
Therapies in changing times — ideas on a complex concept in bioresonance therapy

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1 INTRODUCTION

„Sit before the facts like a small child and be willing to give up all preconceived opinions, follow nature humbly, wherever it may lead you and whatever abysses you may encounter, because otherwise you will learn nothing.“

Let us regard this statement which refers to an ideal world that is difficult to understand without comment. We will come back to it at the end of this paper.

In Eddington's parable, which is about life in the ocean, science limits itself to fishing and uses a net with a defined mesh size of five centimetres. Careful checking always produces the same result, namely that all fish are larger than the mesh size. Put differently, whatever is not caught is not a fish'. Science seems to have its limits wherever objectivity ends. Must we as therapists understand everything, or is it just that we don't want to admit whatever we don't understand, because we ourselves are limited?

In „God, man and science" Wm (1997: 36) writes: „One needs byways in order to find something new.“³ For this, total objectivity and a profound recognition process are necessary. „Like immaterial things, people are inconsistent, unreliable, unpredictable, but that is why we are creative.“⁴

T. H. Huxley in Talbot 1992: 21

² Diirr 1999: 30

³ Dun 1997:36

⁴ Diirr 1997: 682 THERAPIES IN CHANGING

TIMES

Twenty years of bioresonance therapy (BRT) contributed greatly to revolutionary new methods in diagnosis and therapy. The discovery that the body provides all burdening and interfering information resulted in different therapy systems.

Dr Morell and Dr Schumacher developed a system for diagnosing and treating allergies, Sissi Karz uses the body's own substances and Martin Keymer established the Cross-linked Test Technique. The ways of using these systems are complex, but every system has its own method.

3 ASPECTS OF A COMPLEX CONCEPT IN BIORESONANCE THERAPY

Multifactorial burdens and new clinical pictures resulted in new kinds of specialists and further subtypes in traditional medicine that reduced human beings into component parts like a machine. Holistic medicine, however, teaches us that body, mind and soul form a unit. The evaluation of clinical pictures by specialists often results in imprecise diagnoses. Eddington's parable can be applied in this case, too. „Fish that cannot be caught are not fish". If this allegory is freely interpreted, it means: Everything that is not found because no one looks for it, does not exist.

Diagnosis is the key to successful treatment. It should, however, not only mean „recognition and naming of diseases“⁵. I believe that this definition contains too few positive elements. My understanding of diagnosis covers the assessment of physiological structures for pathogenic burdens. Only in this way are assessments of a patient's

⁵ Pschyrembel 1990: 350

state of health possible. I believe the definition of the term „health" covers the following:

- the total unity of all physical, mental and psychological functions
- the maintenance of this unity (prevention)
- the control of possible interference factors (disease)
- the approach to the ideal state (therapy).

Following these basic principles, bioresonance therapy is not a modern specialist subject field, but offers clear diagnosis and therapy whatever the multifactorial burdens. The advantage of BRT lies in the evaluation of the entire system of somato-psychogenic functioning. Determination of the therapy steps follows precisely and fast.

3.1 Case studies

- Girl, aged six, restless, cannot fall asleep
Burden: hereditary TB and tuberculosis vaccination
- Man, aged 30, during the past 12 years diarrhoea caused by foods
Burden: salmonella, ascarids, metabolic toxins
- Woman, aged 20, serious hair loss (by the hand full) during the past months
Burden: anaesthetic (2 operations within 5 days)
- Man, aged 73, aneurism of the stomach aorta, serious weight loss within the past 2 years, aversion to meat and sausage
Burden: tapeworms, metabolic toxins, amalgam
- Baby, aged 8 months, serious generalised neurodermatitis since the second week
Burden: tapeworms, hereditary TB

This collection of examples should be enough for a start. Now the time comes for the therapist and his detective work. At first glance these cases are very different but they have a common denominator: Behind each clinical picture is a cause, a triggering mechanism. The person involved does not know the cause. I assume this also of those therapists who do not use bioenergetic test methods. I believe that this is the reason why diagnoses are often wrong. We know from everyday experience what consequences wrong diagnoses have for the patient. Definite diagnosis is the key to success for the patient as well as for the therapist.

