Feature Article

Pischinger:  
A Scientific Foundation to  
Acupuncture and Homotoxicology

Dagmar Bolling, MD
Pischinger was one of the first to discover that the brainstem and the connective tissue form a functional unit to help eliminate toxins and establish balance in the body. Imbalances in this functional unit result in inflammation when the body attempts to eliminate the toxins. Toxins which are deposited instead of eliminated disturb the function of the connective tissue as a whole. Probiotic therapies such as homeopathy and homotoxology can be utilized to activate both the non-specific immune system and the mesenchymal (connective tissue) detoxification system.

This article is a transcription of a lecture by Dr. Bolling at the 5th Heel U.S. Symposium in San Francisco in October 1989.

The organic substrate, in which the basic regulation of life takes place - i.e. the connective tissue - makes up approximately 50% of total body weight. The extensive significance of what may be called "the organ of connective tissue" was not professionally recognized for a long time, and this organ was relegated to mere functions of filling, supporting, and holding in the body. One reason for this failure of appreciation lies in Rudolf Virchow's highly valuable - and yet purely morphologically fixed - pathology of organ cells. Another reason for the lack of attention here may also be found in the techniques generally employed for microscopic representation in histology: i.e., those in which extracellular fluid does not appear.

It was Alfred Pischinger's accomplishment to break out of this organ-specialized, narrow mode of consideration, and to deduce his efforts especially to the amorphous structure of connective tissue. The humoral pathology of Hippocrates, the studies of Hans Eppinger, and the work of Ferdinand Hoff certainly inspired him in his efforts. Pischinger used the term "cell milieu complex of the connective tissue" to designate the histological basis of the system of basic regulation. Beginning from the fibroblasts, the stem cells of the connective tissue, differential development follows for the connective-tissue cells and the cells of the reticuloendothelial system.

Cell culture studies have shown that if stress is applied to this milieu - e.g., by withholding nutrients - accelerated differentiation of the cells of the reticuloendothelial system takes place. These connective tissue cells emit cytoplasmic droplets into the milieu which surrounds them, and thereby sustain their neighbouring cells. These observations demonstrate the intimate communicative interactions between cells and their fluid milieu.

The study of early-embryonic mesenchyme development most clearly explains the complex relationships between ground substance and extracellular fluid, in the following:

- The biosynthesis of the mucopolysaccharides in the organelles of the fibroblasts, and
- the development of the capillaries, which throughout life remain in intimate contact with the connective tissue, and which engage in active substance transfer with it.

The interstitial space - the liquid milieu - functions here as transit passage to the specialized organ cells. In the same manner, stimulus transmission from the nerve endings to the end plates does not take place directly, but via transmitter emission into the liquid milieu.

The extracellular milieu can therefore be influenced by three factors:

- The cells,
- the capillaries,
- the nerve endings.

The connective tissue, which receives information from the liquid milieu, therefore functions as a common field of action for cytokinetic, hemokinetic, and neurokinetic regulation.

According to Alfred Pischinger, the connective tissue ground system is a functional unit which can be regulated and harmonized with the aid of humoral control processes.

The connective tissue ground system - the seat of non-specific defense functions - responds to all disturbances, e.g., trauma, regardless of their quality, in the same manner: through the reaction of inflammation.

The strength of a disturbance can be assessed in conjunction with its threshold value. Local reactions take place in the event of disturbances quantitatively below certain threshold values. Total defense regulation, on the other hand, is triggered if burdens above the threshold value are inflicted, e.g., as noxie. As early as 1962, Ferdinand Hoff postulated the true mobilization of the autonomic system, a process which would enable the healthy organism to adequately respond to stimuli.

In addition to the thalamo-hypothalamic system which dominates in higher organisms and which functions in a regulatory manner as intermediary between the brain and periphery, critical regulation processes for defense or for compensation of disequilibria also take place in the peripheral ground system. For this reason, Pischinger designated the connective tissue "the autonomic ground system".

There are two alarm reaction phases for total mobilization of the autonomic system:

- A sympathicotonic reaction (the shock phase).
- A parasympathicotonic reaction (the counter-shock phase).

