

How Bringing UV Light Into the Blood Treats Everything from Infections to Heart Disease

Analysis by [A Midwestern Doctor](#)

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STORY AT-A-GLANCE

- › For a century, ultraviolet blood irradiation (UVBI) has demonstrated incredible efficacy across a wide range of conditions in hundreds of studies
- › Conditions UVBI is proven to treat include life-threatening infections, cardiovascular disorders, autoimmune conditions, and neurological issues
- › Because of this, private doctors frequently find great success using UVBI for chronic infections (e.g., Lyme disease, shingles, or Epstein-Barr), a wide range of autoimmune diseases, and in preventing chemotherapy toxicity
- › These results suggest UVBI can address the root cause of illness and that sunlight is an essential nutrient for the body
- › Mechanisms identified for UVBI include it modulating the immune system, improving circulation, reactivating dormant cells, and neutralizing toxins

Ultraviolet Blood Irradiation (UVBI) has a remarkable history and has suffered systematic suppression, [as explored in our previous article](#). We now examine extensive clinical evidence that demonstrates why this therapy represents one of medicine's most powerful yet underutilized tools. Research spanning a century (discussed [here](#)), encompassing thousands of patients, reveals a therapy of unprecedented scope and safety. Conditions with evidence of UVBI efficacy include:

- **Bacterial infections** (sepsis, septic abortions, osteomyelitis, meningitis, tuberculosis, typhoid fever)
- **Viral infections** (pneumonia, shingles, hepatitis, severe COVID-19, long-COVID, polio, AIDS)
- **Cardiovascular disorders** (heart attacks, angina, peripheral arterial disease, intermittent claudication, Raynaud's, thrombophlebitis, high blood pressure, pulmonary hypertension)
- **Autoimmune disorders** (rheumatoid arthritis, asthma, eczema, multiple sclerosis, transplant rejections)
- **Abdominal conditions** (liver, biliary and gallbladder diseases, pancreatitis, disseminated peritonitis, kidney diseases)
- **Surgery** (preventing post-operative complications, reducing death rates, accelerating recovery, treating postoperative ileus or burns)
- **Obstetrics and gynecology** (male and female fertility, preventing miscarriages, preeclampsia, healthy babies, polycystic ovarian syndrome, pelvic inflammatory diseases)
- **Neurologic and psychiatric disorders** (depression, schizophrenia, migraine headaches, tinnitus, hearing loss, foggy head, or insomnia)

Bacterial Infections – Where UVBI Made Its Mark

"Dr. Rebbeck has shown that ultraviolet blood irradiation therapy is effective after sulfonamides have failed. We have given more than 200 irradiations to 100 patients, given thorough sulfonamide courses with no success. I have seen angry, edematous infections subside in six to eight hours following blood irradiation therapy and in 24 hours be almost gone." – Dr. Roswell Lowry

UVBI initially gained use after pioneers observed its remarkable efficacy in treating severe infections. In 1942, Dr. Miley reported on 103 consecutive pyogenic infections at Hahnemann Hospital in Philadelphia.¹ Recovery results were 20 out of 20 for early infections, 46 out of 47 for moderately advanced, and 17 out of 36 for those who were moribund.

As UVBI yielded dramatic results for mothers who developed severe birthing process infections (puerperal sepsis), a frequent cause of death, many used it (e.g., one physician reported that over 4 years they had 2,486 obstetrical patients and 0 deaths).²

UVBI in turn, showed remarkable efficacy for common infections of that era (e.g., staph and strep).³ Likewise, it holds great promise for infections that remain a significant challenge (e.g., numerous studies have demonstrated its effectiveness in treating severe tuberculosis and antibiotic-resistant bacteria). For example:

- In one study, 86 patients with destructive tuberculosis received UVBI and antibiotics (while 136 controls only received antibiotics).⁴ Within 3 months, 100% of the UVBI group was disease free (compared to 58.8% of controls), 89.5% had lung recovery (compared to 38.2% of controls), and hospital stays were reduced by 48 days.

Note: As there are so many studies showing UVBI effectively treats bacterial infection, the rest were summarized [here](#).

Viral Infections – The Ultimate Test

Viral infections have long been an area where medicine struggles (e.g., many types of pneumonia are viral).⁵ Since the start, UVBI has been recognized as highly effective against viral infections. For example:

- Miley documented 79 consecutive viral infections treated with UVBI at all illness stages.⁶ 98% recovered, including 8 of 9 near death. He reported on 6 shingles patients, all of whom had it disappear and never return.

