

## CORRECT RIFE TECHNOLOGY – A SUMMARY

There are literally hundreds of ‘Rife’ machines available. Sadly, the vast majority do not do anything remotely like what Rife actually did. How does the man on the street cut through all of this? **With great difficulty!**

An approach to this problem is to understand some history and apply some common sense.

### Dr Royal Raymond Rife:

1. A microbiologist – hence his ability to run a microbiology lab.
2. A machinist – hence his ability to physically make his own microscope/equipment
3. An optical technician – He worked for years at the Zeiss lens company where he learnt about microscopes.
4. A former navy officer - where he learnt about Radio Frequency basics.

Contrary to popular belief he was very much in with the academic medical community of his day working with medical specialists and professors developing his technology and running mainstream clinical trials. Furthermore, he was significantly funded by the ball-bearing magnate of the day, Henry Timkin. Rife was not some backyard experimenter, there was significant funding behind him. The famous medical trial is the 1934 trial run together with Dr Milbank Johnson and Professor Arthur Kendal. In other words, he was the darling of the medical establishment (see history section on [www.rifevideos.com](http://www.rifevideos.com) ) until the FDA and the AMA woke up to this incredible technology. The rest as they say is history. He was quite literally ruined and he and his team were litigated into oblivion. This all transpired in the late 40’s and by the 50s. At this time doctors were threatened with imprisonment and/or losing their licenses if they continued using Rife’s technology. As a result, the technology simply and sadly disappeared.

This is all presented in incredible detail on this website, [www.rifevideos.com](http://www.rifevideos.com) This website was put together by a transatlantic research group that tracked down one of the above threatened doctors whilst he was still alive in the 90’s. Thankfully this Doctor kept an original machine at home and the research group found it in cob-webs in his attic. He kindly agreed to give it to them and they then spent over 20 years first repairing and then reverse engineering it. This was amazing detective work and is detailed on the above website.

### CRITICAL

It is critical to understand that Rife was the only one whose technology got the amazing results that everyone thinks of when they hear about Rife. It therefore follows that until we know more than Rife (which we clearly don’t!) we should be doing things exactly the way he did then (as far as is possible) if we hope to get similar results. Furthermore, Rife was very clear that things had to be done very specifically and very accurately or the technology simply would not work!

**NB!** This research group is the only group of people that actually got an original machine in their hands. They show clearly exactly what was coming out of an original machine using a spectrum analyser and an oscilloscope. Everybody else by definition is therefore speculating! The suggested links to start reading on that website are:

1. [http://www.rifevideos.com/doctors\\_who\\_used\\_the\\_rife\\_machine\\_on\\_their\\_patients.html](http://www.rifevideos.com/doctors_who_used_the_rife_machine_on_their_patients.html)
2. [http://www.rifevideos.com/dr\\_rife\\_talks\\_about\\_his\\_work\\_on\\_the\\_cancer\\_viruses\\_of\\_bx\\_and\\_by.html](http://www.rifevideos.com/dr_rife_talks_about_his_work_on_the_cancer_viruses_of_bx_and_by.html)
3. [http://www.rifevideos.com/dr\\_rife\\_and\\_cancer\\_a\\_realistic\\_view.html](http://www.rifevideos.com/dr_rife_and_cancer_a_realistic_view.html)
4. [http://www.rifevideos.com/dr\\_milibank\\_johnsons\\_1937\\_cataract\\_clinic.html](http://www.rifevideos.com/dr_milibank_johnsons_1937_cataract_clinic.html)

For those more technically inclined, the downloadable pdf from the above site is comprehensive!

[https://rifevideos.com/pdf/a\\_history/the\\_rife\\_machine\\_report\\_a\\_history\\_of\\_rifes\\_instruments\\_and\\_frequencies.pdf](https://rifevideos.com/pdf/a_history/the_rife_machine_report_a_history_of_rifes_instruments_and_frequencies.pdf)

**NBB!** It is impossible to know what is coming out of an electronic device without a spectrum analyser and an oscilloscope. Anyone can literally tell you anything they like and you would be none the wiser without verifying it with this equipment.

