Acta Scientific NUTRITIONAL HEALTH (ISSN:2582-1423)

Volume 6 Issue 2 February 2022

Perspective

Concepts of Healing

EF Block IV*

Block Institute for Astrobiological Studies, New Braunfels, TX, US

***Corresponding Author:** EF Block IV, Block Institute for Astrobiological Studies, New Braunfels, TX, US.

Received: January 07, 2022

Published: January 31, 2022

© All rights are reserved by **EF Block IV.**

Preface

This work addresses the concepts that surround what comprises healing modalities in these days and times. The concepts discussed do not involve those of surgery. There are three major thrusts in the origin of healing concepts that have been developed over the ages. The more advanced Eastern concepts first originated in the sub-continent of India and were later transferred to the area that is now known as China. All Eastern concepts began development some 4000 years ago and eventually yielded a comprehensive treatment system that lasted into modern times. The Western concepts originated in Europe and progressed much more slowly than those in the East. In all cases, most of what would be known as medicines were for the most part derived from herbal sources with a minority from mineral of animal sources.

It was not until the late 19th century that what may be construed as modern medicine was developed in the West. However, late in the previous century (18th), one such healing modality known as Homeopathy was conceived and developed into a very successful treatment modality. This was in addition to the already practiced herbal medicine in Europe and North America. In the USA, Homeopathy was demonized by the political actions of the American Medical Association (AMA) their members and very active adverse propaganda campaigns. This was despite the very effective treatment modalities of Homeopathic medicine. More upon the subject of Homeopathy later in this article.

In all the above cases, it is the human organism that is the subject of healing protocols. Modern medical science might be stated to have come of age at last in the West in the 1930's. This is because of the fact that studies of the human nervous system at that time yielded the knowledge of the Enteric (ENS) and Central Nervous Systems (CNS). It was subsequently discovered that the Peripheral Nervous System (PNS) is directly involved in all basic healing modalities and that the CNS is only incidentally involved, mostly through behavioral interactions. The PNS is a subset of the ENS, as will be discussed below.

It is this fact, of the direct role of the PNS in healing, that is addressed in this work. Yes, it is this fact that very directly shows that the basis of both Eastern and Western Medicine are essentially the same, despite some very minor differences. This is contrary to the adverse propaganda concerning Chinese medicine that is promulgated politically by the AMA. Please remember, the AMA is only interested in your money and NOT your health or wellbeing!

Chapter One

The modern Western science of anatomy and physiology has yielded an almost overwhelming and bewildering array of facts that very directly impacts what has developed into modern medicine. Most pertainent is the role of modern research into the nature of medical practice. However, both Eastern and Western Medicine view the pratice of medicine in the same basic manner. The "doctor" is the person that receives training and enters into the practice of medicine in order to assist the "patient". The patient requests aid from the doctor in order to receive help in returning their body to health, to normal everyday functioning. Together, both parties enter into a series of healing protocols in order to assist the return of the patient to a healthy state. In the East, medical training involved 2 major prongs. The doctor may receive training in acupuncture

or herbal medicine (known as Chinese medicine) or perhaps both. Eventually in the West, the doctor received training in herbal medicine only as the practice of acupuncture had apparently died out in Europe early on. The finding of "Otzi" in the Alps, between modern Switzerland and Austria, yielded very strong evidence that he had tattoos at acupuncture points on his body. It is estimated that he lived sometime around 3500 BC. Thus, it has been determined that the practice of acupuncture was most likely contemporary at that time in both Europe and Asia. One may only surmise the reason why acupuncture in the West died out in usage.

Modern human anatomy and physiology has now demonstrated that the human organism consists of 2 very important but seemingly separate nervous system groupings. The Central portion originates at the animal pole of the early embryo and the Enteric portion originates at the vegetal pole of the early embryo. What eventually develops are 2 separate and distinct nervous systems that are joined by only a thin nerve called the Vagus nerve. It is the ENS that is intimately involved in all of the various functions dealing with the basic maintenance of the human body as a whole system and any healing that may become necessary. The CNS provides a directed response to acquiring sustenance, fleeing danger, finding the various external elements necessary for living and acquiring a mate.

