

Serrapeptidase - serrapeptase – no tratamento da aterosclerose de carótidas

Silk Worm Enzymes For Carotid Artery Blockage

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Serrapeptase is an enzyme produced by serratia bacteria living on silkworms. With this enzyme the worms melt a hole out of the cocoon. Unlike other enzymes in the field of biology, Serrapeptase dissolves 'dead' tissue like or e.g. not both silk and apparently also fibrinoid layers in the arteries which chemically could be compared to silk.

A special problem in today's civilized society is **occluding processes in the carotid arteries**. Very often we see patients where surgeons were reluctant to operate or to apply drill or laser technology such occluded carotids. The reason for this is the potential risk that off coming debris will be pushed into the smaller cerebral vessels.

We have, therefore started to apply Serrapeptase in cases of severe narrowings of the carotid arteries. Mostly in patients showing severe symptoms due to the narrowing, including amaurosis fugax (intermittent blindness). The therapeutic results are excellent, certainly lifesaving. It is, however, mandatory that the therapy be conducted for a very long time. **Even after month 18, after the onset of the therapy, the patients are improving.**

I have also found Serrapeptase to be an extraordinary substance for safely removing fibrous blockages from coronary arteries, found in the heart and particularly the carotid arteries found in the neck, which supply blood brain. Serrapeptase is a natural enzyme produced by serratia bacteria living in silkworms. Once the silkworm has completed its transformation into a moth, it uses this substance to "melt" a hole in its cocoon, so that it can escape.

The astonishing fact is that, unlike other biological enzymes, Serrapeptase affects only non-living tissue, like the silk cocoon. This is the reason the butterfly is not harmed. For our health purposes, Serrapeptase dissolves only dead tissues such as the old fibrous layers that clog the lining of our arteries and dangerously restrict the flow of blood and oxygen to the brain. Because of this, Serrapeptase is extremely useful in keeping arterial deposits from building up again after angioplasty (a balloon technique used to clear an artery blockage) or coronary bypass surgery has been performed.

Very often, surgeons are reluctant or unable to open partially closed carotid arteries using laser surgery. They fear that resulting debris could be pushed into smaller connecting arteries and result in a stroke and possibly death. In cases of severe arterial narrowing, I have used Serrapeptase with excellent, even life-saving results. Many of my patients have shown significant improved blood flow through their previously constricted arteries, as confirmed by ultrasound examination. Unfortunately, orthodox cardiologists do not employ this important method in their practices.

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