### **PRINCIPLE – RESONANCE!**

This principle is the same as that whereby a glass is shattered by a musical note at just the right pitch. This principle can be applied to the human body with absolute safety and great effectivity.

As a result of his experience working with the Zeiss Lens company for a few years Rife was able to design a special microscope with which he could visualise live viruses. This is still not possible today (one can only see dead viruses with an electron microscope), but is critical! This led him to discover that Cancer is indeed caused by a virus within the cancer cells.

See:

[http://www.rifevideos.com/dr\\_rife\\_talks\\_about\\_his\\_work\\_on\\_the\\_cancer\\_viruses\\_of\\_bx\\_and\\_by.html](http://www.rifevideos.com/dr_rife_talks_about_his_work_on_the_cancer_viruses_of_bx_and_by.html)

Indeed, by isolating, culturing and inoculating lab animals hundreds of times he proved this fact beyond doubt. He then discovered that each of these pathogens was fatally sensitive to specific Radio Frequency or RF waves, and he was able to witness their destruction through the lens of his microscope whilst noting the exact frequency at which this took place.

The critical physics factors are:

1. The correct frequency – sweep from 2Mhz-5Mhz (measured on spectrum analyser)
2. The correct wave shape – so-called Hoyland wave (measured on oscilloscope)

3. The correct power – at least 1W contact (measured on oscilloscope)

Although Dr Rife did his acclaimed research between 1920 and 1940, the technology has only become accessible in the last few years thanks to the dedication of the team at [www.rifevideos.com](http://www.rifevideos.com) . For many years Dr Rife was hounded and maligned by medical colleagues, the FDA, the American Medical Association [AMA] and big pharmaceutical companies who felt threatened by his revolutionary discoveries. Thanks to the internet this information can no longer be suppressed. However, there is a dark side;

1. Of his original 5 microscopes only one remains in the Smithsonian which nobody is able to access or repair.
2. The same forces that ruined Rife and his work and threatened the doctors back in the 40's and 50's now employs an equally effective technique. The internet is simply flooded with masses of conflicting information making it near impossible for the average person to even begin to find the truth. It is literally like looking for a needle in a haystack!
3. Rife's documented frequencies, wave shapes and power settings have been deliberately misrepresented so that the vast majority of 'Rife' machines out there simply do not work.
4. Compounding the above, the vast majority of 'Rife' machines out there are pretty cheap making it even more likely patients are going to treat themselves with something useless.

