

# BIOLOGICAL THERAPY

JOURNAL OF NATURAL MEDICINE

## REPORT FROM THE MEDICAL PRACTICE

### Biological Treatment of Heartburn

reprinted from *Biological Therapy*, Vol. III, No. 4, December 1985/January 1986, p. 82

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#### Question: Heartburn. Biological therapy?

*Heartburn is a complaint frequently reported in practice. Without immediately concluding a gastric or duodenal ulcer, it is not usual for comprehensive tests to be immediately carried out nor, in particular, for X-rays to be taken, but to prescribe some antacid or other. From the biological viewpoint, it is true that an immediate neutralization is achieved but the general state of health does not correspond at all to a permanent cure in most cases. I assume that there are likewise biotherapeutic alternatives for this situation?*

#### Answer:

When the medical history of the patient is carefully investigated, it generally emerges that patients suffering from heartburn also eat food containing preservation agents, colorants or other non-biological additives.

When an accurate investigation is made, it is possible to identify not only colorants, present in jams, sauces (gravy colorants), soups and numerous other industrially produced and packaged foods but also preservatives or stabilizers as well. These include, in particular, mustard which is otherwise a high-quality product. Certain kinds of coffee can also be unwholesome.

It is true that in Germany such additives must now be indicated but this is not invariably the case in other countries.

Consequently, patients must be urged to pay close attention to what they eat.

Biologically, heartburn is to be explained by the fact that overacidification occurs as a result of a diet containing non-biological additives and this can, of course, also be demonstrated by titration of the gastric juice. For the decomposition of such non-biological substances, the organism needs more gastric juice, possibly also for the stimulation of a generous pepsin secretion (when there is a simultaneous heavy intake of protein). Just like every other disorder, heartburn is a biologically expedient defense reaction to a poison (colorants, stabilizers, refining agents, etc.).

The therapy must therefore include, on the one hand, the omission of such non-biological active agents such as colorants, while, on the other hand, an attempt must be made to normalize the secretion conditions again. For this there is a fast-acting, generally immediate drug available which does not neutralize the gastric fluid at all, namely Gastricumeel.

Gastricumeel acts on heartburn by virtue of the pulsatilla and arsenicum album which it contains while nux vomica, as an antispasmodic, also has an effect on hyperkinesis and hyperfunction of the glandular parts of the gastric mucosa. In its totality, Gastricumeel is formulated specifically for the gastric mucosa, in particular by virtue of the silver nitrate component (mucosal preparation for meteorism, gastrocordial complex of symptoms, relief through eruction whereby the action is obviously via the sympathetic nervous system), likewise through carbo vegetabilis, for dyspepsia, flatulence, heartburn, also states of collapse, and through antimonium crudum (effective for a sensation of fullness, and stomach pain, especially with a coated tongue and pains after cold baths).

With heartburn, one tablet is taken every 5-10 minutes, several times until an improvement is registered. The tablets should be allowed to dissolve under the tongue. It is essential that an attempt be made to avoid additives, stabilizers, etc., which are non-biological in their composition.

Gastricumeel has not only an instant effect. Even with the accumulation of gas in the upper stomach with heart pains, it is capable of restoring the downward and biologically expedient direction of the digestive activity, which in most cases is promptly indicated by the escape of flatus and subsequent relief, and likewise of reducing the tendency to overacidification. Like all biotherapeutic agents, Gastricumeel has an immediate and also a lasting curative effect.

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