know about a pressure cooker. And don't forget: A steam locomotive is much more than a wheelbarrow. You won't believe it, but it is true that some "authorities" try to judge an alive earth bion from what they know about a Gram-stained staphylococcus, or to judge the cosmic orgone energy from what they know about "static," instead of the other way around.

9. If you learn of a new basic function in nature be ready to revise your well set ideas.

10. Do not try to hide your mistakes, speak about them frankly, and be proud of knowing your mistakes. Do not try to be perfect. Your mistakes are your most reliable signposts on your road.

11. In research it is of paramount importance to know exactly what you *do not* know.

12. An "authority" is the one who *knows* what he is dealing with, and not the one who never has learned what he thinks he already knows. A bacteriologist is no authority on bions unless he has diligently studied bions, and a cancer researcher is not an authority on orgonomic cancer research beyond his own field unless he has diligently learned to see the developments of protozoa from disintegrating tissue, T-bacilli, etc.

The laboratory procedures presented here are only a part of the whole approach to the understanding of the biopathies, particularly the cancer biopathy. For the complete approach it is essential that the medical orgonomist:

1. Make a complete physical examination of the patient, including a pelvic examination.

2. Obtain the sex-economic history—that of genital functioning.

3. Perform the Reich Blood Test.

4. Examine the vaginal (or other) secretion microscopically in the *living* state.

The details of the procedure for the last two steps, that of the Reich Blood Test and microscopic examination of living tissue, form the greater part of the material of this paper. The physician who acquires skill in these tests must inevitably also acquire the perspective of a research biologist. For this

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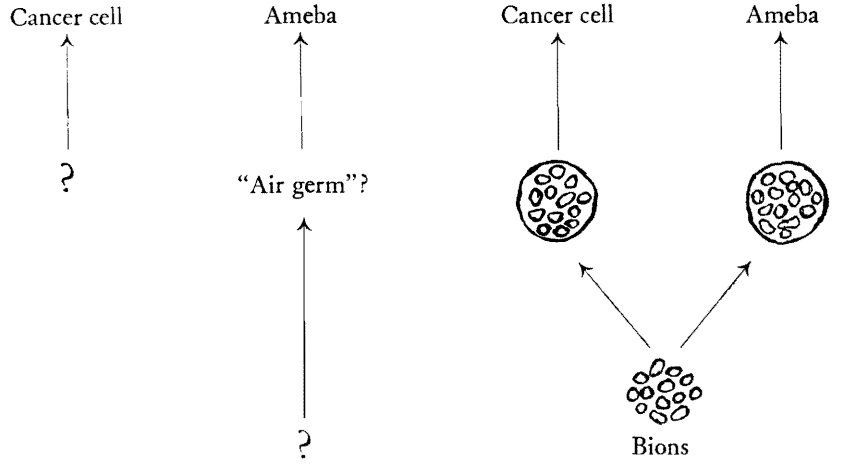
reason no clear-cut separation is made between those steps which are diagnostic and lead to correct prognosis and proper treatment of the patient, and those observations which reveal the more inclusive processes of the functioning of *bio-energy,* of transitions between living forms, of biogenesis, of life and death. For the biologist, therefore, sections are included describing the culturing of T-bacilli, the injection of T-bacilli into mice to produce cancer, and other laboratory procedures.

Wilhelm Reich was the first to seek the solution of the mystery of the origin of the cancer cell by direct examination of blood and tissues in the living state. His success in this led to his elaboration of the useful criteria to be described here. The essential material covered in this article in laboratory manual form can be found in its full orgone-physical as well as biopsychiatric context in Reich's THE DISCOVERY OF THE ORGONE, Vol. 2: THE CANCER BIOPATHY, 1948, Orgone Institute Press. The serious student is referred to a careful study of that text in addition to laboratory work on the cancer biopathy. But no text alone will give a mastery of this subject; such mastery can only come from long-continued observation of the many pertinent phenomena and functions, *studied within the framework of functional, orgonomic theory.* Supervised laboratory instruction in the beginning is recommended.