3.2 Reasons for my own method

My personal goal to be able to find the cause of diseases and clinical symptoms was reinforced by a statement by **Dun**: „Every event has a cause and is also the cause for the next event."⁶ I hoped to find proof of this basic causal principle via BRT.

My training with Sissi Karz and Martin Keymer — two brilliant researchers to whom I owe much — gave me an insight into different treatment systems. True to the motto of Karz „ask the body, since it tells you everything" and „test whether your assumed first therapy step is necessary", I trained myself in seeking priorities via kinesiology. Following the causal principle „everything has a cause", I recognised the limits of these therapy systems very soon. At first I was disappointed about my failing, and then I tried to combine the systems of Karz and Keymer. Because for me, diagnosis is the most important goal.

3.3 Criteria for assessment

The most important question in putting into practice my idea of a complex concept was whether the combination of Karz and Keymer's systems were possible. The usual treatment steps are basic therapy, subsequent treatments based on meridians or indications and finally stabilisation of the structures in the 5-elements test set.

Never forgetting the doctrine of Karz, I tried to answer the following questions via my test results:

- Is there a trigger behind every clinical picture and how can it be discovered?
- What importance do anamnesis and previous traditional medical findings have?
Do they lead me on the wrong track or has the patient inadvertently forgotten something important about his illness?
- Do wrong diagnoses result in wrong treatment which damages the patient?
- Taking into account general validity and the time at which the test was done, how should the test results be analysed?
- Can natural laws be derived from the burdens, and, consequently, necessary complementary therapy steps and possible therapy settings?
- Which burden has priority from a therapeutic viewpoint?

⁶ Dun 1997: 56

- Should every tested burden be treated?
- Are there hidden burdens that do not show up in the test at this time?
- Is every guiding symptom caused by the same thing?
- Which therapeutic combinations are possible and useful?
- How can I save valuable time for diagnosis?

This selection of questions, which is the result of a whole series of tests, should explain to some extent what importance complex bioenergetic diagnosis with resulting therapy has for the evaluation of the state of health.

Especially in the case of multifactorial symptoms, the traditional initial examination using test ampoules takes up much time. But without test ampoules diagnosis is impossible. We often trust the anamnesis since we cannot test all ampoules. The results of the anamnesis and of the test ampoules usually point to interference factors of the intestinal lymphaticum. But how do we know that the tested burden should be treated immediately?

The clarification of these questions has helped me to come nearer to my personal goal to find the cause of diseases. Our remarks should not be understood to cast in doubt what has been learned up to now, but rather they should

- make us aware without making us uncertain
- show that the bioenergetic test method does not form a rigid system
- help us to let go of preconceived opinions
- show that the therapist is only the connection between patient and Bicom instrument.

We as therapists must consider the needs of our patients and should not be seduced to fall back on preconceived judgements and therapy steps without testing beforehand.

3.4 Therapy concept

I will now illustrate how a complex concept looks or functions which integrates the systems of Karz and Keymer as well as diagnosis using test ampoules according to the Karz's principles. „By-ways" resulted in this complex concept. The question of priorities should never be forgotten. It should result in clear answers to central burdens that must be treated. The therapist can derive the necessary therapy steps from these. The results of kinesiological testing can therefore only be „yes", „no" or „partially correct" (indifferent).

Traditional medication therapy does not treat

the true cause, but only the symptoms. It is well-known from scientific pathology that therapeutic measures were often wrong, because the diagnosis was wrong. Guiding symptoms like joint problems, headaches, nausea, inflammation, etc. unfortunately do not help one find the trigger. Thus anamnesis, often, is not very helpful in identifying the cause. Often it even misleads one. A therapy concept based on anamnesis therefore also shows gaps. Only the patient's energetic structures can give clear facts on the central burdens to be treated.

This thesis explains how a therapeutic concept can be decided on only via testing of priorities. Anamnesis and the suspicions of the therapist should be verified by the verity of the real causes. Each patient is an individual. Therefore every patient should get unique therapy depending on the needs of his bioenergetic structures. Every case is different therapeutically, however similar it would seem to others and therefore needs an individual specific therapy.

