Bioregulational Background of the Effect of Body-Waves and Nutrition Advices

Resource management is essential for the practical salute-genesis and the regulation medicine, as thereby damaged health conditions can be transferred into new processes by sophisticated means in-between the determinants health and decease.

On the one hand steadily stages of development are available which can differentiate to health stages. On the other hand there exists increasingly more evidence of decease patterns of therapy indicating semeiotics in a considerably larger differentiation potential as initially assumed. Our knowledge about the regulation of health- and decease stages is incomplete and equipped with barriers. Transcription factors regulate the expression at the end of signal-transduction-pathways. The basis of these pathways, and therefore of fundamental relevance for the communication of micro milieu biology, are interactions. The itemization of these actions displays the necessary requirement for the differentiation. It is indeed needful to consult analogs in order to get from linear actions to complex pattern detections.

An analog out of biology here serves as an introducing example:

<u>Weismann</u> brings into service of agriculture his Barrier-Theory while recommending one-way-signals for marking diversified bio-seeds. (Black et al. 2006)
As is generally known the most popular theorist of evolution next to Darwin, *August Weismann* 1876, describes the development of transmutation (Change Of The Species) along the way of direct impact of exterior living condition: "Observing each variety as a reaction of the organism due to exterior impact as a deviation of the inherited development direction, the reason of this is, that without any change of environment there could not have occurred any development of organic patterns. This "Weismann-Barrier" even today is a global basis for the hybrid of several cultivated forms of crop plants. (Ebert, A.W. et al. 2007)

Only the discovery and interpretation of the "Reverse Transcriptase" has brought doubts in the severity of the linear theory. The reverse transcriptase has first been described in 1970 independently from *Howard Temin* as well as from *David Baltimore. In* 1975 they obtained the Nobel Price for their discovery together with *Renato Dulbecco*.

The name "reverse" here describes the special qualities of the enzyme to reverse the transcription process of DNA to RNA, which previously was seen as the only possible way. With the discovery of these enzymes the by then current "Dogma of Molecular Biology", stating there exists only a one-way communication in the direction DNA \rightarrow RNA \rightarrow protein and never the other way round, has been scrapped. (Coffin, J.M. et al. 1997)

Body-Wave

Another analogue is the operation principle of the Body-Waves and the nutrition advices. The hypothesis relating to this is based on the studies of *Jürgen Schole*. (Schole, J. et al. 1988)

Thus the biological systems go into resonance with substantial-analog information and over reciprocal action the regulation procedures are getting started.

Cell or nuclear membrane receptors, otherwise undocked by regulators, e.g. agents out of medicine, perhaps have an adherence- or carrier-function as dipole-structures. They help at the transmission of information or they are not used anymore, because electron transport systems in the cell nucleus and cytosol are able to get directly into resonance with the information. Therefore the electron performance in the membrane persistant flavin-enzyme system and thereby e.g. the metabolic condition might be regulated by biological effective information, modulated on electro-magnetic fields. These receptor adherence action is described in the studies of *Schole*.

After all its origin can be found in the former molecular biology:

The effect of substrates is after the theory of *Paul Ehrlichs* bound to receptors, which have to be built like a cell. A lack of receptors confines the substrates efficacy and therefore the consequent metabolism.

But this can sometimes cause in a therapeutic sense undesirable side effects, while the organism gets into resonance with the information of a metabolite.

This would not occur with a suitable bio-physical information transfer.

Metabolic regulations and regulation deceases

By acquired dialectic the human of our culture sphere is primary thinking in dualities. To assess polarities means to talk about a condition and at the same time consider its antithesis. Because probably only in the "as-well-as" the truth can be found, to which we can converge step by step.

Albert Einstein has established, in the course of designating, the nine characteristics of the human in mathematical concern to his skills, the following dictum:

The human makes his choice basically between three possibilities, even though he realizes only two of it. Therewith he enables himself to consider an average between two determinants in order to outbalance extremes.

With this Einstein already is consistent with the newest studies in brain research of the last century, viewing the reality not as reality but as an image of the highest sophisticated substance of the human body, the cortex of brain. (Spranger et al. 2004)

The semantic of regulation biology, its physiology and medicine has its origin in the human understanding of symptomatology.

The regulation deceases described by *Jürgen Schole* and his school are using the semiotic of health and decease, resp. regarding the latter, the nosology, to gain a wider range of understanding beneath health scientists and physicians.