The details of what comprises the practice of healing modalities in both the East and the West will now be provided in the following pages.

Peripheral Neuropathy (PN) is the modern Western body of knowledge that details the various causes, signs and symptoms of disease within the human body. Please see below for the details as three general nervous system elements are involved; sensory, motor and autonomic.

If a sensory nerve is involved, symptoms may include

- Pain: burning, dull, sharp, jabbing or electric-like
- numbness, tingling, "pins and needles" and itching
- Loss of feeling
- The sensation that you're wearing an invisible glove or sock
- Extreme sensitivity to touch, even light touch

If a motor nerve is involved, symptoms may include

- Lack of coordination, falling over, lack of dexterity
- Partial or complete loss of movement
- Muscle atrophy and bone degeneration
- Cramping and spasms, tremors
- Difficulty in swallowing or breathing

If a visceral (autonomic) nerve is involved, symptoms may include

- Blurred vision, dizziness, fainting due to inability to control blood pressure
- Decreased ability to sweat and intolerance to heat
- Intolerance to cold
- Abdominal bloating, nausea and vomiting after meals, early satiety
- Diarrhea and/or constipation
- Unintentional weight loss (greater than 5%)
- Urinary incontinence, feeling of incomplete bladder emptying, urinary hesitancy
- Impotence and infertility

Other complications may include

- Ischemia (decreased oxygen/decreased blood flow)
- Frostbite (prolonged exposure to cold)
- Systemic or metabolic disorders, poor wound healing
- Infectious or inflammatory conditions
- Depression and insomnia

Sensory nerves are mainly located in the skin which is the primary organ that is the first line of defence for the body as a whole. Sensory nerves at the surface of the body thus inform the PNS of the location of injury in addition to their normal function of the sense of touch. Motor nerves mostly enervate the voluntary muscle groups of the body that provides for locomotion of the body as a whole. Both sets of nerves lead directly to the elements of the Autonomic Nervous System (ANS). The autonomic nerves of the ANS are the centrally located portion of the nervous system elements that supplies all smooth muscle and glands, and thus directly influences the function of all the internal organs. The ANS is the major

control system that acts largely unconsciously and regulates all bodily functions (such as the heart rate, digestion, respiratory rate, pupillary response, urination, and sexual arousal). The ANS is the major contributor to any required healing activity by way of promoting normalized organ functionality.

In contrast to the seemingly straight forward description of disease symptoms by Western medicine, the description and catagorization of the signs and symptoms of disease by Chinese medicine (essentially herbal medicine) is much more detailed and thus to the Westerner is seemingly a bewildering mystery. The illuminating tenets of Chinese medicine have been set forth for some thus and S of years. It is much more so as a system of diagnosis based upon signs and symptoms that was developed before and without the benefit of modern techniques (which mostly have been developed in the last 200 years or so). This system is quite successful in dealing with both the various causes of disease by the various pathogenic microorganisms and the results of their predations upon and within the body. The main catagorization of the various signs and symptoms of Chinese medicine are set forth in the following 3 schemas: The 8 Principles, the syndromes of Qi and Blood, the syndromes of the Zang-Fu Organs.

The signs and symptoms (S and S) according to the "8 Principles", as 3 complementary pairs: Exterior/Interior, Cold/Heat, Deficiency/Excess

Exterior and interior syndromes

These S and S are shared in common by both Exterior and Interior Syndromes-chills, fever, headache, general aching, a thin tongue coating and a superficial pulse

- Exterior Cold-severe chills, mild fever, no sweating, absence of thirst; tongue coating is thin and white; pulse is superficial and tense
- Exterior Heat-mild chills, sever fever, no sweating or sweating, thirst; tongue coating is thin and yellow; pulse is superficial and rapid
- Exterior Deficiency-sweating
- Exterior Excess-no sweating

Cold and heat syndromes

- Cold skin with pallor, aversion to cold, absence of thirst, loose stools, voluminous clear urine; tongue is pale with a white and moist coating; pulse is slow
- Heat-red complexion, thirst with a preference for cold drinks, constipation, scanty and dark urine; red tongue with a yellow and dry coating; pulse is rapid