There exists a functional identity between the origin of protozoal forms of living matter and the origin of cancer cells. This functional identity has

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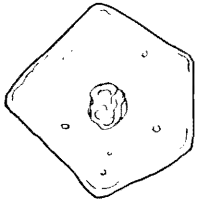
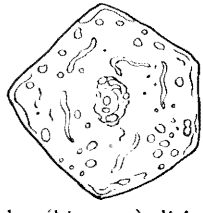
been established by the discovery that both originate from the products of bionous disintegration of living matter. It is this functional relationship which these laboratory studies, described herein, aim to establish. Successful in this, the student will shed classical medicine's recourse to air germs, and begin to understand the true nature of the cancer biopathy. He will learn that the cancer disease does not begin with the tumor, but has existed long before the appearance of the latter. He will understand why it is erroneous to state or to assume that Reich implies that a cure for the cancer disease has been found; but he will also understand how the use of the orgone energy accumulator can retard, or reverse the development of a cancer tumor.

Healthy cells show an orderliness and regularity in structure. Few vesicles are seen. The protoplasm is bluish and hyaline, or it may show fine striations.

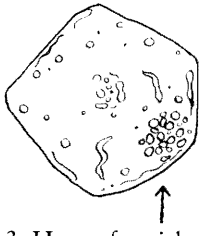
In cancer tissue, on the other hand, the cells show blue vesicles or tiny black bodies. Wherever one finds this vesicular (bionous) structure, it is evidence of tissue degeneration. The typical club-shaped, caudate form of the cancer cell is the end phase of a series of changes in the tissues, changes which are the result, in human beings, of long-continued local spasm of the musculature, and stasis of bio-energy. Diagrammatically the transition takes place as follows:



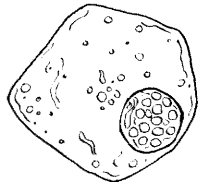
1. Healthy epithelial cell (vaginal)



2. Vesicular (bionous) disintegration



3. Heap of vesicles (bion heap)



4. Formation of membrane around heap

FIG. 2. TRANSITION FROM HEALTHY TISSUE TO CANCER CELLS

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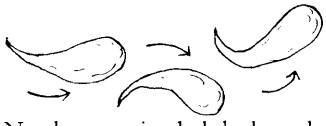
5. Independent growth of new bionous unit with membrane

6. Elongation into club-shaped cell, still showing bionous structure

7. Club-shaped cell with homogeneous plasmatic structure



8. Newly organized club-shaped cell develops motility

FIG. 2.—*(Continued)*

In a similar manner, healthy red blood cells (RBC) show an even structure, with a taut, wide blue frame, and regular centers, and a strong orgone energy field. RBC as well as tissue cells undergo disintegration into blue vesicles or bions, or, when the energy of the cell is low, into smaller bions, even into T-spikes.[1] The latter is indicative of a cancerous process taking place within the organism.

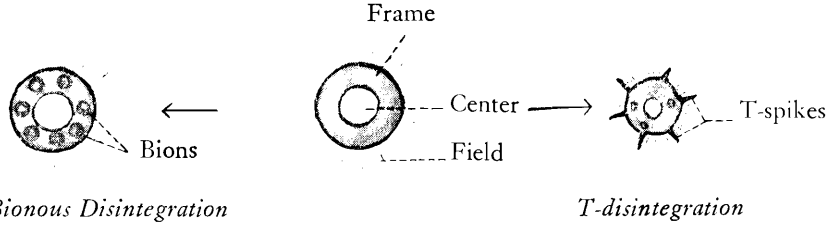



FIG. 3. THE RED BLOOD CELL

T-bacilli are the end stage of tissue disintegration. Cells, at first, degenerate into bions, and these in turn degenerate into smaller and smaller forms, finally into T-bacilli. All living tissues disintegrate ultimately into bions and finally into T-bacilli.

