) Refresh Your Homotoxicology

Synergy Between Functiotropic and Organotropic Therapy

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The three fundamental pillars of antihomotoxic medicine – detoxification and drainage, immunomodulation, and organ support – are implemented to optimize restoration of equilibrium. Homotoxicology sees the body's attempts to maintain homeostasis as *symptoms* and the extent to which regulation is possible or not possible as *disease*.

The Disease Evolution Table classifies the progression of disease. In simple terms, the regulation/compensation (R/C) division separates phases in which the patient is still able to regulate towards health from phases in which only compensation is possible. Applying the pillars can assist the patient's attempts at regulation.

To the left of the R/C division, we are dealing primarily with disturbances in function; to the right, disturbances in both function and structure are present. This distinction is less clear in the impregnation phase (where cell death may be visible only on the microscopic level) than in the degeneration and dedifferentiation phases (where structural disturbances generally become macroscopic).

Clearly, therefore, diseases that involve only functional disturbances will require a different approach than diseases involving disturbances in structure as well as function. During the excretion, inflammation, and deposition phases, regulation still takes place via excretory mechanisms, so physiological support will reactivate the organism's self-regulation. However, once the condition has progressed to the right of the R/C division, healing cannot be achieved without structural support for specific organs.

Classification of antihomotoxic medicines: organotropic vs. functiotropic

Organotropic medications act on a specific organic system or tissue, whereas *functiotropic* medications have biochemical and metabolic effects on several organ systems. Among antihomotoxic

medicines, the action of the homaccords and many of the basic combination medications is functiotropic, whereas the composita and catalysts act organotropically.

Each pillar, therefore, presents both functiotropic and organotropic therapeutic options. Taking the detoxification and drainage pillar as our first example, the Detox-Kit contains two homaccords – Berberis-Homaccord, with functiotropic effects on the kidneys, and Nux vomica-Homaccord, with functiotropic effects on the intestines and liver – along with one basic combination (Lymphomyosot, which acts on the lungs, liver, matrix, and kidneys).

A homaccord is a combination of two or three single-ingredient potency chords with identical potencies. As with most antihomotoxic medicines, the action of homaccords is both synergistic and complementary. Much has been written about the choice of potencies in the accords. Dr. Reckeweg was also a musician, and many scholars believe there are similarities between some



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Functiotropic

Basic combinations (e.g., Hepeel) Homaccords (e.g., Nux vomica-Homaccord)

Fig. 1: Organ strengthening of the liver

of the accords and chords in music. $^{\mbox{\scriptsize 1-3}}$

There are also mathematical models that explain the choice of dilutions in the homaccords. In any case, there is no doubt that the homaccords are an essential part of antihomotoxic treatment. In the Detox-Kit, they effectively deal with mild to moderate toxicity in all diseases to the left of the R/C division. In more serious illnesses, the homaccords (like the basic combinations) serve to restart regulation and are generally administered after a period of organ support.

Basic combinations are the other component of functiotropic treatment. Here, too, the combination of synergistic and complementary effects induces physiologic regulation. Traumeel and Lymphomyosot are two of the most well-known combinations.

There is a long history of therapeutic use of organ extracts in homeopathy. In homotoxicology, the work of August Bier is thought to have influenced Reckeweg to include them in the antihomotoxic repertoire. In his work on treating chronic disease, Bier had noticed that organ extracts are more effective than secretory products of the same organs and concluded that treating disease in a specific organ requires a prepared extract of that organ. Through their work in the Charité clinic in Berlin, Bier and Reckeweg were able to demonstrate empirically that organ therapy is a superior form of treatment for chronic disease.

Now scientific evidence is emerging to support the idea of "resonance" between organ extracts and their corresponding organs. Today, fetal human liver cells and liver extracts are being used for liver regeneration.⁴ If therapy with extracts of a particular tissue has regenerative effects on that tissue, the same should hold true of the organotropic suisorgan preparations in antihomotoxic medicines.

Composita and suis-organ Injeels are examples of medications containing organ extracts. The importance of Reckeweg's formulations, however, lies in the fact that he recognized the interdependence among different organ systems, as mentioned above. Thus the formula of Cutis compositum includes liver and adrenal extracts, recognizing the relationships between the skin and stress hormones and between the P450 detoxification enzymes in the skin and the liver. Of course the inclusion of liver and adrenal extracts also counteracts iatrogenic damage from products used in skin disease. On the right side of the R/C division, use of catalysts as well as composita becomes mandatory. Because no cell can function without energy,

the role of catalysts in maintaining cell health is increasingly being recognized, along with their therapeutic possibilities. For this reason, advanced organ support protocols include catalysts in addition to a number of composita containing suis organ extracts.

Organotropic

Conclusion

Composita

Injeels

(e.g., Hepar compositum)

(e.g., Hepar suis-Injeel)

Functiotropic and organotropic medications are administered either singly or in combination, depending on the severity of the disease process. An example is basic detoxification and drainage and advanced organ support in the liver, which can be depicted as shown in Figure 1.

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