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BIOREGULATORY MEDICINE

An Innovative Holistic
Approach to Self-Healing



CHAPTER TWO

Bioregulatory Medicine

The Future of Health and Healing

The noblest foundation for medicine is love. It is love which teaches us the art of healing. Without love, true healing cannot be born.

—PARACELSUS

The good physician treats the disease; the great physician treats the patient who has the disease.

—SIR WILLIAM OSLER

As we now know, the role of bioregulatory medicine practitioners is to identify and remove whatever agents are blocking the healing process while helping to restore the body's innate ability to rehabilitate and regenerate. We also know that healing cannot be achieved if we don't correctly identify what the root cause of the imbalance is. We know that treating and assessing the whole person is directed at both underlying and immediate causative factors while also recognizing the interconnectivity between physical and nonphysical components of the human body. We know that someone could seem physically healthy, but an unstable emotional environment can have a negative impact on their terrain and be a precursor to future illness. With BioMed, we have a new view of health and disease and the factors that influence it.

Like a log that has fallen across a flowing river, at the root of most illnesses are psycho-emotional and environmental toxic blockades

that overwhelm the body's regulatory systems. Consider a barrel that is filling with water. Every stressful event, every bite of toxic food, every exposure to mercury fillings is akin to pouring more water in that barrel. With every drop, more symptoms appear. Once the barrel is full it overflows into a disease state. But while everyone has a barrel, the influencing factors that fill each barrel are unique to each person. We all have different life stressors, dietary habits, thought processes, past traumas, and environments. Each person, depending on their emotional type or miasm (inherited predispositions toward physical and/or mental illnesses or weaknesses), also adapts in his or her own way to these barrel-filling factors. To one person, getting stuck in traffic is maddening, and it fills their disease barrel a little bit. To another, traffic allows more relaxation time to listen to a favorite book on tape, and therefore it doesn't add water to their barrel. How a person reacts—regulates—in response to causal factors is in part due to genetic predisposition, emotional/mental characteristics, bioenergetic factors, social circumstances, and more. How full the barrel gets over the years plays an important role in the development of chronic illness. This is a process that might appear suddenly or insidiously, slowly mounting over months or even years. At the end of the day, both health and disease result from a complex interaction and reaction to physical, mental, emotional, environmental, genetic, spiritual, and social factors. A harmonious functioning and the ability to properly respond to all these dysregulating aspects is the blueprint to health.

The term *regulation capacity* is a measurement of a person's ability to react. It essentially refers to how many pushes one can take and still remain regulated or balanced. When the body is in balance, it is not as prone to chronic illness, and it remains in a state of health, or homeostasis. Regulation is about reaction. If you throw a ball at someone's face, they should react by either trying to catch the ball or dodging it so they don't get hit. If a light turns on, the iris constricts in the eye. If someone gets bitten by a Lyme-carrying tick, their body's autoregulating systems—immune, digestive, and inflammatory—need to react against the bacteria. Reaction is regulation, regulation is adaptation, and the ability to regulate is *the* key to health. But if a

person's barrel is too full or there are too many logs blocking their flowing river, then regulation and reaction cannot happen. The body slows, cells degenerate, and we run out of energy. Too much energy has been expended trying to get back to homeostasis.

Chronic disease occurs when a person has a lowered regulation capacity to such an extent that inherent healing forces are no longer able to react against disease-causing conditions with their normal and usual corrective efforts. Disease—quite simply—is a reduced regulation capacity. Regulation capacity is how well a person can adapt and react, and regulation logjams are what trigger or worsen chronic diseases. Bioregulatory medicine looks to remove the logjams and drain the barrel, all of which allow the resources for self-healing mechanisms to grow stronger, permitting self-healing to happen.

The terms *self-heal* and *regenerate* both refer to the self-repair forces inherent to humans. We know the body has the ability to regenerate, as our tissues regenerate all the time (think of a cut on your finger turning into a scab, then healing over completely). Over a life span, our body grows, develops, matures, and declines. Within this cycle of life, every one of the body's cells and organs has its own regeneration cycle. Some cells are programmed to die after forty or so divisions. Every organ in the body has a regeneration cycle where old cells die and new cells are generated. Intestinal bacteria regenerate within several days, the intestinal wall within two weeks, and immune cells within four weeks. The liver possesses an extraordinary capacity to regenerate. As little as 25 percent of an original liver mass can regenerate back to its full size within six months. In general, the organs that do the most work encountering the outside world have the fastest regeneration rate. For example, the digestive lining and immune system cells have a far shorter life span than our bone, heart, and brain cells. Healing, therefore, depends on a tissue's regeneration time.

