# Objectivity of the homeopathic constitution T.V. Akaeva, K.N. Mkhitaryan

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### Introduction

The constitution, as a general medical concept, is a complex of individual, relativelystable morphological, physiological and psychological properties of the organism, due to heredity, prolonged, intense influence of the environment and manifested in reactions to various influences (including social and pathogenic), and individual characteristics of biological time. In contrast to the concept of completehuman constitution, a strict and capacious definition of the homeopathic constitution as suchdoes not currently exist. Moreover, no strict criterion is known by which one can distinguish between constitutional and unconstitutional homeopathic remedies, and even how such a criterion can be formulated in general. In homeopathy there are no objective criteria, and algorithms for choosing a drug at a given point in time for a specific patient with a complex of his nosological problems. A homeopathic remedy, chosen incorrectly and given at the wrong time, will either have no effect, or may cause real harm to the patient - interfere with the healing process in the right direction, for example, upset the body's defense mechanism, which will prevent the emergence of a clear picture of symptoms.

Another (at first glance, not related to the first!) Urgent problem of modern homeopathy is the possibility of combining it with evidence-based medicine. Without an objective (independent of the doctor's preference) algorithm for choosing a homeopathic drug used to treat a patient, such a combination is fundamentally impossible, but, therefore, it is impossible to obtain objective evidence of the effectiveness of homeopathy. Awithout combining homeopathy and evidence-based medicine, one cannot speak, on a serious level, about the justification of homeopathy as a scientific direction. In modern homeopathy, the idea of "compressing" the pathogenesis of a homeopathic remedy is relevant - highlighting the "key symptoms" of a patient (Vithulkas, Scholten, Vijaykar, Bentley, etc.) -1–4-. But none of the known ways of choosing a constitutional homeopathic remedy (CHP) - repertorization, psychological portrait, taking into account the leading symptoms or modalities - is objective. Due to the fact that the opinions of experts (different doctors of homeopaths) do not agree, there is nothing to talk about here. Artistic creativity, individualism, professionalism of the doctor is not canceled in his work with a specific patient, but all this is not an objective criterion for the correct prescription of homeopathic medicines,

## Objectives of the work:

- to develop a unified and objective (independent of the subjective views of the doctor) algorithm for choosing a constitutional homeopathic remedy;
- to show that the homeopathic preparation chosen according to this algorithm is quite effective in the treatment of various groups of nosologies;
- proceeding from this, substantiate the possibility of applying the methods of evidence-based medicine, at least to constitutional homeopathic therapy.

## Materials and research methods

To apply the algorithm for choosing a constitutional homeopathic drug and diagnostics using the ART method, a hardware-software complex (APC) was used for electropunctural diagnostics, drug testing, adaptive bioresonance therapy and electro-, magnetic and light therapy using BAT and BAS "IMEDIS-EXPERT" -5-.

4 nosological groups of patients were studied:

1. Group of patients with impaired mineral metabolism (n = 30).

- 2. Group of patients with infertility women (n = 19).
- 3. Group of patients with hepatitis (n = 30).
- 4. Group of patients with various disorders of psychoemotional status (n = 30). The patient's constitution was modeled by the KMX marker (complex marker of chronosemantics, or Kudaeva-Mkhitaryan-Khodareva marker), the sum of control signals (US) written off from the end and nodal biologically active points (BAP) of the main chiroglyphic lines (OHL) on the patient's hands using an electronic probe and equipment for the implementation of ART and BRT methods -6, 7-. This marker has previously shown its effectiveness in a number of studies -8, 9-.

In all 4 groups of patients, therapy was carried out according to the following unified algorithm, using a constitutionally oriented blood nosode and a constitutional homeopathic preparation, selected according to the formal criteria of ART.

Compared: the percentage of recovery in each of the nosological groups of patients. For statistical processing of the results obtained, the criterion was applied-\* Fisher [ten].

Terminology used in the work: informational drug that compensates for CMH during VRT measurement, that is, a drug for which the VRT criterion is fulfilled:

called constitutionally oriented using the KMX marker. Abbreviated symbol to indicate the fulfillment of this ART condition: Drug / KMH.

In particular, the electronic potency of the patient's blood autonosode (ANCr), which compensates for his CMH marker, that is, satisfies the ART criterion:

is called constitutionally-oriented (targeted) with the help of KMH, and is denoted by NANKr = ANKr / KMH.

Homeopathic medicine (GP) that meets the ART criterion:

$$KMH - + Pot-GP -, (3)$$

carried out at any values of the coefficient potentiation -is called constitutional and denoted by KGP.