If the defense functions of the organism
are not impaired, an acute inflammation will take place in accordance with this two-phase biorhythmic alarm reaction. In cases of chronic diseases, this two-phase characteristic of the alarm reaction is lost: the patient's organism remains arrested either in the shock or in the countershock phase, and self-healing cannot take place. Complete lack of reaction is observed, for example, with autoimmune diseases, as well as with all destructive and neoplastic processes.

Chronic diseases are always associated with functional losses of nonspecific defense capabilities, i.e., with impairment of defense functions in the connective tissue ground system. During the course of such disorders, the threshold value for the ground system fails in its response to stimuli. A chronically ill patient can no longer locally respond to even mild stimuli; in such cases, the organism must mobilize the defense forces of the entire organism (which have already been impaired).

This extremely uneconomical process leads to further weakening of the patient. These insights obtained by Pischinger are of great significance for therapy with biological medicine — which regards disease as the expression of a natural defensive struggle against damaging noxae.

Since disease appears as visible forms only once the organism's own defense system has become too weak to effect self-healing, causal and holistic biological concepts of therapy are always directed toward support of the body's own defense mechanisms.

The findings of Hans-Heinrich Reckweg, the founder of homotoxicology, have led to the development of an extraordinarily effective concept for practical therapy: the Six-Phase Humoral-Cellular Table of Homotoxicosis. Reckweg proceeded from the assumption that courses of disease can be broken down into developmental phases, whereby the manifestation of illness characteristically involves particular tissues. The six phases of disease are divided in the middle of the table by the Biological Section, into Humoral Phases with favorable prognosis, and Cellular Phases with unfavorable prognosis. In favorable cases, the organism's defense mechanisms - although impaired - are still active; in the neoplastic phases, for example, massive blockades have occurred.

The metamorphosis of one disease into another, surrogate illness was designated by Reckweg as "vicariation". The physician can conclude from the direction of vicariation, e.g., from a cellular to a humoral phase, in the desired, biological sense, whether positive development in the state of disease has or has not occurred and to what extent enhancement of the reaction capability of the defense mechanisms has come about in association with this improvement. The objective then would be to further support positive development by employing suitable homeopathic and antihomotoxic preparations, until the noxae (i.e., homotoxins) are rendered harmless and eliminated from the organism.

A therapeutic concept in harmony with natural principles has the following objectives:

1. Normalization and harmonization of afflicted basis regulatory processes, e.g., through stimulation of the nonspecific defense system by means of administration of the following:
   - Echinacea compositum S;
   - Engystol® N.

   In the event of severe diseases, it has proved effective as adjuvant therapy to provide progressive auto-sanguis therapy, a technique using isotherapy with the patient’s own blood.

2. Relief of the connective tissue and the lymphatic system by measures designed to detoxify the mesenchyme.
   The following is highly effective as basic therapy here:
   - Lymphomyosot®.

   In addition, regeneration of detoxication mechanisms can be achieved by application of the following preparations:
   - Thyreoidea compositum;
   - Ubichinon compositum;
   - Coenzyme compositum.

   Administration of the following broad-spectrum nosode preparation also offers an excellent possibility mobilizing further defense forces of the organism:
   - Psorinosheet®.

3. In addition to the above-stated measures, however, effective homeopathic and antihomotoxic medication should be applied for the symptomatic therapy of symptoms of disease.

   Antibiotics, chemotherapy, immunosuppressives, and the like should be administered only in emergencies, since they can very easily initiate a process of progressive (undesirable) vicariation through damage to defense mechanisms. This development would then require application of additional biological therapy.

4. Whole-food and low-toxin nutrition is critical to reduce the further intake of toxins and noxae. In this way, enzyme systems which take part in catabolism and anabolism are not burdened with functions requiring additional consumption of energy.

Address of the author:
Dagmar Bolling, MD
Specialist for Internal Medicine
Wiesenweg 6
6232 Bad Soden / Taunus
Germany

7601992 175 No2/93