The default state of the body is one of ceaseless regeneration. In fact, every atom and molecule of the entire human body is replaced every seven to ten years without us even thinking about it. This is a natural process that requires no medical intervention. However, in chronic and degenerative disease this renewal process goes

haywire. In the case of cancer, cells become immortal and are constantly dividing and growing. In degenerative nerve diseases such as Alzheimer's, cells of the nervous system degenerate instead of regenerate; they rot and die without replacement. Those following an allopathic medical track for neurodegenerative diseases end up on drugs such as dopamine antagonists and antiseizure medications that reduce the symptoms but don't stop the root of the problem: nerve degeneration. A bioregulatory medicine treatment approach is in stark contrast. We know that there are several natural and non-toxic compounds with proven nerve-regenerative effects, including Huperzine, Apigenin, and lion's mane mushroom, for example.¹ These phytochemicals stimulate the regenerative process, promote quality and quantity of life, and shoot to cure.

The BioMed Patient Assessment

Bioregulatory medical providers take a patient's medical history on their first appointment, like any conventional general practitioner (GP) would do. But the similarities generally stop there. Bioregulatory medicine therapists focus also on a comprehensive multisystem psychological and bioenergetic assessment; structural evaluation, analysis of nutritional deficiencies, toxicities, childhood traumas, and beyond in order to identify the dysregulatory factors involved in the process of symptoms or pathology. Allopathic GPs ask about symptoms, specific complaints, and review basic serum lab tests in order to match them with a diagnosis code and a prescription. Bioregulatory doctors, by contrast, think in patterns and connections and consider the patient's story. For bioregulatory doctors, it is not about the diagnosis but rather about the systems at play. In the art of the bioregulatory intake, there is an element of intuition, where practitioners have learned to recognize, for example, that adverse events in childhood can manifest into pathology later in life. For example, if during adolescence certain coping strategies for psycho-emotional issues are not learned, addictive behavior can manifest in adulthood. Multiple food intolerances in early childhood can present later in life in immune system deficiencies or digestive

or pulmonary issues. Those with toxin exposure in their past might present with cancer in the future. It's all about recognizing cause and effect, the factors filling the barrel. Disease doesn't just show up on your doorstep one day, just as (most) marriages don't end in divorce in one day. Disease is *never* bad luck.

While the primary diagnostic tools of a bioregulatory medicine practitioner include those of any other physician—lab tests, blood work, X-rays, scans, scopes, histories, and physicals—the bioregulatory medicine practitioner also employs additional tools so they can examine each patient on multiple levels. These tools include, but are not limited to:

- Physical body examination and constitution analysis
- Dental examination and panoramic X-ray
- Organ biocommunication scans
- General blood work, including orthomolecular
- Genetic and SNP analysis testing
- Body composition analysis
- Dark field microscopy
- Hormone testing
- Heavy-metal testing (urine/blood/hair analysis)
- Intestinal flora and comprehensive stool analysis
- Food intolerances (IgA, IgG, IgG4)
- Heart rate variability (HRV)
- Contact regulation thermography (CRT)

Using the most technologically advanced diagnostic testing allows the bioregulatory medical provider to perform a core tenet: *tolle causam*, or identify and treat the cause. Bioregulatory medicine employs noninvasive diagnostic aids that view not only structural imbalances, but also functional, metabolic, genetic, regulatory, energetic, and psycho-emotional conditions. Hence, environmental toxins, lifestyle, social and professional influences, and ecological terrain and genetic information are all vital factors to evaluate. If a patient walks in with dermatitis, instead of simply prescribing a steroid cream, the bioregulatory medical practitioner will seek out

the root cause of that inflammation—a food sensitivity, poor kidney or liver function, impaired oxygenation, weak lung activity, stress at work, or a combination thereof. The symptom is usually the end result of an imbalance in several systems. Lots of pushes off the beam, the barrel overflowing, the river clogged with logs.

Illness does not occur without a cause, and symptoms (nausea, vomiting, headache, rash, fever, etc.) are not the cause of illness. As we have discussed, symptoms are an expression of the body's attempt to defend itself, to adapt and recover, and to heal. When symptoms are treated via palliation and suppression (allopathically), and the underlying causes are ignored, the patient might develop a more serious, chronic condition. Etiologies, or causes of disease, usually exist simultaneously. Disease develops in a causal chain, one begetting the other. Bioregulatory medical providers not only discover the primary cause of the illness, but also identify the weakest afflicted organ or system. This is called the causal chain—which is essentially a flow chart that represents the evolution of the pathological history of the patient, taking into account all the possible manifestations and the evolution of a disease.