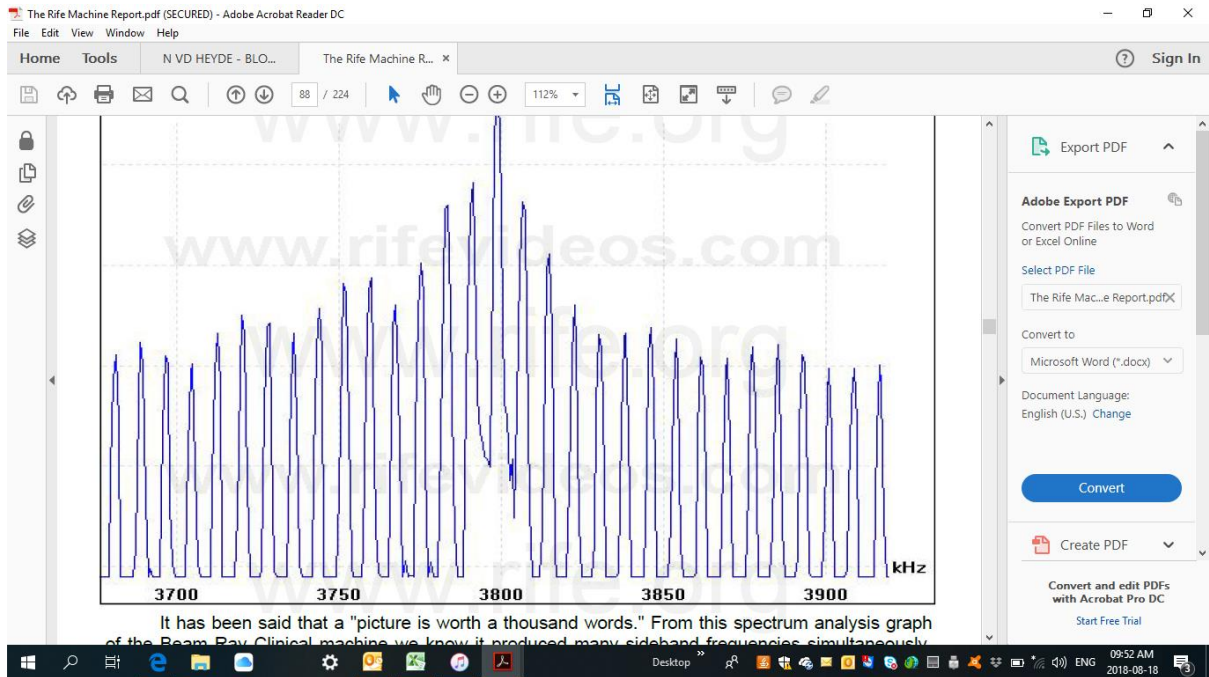
### **CRITICAL QUESTIONS TO ASK ANYONE SELLING A 'RIFE' MACHINE**

1. Do they have a spectrum analyser and oscilloscope?
2. Do they know how to use it?
3. Can they demonstrate that what is coming out of any 'Rife' machine is the same as what we now know came out of an original Rife machine as detailed in chapter 9 of the Rife Machine Report - pdf , [https://rifevideos.com/pdf/a\\_history/the\\_rife\\_machine\\_report\\_a\\_history\\_of\\_rifes\\_instruments\\_and\\_frequencies.pdf](https://rifevideos.com/pdf/a_history/the_rife_machine_report_a_history_of_rifes_instruments_and_frequencies.pdf)

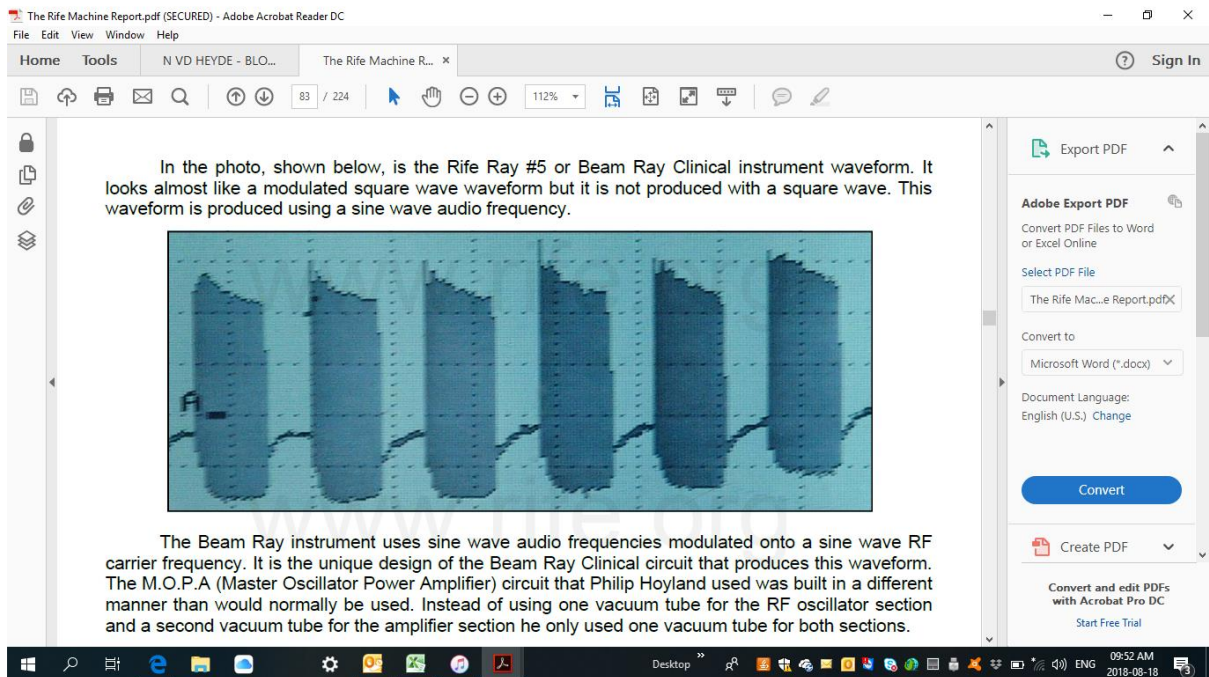
### **What should the spectrum analyser and oscilloscope reveal?**

