

PHARMACODYNAMICS OF DYNAMISED MICRO-IMMUNOLOGY Isopathics & Biotherapics*

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One of our teachers, Paul Langevin teaches us that it is necessary in all scientific researches, to start from the empiric, from observation of phenomena in order to try later on to interpret them and to return to practice with the aim of an experimental verification.

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In the present state of our medical knowledge it is immunology which may help us to understand the mechanism of action of Isopathy.

Immunology is defined as the study of humoral and tissulo-cellular reaction of the organism in response to its environment.

Immunotherapy is its practical consequence and is transformed among others into vaccinotherapy.

The immunologic mechanism is described as an antagonism, an antagonistic conflict between *antigen-antibody*, these two units forming a *contradictional unit*. Antigen or immunogene is generally, a substance foreign to the organism and it is the "possession of a lymphoid system, related to the sanguin and lymphatic circulation which helps the organisms of vertebrates to respond, to react in a specific manner to the aggression" (G. L. Daguet: *Element d'immunology medicale*, 2nd ed., Flammarion, 1972).

The antibody "is protein synthesised in a living organism under the influence of an antigenous stimulation" (G. L. Daguet *loc. cit.*).

Thus specified, the conflict antigen-antibody may provoke two kinds of response of the organism:

(a) A protective effect which is at the basis of the sero- and vaccinotherapy and our dynamised micro-immunotherapy with our biotherapics (ex-nosodes) and isotherapics.

(b) A pathogenous effect which may be direct or indirect, direct: by a cellular lysis—hemolysis type; *indirect*: by a series of immunopathological mechanisms—anaphylaxy and allergy types.

It follows that there exists a complex process of interaction between the virulence of the foreign substance (micro-organism or others) and the mechanism of resistance of the host.

* Authorised translation from the original French from *Traité de dynamised Microimmunotherapy* by Dr. Rajkumar Mukerji, M.A., L.H.M.S., Hooghly.

* Biotherapics or ex-nosodes: At present no homocopathic medicines are sold as nosodes, according to the pharmaceutical law in France. The new name of nosodes is biotherapics.

This host, it is the *morpho-genetic* condition of the organism, which is called by the name 'ground'.

Thus, we have described the essential constituents of immunology.

It is in this context that we should try to elucidate the mechanism of action of Isopathy and of the biotherapies and isotherapies.

We are indebted to H. H. Reckeweg who has undertaken a biochemical study of the disease and immunological reactions of the organism to the aggression (Dr. med. H. H. Reckeweg: *Homotoxicologie: Ganzheitschaw einer Synthese der Medizin*, Aurelia Verlag, 1975).

According to this author, from the biochemical point of view, the phenomenon disease should be studied as the reactional expression of the organism towards 'homotoxins' or 'anthropotoxins' exogenous or endogenous.

Homotoxins (homo-man, human) or anthropotoxins, the pathogenous agents, are capable to provoke in the human organism some patho-physiological actions and pass through a series of six phases, viz: (1) Excretion phase, (2) Reaction phase, (3) Phase of precipitation or of 'deposition', follows a phase of cesura or *biological break* and ends in the phases of (4) Impregnation, (5) Degeneration and (6) Neoplastic syndrome.

The first three phases are humoral having the excretion function, with reserved even unfavourable prognosis, and requires a gross biotic substituant therapeutic. Such is in bold outline drawn the picture of pathophysiological process in consideration of its biochemic action according to Reckeweg.

We are now going to take up the problem of biotherapies and isopathies.

Reckeweg describes the reactions of the organism under the form of "the system of the mass defence" rather according to us *contradictional reactional process* of the five mechanisms that are its expression:

(1) The reticulo-endothelial system of Aschoff, responsible for the production of antibodies and the function of accumulation and of deposition of toxins.

(2) Hypothalamo-hypophyso-cortico-suprarenalian axis. It induces in a greater part the reactional phase of the mesenchyma.

The stimulation of this axis caused by the toxins provokes secretion of corticoids to the direction of inflammatory zone and the contradictional process, the secretion of cortisone which opposes the inflammation.

This corresponds to the syndrome of adaptation of selye.

(3) With the neuro-humoral reflex system of Speransky Rcilly we have the third form of reaction: It is the sympathetic-parasympathic antagonism.

It corresponds to irritation syndrome of Reilly and excitability of the neural receptors by a toxin may be shown experimentally by a dilution going up to 10^9 .

The therapeutic action of biotherapies as well as of homoeotherapies is placed in this process.

(4) The fourth process intervenes with the *detoxicating function* of the liver.

The liver is the origin of the formation of antitoxins in the form of enzymes and here intervenes similarly the neutralisation of acids and of exo- and endogenous toxins.

(5) Finally comes the action of connective tissue with the formation of leucocytes and the antigen-antibody reaction.

These are the cellular formations: fibrocytes, reticulocytes, histiocytes, that participate to the analysable chemical substances which are reflexological reactions and reconstruction of tissues.