- 43 patients with acute viral hepatitis received UVBI (averaging 3 treatments). All experienced rapid improvement in acute symptoms (nausea, pain, jaundice), with 27 experiencing marked improvement within 3 days or less, 11 within 4 to 7 days, and 5 within 8 to 14 days.⁷ No patients died.
- A 2015 American trial gave 9 hepatitis C patients three sessions of five UVBIs over 22 weeks.⁸ Viral load reduced 21.5% at 20 weeks, reaching its lowest (44.9%) at 37 weeks. At 20 weeks, direct bilirubin declined by 41.1%, AST by 15.2%, and ALT by 19.3%.
- In 2020, 35 patients and 35 controls with moderate or severe COVID-19 underwent UVBI in a Russian hospital.⁹ The UVBI group experienced a 7 day reduction in total hospital stay (from 18±7 to 11±9 days), with 85% recovering within 7 days versus only 60% of controls, with one dying in the placebo group and none in the treatment group.
- 10 long-COVID patients received UVBI.¹⁰ All experienced significant symptom improvement, correlating with declining D-dimer levels. Many fully recovered after one irradiation with no side effects.

Polio – The 'Incurable' Disease

- Miley reported 58 polio cases treated with UVBI.¹¹ This included 7 near-death Bulbar polio cases (brainstem polio), 3 of whom regained swallowing reflexes within 24 hours, and only 1 died (for context, Bulbar polio had 40% death rate). Miley also treated 6 rapidly progressing polio patients, all recovering within 48 to 72 hours of UVBI.
- Another doctor who had given 2,500 UVBIs reported similar results in 23 bulbar polio cases and 6 spinal polio cases,¹² stating:

"The chief pediatrician repeatedly stated to medical student classes that they had fully expected the death of the first five bulbar polio cases they had asked me to treat with ultraviolet blood irradiation, and none of them died."

Regaining Circulatory Health

"Just months ago, I had problems walking around the mall, stopping four times to rest going two blocks. I was told 1/3 of patients get better, 1/3 stay the same, 1/3 get worse, and there was nothing more to do. I had two UBI treatments, and what a difference. I walked over two miles in cold weather at a Minneapolis conference (something I couldn't do). I not only felt great, but I am full of energy." – Lenny¹³

UVBI has repeatedly shown significant improvement for cardiovascular disorders like cardiac ischemia, heart attacks, poor circulation, and congestive heart failure, often in severe cases not responding to conventional therapies.¹⁴ Studies include:

- 70 males (56 who had previous heart attacks) with severe angina not recovering from intensive drug therapy received 7 UVBIs.¹⁵ Over 2 to 16 months, there was an "outstanding" response, with all participants experiencing significant angina improvement. Specifically, 46 were able to walk 1 km daily, and 31 of the 39 individuals with jobs returned to work.
- A double-blind study of 50 patients with Fontaine Stage II arterial disease (leg pain with light exercise) found that those receiving 6 days of UVBI had 360% improvement. This means UVBI is superior to the current intermittent claudication treatment.
- Azerbaijan hospital doctors gave UVBI to 34 patients with challenging blood pressures and found a 30% reduction in systolic and diastolic blood pressure, with severe symptoms (headaches, dizziness, chest pains) disappearing, results lasting at least 10 months, with drastically reduced medication needs.¹⁶

Calming the Overactive Immune System

UVBI has been observed to work for a wide range of autoimmune disorders (e.g., one early DMSO doctor reported that rheumatoid arthritis patients improved remarkably, often within hours).¹⁷ Likewise:

- A 1946 study of 160 consecutive "intractable" asthma patients found 72.7% had favorable responses lasting years after 6 to 12 months of monthly UVBIs.¹⁸
- **A Russian trial** of 88 asthma patients found 90.9% of early stage asthma cases had positive UVBI responses, 78.9% of mid-stage cases, and 65.9% of severe persistent cases (with responses more rapid than drug treatments).¹⁹ Responses included reduced breathing difficulty, fewer flare-ups, halved medication needs, and decreased or eliminated glucocorticoids.
- Many studies (detailed [here](#))²⁰ have found that UVBI is an effective treatment for preventing the rejection of transplanted tissues.

Helping the Mother and Baby

In addition to treating sepsis, UVBI provides many other benefits to mothers. For example:

- 30 consecutive patients with 38 episodes of low abdominal cramps, vaginal bleeding or premature labor (indicating baby loss risk) received UVBIs.²¹ All had immediate cessation of cramps and bleeding. 21 patients receiving UVBI promptly (typically within 24 hours of symptom onset) had normal pregnancies and healthy children.
- A German researcher treating migraines with UVBI reported many patients also experienced menstrual cycle normalization and regained fertility (e.g., 9 out of 30 previously infertile women became pregnant after UVBI).²²

