This report of the treatment of a case of ichthyosis with orgone energy is being made because this disease has always until now been considered incurable and unresponsive to all therapy. The medical literature on ichthyosis is vague and brief and only few references to it can be found. Of the signs and symptoms, the literature states that in the mild form the skin is dry and presents fine scaling, chiefly on the extensor surfaces of the extremities. The skin has a grayish hue. In the more severe forms, the process is generalized but the extensor surfaces continue to present the greatest changes. The scales are quadrangular and attached centrally. The skin frequently becomes thick and inelastic. The nails become coarse and easily broken; the hair becomes dry and the function of both sebaceous and sweat glands is greatly reduced. The severity of the disease is greater in winter than in the summer. The disease progresses to a given stage and then remains stationary except for seasonal fluctuations. While the reports in the medical literature vary somewhat on the therapeutic measures to be used to control the itching, they are unanimous that complete recovery is never seen. Without the use of orgone energy, those suffering from this disabling illness can only hope, even with persistent use of medications, to reduce only by a slight degree the severity of the symptoms.

The case which I am reporting and demonstrating is that of a 45-year-old male who came to me for psychiatric orgone therapy. During a lifetime of living with the disabling symptoms of ichthyosis he had learned that nothing could be done for this disease. He therefore mentioned nothing about his
skin ailment until I saw his skin during the initial examination and questioned him about it. He stated that for as long as he could remember he had itching scaling skin, with the greatest severity from the waist down. The disease apparently was present during early infancy because he recalled that he suffered severe itching during the winter months, especially when he went from the cold outside into a heated room.

He suffered his most disabling symptoms with the onset of winter each year. In addition to the ever-present itching and scaling, the skin on his feet, particularly at the sides of the heels, would crack into deep painful fissures. The itching, which was always most intense on the extensor surfaces of both legs, could only be relieved by scratching, which each winter led to the formation of numerous raw, denuded, fissured areas, often as large as two inches in diameter. His toenails were always brittle and broke easily and the nail on his large toe on the right foot, which was split as the result of an injury during childhood, continued to grow out split. The skin between his toes was constantly cracked and peeling so that it resembled a severe case of epidermophytosis.

The disease always showed some spontaneous improvement during the warm summer months and the use of medications could frequently be abandoned during these months. However, the scaling of the skin continued during the warm weather also, especially on the abdomen, hips and legs. He stated that every evening when he removed his undershirt the accumulated exfoliated skin would descend "like a dust cloud" to the floor.

The patient was first seen in May, 1950. The skin on his face, ears, neck, shoulders, back, arms, abdomen and thighs was covered with fine white powdery scales which brushed off easily. The skin on the extensor surfaces of both legs over an elliptical area measuring about 6 x 3 inches was covered with larger, light brown, centrally attached scales. Both heels were covered with heavily fissured callous-like skin and the lateral sides of both feet were also covered with shallow vertical fissures. He stated that the condition of his skin as it was seen at this examination represented the usual status of the disease during the warm weather each year. The toenails, which were brittle, rough and thickened showed no seasonal changes. The skin felt cold and was inelastic. The coldness was most marked over the abdomen, lower back, pelvis, genitals and both lower extremities. The patient began to use the orgone energy accumulator on September 15th for daily thirty-minute irradiations. Within two weeks he reported a marked decrease in the itching and scaling. The skin began to assume a healthier pink color but this improvement could not be properly evaluated because the weather was still warm.

Within one month after beginning the use of the accumulator he was free of itching, and the scaling of the skin was present only on the legs. With the onset of freezing weather the length of the daily irradiations was increased and the improvement continued. The pigmented, scaling areas on both legs gradually diminished in size and the fissures on the heels and sides of the feet gradually became more shallow. The indurated skin on the heels became softer and more supple, while the cracked peeling skin between the toes healed completely. The toenails showed lunulae of healthy pink new growth which contrasted dramatically with the old unhealthy nails which were still growing out. The nail on the large toe on the right foot, which had been growing out split since childhood, was now growing out intact. He reported that while he sat in the accumulator and for a period after each irradiation his respiration felt free and with this unrestricted respiration he felt a warm flow into the legs.