The connective tissue has at present three essential characteristics:

It intimately participates in the pathology of organs in the constitution of which *it is deeply integrated*.

There is the deposit of toxins in the form of homotoxin (formed by two toxins neutralising each other) and the seat of inflammation as reactional process towards the reconstruction of the normophysiological.

Finally it has a pathology, *etiologically specific* and its own clinical and evolutionary forms which is called 'connectivities'.

But it is on the level of inflammation processes that Reckeweg tries to detect the action of the biotherapies.

According to homotoxicology, the inflammation is a process of drainage of homotoxins. The inflammation then according to the author will have a useful biological action and that may be induced by the biotherapies in an *anti-homotoxic direction*.

Thus the therapeutic action of biotherapies is understood by the intermediary of the mechanism of inflammation.

Inflammation is expressed by the well-known rubor-tumor-calor-dolor (redness-tumefaction-heat-pain) and which has for its biochemical respondent, by the action of different factors, notably histamin, acetylcholin, noradrenalin, also porphyrin and other intermediary homotoxins.

At this stage the components of albumin (peptides and polypeptides) following the enzymatic action of hyaluronidases, play an important pathogenetic part.

If the development of the acid phase is blocked by an intempestive therapeutic intervention, there will result a contrary reaction, which is alkaline, which checks or stops the fermentation activity of hyaluronidases and instead of the hydrolysis reaction there is formation of untamed peptides which are the extremely toxic synthetic products, particularly antigenic.

The patho-physiological development of inflammation implicates an acid reaction and hyaluronidase enzyme contribute to the hydrolysis as well of the intercellular substance as of homotoxins in order to end their elimination.

The elimination of homotoxins is done through the vessels of *lymphatic system*.

If the quantity of homotoxin in the connective tissue is very much important the action of hydrolysis of the hyaluronidases is at fault.

The completion of this hydrolytic action is useful and necessary to open

the mechanism of elimination of homotoxins which will be the work of the bacterias.

Thus the strepto-staphylo-meningo-pneumo and gonococcus and many others intervene by their power of production of hyaluronidasic enzyme. At this stage, the *non-antagonistic part*, biologically useful to bacterias decisively contribute to the hydrolysis of the connective tissue but, being antagonistic process they prepare in this manner for themselves the ground offering them the best condition of life.

Here one will understand fully the significance of the famous phrase of Claude Bernard: "*the germ is nothing and the ground is everything*" because this homotoxic ground is in fact an excellent bouillon of culture for the microbes.

The rejection of homotoxins by the connective tissue in the state of hyaluronidasic hydrolysis and bacterial phagocytosis are the normal processes of the evolution of the inflammation and is manifested in the form of elimination of pus, mucositis, and other rejections.

A blockage has for its consequence a re-intoxication.

By the *sudden change* of the biochemic milieu a patho-physiological phase of excretion is suddenly transformed into a phase of impregnation, otherwise injurious.

This sudden change is the result of antibiotic treatment of chemotherapy and shows if required the necessity of a biotic intervention by the help of biotherapics, isopathics, and homoeotherapics and others.

The re-toxic impregnation, resulting out of a suppression of a patho-physiological process, means that the toxic element, such as the untamed peptides, the endotoxins of the bacterias and the chemo-antibiotics cause a sudden hyaluronisation (phenomenon of a sudden start) of connective tissue.

This reaction results from the biochemic point of view of the *sudden change* of the acid into basic reaction and the sudden cessation of hyaluronidasic activity.

It will be the work of biotherapics to induce the therapeutic effect in view of the elimination of the untamed peptides or to reabsorb the blockages caused by the same injurious peptides.

This reaction is concreted by the appearance of the antigen—(untamed peptides) antibodies contradictional unity.

Such polypeptides are found in different pre-clinical stages.

Thus after a severe stage of influenza treated by toxic medicines, the untamed polypeptides supervenes either by precipitation or by hyaline sedimentation in the tissue formerly inflamed either as pulmonary infiltrate which is reabsorbed or condensed during a pneumonia treated by antibiotics.

Face to face with them the organism forms some antibodies which are auto-antibodies.

These auto-antibodies have a contrary action towards the peptides which are untamed that have analogous protein structure.

But their injurious action goes equally to manifest itself against the cells of the organism.

Let us cite: The lesion of hepatic parenchyma entrains some troubles in the hepatic cells; the lesion of renal parenchyma with massive proteinuria or glomerulo-nephritis; lesions of muscles of the heart may cause a degeneration of myocardia, of the arteries with thrombo angitis; of the thyroid, of the brain etc.

Thus an auto-immune pathological chapter sees light.

On this sphere the rôle of biotherapics intervenes.

The organism cannot by itself eliminate by its own means the untamed proteins even by the formation of antibodies often marked more and more by the molecules of sulfonamides, antibiotics, febrifuges etc. . . .