This universal disintegration can be reversed, although not in a true sense. Thus T-bacilli, by the use of a nutrient serum, will form blue PA bions,[2] and bions can reorganize into protozoal cells.

[1] T = *Tod* (German for *death*). *Cf.* THE CANCER BIOPATHY, p. 26.

[2] PA = Term originally applied to sand bions which grew in packets, and were energetically strong. Now used generally to describe large vigorous bions. (*Cf.* photos 7-9.)

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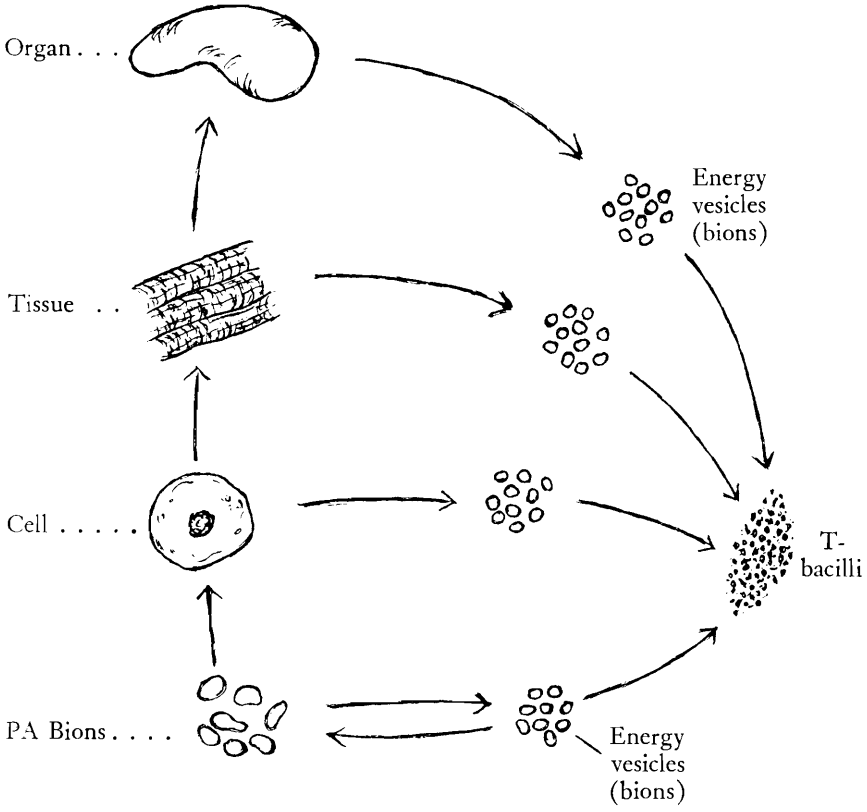


