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Tagungsbeiträge

Abstracts der Poster der Jahreskonferenz der Medizinischen Sektion am Goetheanum, Dornach 12.–15.9.2019 (Teil 2)

1 | Neurosciences and Anthroposophic Medicine: A protocol presentation

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Question: The neurosciences describe the perceptual phenomenon, mapping its processes in the human body in health and pathological conditions, being an important tool for clinical investigation and medical treatment approaches. The anthroposophic medicine, with scientific spiritual methods, allows a qualified biographical and body therapy approaches, improving the health. It includes, in this integrative system, medicines that consider the common evolution of human and nature. Based on this knowledge, this paper describes a clinical protocol that join neurosciences and the integrative system of anthroposophic medicine, taking in account the body, mind, soul and spirit interaction. These practices are currently developed at the Clínica de Neurodiagnose & Neuroterapêutica, Jundiaí, SP, Brazil, since 1994.

Tab. 1: Organs manifestations: revitalization currents

| Organ | k | Fear | Depression | Metal |
|--|---------------------------|------------------------------------|---|---------------------|
| <i>Lung</i> Connects body and soul, world and self | Physical organ <Earth> | Fear of world | Obsessive alterations Melancholic temper | Mercurius Ferrum |
| <i>Liver</i> Actions, decisions Interiorizes action of the self over the substance (carbohydrates, proteins) | Vital organ <Water> | Fear of life | Typical depression Abulia, indecision, doubt | Stannum |
| <i>Kidney</i> Changes of mood Humor Reactive impulse | Animic organ <Air> | Fear <<organic <<pathophobia | Inertia, gravity (weak renal irradiation) | Cuprum |
| <i>Heart</i> Judgment Sense of life Enthusiasm Balance SNS/SMM | Spiritual organ <Fire> | Fear of death | Destructive depression Loss of the meaning of life | Aurum |

Tab. 2: Perceptive balance: sensorial forces

| Member of human constitution | Volitional or lower senses | Senses related to feelings or intermediate | Cognitive or upper senses |
|------------------------------|----------------------------|--|---------------------------|
| Physical | Touch | Olfaction | Hearing |
| Etheric | Vital | Taste | Word |
| Astral | Motion | Vision | Thought |
| Self | Balance | Thermal | I-sense |
| | Physical | Animic | Spirituals |

Materials and methods: The team of the Clínica de Neurodiagnose & Neuroterapêutica apply the following anthroposophic therapies: rhythmical massage, Pressel massage, quirophonetic, biography work, curative education, psychotherapy, as well as biodynamical craniosacral therapy, neuropsychology, physiotherapy, and phonaudiology. Our protocols care surgical and clinical neurological diseases follow the cognitive, motor, and emotional clinical manifestations, as well as

autonomous symptoms added to the psychogenic influences. This approach improves the balance of sensorial forces and organ revitalization, focusing on the manifestations that require more care.

Results: Tab. 1 and Tab. 2 summarize the main protocol of the clinical routine.

Conclusion: This work highlights the relevancy of the approaches body-mind, cause of the diseases, and preventive health practices, considering the need of integration in medical care.

Tab. 3

| | |
|--|--|
| 1. Abdominal cramps 2. Nausea 3. Exocrine secretory problems including corneal and skin dryness 4. Epilepsy 5. Asthma 6. Panic 7. Nightmares 8. Soul shocks, panic attacks, fears in mid childhood 9. Dysfunctional teenagers in search of autonomy 10. Loosing centre (psychologically) | Directly confirmed by bibliography |
| 11. Diarrhoea 12. Emetic 13. Addiction, substance abuse, alcoholism and self-harm 14. Low self-worth, borderline personality disorder 15. Polluted soul states – depression – (homeopathic like treating like) 16. Fear of darkness – connection to pineal gland 17. Truth serum (allopathic) 18. Stagnation or blockage in CNS “carrying energetic imprint of blocked kundalini” (homeopathic) | Indirectly or possibly supported by bibliography |
| 19. Bending too much forward or backward and adolescent spinal deformities | Unconfirmed by bibliography |

2 | Researching the potential therapeutic action of medicinal plants using a post-reductionist method

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Question: Can a research process based on observation, picturing the plants development over time and the observers' subjective feelings lead to hypothesis of the plant's medical value which are confirmed by traditional, conventional pharmacology and anthroposophic literature?

Material and method: A plant is chosen by the facilitator, which is known to have medicinal properties, but which few participants are likely to recognise. The identity and use of the plant are kept secret till stage 5 of the process below is completed. The size of the group is usually between 4–18 participants. The plant is readily available growing wild or in a medicinal herb garden close to the training venue. Summary of the method's steps:

- Step 1: Exact observation of the plant. – *Spatial, physical description.*
- Step 2: Creating a moving picture of the plant's growth process over time. – *Time “Gestalt”, life organisation.*
- Step 3: Noting the subjective feelings or mood evoked by the plant – describing the plant's “personality”. – *“Soul” level.*

- Step 4: Distilling the essential qualities of the plant. – *Ontological, essence level.*
- Step 5: Considering hypothetical medical indications for this plant assuming the above qualities could be “administered” to a patient. – *Hypothetical indications.*
- Step 6: After learning the name of the plant, consulting traditional and conventional medical literature and tabulating indications. – *Bibliographic indications.*
- Step 7: Examining the hypothetical indications and comparing them with those listed in the literature to see which are “confirmed” and which are not. Estimating the proportion, that is “confirmed”. – *Assessment of results.*

Results: For tabulated hypothetical indications from a study of Henbane *Hyocyamus Niger* and their bibliographic confirmation or non-confirmation see *Tab. 3.*

Conclusion: This research process on the therapeutic properties of medicinal plants appears to produce hypothetical medicinal conclusions which are to a high proportion substantiated, not only by traditional herbal literature but also by conventional pharmacological literature.

References

- 1 Evans M. Researching the potential therapeutic action of medicinal plants using a post-reductionist method. *Journal of Holistic Healthcare* 2019;16(1):54–59.

3 | Supportive mistletoe therapy in a patient with metastasized neuroblastoma

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Purpose: Complementary therapies are increasingly applied in pediatric oncology. The impacts of supportive mistletoe therapy on quality of life, performance and course of disease are presented and discussed by means of a case report about an – at the time of the diagnosis – 18-year-old patient.

Case report: The female neuroblastoma patient was treated first with chemotherapy, which proved to be temporarily effective and was essentially responsible for the long and stable course of disease. On the other hand, the significant improvement in quality of life and even freedom from symptoms, and full recovery of performance can be attributed primarily to subsequent mistletoe therapy due the coincidence with this treatment.