Treatment on the Terrain (or Internal Milieu)

Bioregulatory medicine sees imbalances in the biological terrain as the root of disease. For example, *Streptococcus* is not viewed as the cause of strep throat, but rather as a breakdown in the body's immune system that then creates a hospitable environment for this gram-positive bacteria to transform into an infectious and virulent form. An allopathic medicine treatment plan would kill the *Streptococcus* with antibiotics and suppress the associated fever with aspirin. From a bioregulatory medicine perspective, fever is the body's natural response to stimulate the immune system and should not be suppressed; rather the biological terrain should be supported through rest, hydrotherapy, herbs, vitamins, probiotics, and so on.

To back up for a moment, the *internal terrain* or *milieu* is a conceptual term coined by nineteenth-century French physician Claude Bernard and refers to the internal environment of an organism.

Any type of disturbance of the balance between the cells and the surrounding cell milieu can lead to a functional disorder and later to cellular degeneration or cancer. Our organs, glands, and tissue cells are embedded in a complex bioregulatory extracellular matrix (ECM) consisting of water, proteins, carbohydrates, and fats. It is in the ECM that the causes and cures of many of the so-called systemic and chronic illnesses, especially inflammatory conditions, are most appropriately addressed. And it is also in the ECM that many of the biologically oriented therapeutics exert their effect. All nutritional substances—oxygen, vitamins, minerals—reach the cell by passing through this matrix. Therefore cellular detoxification, communication, and regeneration are dependent upon the health and integrity of the bioregulatory matrix.

Various influencing factors can destroy and dysregulate the matrix and, thus, the biosphere of the cells. Repair of tissue after physical or chemical injury depends on the synthesis of the ECM to replace lost or damaged tissue. The ECM directs repair by regulating the behavior of the wide variety of cell types that are mobilized to the damaged area to rebuild the tissue. Acute inflammation, reepithelialization, and contraction all depend on ECM interactions and contribute to minimizing toxicity and infection and promoting healing. So we see, and will continue to see, that BioMed embraces terrain-focused medical interventions in all cases of chronic and degenerative disease. Our health is more than just a medical construct, it is a reflection of how we choose to live. Humans cannot achieve optimal levels of health living in unhealthy environments, while eating toxic foods or not getting enough rest or exercise. It is the responsibility of the physician to make the patient aware of these factors. It is then the patient's responsibility to create an environment that will be conducive to health and supportive of the body's internal milieu. There are many factors that can adversely impact the biological terrain, including:

- Dehydration
- Food allergies
- Improper diet and overeating

- Stress
- Heavy metals and environmental toxins
- Dental problems
- Vaccinations
- Medications
- Hidden infections
- Lack of exercise
- Electromagnetic field (EMF) exposure
- Lack of sunlight
- Structural imbalances and injury

All these factors can be prevented. Recall one of the core principles of bioregulatory medicine of utilizing the healing power of nature, or *vis medicatrix naturae*. Reverend Sebastian Kneipp (1821–97), a Bavarian priest and one of the forefathers of bioregulatory medicine, cured himself from tuberculosis using natural methods. At that time the disease was usually fatal, but Kneipp learned about the ancient wisdom of using water as a means of therapy. He decided to immerse himself several times a week in the frigid Danube River. These brief exposures to cold water bolstered his immune system enough to send his disease into remission. Heat and cold, dryness and moisture, light and air, as well as proper nutrition, are all part of the traditions of Hippocrates and are the important cornerstones of bioregulatory medicine today.

Ask a room full of people what they think causes illness. Germs is generally the most common answer, followed by genes, toxins, diet, and stress. But the real cause of illness is violations against natural laws. German medical doctor Henry Lindlahr was the author of one of the cornerstone texts of bioregulatory medicine, *Nature Cure*. The book includes topics such as disease suppression versus elimination, hydrotherapy, and the importance of fresh air and sunbathing. It was inspired by his own healing journey alongside his mentor, cold-plunger Kneipp. The reasons why *Nature Cure* is not popular within the allopathic medical profession and the public are twofold: First, it is just too simple. But also, it is drugless healing, which means pharmaceutical companies can't profit from

it. Bioregulatory practitioners recognize that if their patients are not living in accordance with natural laws to start, then health or healing will not be attained.