**A very specific pattern!** You do not need to be a doctor or an electronic engineer to recognise and discern patterns. Below are screenshots from this website showing the patterns of signal coming from an original Rife machine. Any machine you are considering using should put out this pattern or it is simply not doing what Rife's original machine was doing.

- **SPECTRUM ANALYSER PATTERN:** Clearly showing the central high frequency carrier wave with multiple 'side-band' frequencies generated simultaneously.



- **OSCILLOSCOPE PATTERN:** Clearly showing an interrupted (aka gated) wave looking like a square wave which is in fact known as a 'Hoyland' wave, named after Rife's engineer, Phillip Hoyland.



- **FREQUENCY RANGE:** See [https://rifevideos.com/dr\\_rifes\\_true\\_original\\_frequencies.html](https://rifevideos.com/dr_rifes_true_original_frequencies.html) This should be between 2Mhz and 4Mhz. Below is a table detailing Rife's recorded frequencies which he saw devitalize various pathogens under his microscope. Whilst a lot of these recorded frequencies are lower than the range this machine put out; it nevertheless works on the higher harmonic frequencies of

these pathogens. Why Rife and his engineer decided on this use of harmonics is suspected as being part of a strategy to hide how they ultimately did things as one cannot patent frequencies. Regardless, it proved very effective!

Rife Ray #3 And Rife Ray #4 High Sine wave RF Frequencies	
Actinomycolosis (Streptothrix)	192,000 Hz
Anthrax	139,200 Hz
B. Coli (Rod form)	417,000 Hz
B. Coli (Filterable virus)	770,000 Hz
Bacillus X or BX (Cancer Carcinoma)	1,604,000 Hz
Bacillus Y or BY (Cancer Sarcoma)	1,530,000 Hz
Gonorrhea	233,000 Hz
Spinal Meningitis	427,000 Hz
Staphylococcus Pyogenes Aureus	478,000 Hz
Staphylococcus Pyogenes Albus	549,070 Hz
Streptococcus Pyogenes	720,000 Hz
Syphilis	789,000 Hz
Tetanus	234,000 Hz
Tuberculosis (Rod)	369,000 Hz
Tuberculosis (Virus)	769,000 Hz
Typhoid Fever (Rod)	760,000 Hz

- **POWER LEVEL:**

See chapter 2 of:

[https://rifevideos.com/pdf/a history/the rife machine report a history of rife instruments and frequencies.pdf](https://rifevideos.com/pdf/a%20history/the%20rife%20machine%20report%20a%20history%20of%20rife%20instruments%20and%20frequencies.pdf)

Using the hand contact method, one needs at least 1W of power with at least 70V to penetrate the most resistive tissues. The oscilloscope will show the peak-to-peak voltage of the frequency waves.