## Algorithm for the preparation of therapy drugs

- 1. In accordance with the guidelines for the use of the ART method [5], was compiled complex ART diagnosis of the patient, which necessarily included an individual markerKMH.
- 2.With the help of an individual KMH marker, a targeted (constitutionally oriented) blood autonosode: NANCr / KMH. For this, in accordance with the ART criterion (2), by turning the knob of the potency regulator, potentiation of the electronic autonosode of blood was carried out, up to compensation, in its position by the potentiated autonosode of bloodPot-ANKr of the individual marker KMH:

The criterion for achieving compensation was the reproducible rise of the measuringlevel on the scale of the device up to 100 cu. when taking measurements at the measuring point. Received autonosode Pot-ANKr is designated NANKr = ANKr / KMH.

3. Objective selection of constitutional homeopathic remedies (CGP) was carried out through a pseudo-transparent marker in accordance with the ART criterion:

Earlier, in works [11, 12], it was shown that criterion (4) statistically reliably selects the same constitutional homeopathic remedies as criterion (3), but requires significantly fewer measurements.

# Algorithm of therapy

A single two-stage therapy algorithm was used in all 4 groups. At the first stage of therapy in all 4 groups, patients received NANCr - blood autonosode, aimed at KMH (this stage could last from 1 to 3 months). Note that the reception of NANKr-but usually does not lead to exacerbations, in contrast to the reception of a non-constitutionally oriented autonosode blood.

At the second stage of therapy, all four groups of patients received CHP, a constitutional homeopathic drug selected in accordance with criterion (3). The second stage of therapy lasted an average of 2–6 months, after which, if necessary, the first stage was again transferred.

The transition from the first to the second and from the second to the first stages of therapy was carried out at the discretion of the doctor, which can be considered a certain reserve of the algorithmization of the method.

In the course of therapy, the courses of prescribing KGP and NANKr-a alternated. On average, 1 month course of NANCr accounted for from 2 to 4 courses of constitutional homeopathic therapy. The combined appointment of NANCr-a and CHP to the patient was not used.

No other forms of academic or homeopathic therapy were used during the study.

In general, the patients' therapy lasted for different periods of time: from three months to two years - that is, in fact, "until the result is achieved."

Using the ART methodology and the above algorithm for choosing the CHP for therapy, each individual patient was compared with the only homeopathic remedy, moreover, independent of the subjective notions of the doctor. Thus, the patient's disease, considered in the framework of ART, turned out to be unambiguously described without the use ofstandard nosological units - instead of this, his objectively observed homeopathic constitution was indicated (for example, a persistent violation of elemental metabolism in hisorganism).

## Therapy results

The qualitative results of therapy are shown in table. 1.

Qualitative results of therapy

Table 1

Group no.	Number of patients	Number of patients with success of therapy	% of therapy success
1st group	n = 30	27	91.3%
Group 2 (women)	n = 19	16	85.2%
Group 3	n = 30	25	83.3%
4 group	n = 30	21	70%

In all four groups, the success of therapy ranged from 70 to 91% (p  $\leq$  0.01) for various nosological groups to which the patient belonged. At the same time, using the Fisher - \* criterion, it was not possible to find a statistically significant difference between the percentage of therapy success in different nosological groups, that is, the percentage of therapy success actually did not depend (weakly) on the nosological group to which the patient belonged.

Note also that when test indicators of elemental metabolism are used as preparations from which the CHP was selected, in 91% of cases (for all 4 groups) the CHP selected in accordance with the described algorithm coincided with the residual, i.e. the most stable violation of elemental metabolism, manifested after two months of therapy with blood autonosode at its first stage.

Thus, the research data show, in particular, that if we restrict ourselves to the quality constitutional preparations only with potentiated elements (mineral range), thenthe concept of CGP is objective since this drug is simply a marker of the moststable violation of elemental metabolism, against the background of system-wide therapy (in ourresearch - constitutionally oriented blood autonosodeNANCr = ANKr / KMH).