In extension of the former WHO-definition health is not defined as a singular but as three stages. Which there are counted among the primary, the liberty of damage, the secondary which means reversibility and the tertiary, the prognosis under influence of a therapy. Deceases are therefore subdivided into therapy-based classifications of regulation medicine into ethological-homologues (as in most cases of infection), pathogenetic hetereologue or cascadical damages showing complex patterns with individual designs. (Spranger 2007)

Symptoms of decease are showing a hidden imbalance of which we once found should work out its origin and further eliminate it.

This imbalance can become apparent on three different levels and has to be balanced there. The decision pattern should be identical with the prime levels of psyche intervention, metabolism and matter, as well as again 3 determinants. In this outline it conveys that decease is not anything negative but another experience-of-live, how *Rudolf Virchow* phrases. An imbalance manifests decease, he inhibits the organism on his way to experience health.

Every regularly running acute decease goes along with an immunological action and is a healing action because it utilizes at the same time reparative and proliferative tendencies, which can bear down any stress (infect, trauma) in a regulating way. Only a chronic process contains the problems of metabolic efforts taken in turns to each other.

Mind-Body-Medicine And Information

"Mind-Body-Medicine focuses on the interactions among the brain, mind, body, and behavior, and the powerful ways in which emotional, mental, social, spiritual and behavioural factors can directly affect health. It regards as fundamental an approach that respects and enhances each person's capacity for self-knowledge and self-care, and it emphases techniques that are grounded in this approach." Herewith the NIH describes intervention techniques, which offer the access to cognitive behavioural changes of affected persons. (NIH 2006)

The principles of mind-body-medicine is the dealing with information and the self-constitution of life draft and style. (Dobos, G.J. 2007)

The effect of information in living, complex systems is unlikely larger than in technical equipment. In the organism it can only lead to an effect if the information transfer is given, which is steadily operated self-regulated. Information characterizes reality between mass and energy. It is the form shaping power between the determinants. Matter is not only mass but also energy and information.

Resonance

A vast number of information runs through the organism without causing any reaction. The possibility that in an individual case our organism is arranged to make a reaction, is only big, when it comes to resonance.

Indeed a change is only achieved by information which goes into resonance with the complex biological system.

Basis for this is the compliance, which means the affinity of information to the resonance system acc. to the principle of sender-receptor-acceptor.

Only then we can anticipate interaction in the biological system leading to regulation.

Metabolic-Regulation

In medicine there are slightly known synthetic concepts although they have a scientific background.

It is a matter of concepts of dynamic regulative systems, which part of them are standing contrary to the generally inflexible point of views.

The human is a complex system, handling information with a dynamic order, which points out polarities. The organism succeeds in dynamically combining the opposites of a determined chaos and order.

The concept of metabolic regulation could show, which method is better suitable to help a patient finding his health target in an individual and optimal way.

The method itself doesn't play a role, indeed a proof of efficacy should be possible.

The metabolic regulation can achieve the following (Schole, J et al., 1988):

With the measurement of metabolic regulation we are holding in our hands an instrument, which enables us to certify the efficacy of a therapy process directly at the patient in a very individual way.

Only the positive influence of a deadlocked metabolic condition of an ill patient shows, that the chosen method is suitable for him. The metabolic regulation forms a reference platform between environmental influence, nutrition, mind and therapy out of all medical fields.

The anabolic synthesis and the catabolic energy metabolism are linked with and depend on each other as a polarity. Non of both can be described without contemporary consideration of its partner (Yin-Yang-Principle). In a state of rest the metabolic action is the same. It is guaranteed by the so-called basis regulation, which is marked with oxidation- and reduction-processes.

Through the exchange of electrons over persistant flavin-enzymes in the nucleus, cytosol and mitochondria following the principle of electron-donator-acceptor-reaction a steadily give-and-take is happening.

The redox potential defines the basis regulation and therefore guarantees the regular metabolism, the cell's "daily-routine-metabolism". *Schole* writes: "Synthesizing on the pasteur-effect as the most elementary regulation principle all experimental facts and all evidence pleads for the basis regulation in all cells of a higher organism taking place over the redox-potential. This is to be completed by the possibility of interconversion and allostery.

,Second-Messenger-Systems' are not only used for basis regulation but also for very fast regulations as for example in special regulatory circuits, whereby the whole regulation system experiences a tight connection.