Deficiency and excess syndromes

- Yin Deficiency-afternoon fever, malar flush, heat sensation the the palms and soles, night sweats, dryness of throat and mouth, yellow urine, dry stools; red tongue with little coating; a thready and rapid pulse
- 2. Yang Deficiency-chills, cold limbs, listlessness, lassitude, spontaneous sweating, absence of thirst, urine is clear with increased volume, lose stools; pale tongue with white coating; weak pulse
- Deficiency-emaciation, listlessness, lassitude, feeble breathing, dislike speaking, pallor, palpitations, shortness of breath, insomnia, poor memory, spontaneous and night sweating, nocturnal emission, nocturnal enuresis, pain alleviated by pressure; dry tongue with little or no coating; deficient pulse
- Excess-sturdiness, agitation, sonorous voice, coarse breathing distension and fullness in the chest and abdomen, pain aggrevated by press use, constipation or tenesmus dysuria; thick and sticky tongue coating; excess type pulse

Yin and yang syndromes

- yin syndromes-inhibition, quiescence, hyperactivity, sallow complexion
- yang syndromes-excitation, fidgeting, hyperactivity, bright complexion
- collapse of yin-sticky sweat, feverishness in the body, warm hands and feet, shortness of breath, irritability, restlessness, thirst with a preference for cold drinks; red and dry tongue; rapid thready and weak pulse
- collapse of yang-profuse cold sweat like pearls on the skin, generalized coolness of the body, cold hands and feet, feeble breathing, listlessness, absence of thirst or preference for hot drinks; pale moist tongue; thready fading pulse

Differentiation of syndromes according to Qi and blood

Syndromes of Qi

Deficiency of Qi-dizziness, blurring of vision, spontaneous sweating; pale tongue; pulse is weak

Sinking Qi-weakness in any "holding" ability by body elements.

Stagnation of Qi-distension and pain.

Perversion of Qi-upward disturbance of lung qi manifesting as coughing and asthmatic breathing. Upward disturbance of stomach qi as belching, hiccups, nausea and vomiting. Excessive ascend-

ing liver qi as headache, dizziness and vertigo, coma, hemoptysis and hematemsis. Upward dsturbance of lung qi as coughing and asthena. Retension of fluid, phlegm or food in the stomach, belching, hiccups, nausea and vomiting. Upward disturbance of liver qi producing headache, dizziness and vertigo, even coma, hemoptysis and hematemesis in severe cases.

Syndromes of blood

Deficiency of Blood-pallor or sallow complexion, pele lips, dizziness, blurring vision, palpitations, insomnia, numbness of hands and feet; pale tongue; thready pulse.

Stagnation of Blood-pain, masses or tumors, hemorrhage, ecchymoses or petechia.

Heat in the Blood-mental restlessness or mania in severe cases, dry mouth with no desire to drink; deep red tongue; rapid pulse; various hemorrhagic occurrences, profuse menstrual flow.

Zang-Fu organ syndromes

In Chinese medicine, the Zang-Fu organs exist as 6 complementary pairs of solid (Zang) and hollow (Fu) organs. The differentiation of the various syndromes is based upon the complementary pairs and also are coupled vary closely with the clinical application of the 8 Principles and the theory of Qi and Blood.

Syndromes of the heart and the small intestine

- Deficiency of heart qi and yang-palpitations and shortness of breath, spontaneous sweating; thready, weak pulse or a missed-beat type pulse
- Deficiency of heart blood and yin-palpitations, insomnia, disturbed sleep, poor memory; skin pallor, pale lips, dizziness and vertigo; thready and weak pulse
- Stagnation of heart blood-palpitations, intermittent cardiac pain with often referred left shoulder or arm pain; purplish dark tongue or tongue with purplish spots; pulse is thready and hesitant with often missed beats
- Hyperactivity of heart fire-mental restlessness, insomnia, flushed face, thirst, ulceration of the mouth and tongue; hot, deep yellow urine or hesitant and painful urination; red tongue; rapid pulse
- Derangement of the mind-mental depression and dullness, incoherent speech, weeping or laughing without any apparent reason, sudden collapse, coma with gurgling and sputum in the throat; white, sticky tongue coating; rolling pulse
- Pain due to the disturbance of the qi of the small intestine-acute pain in the lower abdomen, abdominal distension, borborygmus; white tongue coating; deep, string-taut pulse