FIG. 4. DISINTEGRATION OF LIVING MATTER INTO BIONS AND T-BACILLI

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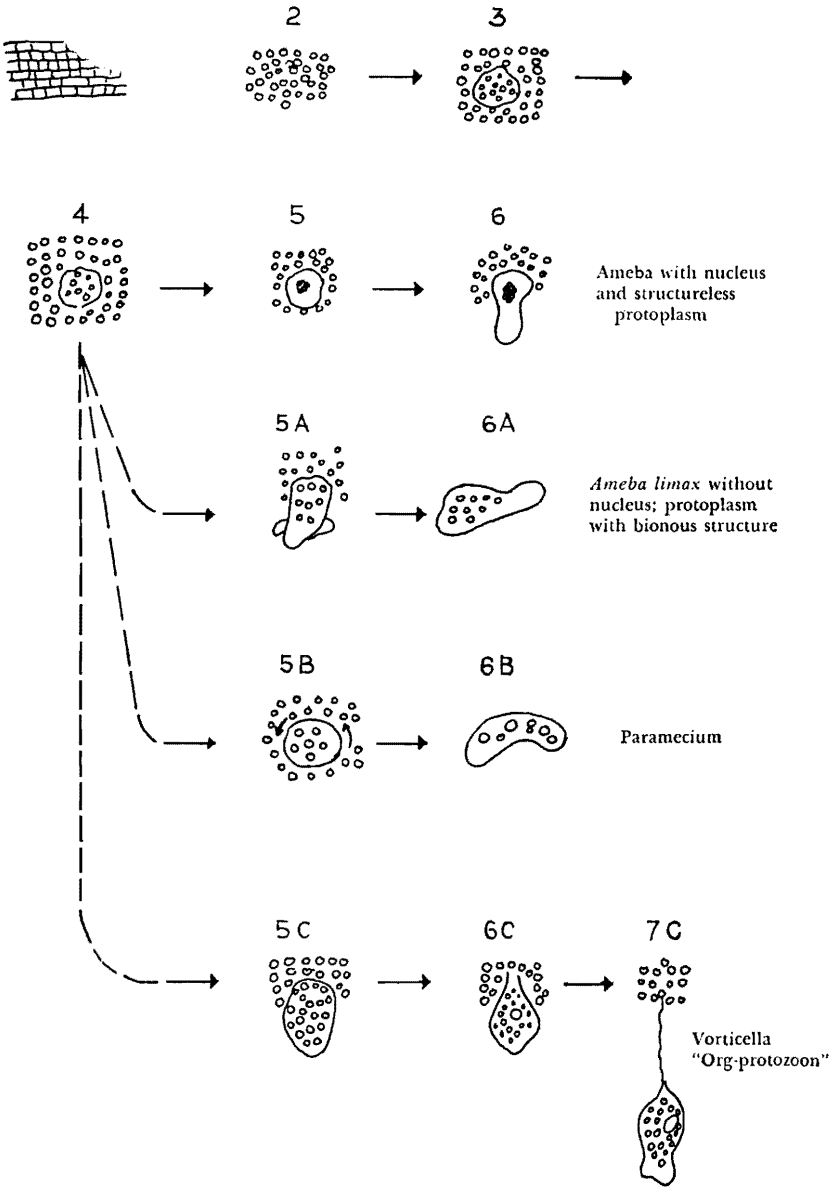


FIG. 4A. DEVELOPMENT OF DIFFERENT PROTOZOA FROM THE SAME MEMBRANOUS BION HEAP. (1-4 = COMMON STAGES OF DEVELOPMENT; 5-7 = DIFFERENTIATION)

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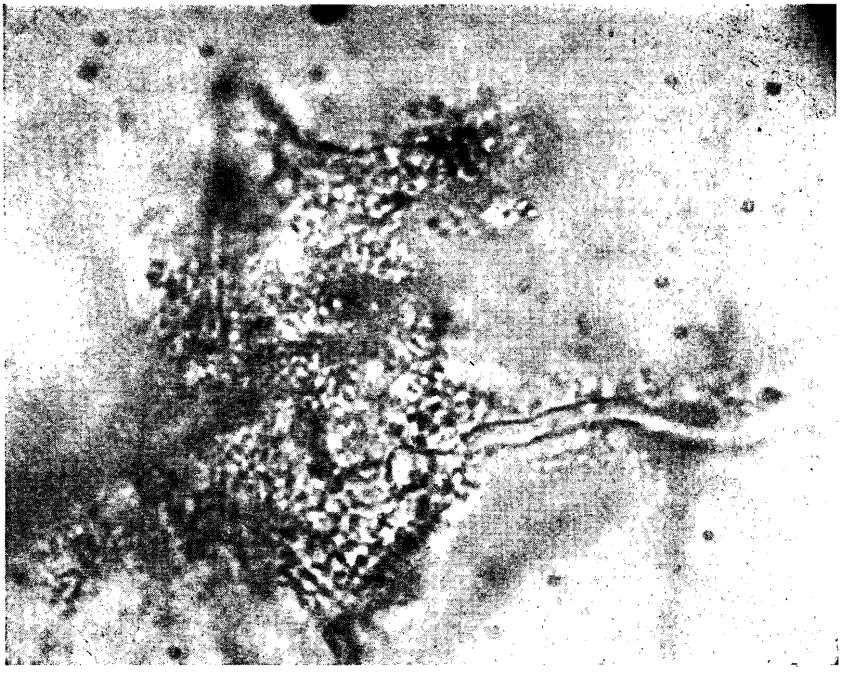

