

Andrew Pallos, D.D.S.

General Dentistry

To: Licensed M.D.s, D.O.s, D.D.S.s, D.M.D.s, L.Ac.s, and O.M.D.s
Re: An Open Letter endorsing the work of Yoshiaki Omura, M.D., Sc.D.

Dear Colleagues:

It is exciting and inspiring to work with physicians who often get dramatic therapeutic results in difficult cases, and to see the gratitude on the faces of the people we have helped. I am privileged to know such a physician--Yoshiaki Omura, M.D., Sc.D., the founder of the non-invasive Bi-Digital-O-Ring Test (BDORT), which was granted a U.S. Patent in 1993.

I have been practicing general dentistry in private practice in Laguna Niguel, California for almost 25 years. I am a refugee from Hungary (1956) who grew up in refugee camps, orphanages, boarding and foster homes in Yugoslavia, France and Switzerland, and came to California at age 12 the year President Kennedy was assassinated. Due to my mother's manipulative skills, I skipped grades 1, 7, 8 & 12 and attended the University of California at age 16 with a German-English dictionary in my back pocket. I did scientific research for 5 years before attending dental school and was involved in developing the forensic gunshot residue (GSR) test now widely accepted in courts of law. At the UCLA School of Dentistry I was elected by the students to be their Class President 3 years in a row, and elected by the faculty to the highest Dental Honor Society, Omega Kappa Upsilon.

I have been learning from Dr. Yoshiaki Omura for almost eight years and have assisted him in his seminars and research since 2005 as a volunteer. Every course given by Dr. Omura in New York is co-sponsored and accredited by the New York Academy of Medicine, and his is one of a few courses in New York State approved to certify physicians and dentists in Acupuncture (www.icaet.org).

The Bi-Digital-O-Ring Test for Early Disease Detection

When Dr. Omura first discovered this technique he calls the Bi-Digital-O-Ring Test (BDORT) to detect disease early, he found stomach cancer in his own sister! He referred her to the best gastroenterologist he knew--his professor in medical school--who hospitalized her and performed every test he could. When using accepted methods he found no stomach cancer, he told her that her brother was wrong, and she should never worry about stomach cancer. Two years later she died of terminal stomach cancer.

My good friend Dick Kopp went to his physicians three times complaining of pain in the area of his prostate and was referred to a psychiatrist because they found nothing wrong. When six months later they found terminal prostate cancer, they told him, "If you had come sooner, we could have helped you." He died in about three months, suffering tremendously. This experience told me to look for a better way and not let go.

My office manager, Dee Davis, has a 14 year old son, Cameron. Cameron was suffering from disabling migraine-type headaches (often on awakening) that became more frequent and severe--to the point he passed out 4 times when the pain hit, and also stopped breathing once and was saved in Emergency. His pain was rated 10 out of 10. Usually when the pain hit, he could not walk but had to lie down in a dark and quiet room until it passed. His doctors, including specialists, offered no diagnosis, treatment or hope.

Dee brought Cameron to New York at the end of January 2007 to be evaluated and treated by Dr. Omura during his seminar for physicians. Dr. Omura found & mapped an area showing resonance with Astrocytoma (in his head directly as well as on the MRI of his brain) and measured several associated parameters. Then he treated Cameron with One Optimal Dose of DHEA and made sure he wore clothing that supported the treatment. The disease-related parameters disappeared and the health-related parameters became optimal. Cameron started cheering up and feeling better that weekend. To date, over 8 months following that weekend, he has had only one migraine-type headache, is getting straight A's, and is a starter on his high school football team. You may call Dee at my office and find out how happy this result has made her.

Adenocarcinoma of the Prostate Gland

I started attending Dr. Omura's seminars and workshops for physicians and dentists in New York regularly in 2005, after my friend Don received a diagnosis of Prostate Cancer and sought an alternative to surgery or radiation. Don's PSA had spiked to around 10 and his diagnosis was based on biopsy. Dr. Omura evaluated him using the BDORT and treated him with one (single) optimal dose of DHEA and found clothing for him that would not interfere with the treatment (maintaining optimal Telomere levels). Don's sleep improved tremendously starting the first night, as his frequency of urination reduced from 7 times per night to once per night. He regained his strength and golf swing. His malignant tumor began to shrink on sonography, and his PSA dropped below 3 (it was 2.6 a few weeks ago). His oncologist was amazed, his urologist supportive, and his family physician felt betrayed because Don went against his recommendations. It will be 2 years since Don's first visit to New York this December.