Today, in small corners, using various natural cures has become hip and trendy, but it's been given a new name: bio-hacking. This do-it-yourself, improve-your-biology trend has become a social movement, where people have found that adapting natural law “tricks” such as fasting or spending at least thirty minutes a day outside, no matter what the weather, can improve their health and cognitive performance. These natural law tricks include outdoor time in extreme temperatures, exercising, sleeping, staying hydrated (most people with chronic illness are dehydrated), eating whole foods, playing, laughing, meditating, and breathing. All of these activities, either individually or done in tandem, have been shown to have a positive impact on healing chronic diseases, from depression to colon cancer. Living in accordance with natural laws is the prescription for prevention that bioregulatory medicine teaches all patients—no matter where they are on the health continuum. It's time to start changing the health and disease stories of our loved ones and ourselves. And this prescription is not just about curing chronic illnesses; medicine should be about health promotion and community—that is the future of medicine. BioMed is not a new or fringy idea and to learn about just a few of the BioMed pioneers, we primarily look overseas to Europe.

The Origins of BioMed

Bioregulatory medicine got its modern start in Germany during the early 1900s. In 1905, Dr. F. Bachmann united many like-minded physicians together in the Biological Medicine Society (Medizinisch-biologische Gesellschaft), which promoted biological regulatory medicine at conferences in Hamburg in 1912, and Dresden in 1924. At the turn of the nineteenth century, many doctors were still practicing homeopaths and many of those homeopaths were also Jewish. In Germany and throughout Europe, World War I and World War II brought chaos and destroyed much of the

bioregulatory medicine movement (which, as we discussed in the introduction, was referred to as European Biological Medicine). During World War II many Jewish scientists and homeopaths fled Germany for North and South America. It was not until the end of the National Socialist regime in the mid-1940s that a new renaissance in biological regulatory medicine started in Germany, Austria, and Switzerland, transitioning into what is today simply called bioregulatory medicine.

There are more than fifty pioneering contributors to the herbal, nutritional, homeopathic, energetic, and dental arms of bioregulatory medicine who were born before 1910. It would take a whole book to tell all of their tales of medical innovations and discoveries. Saint Hildegard of Bingen (1098–1179), for example, was an abbess, mystic, healer, visionary, and herbalist who believed God had given mankind herbs, spices, and foods to serve our bodies and keep us healthy. She authored two major medical treatises outlining nine categories of healing systems: plants, elements, trees, stones, fish, birds, animals, reptiles, and metals. These papers were the foundations of natural medicine. Due to her outstanding work, which unfortunately no one was able to understand at that time, she was later made a saint in the Roman Catholic Church.

Christoph Wilhelm Friedrich Hufeland was a German physician born in 1762, and *Makrobiotik* was his masterpiece on preventive medicine. First published in 1797, the book had eight official editions appearing during his lifetime and several translations. The organizing principle for understanding human life and health in *Makrobiotik* was the life force (called *lebenskraft*). This life force, according to Hufeland, is manifested in organic beings as the ability to respond to external stimuli. He believed that this force could be weakened or destroyed, as well as strengthened, through external influences. *Lebenskraft* is depleted through bodily exertion and increased with rest. Hufeland believed that moral and physical health were intertwined and flowing from the same life force. The concept of life force has clearly been present for a very, very long time.

Constantine Hering, one of the giants of homeopathy, was born on January 1, 1800, in Oschatz, Germany. He authored a number of

books, including *The Guiding Symptoms of Our Materia Medica*, which was based on fifty years of his research. Hering was involved with proving over ninety remedies and also founded the first homeopathic schools in the United States. Among his many contributions to the medical field were his observations of the healing process, coined Hering's Law of Cure, the way the body acts to heal itself. Hering formulated the law based on observed that the body seeks to externalize disease, noting that symptoms will surface as part of the curative process (e.g., rashes), and a person's symptoms will appear and disappear in the reverse order of their appearance upon the body. Thus, a patient might reexperience symptoms during the healing process as the body heals from top to bottom, and from more vital organs to less vital organs. Today we call this a healing crisis—when people tend to feel a bit worse before they feel better. Just ask anyone who has ever done a two-week cleanse how they felt on the third day.

At the end of the eighteenth century and the early nineteenth century, we saw the advent of several distinct natural healing fields that are also considered limbs on the tree of bioregulatory medicine. These include osteopathic, chiropractic, holistic dentistry, and elements of psychological medicine. Carl Gustav Jung (1876–1961) was a Swiss psychiatrist who emphasized the important role of the unconscious mind. Wilhelm Reich (1897–1957) was an Austrian psychoanalyst who discovered a form of energy he called “orgone” and asserted that this energy could be found within all living things and throughout the cosmos. One of Reich's books, *Character Analysis*, published in 1933, was groundbreaking. It suggested that a person's overall character, rather than only their symptoms, should be considered when diagnosing and analyzing neurosis.