- **FREQUENCY SWEEP**

See [https://rifevideos.com/dr rife and philip hoylands 3.3mhz sweep.html](https://rifevideos.com/dr%20rife%20and%20phillip%20hoylands%203.3mhz%20sweep.html)

Through years of painstaking research Rife and his engineer, Phillip Hoyland, found that by modulating low frequency audio waves onto a high frequency carrier frequency (AM radio) that they were able to create multiple high frequency harmonic 'sideband' frequencies. In other words the machine was able to generate many frequencies of sufficient power at the same time and by fortuitous accident, they discovered that the machine could now sweep through all the pathogenic frequencies in a very short time, such as 10 seconds, see Using some mathematics one can show that every frequency will be hit for about 3 mins in a 20 minute session. Originally Rife treated cancer with only the one frequency for 3 minutes and not more than twice a week for 4 months as he showed that the patients would recover slower (due to detoxification) if treated more frequently and longer.

This means that whether one is treating cancer, TB, auto-immune diseases, infections etc the same 20-minute sweep is used for these different conditions. This is clearly massively practical.

## NETT EFFECT – ELECTRONIC ANTIBIOTIC!

If all the above is done correctly then the nett effect is that a correct Rife machine seems to have the effect of a true broad-spectrum electronic/resonant anti-biotic in that all viruses, bacteria and smaller fungi are seemingly destroyed. As opposed to conventional chemical anti-biotics which only destroy certain bacteria.

## PHYSIOLOGY

1. **FREQUENCY SENSITIVITY:** Mammals cannot feel frequencies above approximately 50Khz. (Some of the literature suggests it may be as low as 5K high as 90Khz) This is based on the fact the nerve and muscle membranes responsible for conducting electrical signals cannot depolarise and repolarise faster than that rate.
2. **POWER LEVEL:** Adequate power is critical. Research from the 70's already shows that different tissues have different conductivity/transmission values for both electricity and Ultrasound waves. As an example, bone is a very poor conductor whereas bodily fluids and muscles are very good conductors. The practical consequence of this is that sufficient power is necessary to get the frequency current/signal into the bone. Experience has shown that until sufficient power levels were achieved treatment of metastatic carcinoma would yield great results in the soft tissues but the bony metastases would nevertheless still progress and kill the patient. Basically, one risks tickling the cancer virus rather than destroying it with too little power. Since we have achieved the present power levels of at least 1W bony metastases are reliably treated.

## HOW TO TELL IF YOU HAVE THE CORRECT TECHNOLOGY?

Naturally the use of a spectrum analyser and oscilloscope is key and is quick and simple assuming you know how to use the equipment to compare what you find out of any 'Rife' machine with what we now know comes out of an original Rife machine as detailed on the website [www.rifevideos.com](http://www.rifevideos.com)

However, in the absence of access to and ability to use said equipment then combining the knowledge of the PHYSIOLOGY and SWEEP sections above you are able to employ **2 two crude tests** in the absence of a spectrum analyser and oscilloscope:

1. **Muscle spasms;** If one's hands and arms spasm and/or react to the signal from the 'Rife' machine then it cannot possibly be correct as by definition the frequencies must be below 50Khz (perhaps even 70-90Khz) to experience said sensation and we know that the correct Rife sweeps between 2Mhz and 5Mhz which is way above the physiological range to be felt.
2. **Multiple programmes/settings:** If the 'Rife' machine under question has multiple settings/ programs then it too cannot be correct as we know that the original Rife automatically sweeps through all the relevant frequencies every 10 seconds. The correct Rife simply switches on and runs with no other inputs.

## **DISTURBING FACT**

Rife used 2 things to culture the cancer viruses he discovered overnight:

1. Radiation – the test-tubes filled with the virus were placed within argon-loops producing ionising radiation overnight.
2. Decreased atmospheric pressure – the above was in turn performed within a partial vacuum chamber.

Many doctors will recall how often they have cancer patients in 'remission' who subsequently deteriorated after a long-haul overseas trip. People are subjected to multiple forms of radiation at airport security multiple times per trip as well as multiple forms of radiation for the entire trip inside the fuselage of the aircraft. Furthermore, whilst the cabins in modern aircraft are pressurised, the pressure is nevertheless significantly less than ground pressure, thereby simulating the partial vacuum chamber described above.