PHOTO 1. GRASS IN A STATE OF BIONOUS-VESICULAR DISINTEGRATION. FROM AN INFUSION. ABOUT 700X

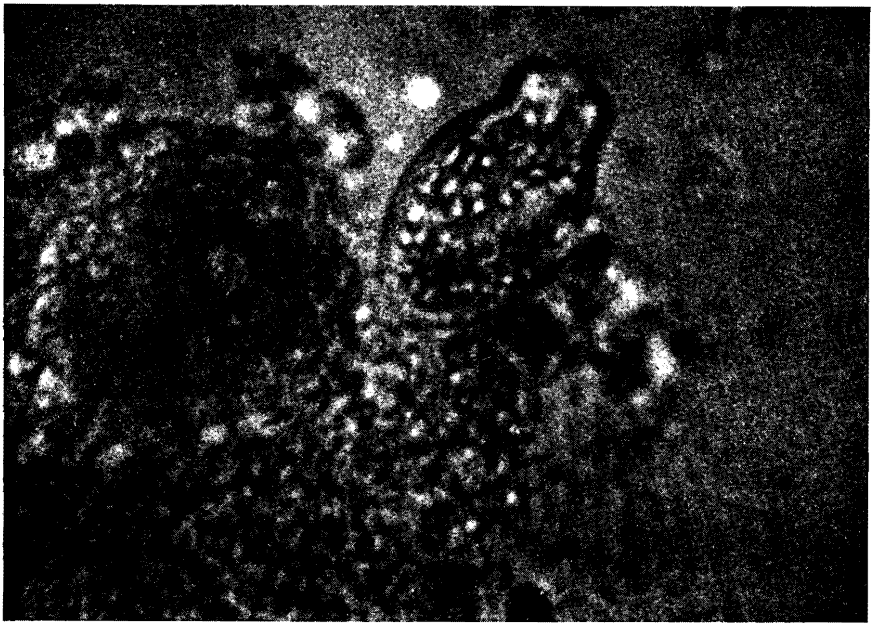

PHOTO 2. HEAP OF BION VESICLES IN AN ADVANCED STAGE OF ORGANIZATION

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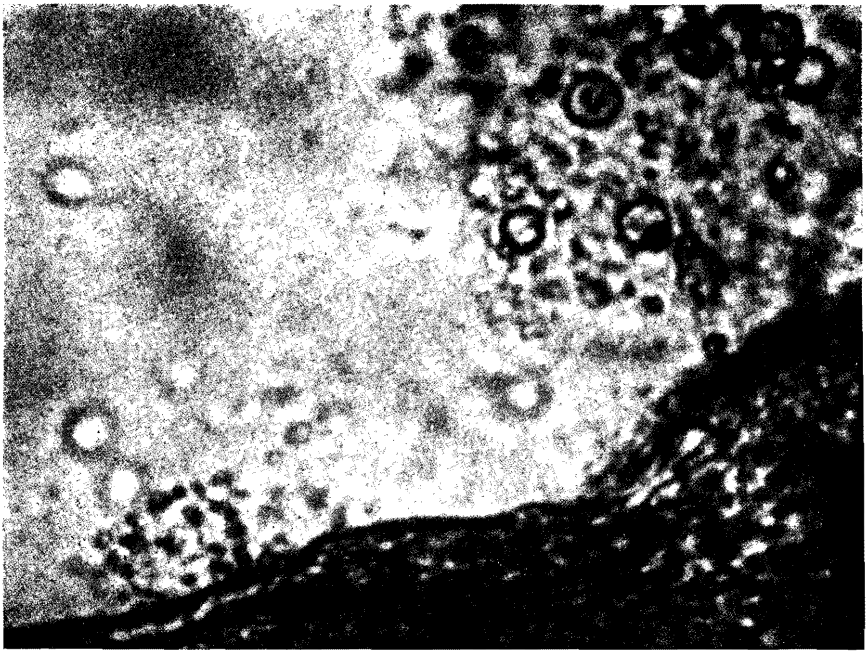