Dr. Omura published his findings as Clinical Case #9 ([Anti-Cancer Effects of One Optimal Dose of DHEA \(7 mg\) on Adenocarcinoma of Prostate Gland](#)) in the article "Beneficial Effects and Side Effects of DHEA" in *Acupuncture and Electro-Therapeutics Research, The International Journal*, Volume 30, Number 3/4, 2005 (ISSN 0360-1293). This article is freely available under the heading "DHEA—One Optimal Dose" at www.bidigitaloringtest.org.

Dr. Omura's research on Autism

A mother of a five year old boy with autism came to Dr. Omura in 2006 for evaluation and treatment for her child. She reported and we observed significant positive changes during the next 48 hours (he was given one optimal dose of DHEA and stopped wearing telomere-reducing clothes). About 9 months later, she enrolled her son in a ten week summer program and did not tell the staff that he had autism. She told us, "Every day when I picked him up, I expected someone to say, 'What's wrong with your son?' But it never happened!" Though behind, this boy is progressing and passing as a typical child.

Dr. Omura calls Autism a juvenile type of Alzheimer's Disease because their parameters are so similar: the toxic accumulation in the brain of β -Amyloid(1-42), Asbestos and Aluminum due to a mixed bacterial (*Chlamydia Trachomatis*) and viral (CMV) infection probably acquired during birth.

Moreover, a dentist trained by Dr. Omura believes he prevented the development of autism in two of his grandchildren. Using the BDORT, Dr. Omura confirmed severe mixed infection in their brains, shortly after birth, and applied non-invasive treatment immediately. The boys are excelling in school and in life. What a life-saving blessing it would be if all newborns or infants could be screened for such infection, since now 1 in 150 males is diagnosed with Autism! The BDORT is accurate, rapid and 100% non-invasive.

Disabling Intractable Chronic Pain

Early in 2007, a young lady (22 years of age) sat curled up in pain, waiting to be seen by Dr. Omura at our conference in New York. She was brought by her father (a dentist) who had exhausted all resources in Boston where she was referred to “group psychotherapy for eating disorders.” The specialists found nothing wrong, and the medicines they prescribed did not help. After the previous summer abroad, this Boston University student had to drop out due to stomach pain and inability to function; she also had to quit a job. Her face looked drawn and tired; she was thin, pale, depressed, and unresponsive to any encouragement or attempts at humor. She rated her pain as 9 out of 10, but appeared to be in less pain.

Dr. Omura confirmed she really had severe pain, since Substance P was greatly elevated in the area of her complaint. He measured several other parameters of her condition. He found a strong resonance with a pathology slide of Adenocarcinoma of the Stomach in the area of her pain and marked the outline of the resonance response on the skin. Her evaluation took about an hour, and then he treated her according to his method. By the next day her pain had reduced to a rating of 1 out of 10 and her appetite was improving; on the third day she was hungry, her pain was gone, she started smiling and her sense of humor was returning. We were witnessing an almost unbelievable transformation of a beautiful young person getting her life back.

Not all cases demonstrate outstanding outcomes, to be fair. Some cases have been too damaged for a full recovery. Some are unwilling to change their telomere-lowering clothes or jewelry. Some cases are beyond the reach of this method.

Dr. Omura holds seminars and workshops for doctors in New York, California and Arizona—see the schedule at www.bidigitaloringtest.org. I invite you to attend, participate and learn this safe and effective method of evaluation and treatment that honors the first principle of medicine—“Do No Harm.”

If you have any questions, please call me at 949-363-9998.

Very truly yours for better health and medicine to all,

Andrew Pallos, D.D.S.
(Electronically Signed on December 26, 2007)

P.S. The attached INVITATION containing Dr. Omura’s Top Ten Relevant Research Findings may sound like a new language, and technical, so I wanted to share some positive results I have witnessed to assure you this new and powerful method is truly worth exploring. Please come and find out for yourself.