## Discussion

The main question that the authors posed in their research was the question of how important nosology is for choosing a patient's homeopathic therapy. Two different hypotheses can be formulated:

Hypothesis 1. Different nosologies are not manifestations of a single pathophysiologicala process in the patient's body described by his homeopathic constitution. We can also assume the complete absence of a homeopathic constitution - then any pathophysiological processes in the body will simply not depend on it. In this case, we can expect that the  $success\ rate\ of\ constitution ally\ oriented\ therapy\ depends\ significantly\ on\ the\ nosology\ we\ are\ treating.\ Indeed, if\ the\ pathogenesis\ of\ nosology\ is\ close\ to\ the\ homeopathic$ constitution, then the cure rate will be high. If the pathogenesis of nosology is far from the patient's homeopathic constitution, then the percentage of cure, on the contrary, will be low. If hypothesis 1 is fulfilled, there is a number of nosologies, the pathogenesis of which are initially far from any constitutional manifestations, for example, diseases caused by external agents - viruses, bacteria or fungi - and, on the contrary, a number of nosologies, initially close to constitutional manifestations - for example, metabolic disorders. It is obvious that treatment with the help of constitutionally oriented therapy for nosologies that are not related to constitutional manifestations will give a low percentage of cure, while the same therapy, carried out in relation to constitutionally determined nosologies, will, on the contrary, give a high percentage of success. Moreover, this pattern will manifest itself regardless of what kind of constitution is revealed in the patient. Consequently, with constitutional treatment of patient flow, there will be significantly different success rates depending on the nosology. with the help of constitutionally oriented therapy for nosologies that are not related to constitutional manifestations, will give a low percentage of cure, while the same therapy, carried out in relation to constitutionally determined nosologies, will, on the contrary, give a high percentage of success. Moreover, this pattern will manifest itself regardless of what kind of constitution is revealed in the patient. Consequently, with constitutional treatment of patient flow, there will be significantly different success rates depending on the nosology, with the help of constitutionally oriented therapy for nosologies that are not related to constitutional manifestations, will give a low percentage of cure, while the same therapy, carried out in relation to constitutionally determined nosologies, will, on the contrary, give a high percentage of success. Moreover, this pattern will manifest itself regardless of what kind of constitution is revealed in the patient. Consequently, with constitutional treatment of patient flow, there will be significantly different success rates depending on the nosology. Moreover, this pattern will manifest itself regardless of what kind of constitution is revealed in the patient. Consequently, with constitutional treatment of patient flow, there will be significantly different success rates depending on the nosology. Moreover, this pattern will manifest itself regardless of what kind of constitution is revealed in the patient. Consequently, with constitutional treatment of patient flow, there will be significantly different success rates depending on the nosology.

Hypothesis 2. Various nosologies are manifestations of a single pathophysiologicala process in the patient's body described by his homeopathic constitution. Then, on the contrary, one can expect that the success rate of constitutionally oriented therapy does not depend on nosology. Indeed, in this case, the percentage of therapy success will depend on the degreethe similarity of the pathogenesis of the selected drug and the homeopathic constitution, but not from the degree of similarity of the pathogenesis of this drug to the particular nosological manifestations of the patient.

The research data testify in favor of the second of the stated hypotheses - different nosologies of the organism behave as manifestations of a single homeopathic constitution in it. Hence, an important, albeit unexpected from the point of view of orthodox medicine, conclusion can be drawn: the evidence base for the effectiveness of constitutionally oriented diagnostic and therapeutic algorithms (that is, algorithms based on the identification and compensation of the patient's homeopathic constitution) can be collected without taking into account academic nosologies, for example, ICD-10. Indeed, in the case of constitutional orientation of the algorithmthe percentage of therapy success does not depend (or weakly depends) on the specific nosological manifestation of the patient's constitution, but only on the quality of its identification and compensation. This gives an understanding that no matter how surprising it may seem, it can be summarized in the evidence base for the effectiveness of a constitutionally oriented algorithm for a group of patients with different nosologies. Thus, within the framework of the new - constitutionally oriented - paradigm of diagnostics and therapy, patients from different nosological groups can be considered as one group.

#### Conclusions:

- 1. Found and developed algorithm for choosing constitutional homeopathic drug allows to objectify the concept of homeopathic constitution.
- 2. The efficiency of the presented algorithm for the choice of the constitutional homeopathic medicine averages from 70–91% ( $p \le 0.01$ ) in various nosological groups.
  - 3. The success rate of therapy does not depend on the nosological group to which it belongs.

patient, which allows us to talk about the possibility of constitutionally substantiating homeopathic therapy by evidence-based medicine.

## Conclusion

Constitutional homeopathic medicine objectively exists. Constitutional therapy should be included in the category of methods studied by evidence-based medicine.

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Akaeva, T.V. Objectivity of homeopathic constitution / T.V. Akaeva, K.N. Mkhitaryan // XXII International Conference "Theoretical and Clinical Aspects of the Application of Bioresonance and Multiresonance Therapy". - M .: IMEDIS, 2016 .-- P.30-36.

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