Each treatment session should begin with the question: „Is therapy useful today?" Reasons for not treating the patient are pregnancy, the reactive situation according to the organ clock or e. g. overstimulation through too much therapy. To find multifactorial burdens and the necessary therapy steps implies spending valuable time on testing. As regards priority, there is only one correct answer if the question is precisely formulated. Differentiation into states like acute, chronic, inflammatory, toxic, focal burden, dental burden and allergic burden or psychic irritation soon leads one to the corresponding test set of the Cross-linked Test Technique. The substances in it can then be tested as usual via electroacupuncture or biotensor for resonance behaviour.

Based on the request to find causal burdens, one should keep in mind that the patient needs a basic therapy, a therapy programme according to Karz or an individual programme to improve the reactive situation.

If a suitable Bicom programme is used to save time, the individual parameters should be tested carefully. Each patient is an individual. In the same way the kind of electrodes, their application (placement) and the number of inputs and outputs should be verified. At the end of each therapy step one should evaluate whether the therapy step has ended and which one (if any) should follow.

If the treatment session has been concluded for the day, the question on the date of the next treat-

ment session should be answered. The basic tenet is: The more acute the symptoms, the shorter the time lapse between treatments. In the case of deep-seated chronic burdens, like hereditary toxic burdens, old or inborn heavy metal or metabolic burdens, a time lapse of several weeks is not unusual.

Accompanying medication (vitamins, minerals, etc.) is often unnecessary at the beginning of treatment.

A few remarks on possible natural laws can be derived from testing according to priority.

Bioenergetic testing shows the present state of the energy system as well as pathological areas at the time of testing. This means that burdens which cannot be tested at this time may be relevant to therapy at a later stage.

It is crucial that the central burden be dealt with. Not all symptoms should be treated, even if several treatments are necessary.

According to the principle of biological half-life, which expresses „after which time half of a given amount of an incorporated substance is naturally excreted" a bioenergetic therapy step is always an intervention in the existing if restricted basic regulatory system, and this step starts reactions. The patient should be told of possible initial deterioration. In treating patients the main precept for therapists is to accompany the patient through his clinical picture. Of course all patients must be told of the importance of the „Therapeutic House" (correct diet, sufficient fluid intake, paraffin free body care, healthy sleep, enough exercise, harmonious psychosocial milieu). The treatment of chronic diseases takes time and patience. Successful therapy cannot be forced, either by the patient or by the therapist.

4 CRITICAL RECOGNITION

„Byways" and brilliant teachers have contributed to the fact that the possibilities of extended diagnosis using Bicom technology for the evaluation of causes are diagnostically most important and therefore simplify the therapeutic approaches substantially. Evaluation of the total system should be our goal, not looking for detail (treatment of symptoms).

In view of an extended complex Cross-linked Test Technique, the test technique should be trusted and the test result accepted, however awkward

Pschyrembel 1990: 644

and strange it may seem at first. In objective testing the result will be correct.

To follow new paths can only mean that one should be open to innovative ideas and not classify them as wrong from the beginning. This discovery should be taken up, and therefore it is necessary to test causality, priority and the optimal therapy setting. Wrong results should be impossible in a complex bioenergetic test method.

BRT seems to contain application possibilities which were not suspected up to now. Let us be willing to give bioresonance therapy the international status it deserves in our eyes on account of the proven diagnostic and therapeutic successes (cures) via our work without sparing time and energy.

The way something should be „experienced" (which Huxley points out in the words quoted at the beginning of this paper), should be discussed again at this point. As grown-ups we have forgotten the ability to wonder. Huxley reminds us of this for our confrontation with the facts.

- Let us do tasks with wonderment, with open eyes, with curiosity.
- Let us avoid known paths or patterns (each patient is an individual) and let us open ourselves up to new and unknown things.
- Let us turn to nature in respect and trust, even if this leads us into almost impossible territory.

Only in this way will we experience new things, and make new findings — especially with BRT.

Let us search for new possibilities in co-operation. Let us use the ideas listed here for the good of our patients.

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