Note: UVBI has also been shown to improve male fertility.²³

- When UVBI was given to 119 women with polycystic ovarian syndrome, 29 out of 41 with no menstruation had cycle regularization, 7 of 24 complaining of infertility became pregnant, 8 of 42 with hirsutism improved, 12 of 30 overweight women lost 6 to 52 pounds in 3 weeks.²⁴
- A Russian OBGYN department reported that UVBI addressed many of the shortcomings with conventional treatments for preeclampsia, and that when 53 cases of each were compared, UVBI on average prolonged the gestation by 4.1 weeks and reduced pathological births and poor fetal conditions by 50%.²⁵

There was also less maternal blood loss and fetal hypoxia at birth, and the fetal birth weight was higher. Likewise, another doctor reported successfully treating 91 patients with preeclampsia even after the onset of convulsions.²⁶

Healing the Mind

- Multiple studies have found UVBI greatly enhances the recovery from strokes.^{27,28}
- A 1999 study of 70 patients with sudden deafness found standard care caused 65.7% to recover, while when UVBI was also used, 85.6% recovered.²⁹ Likewise, multiple studies have shown UVBI treats tinnitus.^{30,31}
- A 1995 study found LBI helped 70.6% of those with melancholy-depressive syndrome, 53.8% with anxiety-depressive syndrome, and 39% with apathy-depressive syndrome.³²
- One doctor reported that many migraine patients benefited from UVBI. In one cohort of 12 patients with classic, longstanding migraines, UVBI every 6 to 10 weeks for 1 to 3 years, caused 58% to experience no more migraines.³³
- A study evaluated 38 chronic schizophrenic patients who hadn't responded to drug regimens or electroconvulsive therapy.³⁴ After brief LBI courses, 21 out of 38 (55%) responded well. Reduction of delirious ideas, hallucinations, and monotonous motor

behavior occurred alongside improved mood, interest in surroundings, and socialization. Some returned to work.

UVBI Physiological Effects – What Happens in the Body

Almost everyone working with UVBI has noticed:

- Marked increase in venous oxygen and oxygen carrying capacity alongside a rapid pinkening of the skin (which 75% of UVBI recipients experience), a significant improvement of microcirculation, and a rapid resolution of abnormal vitals (e.g., severe fevers or rapid breathing).
- Normal autonomic nervous system function resumption. This could mean that temporarily stopped functions regain normality (e.g., a paralyzed bowel regaining peristalsis within 12 to 24 hours) or that overactive functions decrease (e.g., airway constriction).
- Many blood parameters (e.g., an excessive or deficient immune response) normalize.

This suggests that UVBI reactivates the body's innate self-regulation and healing abilities, with numerous benefits resulting from this reactivation.

Zeta Potential and UVBI – The Missing Link

During my career, I occasionally encountered critically ill, near-death patients having immediate, profound responses to treatments, stabilizing within minutes. I noticed they transitioned from volatile vital signs to rapid normalization despite not receiving treatments directed toward those signs.

Once I learned about [the zeta potential concept](#) (poor electrical charges causing fluid substances to clump together and partially solidify), these observations made sense. If blood is clumped together, it can't reach where needed, and conversely, if [zeta potential](#)

changes, there will be rapid circulation changes without adding significant supplemental fluid.

Looking at UVBI effects, similar dramatic improvements often occur. Since UVBI requires drawing blood and mixing it with saline before transfusion, UVBI provides many opportunities to observe the patient's blood zeta potential. From performing many UVBIs, I've noticed that the sickest patients typically have the worst zeta potential (dark blood is likely to settle in saline bags quickly), and UVBI improvements often correlate with improvements in blood sedimentation rates in subsequent UVBIs.

Throughout UVBI literature, investigators repeatedly note UVBI improves erythrocyte sedimentation rate (ESR), a metric originally created by researchers investigating blood clumping phenomena and the closest correlate to zeta potential in conventional blood work. Many noted UVBI reduces blood viscosity or directly **reduces blood sludging** (the **closest equivalent** to improving physiologic zeta potential)³⁵ as does light externally applied to blood:

[Video Link](#)

How UVBI Works – Multiple Mechanisms

Key mechanisms include:

- **Blood conducts light**. Clinical observations show that if a small portion of blood connected to the bloodstream is irradiated, systemic changes rapidly occur.
- The body **is extremely sensitive to low UV amounts**, such as those emitted by UV-exposed blood cells. Many body parts have receptors **designed to be ultra-sensitive to specific light wavelengths**.
- Cells frequently enter dormant states after stressor exposure (known as **cell danger response**). One primary signaling agent that "wakes them up" is the ultra-faint emission of UV photons.