Throughout the winter of 1950 the improvement continued and he has remained entirely free of itching for the first time in his life. At times when he has become lax in the use of the accumulator the scaling of the skin returned slightly, but there has not been any recurrence of the itching. This has been the first winter in his lifetime in which he has been free of the itching and of the painful disabling fissuring of the legs, heels and feet. The scaling has been reduced to a minimum when it has been present, and there have been periods, when he used the accumulator most persistently, in which he had no scaling.

For a complete evaluation of the results, a few words must be said about the role of psychiatric orgone therapy in this case. The patient was seen for a total of 34 treatment sessions and then this treatment was discontinued.
In view of his age and his structure it was felt that he could not reach full genitality. Therefore, the aim of therapy was to relieve his most distressing character symptom which was an almost uncontrollable impulse to laugh and grin whenever he looked at people to whom he was talking. To control this he had to tighten his face and mouth in a most exaggerated way.

When relief from this was accomplished, his respiration was spontaneously released and he experienced a flow of energy into the pelvis and legs. When it was seen that he could maintain this status, his therapy was discontinued. He continues to use the orgone accumulator for daily hourly irradiations and at the time of this writing he has been without psychiatric orgone therapy for one month.
Projeto Arte Org
Redescobrindo e reinterpretando W. Reich

Caro Leitor
Infelizmente, no que se refere a orgonomia, seguir os passos de Wilhelm Reich e de sua equipe de investigadores é uma questão bastante difícil, polêmica e contraditória, cheia de diferentes interpretações que mais confundem do que ajudam. Por isto, nós decidimos trabalhar com o material bibliográfico presente nos microfilmes (Wilhelm Reich Collected Works Microfilms) em forma de PDF, disponibilizados por Eva Reich que já se encontra circulado pela internet, e que abarca o desenvolvimento da orgonomia de 1941 a 1957.

Dividimos este “material” de acordo com as revistas publicadas pelo instituto de orgonomia do qual o Reich era o diretor.
01- International Journal of Sex Economy and Orgone Research (1942-1945).
02- Orgone Energy Bulletin (1949-1953)
03- CORE Cosmic Orgone Engineering (1954-1956)

E logo dividimos estas revistas de acordo com seus artigos, apresentando-los de forma separada (em PDF), o que facilita a organizá-los por assunto ou temas. Assim, cada qual pode seguir o rumo de suas leituras de acordo com os temas de seu interesse. Todo o material estará disponível em inglês na nuvem e poderá ser acessado a partir de nossas páginas Web.

Sendo que nosso intuito aqui é simplesmente divulgar a orgonomia, e as questões que a ela se refere, de acordo com o próprio Reich e seus colaboradores diretos relativos e restritos ao tempo e momento do próprio Reich. Quanto ao caminho e as postulações de cada um destes colaboradores depois da morte de Reich, já é uma questão que extrapola nossas possibilidades e nossos interesses. Sendo que aqui somente podemos ser responsáveis por nós mesmos e com muitas restrições.

Alguns destes artigos, de acordo com nossas possibilidades e interesse, já estamos traduzindo. Não somos tradutores especializados e, portanto, pedimos a sua compreensão para possíveis erros que venham a encontrar.

Em nome da comunidade Arte Org.
Textos da área da Orgonomia Bífisica. Casos clínicos. 
Texts from the area of Biphysical Orgonomy. Clinical cases.

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International Journal of Sex Economy and Orgone Research 

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01 Wilhelm Reich. The Orgasm Reflex. A case History 1942. 
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Interval 60-69 Pag. 55-64

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03 Wilhelm Reich. The Mosochistic Character (1933) 
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