Syndromes of the lung and large intestine

- Invasion of the lung by pathogenic wind-cough with mucoid sputum, absence of thirst, nasal obstruction, watery nasal discharge, possible chills and fever; thin, white tongue coating; superficial, tense pulse
- Retension of phlegm-dampness in the lung-cough with much frothy or white sticky sputum, fullness and stuffiness in the chest, gurgling with sputum in the throat, shortness of breath or asthmatic breathing; white, sticky tongue coating; rolling pulse
- Retension of phlegm-heat in the lung-cough, asthmatic and coarse breathing; yellow, thick sputum or expectoration of foul-smelling bloody sputum, chest pain upon coughing, dry mouth; yellow urine and constipation; rolling, rapid pulse
- Deficiency of lung qi-feeble cough, shortness of breath lassitude, lack of desire to talk, low voice, aversion to wind spontaneous sweating; pale tongue with a thin white coating; weak deficient pulse
- Insufficiency of lung yin-unproductive cough, cough with a small amount of sticky sputum or cough with blood-tinged sputum, dryness of mouth and throat, afternoon fever, malar flush, night sweats, heat sensations in the palms and soles; red tongue with a small amount of coating; rapid, thready pulse
- Damp-heat in the large intestine-abdominal pain, tenesmus, blood and mucus in the stools or diarrhea with yellow and watery stools, a burning sensation in the anus; scanty deep yellow urine; sticky yellow tongue coating; a rolling rapid pulse or a soft rapid pulse
- Consumption of the fluid of the large intestine-dry stools, constipation, dryness of the mouth and throat; red tongue with little moisture or with a dry yellow coating; thready pulse

Syndromes of the spleen and stomach

- Deficiency of spleen qi-sallow complexion, emaciation, lassitude, dislike of speaking, reduced appetite, abdominal distension, loose stools, a bearing-down sensation in the abdominal region, viscera ptosis, prolapse of the anus; pale tongue with thin white coating; slowing down weak or soft thready pulse

- Dysfunction of the spleen in controlling blood-pale complexion, lassitude, dislike of speaking, purpurea, bloody stools, excessive menstrual flow, uterine bleeding; pale tongue: thready weak pulse
- Deficiency of spleen yang-skin pallor, the 4 limbs lacking warmth, poor appetite, abdominal distension which is worse in the afternoon or a dull pain in the abdominal region which is better with warmth and pressure, loose stools; a pale and delicate tongue with a white coating; a deep slow pulse
- Invasion of the spleen by cold-damp-fullness and distension in the epigastrium and abdomen, loss of appetite, sticky saliva, heavyness of the head and body, loose stools or diarrhea; white sticky tongue coating; soft pulse
- Damp-heat in the spleen and stomach-fullnes and distension in the epigastrium and abdomen, lose of appetite, nausea, vomiting, bitter tasteand stickiness in the mouth, heavyness of the body, lassitude, bright yellow face, eyes and skin; loose stools and scanty yellow urine; yellow sticky tongue; soft rapid pulse
- Retention of food in the stomach-distension, fullness and pain in the epigastrium and abdomen, foul belching with sour regurgitation and anorexia, vomiting and hesitant bowl movements; thick and sticky tongue coating; rolling pulse
- Retention of fluid in the stomach due to cold-epigastric fullness and pain which are worse upon exposure to cold and better upon exposure to warmth, reflux of clear fluid or vomiting after eating; white slippery tongue coating: slow pulse
- Hyperactivity of fire inthe stomach-burning sensation and pain in the epigastric region, sour regurgitation and an empty, uncomfortable feeling in the stomach, thirst with a preference for cold drinks, voracious appetite and getting hungry easily, vomiting, foul breath, swelling and pain or ulceration and bleeding of the gums; constipation with scanty yellow urine; red tongur with yellow coating; rapid pilse
- Insufficiency of stomach yin-burning pain in the epigastric region, an empty and uncomfortable sensation in the stomach, hunger with no desire to eat, dry vomiting and hiccups, dryness of the mouth and throat, constipation; red tongue with little moisture; thready rapid pilse