PHOTO 3. A PHASE IN THE DEVELOPMENT OF AMEBA LIMAX. THE PROTOZOAL GERMS AT THE UPPER RIGHT DERIVE FROM GRASS WHICH UNDERWENT SWELLING; EACH OF THEM IS DEVELOPING INTO AN AMEBA. AT THE LOWER LEFT ANOTHER PROTOZOON IS FORMING. ABOUT 1000X. PHOTOGRAPHED WITH ACCELERATED MOTION DEVICE

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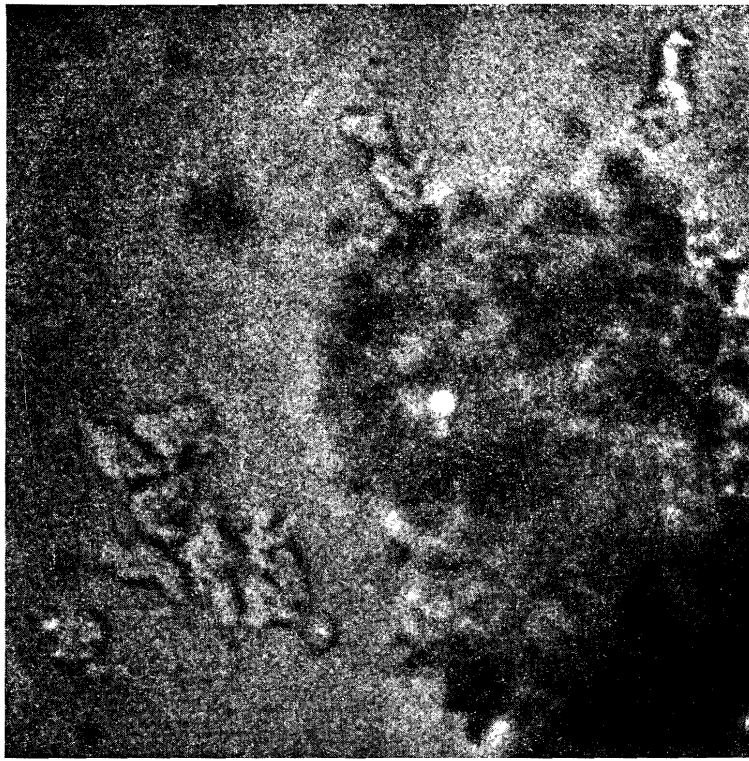

PHOTO 4. DISSOLVING PROTOZOAL GERMS (AT THE RIGHT MARGIN O
DISINTEGRATED GRASS). AMEBAE WHICH ARE DETACHING THEMSELVE
AND TOP)