Basis regulation happens by three-component-systems:

Corticoids and thyroid hormones regulate as catabolic components the energy metabolism in the mitochondria and in the nucleus and by Somatotropin provided peptides as anabolic components they regulate the synthesis metabolism in the area of Cytosol and nucleus. These are the three main metabolic hormones of endocrinium.

A second system, connected thightly with the endocrinium and used for the basic regulation modulation, consist of Noradrenalin as catabolic and of Acetylcholine as anabolic components of the vegetativum.

To guarantee an optimal and sufficient solid stationary condition between energyand synthesis-metabolism and therefore an ideal redox-status for the several cell compartments, the components of both systems have to be available inside the cells in an optimal relation to each other and in sufficient quantity An optimal solid metabolic condition corresponds to the idea of "Health".

During a positive stress adaptation the main metabolic hormones are provided by the depots within one hour, under high significant increase of the organism's functionality.

During a long-term stress situation under participation of the nucleus an adaption of enzyme patterns, quantity of mitochondria, etc. accordingly to the new situation happens. When one component is provided preferentially this leads to a regulative lapse, which became apparent as regulation deceases.

A negative stress adaptation corresponds therefore to the idea of "chronic decease".

The knowledge of concentration and with this the efficiency of both endocrine and both vegetative components in the organism is therefore, in the medical diagnostic, the therapy or prophylaxes of exceptional meaning.

Acute deceases only occur if the Cortisol storage resp. anabolic peptides are exhausted because of stress. Since then a stress adaptation after an immediate reaction within one hour is not possible anymore.

In this case it comes to an alarm reaction, which can last 7 days and has to be understood as healing reaction (Adaption-Syndrome).

Here the production of anabolic peptides on the one hand and of Cortisol on the other hand hast o be increased, before the metabolic condition can be optimally adjusted.

The two phases not only differentiate in time, but also in various activities of metabolic stages at the beginning. In the quicker phase it primary comes to an increased catabolic activity, which means sympathicotonia and in the slower phase it primary comes to an increased anabolic activity, which means parasympathiconia. Example: During a shock as primary anabolic reaction with all well-known inflammatory-signs a lack of catabolic activity exists. So catabolic effective corticoid is given!

An optimal-solid metabolic condition with undisturbed information transfer would be able to equate to the idea of "Health".

Metabolic Lapse

Every chronic decease develops through a regulative disharmony, through a metabolic lapse within the cells. All deceases are divided into anabolic and catabolic because of their symptomatic. The origin however is in each case the malfunction of polar metabolic activities of energy- or synthesis-metabolism. The underlain blocking has to be always diagnostically recorded and specifically treated. It can be situated on all levels of being, from mind to matrix.

Therefore every chronic decease has to be primary studied onto the fact how the normal metabolic condition has been disturbed. So a symptomatical therapy can be precluded.

An example for catabolic metabolic lapses are our civilization deceases. As essential origin we can ascertain: lack of movement, permanent psychichal stress, carbohydrate abuse and destruction of lipoproteids (entropy).

The consequence is a catabolism, affection of the heart-circulation-system as well as degenerative deceases.

The stressed human is only increasingly vulnerable for infects, because his anabolic metabolic power is blocked. STH is the strongest immune stimulating, anabolic-effective hormone. In case of a lack of STH, often additionally blocked through too much insulin (carbohydrate abuse), the catabolism predominates.

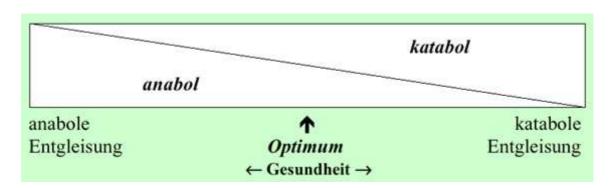
During the post-aggression-syndrome after surgeries, trauma or infections there is also extreme catabolism.

Reciprocal there is an acute anabolism at a shock due to extreme blockings of catabolic metabolic power. In order to balance the deficient catabolic polarity, in this case we have to administer catabolic-effective Cortisol.