Syndromes of the liver and gall bladder

- Stagnation of liver qi-mental depression, irritability, distending or wandering pain in the costal and hypochondriac regions, distension of the breasts, stuffiness in the chest, excessive sighing, epigastric and abdominal distension and pain, poor appetite, belching or possibly a sensation of a foreign body in the throat, irregular menstruation and dysmenorrhea, irregular menstruation and dysmenorrhea; thin white tongue coating; string-taut pulse
- Flare-up of liver fire-distending pain in the head, dizziness and vertigo, redness pain and swelling in the eyes, a bitter taste and dryness in the mouth, irritability, burning pain in the costal and hypochondriac regions, tinnitus like the sound of waves, yellow urine and constipation, hematemesis, hemoptsysor epitaxis; red tongue with yellow coating; string-taut rapid pulse
- Rising liver yang-headache with distending sensation in the head, dizziness and vertigo, tinnitus, flushed face and red eyes, irritability, insomnia with dream disturbed sleep, palpitations, poor memory, soreness and weakness in the lower back and knees; red tongue; string-taut thready and rapid pulse
- Stirring of the liver wind in the interior-dizziness and vertigo, convulsions, tremors and numbness, extream heat and deficiency of the blood
- Retension of cold in the liver meridian-lower abdominal distending pain with bearing down sensation in the testes, contracted scrotum, pain aggrevated by cold and alleviated by warmth; white tongue coating; slippery deep and string-taut pulse
- Insufficiency of liver blood-skin pallor, dizziness and vertigo, blurring of vision, dryness of the eyes, night blindness, numbness of the limbs, spasms of the tendons, scanty menstrual flow or amenorrhea; pale tongue; thready pulse
- Damp-heat in the liver and gall bladder-hypochondriac distension and pain, bitter taste in the mouth, poor appetite, nausea, vomiting, abdominal distension, scanty and yellow urine; yellow sticky tongue coating; string-taut rapid pulse

Syndromes of the kidney and urinary bladder

- Deficiency of kidney qi-soreness and weakness in the lumbar region and knee joints, frequent urination with clear urine, dribbling of urine after urination or enuresis, incontinence of urine in severe cases, spermatorrhea and premature ejaculation in men with clear cold leukorrhea in women; pale tongue with a white coating; weak thready pulse

- Insufficiency of kidney yang-skin pallor, cold limbs, soreness and weakness of the lumbar region and knee joints, impotence, infertility, dizziness, tinnitis; pale tongue with white coating; deep weak pulse
- Insufficiency of kidney yin-dizziness, tinnitis, insomnia, poor memory, soreness and weakness of the lumbar region and knee joints, nocturnal emission, dryness of the mouth, afternoon fever, malar flush, night sweats, yellow urine, constipation; red tongue with little coating; thready rapid pulse
- Damp-heat in the uriny bladder-frequency and urgency of urination, burning pain in the urethra, dribbling urination or discontinuation of urination in mid-stream, turbid urine that is a deep yellow color, hematuria, possible stones in the urine, possible lower adominal distension and fullness or lumbago; yellow sticky tongue coating; rapid pulse

A brief explanation of these major components follows. The Exterior denotes the surface of the body while the Interior denotes the internal structures. The Heat refers to those causes that result in the production of heat within the body, as opposed to normal bodily activity. The Cold will then refer to those causes that result in the loss of normal activities which will result in the cooling of the entire body. While Heat/Cold is more generalized and system wide in effects, Deficiency/Excess are more generally localized and involve fewer components. Blood/Qi involves a bit of mental stretching in order to grasp. Blood involves activities that disrupt the normal flow of blood in the vessels, either in a general sense or locally. Any discussion of Qi involves the circulation of life force and in this case it refers to the result of what may inhibit that normal flow. For the rest, please refer to the copious information that is to be found online from various sources concerning these schemas.