Canadian-born dentist Weston A. Price (1870–1948) researched the relationship between nutrition, dental health, and physical health. Price developed the theory that systemic conditions including intestinal disorders and anemia were caused by infections in the mouth. In 1925 he published the book *Dental Infections and Related Degenerative Diseases*. Price also founded the National Dental Association and pioneered the holistic dentistry movement. It is

worth noting that medicine and dentistry were one and the same until the mid-1800s. As medicine began to demand specialists, oral care was divorced from medicine's education systems and payment systems. Today a dentist is not just a different kind of doctor but is considered another profession entirely. Of course our *teeth* don't know that they're supposed to keep their problems confined to the mouth. Still the connections proven between location of dental infection and location of organ dysfunctions, including breast cancer, cannot be ignored.

Also in the late 1800s, when allopathic medicine was looking at cancer treatment with a chemical-warfare lens, those in the bio-regulatory medicine field were discovering and using other highly effective yet nontoxic approaches. These BioMed treatments had promising and prevailing results. Nobel Prize-winning German Otto Heinrich Warburg (1883–1970) discovered that cancer cells had an altered metabolism, and were low in oxygen due to a change in their cellular respiration. Warburg's discovery is the foundation of the metabolic hallmark of cancer that is gaining major modern traction in both drug development and dietary interventions today. Around the same time, Austrian Rudolf Joseph Lorenz Steiner (1861–1925) and Indonesian/Dutch Ita Wegman (1876–1943) cofounded a spiritual science called anthroposophical medicine, a belief that everything physical is infused with and manifests spirit—the earliest hint at epigenetics. Steiner and Wegman also developed a natural immunotherapy treatment using an extract of mistletoe. The remedy, called *IsCADOR*, has been an approved and effective cancer treatment in Germany and a number of other countries for decades and is currently undergoing clinical trials in the United States. Sadly, Americans who can afford it have, to date, had to travel overseas to cancer clinics in countries such as Switzerland in order to have access to mistletoe therapy.

Finally, an American entered the scene. William Bradley Coley (1862–1936), a bone surgeon and pioneer of cancer immunotherapy, injected the *Streptococcus* bacteria into a terminal cancer patient, eliciting a high fever that subsequently dissolved an inoperable tumor. This was a medical miracle. (The healing miracle of a fever,

which bioregulatory doctors had been using for centuries.) Isn't it amazing that, even after Coley's medical miracle, Western medicine continued to suppress the power of fever with use of bioengineered immunotherapy substances? Also in the cancer realm was Josef M. Issels (1907–98), a German physician who was dedicated to treating advanced and standard therapy-resistant cancers. Known for promoting an alternative cancer therapy regimen that he named the Issels treatment, his therapies included detoxification; nutritional support; supplementation with vitamins, minerals, and enzymes; chelation therapy; acupuncture; massage therapy; counseling; oxygen/ozone therapy; vaccines; and light therapy. Issels's methods were truly integrated, natural, polytherapy, bioregulatory approaches to treating cancer and chronic illness.

What we see is that these nature cure treatments and concepts are focused on the terrain. Once we go deeper into the terrain, the wonders of the body's bioregulating systems that create and sustain life become illuminated. Successful medicine, bioregulatory medicine, is focused on using treatments that encourage the harmonious functioning and homeostasis of all these systems. In the next chapter we will discuss each of these systems and introduce a few of the diagnostics and treatments used to assess and address each one.

“An excellent book for patients wanting to get healthy based on time-tested methods as well as for health practitioners looking to expand their own practice treatment modalities.”

—Michelle Perro, MD,
author of *What’s Making Our Children Sick?*

“I sincerely hope that the future of medicine looks much more like the approach outlined so expertly in *Bioregulatory Medicine*. Imagine a world in which each person’s individuality drives the approach to treatment. . . . This easy-to-digest guide will open this whole world to you.”

— J.B. Handley, author of *How to End the Autism Epidemic*

B *ioregulatory Medicine* offers an introduction to the most comprehensive medical model for personalized medicine and the prevention and treatment of chronic and degenerative illness. In direct contrast to the mainstream allopathic medical approaches in the United States, bioregulatory medicine, which is well-established in Europe, views health as much more than an absence of symptoms or disease. Rather, good health is defined as a mode of being comfortable, balanced, mindful, and happy—a state of balance and optimal well-being that permits a person to achieve their ultimate purpose.

Using a sophisticated synthesis of the very best natural medicine with modern advances in technology, bioregulatory medicine addresses the four pillars of health—drainage and detox, diet, mind-body medicine, and oral health—in order to treat the root causes of disease and enable the body’s innate ability to heal. Forward-thinking patients and integrative practitioners will discover why this is such a popular concept around the world and find this book an invaluable resource for understanding the leading edge of integrative medicine and research.