## **KEY DIFFERENCE BETWEEN ONCOLOGY AND RIFE THERAPY**

- Oncology (chemo and radiation) aims to kill cancer cells, often very successfully. However, oncology definitively does not kill the cancer viruses, see [www.rifevideos.com](http://www.rifevideos.com) In addition radiation in particular not only does **not** kill the viruses but makes them grow more virulently as described above.
- Rife therapy on the other hand kills the cancer virus in the cancer cells rather than the cancer cells themselves. The cancer cells thereafter die off through a process known as apoptosis, so-called programmed cell death. This is necessarily a slower but less toxic process.

This means that oncology often causes tumours to shrink as cancer cells die, all the while liberating the viruses which are now far more virulent. All concerned are then surprised when the cancer rears its head again within months or a few years.

## **CAUTION**

It must be understood that whenever any tissue in the body 'dies' there is a good chance there will be resulting inflammation and swelling. This applies whether cancer cells are destroyed through oncology or through apoptosis as a result of Rife therapy. An analogy is that any trauma to any tissue can cause inflammation for the same reason. It is well known that corticosteroids are often required during these varying treatment methods.

## **FURTHER READING:**

- **Antoine Bechamp**, microzymas, vaccinations and Pasteur, [https://arizonaenergy.org/BodyEnergy/antoine\\_bechamp.htm](https://arizonaenergy.org/BodyEnergy/antoine_bechamp.htm)
- **Antoine Bechamp** and his theory of **pleomorphism** as opposed to the monomorphism we are taught today. This is critical to Rife's work and this link is long but well worth it. [http://whale.to/v/bechamp\\_b1.html](http://whale.to/v/bechamp_b1.html)

- **Georges Lakhovsky and his MWO** (multi wave oscillator). Similar results to Rife but a complimentary approach.  
<http://users.skynet.be/Lakhovsky/Getting%20Started.htm>
- **Albert Abrams and his Oscilloclast**, Rife's predecessor.  
<https://www.sueyounghistories.com/2008-10-19-albert-abrams-1863-e28093-1924/>

**NB! These people were NOT quacks!** Contrary to popular belief they were respected members of their medical communities in their day.

## CONDITIONS TREATED

**NB!!! This is an informative guide ONLY and by no means medical advice. Always see a doctor before embarking on any 'alternative' therapy!**

Many conditions which respond well to treatment are not commonly thought to be caused by infections. As the net effect of a correct Rife machine seems to be that of a true broad-spectrum antibiotic this must give rise to the logical postulation/suspicion that these conditions are at least in part caused by viruses, bacteria or fungi!

### POST-OPERATIVE INFECTIONS

This technology has been seen to be extremely effective in both the prevention and treatment of post-operative infections, including dental work and any other surgical work. Indeed, generalised infections have all responded particularly well. With a suspected active infection, it is often advisable to do a session daily until the infection and inflammation noticeably decreases. Thereafter one or two more sessions at 3-day intervals may be done.

### CANCER

Rife discovered two cancer viruses which he called BX and BY [bacillus X & Y] which he saw as responsible for causing carcinomas and sarcomas. Research has revealed other viruses linked to cancers. One suspects that possibly all cancers may be linked to viruses.

- Generally, treatments are twice a week for 3-4 months as per the protocol Rife used in his 1934 trial. Patients usually report an improved sense of well-being, mood, demeanour and skin changes within 3 sessions.
- Limitation: Patients who avoid chemotherapy and radiotherapy tend to respond much better than those who have had chemo or radiotherapy. X-rays also appear to make treatment more difficult. In spite of this limitation, many have still benefitted.