Chapter Two

With the benefit of a schema comparison, we can see how the modern Western schema of peripheral neuropathy meshes very well with the essential schema of Chinese medicine, regardless of what the AMA would have us believe. One can readily see the various S and S of the 3 components (sensory nerves, motor nerves and autonomic nerves) of peripheral neuropathy within the S and S of the 3 major schemas of Chinese medicine (the 8 Principles, the Qi and Blood and the Zang-Fu Organs) as described above. However, the Chinese medicine S and S are gained from more than just those of peripheral neuropathy since the concepts of peripheral neuropathy are of a strictly modern timeframe. The principle of Chinese medicine has a broader approach due to the organismal nature of the human body and the necessity to deal with the entire intact individual in any treatment protocol. It seems then that Chinese medicine was the original wholistic medicine!

Thus, we have seen how certain treatment practices have developed and evolved from ancient times to the present day. This leads us then to a discussion of the concepts of healing in use today as the treatments of disease in use today are dependent upon the manner in which those treatments are applied (in accordance with the current concepts of what comprises healing). Unfortunately, the abject horror that is the AMA has become the dictatorial governing body guiding medical education and research in the USA today and thus by extention much of the world. This work is an effort to go beyond the narrow scope of medical education proscribed by the AMA.

It is the human organism that is the subject of our inquiry. Many different concepts of healing have been provided to us by the many different cultures around the world. The rapid pace of modern medical research today has allowed for rapid improvements in the USA in only the proscribed and approved manner as dictated by the AMA. Fortunately, there are many workers around the world today that are not hampered by the dictatorial efforts of the AMA, especially in mainland China. These modern workers continue to push the boundries of real and beneficial research regarding the concepts of healing. In mainland China, both Western medicine and Eastern medicine are very successfully practiced together side by side and are used as complementary pairs for the benefit of the patient.

What then are the various elements involved in healing and what are the essential functions of those healing components in relation to the body? First of all, one must realize and come to the conclusion that the natural process by which the body repairs itself is the ultimate source of all bodily healing. The purpose then of any "healer" is to assist those various natural processes which are an essential function of the peripheral nervous system (PNS) components of the enteric nervous system (ENS) and the many factors found within the liquid component of the blood. Let us first discuss the elements of the blood that are directly involved in the maintenance of a healthy body. The 2 organs of the body that are the source of those factors involved in healing processes are the liver and the spleen/bone marrow. The liver produces all of the non-

cellular factors in the blood that are directly involved in enabling blood clotting, the production of immune factors and the elimination of pathogens directly from the blood. The spleen/bone marrow are the source of all of the white blood cell components within whole blood that directly attack any disease-causing elements that may invade the blood or interstitial fluid spaces and tissues of the body.

The ENS is one of the two components that make up the nervous system of the body as a whole of all bilateral animals, with the other part being the CNS. The ENS consists of all of the nerves and ganglia outside of the brain and spinal cord, the CNS. In vertebrates, a ganglion is a cluster of neural cell bodies outside of the CNS. A spinal ganglion is a cluster of nerve cell bodies positioned along the spinal cord at both the dorsal and ventral roots of any spinal nerve. The main function provided by the ENS is to connect the various bilateral components of the PNS elements of the limbs and organs of the body to the overall control system provided by the spinal nerve ganglia which lie bilaterally next to and just outside the spinal cord (CNS). It is the coordination of the various PNS elements by the spinal ganglia as a whole that constitutes both the normal function of the physical body elements and the processes involved in normal daily life in support of the CNS. Unlike the CNS, the ENS is not protected by the vertebral column and skull or by the blood–brain barrier, which leaves it directly exposed to any environmental toxins and mechanical injuries. It is this fact that puts the normal everyday activities of the ENS in the spotlight for any healing that may be necessary in the daily life of the intact healthy organism.

Chapter Three

At this time, perhaps a clarification of those elements that are directly involved in any disease process of the body need to be discussed so that it is made clear which constitutes a disease bearing pathogen. A pathogen is any environmentally derived element that may be involved in overwhealming the natural healing processes of the body and thereby causing a disruption in the normal processes involved in the everyday living and basic functionality of the organism as a whole. The normally encountered disease causing elements are the various pathogenic microorganisms that are readily found within the living component of the surrounding environment. Those elements consist mainly of the many kinds of pathogenic viruses and bacteria. These are in addition to any parasitic protozoa, helminths and insects that may be encountered, although usually in much lesser quantity.