Metabolic Therapy

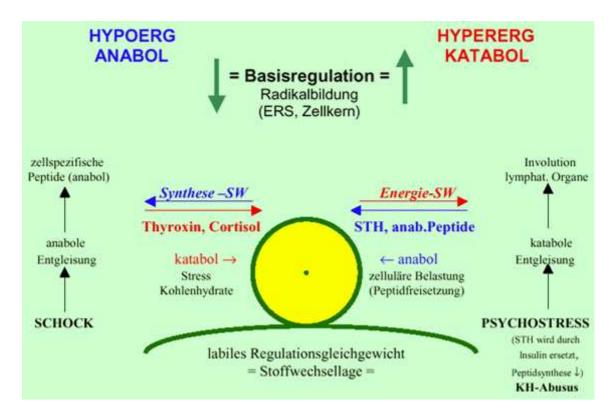
Negative stress adaptations require chronic deceases as consequence of a cellular regulation disturbance. A healthy person with a dynamical metabolism can easily balance anabolic or catabolic lapses. The chronically sick person although remains in a frozen regulation of its metabolic lapse, which has been caused by the lack of anabolic or catabolic amount.

The therapy has to begin in the manner of balancing the responsible lack by empowering the weakest part after the polar principle. The metabolic therapy is an essential part of biophysical information therapy. During a catabolic metabolic lapse there should be supplied anabolic metabolic information habitually from the outside and the other way round, whereas after analyzing the dosage and frequency of taking has to be fixed. The application should be combined with our nutrition advices referred to the metabolism.



Übersetzung Bild1:

anabolic catabolic anabolic/ catabolic lapse optimum health



Übersetzung Bild 2:

hypoergical anabolic/ catabolic Basis Regulation, radical development (ERS, nucleus) cell-specific peptides (anabolic) anabolic laps shock

synthesis-SW Thyroxine, Cortisol catabolic stress carbohydrates

energy-SW STH, anabolic peptides anabolic cellular stress (release of peptides)

Involution
lymphatic organs
catabolic lapse
psycho-stress (STH is replaced by Insulin, peptide synthesis)
carbohydrate abuse

Übersetzung Bild 3 (Bild selbst konnte ich hier leider nicht einfügen)

membran permeability oedema, redness, swelling anabolic

catabolic blocked anabolic lapse catabolic blocking psychic inhibition of CHR beta- or ganglionic blockers inhabitation of electron flow insufficiency of NNR or thyroidea dysbiosis (damaged flora by antibiotics)

Positive Stress Adaptation anabol, Cytosol catabol, mitochondria optimal irritant response

membran permeability cell division differenciation chronic inflammation

anabolic blocked cataobolic

catabolic lapse
anabolic blocking
psychic inhibition of GHRH
alpha-blockers
permanent stress (interfering fields)
lack of reduced milieu
carbohydrate abuse (Insulin blocks STH)

Conclusion

Acute deceases develop habitually in case of accidents, infections, neglects of various kinds until finally inflammations of deceases, which are assigned to a chronic happening. They require medical competence and professional healing assistance.

Every chronic decease develops trough a regulation disharmony, a metabolic lapse within the cells and within the regulative and managing basic system. (Heine 2007) Non-linear interaction is sensitive against a number of influences because of its reaction turns. Therefore an intervention, which proceeds on the variable individual basic requirements during the analysis as well as in the therapy, operates without a distribution principle. The target of perception lays in the description, as before mentioned in the specification of Health and Decease.

All chronic deceases are divided into anabolic and catabolic due to its symptomatic after *Schole*. The origin however is in each case the fail of polar activities of determinants of the energy- or synthesis metabolism.

Therefore the basic blockades have to be captured and further specifically treated. It can be situated on all levels of being, from the mind to the basic system of the body. Thus every chronic decease has to be primary analyzed on the reason of the disharmony in the normal metabolic regulation. The deficit finally defines the leading symptoms.

This conclusion primary eliminates the principle of a symptomatic therapy of chronic deceases.

An example for catabolic metabolic lapse are our civilisation deceases. As essential origins lack of movement, permanent psychic stress, carbohydrate-abuse and the destruction of lipoproteides (entropy) are considered.

The consequence is a catabolism, are deceases of the heart-circulation-system as well as degenerative deceases. The stressed human is only vulnerable for infects because of his metabolic power is blocked.

STH (growth hormone) is the strongest immune-stimulating, anabolic effective hormone we know. In case of a lack of STH, often additionally blocked by too much insulin, catabolism predominates.

It is to explain, where the deficit concerning the blockades of the basic system is situated and where conditions of energy lack can be found, which disturb the metabolic regulation.

Only therapeutic balance of the deficit creates an optimal solid metabolic condition in an undisturbed information transfer in the basic system of the organism.

Thus it is detectable, that regulation deceases in typical form can be recovered in nearly all occasions of chronification.

The purpose of regulation medicine is sophisticated, but enough exemplary to handle with it.

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