- **UVBI improves circulation** by fixing the zeta potential. It may also improve through the production of nitric oxide and vasodilation.
- One medicine school believes that invisible cell-wall deficient bacteria (e.g., mycoplasma) **underlie many chronic autoimmune conditions**. UVBI happens to be one of the most effective tools for eliminating these organisms.
- White blood cells absorb UV light, but overactive ones absorb too much (becoming cytotoxic to them), hence allowing UV to modulate the immune system.
- UVBI generates ozone and hydrogen peroxide, and some therapeutic properties are due to these oxidants (e.g., there is a significant overlap in the benefits of these therapies).

Note: *Many of these properties are shared with **DMSO**, another umbrella remedy **which also can treat a wide range of similar conditions**, including many that do not respond to other therapies.*

Our Experiences with UVBI – Modern Clinical Applications

My first UVBI exposure was for years of migraine-like headaches (for which UVBI greatly benefited me). Unfortunately, due to American medical politics, UVBI is virtually impossible to get in hospitals, and I've watched countless patients desperately needing UVBI not given access, regardless of my efforts.

This changed during COVID. I (like many UVBI doctors) had numerous severely ill patients not wanting hospitalization who received UVBI and had rapid recoveries, avoiding hospitalization. We found UVBI became less effective later in disease processes (typically requiring more UVBIs for the same improvement as patients became sicker).

Note: *One thing consistently amazing about UVBI is response speed – you can often have patients seeming to have poor vitality or shutting down immediately come back as they receive UVBI (e.g., many COVID patients later requested UVBI for flus).*

In the United States, UVBI usage is typically limited to integrative medicine. Many doctors have used it on thousands of patients, reporting it benefits the majority (figures around 80% are often cited for challenging chronic conditions – though difficult cases often require numerous treatments).

Within integrative medicine, the most common use of UVBI is treating chronic viral infections (Epstein-Barr, shingles, herpes), as it appears to be one of the most effective treatments, along with Lyme disease (a difficult-to-treat bacterial infection). I've met Lyme patients who'd tried many other therapies but found UVBI transformed their lives.

The second most common use is for autoimmune conditions. I've frequently seen UVBI used as "if in doubt, try UVBI and see what happens" therapy (where it helps typically). It often yields significant improvements in chronic fatigue syndrome and helps various allergic conditions.

Note: *UVBI is one of the only IV therapies I know that consistently yields positive effects, which patients notice, while being relatively unlikely to have side effects.*

Recently, we've seen it often significantly help COVID-19 vaccine injury individuals, though typically requiring repeated sessions and achieving partial rather than complete recovery (whereas for long-COVID, responses are much stronger with few sessions often sufficing). I suspect UVBI "detoxifies" spike protein in a manner similar to what it does with various biological toxins.

Circulatory benefits and the ability to reactivate dormant or malfunctioning body parts are also real UVBI benefits, although this application is used less frequently in the United States. Lastly, we believe UVBI has antiaging effects, so many older patients routinely use it to extend their body's functionality and prevent aging symptoms from developing.

Conclusion – The Future of Light Medicine

What makes UVBI particularly remarkable isn't just its clinical efficacy, but what it reveals about the fundamental nature of health and disease. The therapy demonstrates **light is indeed an essential nutrient** that the body has profound self-healing capabilities when given proper tools, and that **many chronic diseases may result from a deficiency in proper light exposure**.

UVBI mechanisms — point toward a more sophisticated understanding of human physiology than our current medical paradigm allows. This therapy shows that healing often involves restoring the body's natural regulatory systems rather than suppressing symptoms with pharmaceutical interventions.

Unless you've worked in the medical field, it's hard even to begin to appreciate how paradigm shifting a therapy with this type of data is (or how many existing therapies would no longer be commercially viable if UVBI entered mainstream usage within the USA).

Medicine's future lies not in more expensive pharmaceutical interventions, but in rediscovering and embracing therapies like UVBI that work with the body's innate healing mechanisms along with their natural counterparts (e.g., more sunlight exposure).

As more practitioners and patients become aware of UVBI's remarkable potential during this MAHA moment, we may finally see this suppressed therapy take its rightful place as one of medicine's most valuable tools for healing and health restoration.

Author's Note: This is an abridged version of **a longer article** about UVBI which goes into greater detail on the mechanisms behind UVBI, summarizes its vast body of published literature (this article synopsis a fraction of it), and provides resources for those interested in accessing the most effective forms of this therapy (something many have now reported benefitting from). That article and its additional references can be read **[here](#)**.

A Note from Dr. Mercola About the Author

A Midwestern Doctor (AMD) is a board-certified physician from the Midwest and a longtime reader of Mercola.com. I appreciate AMD's exceptional insight on a wide range of topics and am grateful to share it. I also respect AMD's desire to remain anonymous since AMD is still on the front lines treating patients. To find more of AMD's work, be sure to check out [The Forgotten Side of Medicine](#) on Substack.

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