### AUTO-IMMUNE DISEASE

- Rheumatoid arthritis, scleroderma, Raynaud's disease, Ulcerative Colitis, Crohn disease, Sjogren's Disease, Temporal arteritis and many others have



been significantly affected if not often resolved. In many cases one is able to get the patients off their drugs such as methotrexate, plasmoquin etc, the more refractory cases then needing a very minor/negligible dose of cortisone (eg 5mg prednisone/day orally) to remain symptom free. The conditions will generally require ongoing maintenance treatment once or twice a month after the acute phase has been managed

- Generally, treatment starts at twice weekly sessions for about a month and then tapering off eventually to either twice or once monthly. The auto-immune disease seems to require ongoing maintenance, albeit a lot less frequently. Individual variation of response is the rule.

## **UROGENITAL TRACT INFECTIONS**

- Cystitis responds quickly to treatment: often the symptoms improve during the first session, and most have completely resolved within the next day or two, requiring no further treatment.
- Epididymo-orchitis has been treated as well.
- Pyelonephritis often responds very well.

## **UPPER RESPIRATORY TRACT INFECTIONS**

URTI's seem to have a mixed reaction to Rife, however:

- Tonsillitis seems to respond as quickly as cystitis, also requiring no further treatment.
- Sinusitis improves within a few days. Allergic sinusitis seems to take a while longer and seems to need repeat treatment whilst exposed to the allergens.

## **LOWER RESPIRATORY TRACT INFECTIONS**

- Known chronic TB patients all improve clinically within days and require only a few more treatments on average. Often within a month or two they have reported weight gain.
- Productive bronchitis and pneumonia respond within a few days.
- COPD and Emphysema become much more manageable.

## **EYES**

- Conjunctivitis or 'pink eye' resolves often overnight after just 1 treatment.

## **WOUNDS**

- Results of treating wounds, infected bites/stings and ulcers have been almost as good as that of cystitis mentioned above.
- Type 1 Diabetics report improvement with infective skin conditions such as staph aureus, mostly the next day. Within a few days of treatment this usually returns. Diabetics that return for treatment every second day seem to remain free of this. If chronic low-grade infections contribute to chronic organ damage in diabetics, it is a reasonable postulation that regular treatment with Rife may slow down and/or prevent organ damage over the long term.

**GLANDULAR FEVER** (infectious mono-nucleosis) and ME (myalgic encephalitis or 'yuppie-flu' or chronic fatigue syndrome)

- Results have been very satisfactory over 3-5 treatments on average.
- Generally, fatigue largely disappears and lymphadenitis resolves within a few days to weeks.
- Patients often report improvement over the next few months even after treatment has stopped.

## **MIGRAINE**

- Migraines seems to abate and not return after a few sessions.

## **GOUT**

- Gout responds very well to even just one session, pain often subsiding to an extent during the session.
- Furthermore, it seems the frequency of attacks decreases if not stopping completely. One is usually able to take the patients off any chronic gout medication such as Puricos etc.

## **SKIN**

- Chronic staph aureus infection normally clears up in 2-3 sessions.
- Malignant Melanoma responds well as described in the Cancer description above.
- Minor skin lesions such as squamous cell and basal Ca seem to clear up within 2-3 months.
- Psoriasis has now become very treatable if not resolvable once adequate power levels were achieved.

## **SHINGLES, HERPES & COLD SORES**

- These afflictions are often dramatically affected
- The earlier treatment is initiated the better
- This is an occasion for daily treatment for 3 days followed by twice weekly sessions until resolved.

## **WHAT DOES TREATMENT INVOLVE?**

A metal cylinder is held in each hand for 20 minutes, while the device repeatedly sweeps through the wide range of pathogenic frequencies. These frequencies are not felt by most people, nor are they audible.

Sessions are repeated one or two times a week until clinical improvement occurs, then possibly continued once a week for a few weeks to ensure continued success. Rife treatment can be easily combined with other therapies or treatment. One may experience symptoms of detoxification initially which may include headaches,

lassitude or body aches, but these are only temporary and are usually followed by a sense of wellbeing. It is vitally important to ensure adequate intake of pure water [2 litres/24 hours] after each treatment to flush out dead organisms and products of toxic waste.

Further reading: [www.rifevideos.com](http://www.rifevideos.com)