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PHOTO 5. A PHASE IN THE DEVELOPMENT OF A PROTOZOON FROM MOSS

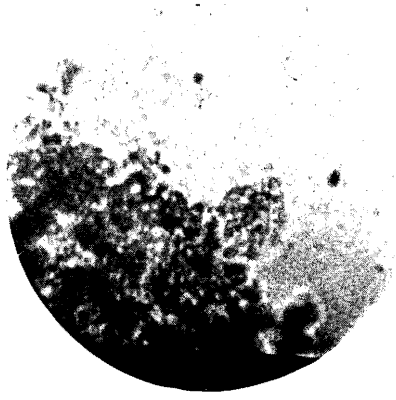

PHOTO 6. MARGINAL FORMATION IN THE PROCESS OF ORGANIZATION, IN BIONOUSLY DISINTEGRATING GRASS. APPROXIMATELY 700x

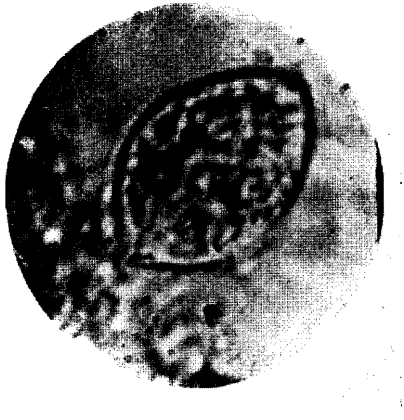

PHOTO 6A. ORGANIZED HEAP OF BION VESICLES. APPROXIMATELY 1500x

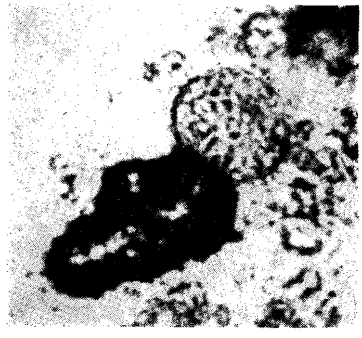

PHOTO 6B. PROTOZOAL (BIONOUS) MARGINAL VESICLE IN DISINTEGRATED GRASS (DARK)

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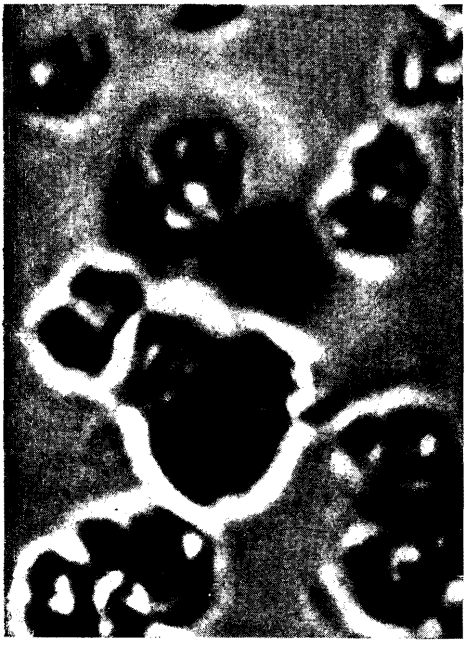

