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In November 1995 I presented a hypothesis known by the title: 'Water Regulating Theory (Hayashi's Model)' in a US health magazine. It says that active oxygen could be scavenged or reduced by atomic hydrogen, which results in production of H₂O to give again a birthplace for every life form.

My hypothesis was born from the clinical observation study in our clinic. Since May 1985 we have confirmed thousands of clinical improvements, obtained solely by exchanging drinking (as well as cooking water) from tap water to reduced water (hydrogen rich water). Those improvements were very exciting and some of them were considered to be miraculous at that time, when Shirahata's paper was not yet submitted. It should be remembered that such putrefied metabolites are the same ones which are produced as a result of putrefaction of protein. The difference lies only in the fact that the former putrefaction process is brought about by intestinal microbes, whereas the latter is brought about by airborne microbes. Based on these facts, I proposed a hypothesis 'Pre- and posthepatic Organ Theory' in 1988, 1989 & 1990 at the International Symposium on 'Man and His Environment in Health and Disease' held at Dallas, Texas, USA.

I stated that, as it is impossible to purify the polluted water in the St. Laurence River without purifying the polluted water in Lake Ontario, so it should be impossible to improve the disorders of posthepatic organs, without trying to improve the disorder of prehepatic organs, namely putrefaction in gastrointestinal tract. Such clinical experiences have led us to recognize that reduced water is not only effective for restoration of intestinal flora metabolism, but also could be effective in scavenging active oxygen. Our clinical observation data, and my hypothesis, were delivered to Prof. Shirahata in April 1996 and his research has since started.

Shirahata's paper means that cell metabolism, either microbial or cancerous, depends on its intracellular water, namely cell metabolism. This can vary according to the property of intracellular water, i.e. hydrogen-rich or not. And even cancer cells might lose their characteristic feature of unlimited proliferation when they are immersed in hydrogen-rich water, originated and developed in Japan, but totally unknown in the past throughout the world. The solution might now be in our hands. Our 'new water' should be the first choice for all of us to take, as has been suggested by Happe, Shirahata and ourselves.

Case study presentations showed improvements of diabetes, hepatoma & atopic dermatitis. Now, there could be no wonder why such clinical improvements have been obtained. In short, the 'invisible reaction' of active hydrogen against active oxygen was regulated at first. As a result of it, 'visible reaction', so-called clinical exam data as well as clinical symptoms have been improved.

**CLINICAL IMPROVEMENTS OBTAINED FROM
THE INTAKE OF REDUCED WATER
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(1985-2000)**

1. Improvement of blood glucose and HbA1C levels in diabetes mellitus.
2. Improvement of peripheral circulation in diabetic gangrene.
3. Improvement of uric acid levels in gout.
4. Improvement of liver function in hepatic disease, cirrhosis of liver, hepatitis.
5. Improvement of gastroduodenal ulcers and prevention of recurrences.
6. Improvement of cholesterol level; hypertension, angina, myocardial infarction.
7. Improvement of hypersensitive disorders; atopic dermatitis, asthma, urticaria.
8. Improvement of autoimmune disorders; rheumatism, collagen disease, SLE.
9. Improvement of so called specific diseases; Behcet' syndrome, Crohn disease, ulcerative colitis, Kawasaki's disease.
10. Improvement of malignant tumors of liver; hepatoma, metastatic tumors.
11. Improvement of general malaise, chronic constipation & diarrhea as well as persistent diarrhea occurred after gastric resection.
12. Improvement of dehydration in infants with vomiting and diarrhea caused by viral infection
13. Improvement of hyperbilirubinemia in newborns
14. Experiences of pregnant women who took reduced water during their pregnancy; almost no emesis, smooth delivery, slight jaundice, enough lactation, smooth and satisfactory growth of newborns.....

Devices to produce reduced water were introduced into our clinic in May 1985. Soon after, the *Hydrogen Producing Mineral Stick* was designed to make hydrogen-rich water available inexpensively and more efficiently to all. This *Hydrogen Producing Mineral*

Stick showed to be a more effective source of hydrogen than electrolyzed-reduced water with no concern of hydrogen gas dissipating within minutes after being poured. This then allowed even better results to follow. Based on the clinical experiences obtained in the past 15 years, it can be said that introduction of naturally reduced water (using H-01 Active Hydrogen Generator; later named ***The Hydrogen Producing Mineral Stick***), or electrolyzed-reduced water for drinking and cooking purpose for in-patients should be the very prerequisite in our daily medical practices. It is because any dietary recipe cannot be a scientific one if property of water taken by the patients is not taken into consideration.

The Ministry of Health and Welfare in Japan announced in 1965 that the intake of reduced water is effective for restoration of intestinal flora metabolism.