In order to help the formation of specific antibodies against the peptides, one intervenes in the form of specific stimulant one or some biotherapics (ex-nosodes) or rather a chemotherapy or diluted and dynamised allergens.

This is what Fortier Bernoville has expressed as specificity and immunity.

There will intervene equally the action of biotherapics, organotherapics or hormonotherapics opposing the secondary action of auto-antibodies situated on the liver, kidney, heart etc.

Experience shows that the dynamised biotherapics have an action, *protective* or reparative against the deep lesions consecutive to the action of these antibodies.

There are cases where the organism has lost control on its auto-antibodies. These auto-antibodies wear, we may say the 'same uniforms' as the protein proper, and it results that they are not recognised by the organism's own 'system of mass defence'.

The tendency of the organism is to react against the destruction caused by these auto-antibodies and it can be made easy, thanks to the action of biotherapics (ex-nosodes).

The biotherapics direct at the time their action against the disease of antibodies because they contain the *simillimum*.

They have an exciting action on the system of mass defense by inducing an analogous reaction against certain toxins that are similar to those against which the organism already defends itself but insufficiently under the form of diseases of the antibodies.

Thus, it is now being more and more discovered that many diseases like erythrodermatosis, nephrosis, myocardosis, agranulo-cytosis etc. are consecutive to the sudden suppression of the acute inflammation and to the formation of auto-antibodies.

The biotherapics possess in their structure a part *analogous* to these substances which are in the origin of these diseases.

The latter is characterised by the absence of an analogous substance for forming antibodies before neutralising the auto-antibodies.

Then it becomes understandable the mechanism of action of biotherapies and homoeotherapies, which by a specific mini-excitation activates the system of mass defense.

But from the fact that many homotoxins may participate in the process in course, the use of many biotherapies or homoeotherapies find from thence their biological justification.

The mechanism of action of biotherapies and homoeotherapies seem to have found by enzymology a new scientific dimension.

As for example, when a carcinotoxin such as Methylcholantrene is injected in the peritoneum of a rat a neoplasm is formed.

If now the same substance is injected in the form of a dynamised dilution in 3 or 4DH the curative effects are seen, as it is proved by the experiment of Connay & Burns (*Medizinische Klinik*, 59, 48, p. 1811, 1964).

The injection of 3 or 4DH of Methylcholantrene in 0.1 to 1mg for 1mg H₂O in the peritoneum of the rat helps to observe the formation of an enzyme on the liver, which is susceptible to detoxicate other carcinotoxins as for example 3-Methyl-4Methylamino-Azobenzol (the yellow colouring of butter).

There we find an analogo-therapeutic proof, biotherapeutic, homoeotherapeutic or hormonotherapeutic or a carcinogenous substance with which we may determine, in dynamised microbes, some anticarcinogenous action, specific or analogous against other carcinogens.

According to Reckeweg as we have explained above, the disease is the expression on biochemic level of the reaction of the defense of the organism against the homotoxins.

Because we do not know always the exact homotoxin which is in the origin of the defense of the organism a similar or analogous toxin is used in the form of biotherapies to direct the therapeutic effect against the analogous homotoxins that possess the same biochemic receptors as that of these homotoxins.

Because all the biological reactions are conditioned by analysable chemical substances which are even the foundation of homotoxicology.

It is therefore necessary to search for these homotoxic substances for discovering the relations of the disease and the remedies that cure it.

It follows then that the therapeutics by analogy contributes to the regeneration of blocked enzymes which may be verified by the change of the homotoxic phase.

If we are face to face with a degenerative phase following the enzymatic deterioration (as for example in the case of an antibiotic treatment) after the administration of an analogous, biotherapeutic or homoeotherapeutic*, the enzyme may be normalised.

* Homoeotherapy: According to the author Homoeopathy or Homeopathy being composed of two Greek words homoios & pathos, does not suggest anything about any therapy, i.e. any treatment of disease. But as it is introduced in the dictionaries and has become current it may be maintained. Homoeotherapy will be a better term

The enzyme begins anew their function, which has for its consequence to make effective again the whole system of mass defense and there comes the process of detoxication.

This is observed in the processes of regressive vicarisation in the inflammation where organism liberates itself again from its homotoxins.

There is therefore every ground to induce the functioning of the system of mass defense of the organism by the analogical medicines in order to put anew into work the enzymatic process and thus assure the detoxication.

In order to realise it one should take the help of biotherapies.

The concept of homotoxicology and of homotoxins helps thus to establish the scientific foundation of biotherapies on biochemical basis.

which will not give any reason for wild criticism. But even with the word Homocotherapy the author is not satisfied because it limits the field of *similia similibus curentur*. He gives a new name: Homoeopathic Concretology.—R.M.

EDITORIAL

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This was the *guru-mantra* which the professor was trying hard to put through to his students. But alas! how many could understand it? Truly it is said, that knowledge cannot be taught, but can be learnt.

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