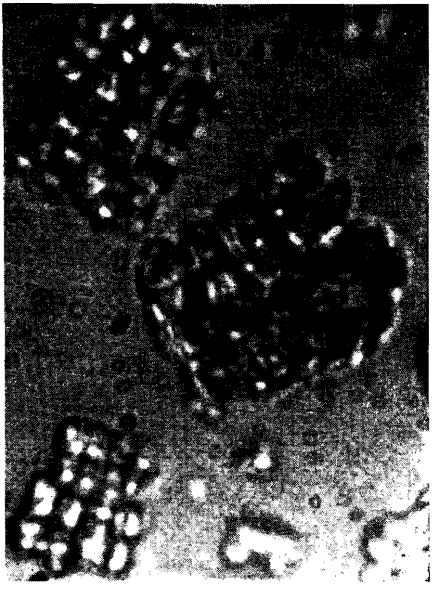

PHOTOS 7 AND 8. CULTURES OF SAPA BIONS IN WHICH THE ORGONE ENERGY WAS DISCOVERED

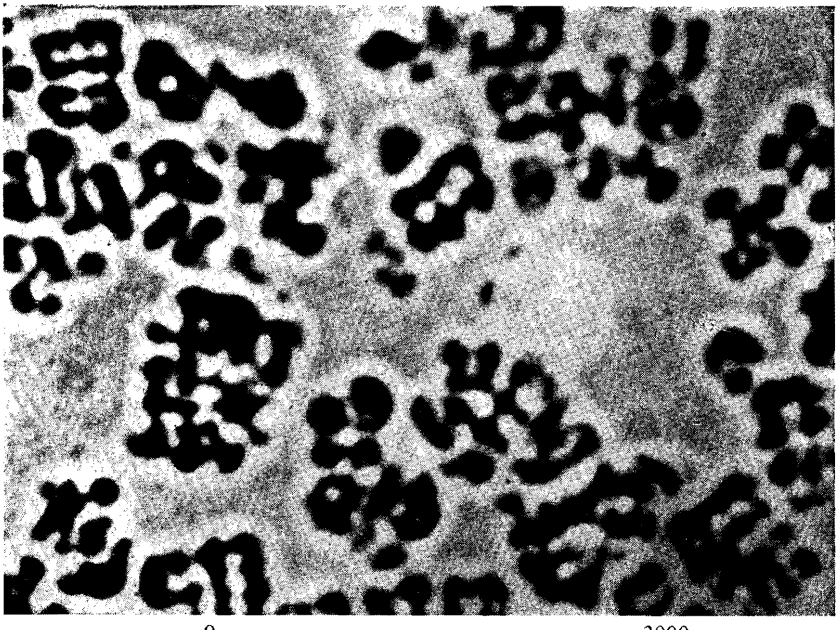

PHOTO 9. CULTURE OF PA BIONS. APPROXIMATELY 3000X

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## II. The Reich Blood Test

*The Reich Blood Test* is a method for the determination of the health of the individual, the onset and progress of a cancerous process at work within the organism, and the improvement in health derived from the use of the orgone energy accumulator. First published in 1942 (*cf.* Reich: "The Carcinomatous Shrinking Biopathy," *International Journal of Sex-economy and Orgone Research* 1, 1942, p. 141ff.) and again in 1948 in Reich's THE DISCOVERY OF THE ORGONE, Vol. 2: THE CANCER BIOPATHY, pp. 144-145, the Reich Blood Test has been in continuous use by those trained in medical orgonomy, and has proved itself to be of inestimable value.

A prerequisite for the proper evaluation of the Reich Blood Test consists in the rearrangement of one's thinking with regard to the basic unit of living things. It is understood in mechanistic science that this basic unit is the cell *(cellular theory)*. Now, in observing the disintegration of RBC in physiological saline, it is immediately apparent that this theory is insufficient, for as the cell disintegrates a more primitive unit makes its appearance. This basic unit is the *bion,* or energy vesicle. We may define the *bion* as a microscopically visible vesicle of functioning energy, i.e., a unit of energy consisting of a membrane, liquid content, and an amount of *orgone (life) energy.*

There are three parts to the Reich Blood Test, all based upon a *functional* approach to the understanding of the bio-energy (orgone energy) contained in living matter, and the knowledge that the *bion* is the basic unit of structure of living things.

1. THE DISINTEGRATION OF THE RBC IN PHYSIOLOGICAL SALINE (THE MICROSCOPIC TEST)

*Preparations for the test*

1. Sterile Ringer's solution or physiological saline in a dropper bottle, warmed to body temperature.
2. A slide with one or two concavities, which is washed, then dipped in alcohol to remove any oily substance, and thoroughly dried. Quick flaming removes any excess alcohol.
3. A bunsen burner, or alcohol lamp.
4. Stylette, flamed and allowed to cool.
5. Absorbent cotton.
6. Micropipettes, flamed and allowed to cool.

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