Chronic Obstructive Lung Disease (COPD)

Background

Atmospheric air activated by Singlet Oxygen Energy (SOE) therapeutic inhalation equipment, leads to improved utilization of available oxygen by the human body. COPD patients often need oxygen therapy due to their poor physical endurance. These two studies measure whether the SOE equipment can improve physical capacity and performance.

Both tests were run by Dr Klaus Erpenbach at his clinic in Erfstadt, Germany.

Methodology

Physical walking tests were performed on patients suffering from COPD, measuring how far they could walk in a 6-minute period, and statistically analysing the improvement in distance travelled, following SOE therapeutic inhalation treatments.

In both tests the patient was treated for the initial 4-week period, and walking distance tests were continued after the treatment had ceased, to understand the longer term effects of the SOE treatments.

Tests

Test 1 was completed in 2010 using the SoeTie clinical product, and covered 14 patients, 6 with bronchial asthma and 8 with COPD. Each patient had an intense, daily, 30-minute treatment, 5 days a week, for 4 weeks. The details of this test have been covered in an earlier report but in summary, it was shown with greater than 99.9% certainty (using the t-probability test) that the patients' physical walking capacity improved following SOE treatment. The effects remained for a period following the end of the treatment, but trended back towards the original values over the next few weeks.

Test 2 was completed in 2011 using the new SoeMac home use product, and covered 12 patients, 10 of which were using the actual product, and 2 using a placebo. Each patient switched on the product every day or night and allowed it to run for up to 8 hours each day. Being a passive treatment, there was no hindrance to lifestyle. Again this test ran for 4-weeks. The test was a double blind with neither the Doctor nor the Patients aware of which unit they were using. The details of the measurements taken are included as an Appendix to this report.

Walking distance in a 6-minute period was measured at the commencement of the project (t0). After 4-weeks, all 10 patients using the active products experienced increases in their physical performance. It is shown with greater than 95% certainty (again using the t-probability test) that the SoeMac treatments were beneficial after 4-weeks usage (t4). In the placebo group, there was less than 5% probability of any change in performance – which is expected.

Interestingly, after 4 more weeks, and with no further treatments, the Patients' physical performance continued to improve, and the t-probability of beneficial effect increased to almost 96% (t8).

Even more interesting is that after a further 4-weeks, the physical performance was maintained and the t-probability increased to greater than 98% (t12).

Conclusion

1. SoeMac inhalation therapy is beneficial to the physical performance of COPD sufferers.
2. The benefits remained for a further 8-weeks after the treatments were finished, indicating that the provision of SOE to the human body over a daily 8-hour period is more beneficial than a short 30-minute, daily treatment, though it is noted that both methods are beneficial.