How is it then that the various disease-causing viruses and bacteria encountered are capable of being pathogenic? They must be in some manner capable of disrupting, evading or overwhelming the normal healing qualities of the intact host organism. The various actions of a pathogenic microorganisms are normal for that specific entity. All disease-causing microorganisms are opportunistic in character as their capacity for movement and dissemination are somewhat limited and completely of a passive nature. As a result, it is the character of certain elements in their normal routine activities that is the cause of disease in other organisms. Many of their normal activities then are the direct cause for the production of various metabolic factors that are then somehow in some manner disruptive to normal "host" activities and metabolism.

It is then the result of the actions of the normal activities of the pathogenic microorganisms that may overwhelm the routine healing activities by the "host" and thereby providing the means for the pathogen to flourish within the body of the host organism. This sudden and rapid flourishing within the body of the host by the pathogen and the resultant production by the pathogen of any host disruptive factors is then the direct cause of any "disease" within the host body. Healing then will be both a riding from the body of the disease pathogen as well as any factors produced by the pathogen that are disruptive to the normal activity of the host metabolism.

Chapter Four

Getting finally to the core of this article, the role of the "doctor" (physician) in the alleviation of disease by assisting any and all natural bodily processes. It is the natural activities of the ENS that are responsible for any of the innate activities within and by the body which may be construed then as healing. A person gets sick or ill when the normal activities of the ENS are disrupted or overwhelmed by one or more disease causing pathogens and/or the products produced by that pathogen. The S and S of the sick person are dependent upon the location of body disruption and the organs/tissues that are directly involved at the site of infection/disruption. The activities of the disease pathogens may produce compounds that are disruptive to normal bodily function at the site of infection and then to other locations within the body as those elements are carried away from the site of infection by the blood vascular system and consequently distributed widely into the body. This is the direct cause of any swelling within the body at the site

of infection as many of the compounds that are produced by the pathogen incite a reaction by host body elements to release agents that directly cause the localized swelling. It is the purpose of the swelling to keep localized the disease pathogen and any released pathogenic agents. The role of the physician then is to investigate the essential nature of the S and S in order to determine the possible causes of disease, to asses the natural progression of disease symptomology within the host body and then possibly to determine the protocol for assisting the patient body to resist the disease pathogen(s). And finally, to assisting the body in eliminating any waste products resulting from the progression of the disease and any healing protocols.

The role of the clinical laboratory in these modern times can not be understated! The physician will most likely have an idea of just what comprises the disease causing agent because of the S and S displayed. If not, the results of the laboratory will be very useful for determining the possible cause of the disease. Upon receiving the results of the laboratory work-up, the physician will then determine the possible treatment protocol(s). The physician then follows the progression of the disease after treatment in order to determine if the course of the treatment protocol has been successful or not. In any case, it is the return to normal functioning by the ENS that is the ultimate goal of any medical treatment protocol.

Chapter one outlined the 2 major systematic approaches in determining the result within the body of the predations by disease causing pathogens. It is both the description of the locus of infection and the resulting S and S within the body of that infection that allows the physician to determine both the course of treatment and the possible outcomes of that treatment. Thus, the physician needs to be aware of the direct local effects of the disease and also the effects of any pathological products that are carried away from the locus of infection by the blood. Any treatment protocol must then address both of these issues. Often, the non-local effects are negligible and are not a cause for alarm. However, some pathogens are such as to directly produce compounds that are disruptive to norman bodily function away from the primary site of infection. These pathogens are usually the most difficult to treat as multiple bodily systems are then directly involved.

Some diseases produce symptoms of hypofunction (Cold) in the tissues of the body, such as that of Leprosy. The infected areas of Leprosy do not have any symptoms of heat nor does Leprosy produce any elevated bodily temperatures away from the site of infection. Most diseases produce symptoms of heat as fever within the body which is the result of elevated heat production within the body by the secretions of the hypothalamus. This is the result of the various pathogenic factors directly causing an elevation of the setpoint of bodily temperature by the hypothalamus in response to those foreign factors. The reason for this is the fact that the cells of the body are able to function just fine at a higher temperature while those of disease pathogens are not able to do so. Supposedly, the reason for this is the fact that normal intense muscular activity routinely raises the overall temperature of the body in the course of daily activity. Sick people are not normally physically active and this is a means to raise overall bodily temperature. The reason for the raise in body temperature is that microorganisms have an optimum temperature for growth that will be lower than that of the elevated temperature of a fever. White blood cell elements have then an advantage over the disease pathogen(s) with the resultant increased functionality at the higher temperature.

