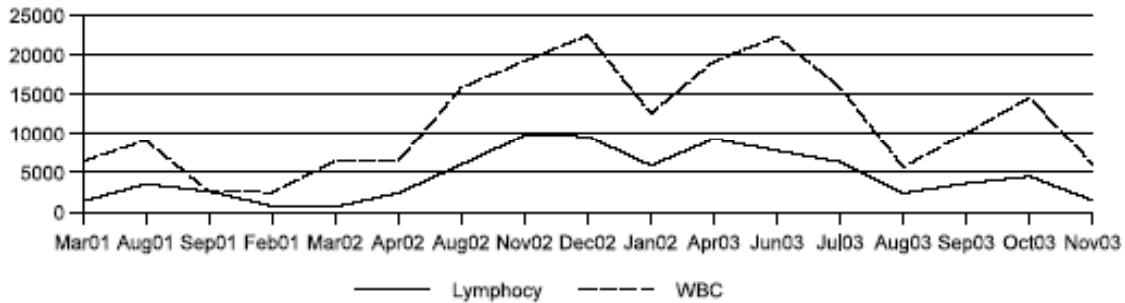


ImmunoRegulin: Before-During-After



Lymph>	1344	3548	2619	775	650	2425	6042	9792	9675	6922	9344	7605	6360	2394	3638	4526	1464
WBC	6400	9100	2819	2500	8500	8500	15800	19200	22500	12800	19200	22300	15900	5700	10100	14800	6100

ImmunoRegulin was **begun in April 2002**. It was **stopped in July 2003**. The spike of both white cell count and lymphocyte count during the period when ImmunoRegulin injections were being given is unmistakable.

The average white count of 5 samplings prior to ImmunoRegulin therapy was **6840**; average lymphocyte count was **1787**.

Average white count in 4 samplings after ending ImmunoRegulin therapy was **9125**; average lymphocyte count was **3005**.

Average white count of 8 samplings during ImmunoRegulin therapy was **16600**; average lymphocyte count was **7168**.

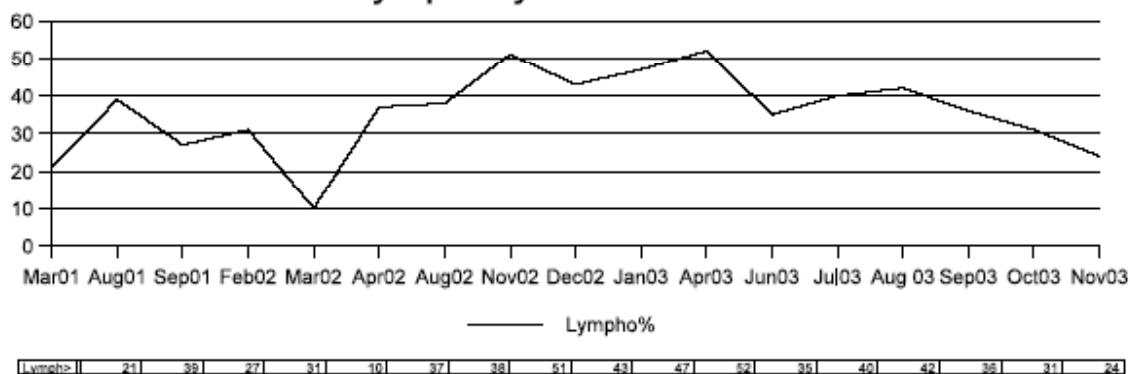
In the following chart, the percentage of lymphocytes to total white cells is represented. A similar pattern emerges.

Prior to ImmunoRegulin therapy the percentage of lymphocytes to white cells in 5 samplings averages **25.6%**.

After ImmunoRegulin therapy has been stopped the percentage of lymphocytes to white cells in 4 samplings averages **33.25%**.

During ImmunoRegulin therapy, the percentage of lymphocytes to white cells in 8 samplings averages **42.8%**.

% Lymphocytes to White Cells



Again, ImmunoRegulin therapy was **begun in April 2002**; it **ended in July 2003**.

Although lymphocyte and white cell counts and percentages can, in any given instance, be influenced by a number of factors—most notably the health of the animal at the time of sampling-- a sizable number of samplings tends to level out the influence of these factors. During this period, Bud's health was in a constant cycle of improvement and relapse, the cycle itself being a leveling force.

It seems hard to deny the influence of ImmunoRegulin on at least this one aspect of immune function. Whether the high level of white cell and lymphocyte production was actually beneficial is an unanswerable question. Likewise, since the testing in question did not differentiate B and T lymphocytes, it is not possible to say from this data whether the action of ImmunoRegulin contributed to, dampened, or left unaffected the proinflammatory B cell tilt characteristic of FIV infection. One final caveat. If the activation of lymphocytes by ImmunoRegulin led to a much higher viral load than would otherwise have been the case, then the question becomes, which has the more significant impact on the animal's health in the short and long run?