It is then a means of assisting the normal activities of the ENS that is the essential role of the "healer". This is why the education which the healer receives is paramount in importance. The healer must be able to gather all of the relevant factual information regarding the ill patient and then be able to recognize the possible direct causes, possible resulting outcomes and possible relevant sources of the illness. The quality of the instruction that the healer receives is then of considerable importance and directly determines the quality of any possible treatment by the healer directed to the patient.

Chapter Five

At this time, a discussion of another type of healing modality will commence. This modality will be that of Homeopathy. Please read the information online concerning the history about Homeopathy, which will a bit stilted due to the predations of the AMA. This work is more about the manner in which the practice of Homeopathy proceeds and just why this mode of healing is very effective. The efficacy of any mode of medical treatment is dependent upon the nature of the system(s) of the body that is/are involved and being directly influenced by said treatment. In the case of Homeopathy, the systems of the body as elements of the ENS being influenced are the same as any other mode of healing. However, it it the manner of the treatment that is seemingly different, even

though in actuality it is really the same. Going forward will now involve a discussion of the basic systems involved in all living systems great and small.

All biological systems are directly involved in slowing down the predations of entropy and which then is at the center of all manner of living activities by all living entities. Yes, biological entities slow the movement of energy transfere from areas of lower entropy to areas of higher entropy. This directly is what "living" is about and what constitutes being alive. In the case of this work, we are describing how the human organism functions and what may disrupt that normal functioning. What then exactly does this have to do with Concepts of Healing you say? And the author says-"everything". The reason for this is that there are multiple ways to address malfunctions in energy flow within living systems. In the case of human entities, becoming "sick" means that the normal energy transfer mechanisms are in some manner disrupted. And in most cases it is the result of predation by viruses and bacteria upon the "host" organism.

The manner in which human beings have first learned to treat disease is by altering the normal substances consumed as food. This is the origin of herbal medicine. Modern herbal medicine directly involves the consumption of various specific plant material(s) for a curative effect according to the signs and symptoms of the disease encountered. The fact that modern biochemistry has moved from naturally derived plant-based medicines to completely man-made substances promulgated by the AMA gives us a clue as to just what Homeopathy is all about. Homeopathy is all about what is being called "energy medicine". The essential energy signature of the agent used to make the homeopathic tincture is the actual healing component. Let me say that again to make sure that you got the critical message. It is the energy signature of the curative agent that is most directly involved in healing by the homeopathic tincture! Again, it is the energy signature and not the physical presence of the curative element that is directly involved. This fact seems to be completely out of the realm of possibility to the practicioners of medicine as dictated by the conventions of the AMA, so much for enlightened medical education in the USA. This is because the direction of AMA dictated research efforts are stuck in looking for a biochemical solution to disease instead of an energetic solution. However, it may be thus noted that all healing is energetically based in actual fact. This is true for massage, for herbal medicine, for homeopathy, for Western medicine, for Eastern medicine, for any form of medicine. In fact, it is the energy of the doctor that is interacting with the energy of the patient that is the source of most all healing interaction. The curative element of the proscribed medicine is ultimately energetically based. This is the direct cause of "burn-out" by medical professionals. Those in the healing professions directly deplete their own personal store of energy in the service to others. This is simply due to the fact that human beings are energetic beings as well as physical beings. There is no possibility to separate the two, one from the other, and remain living. It is in understanding the nature of what constitutes the reality of our being alive that all may learn as students of life.

Assets from publication with us

- Prompt Acknowledgement after receiving the article
- Thorough Double blinded peer review
- Rapid Publication
- Issue of Publication Certificate
- High visibility of your Published work

Website: www.actascientific.com/
Submit Article: www.actascientific.com/submission.php
Email us: editor@actascientific.com
Contact us: +91 9182824667