

The Field of Medicine has its Knickers in a Twist

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Medicine is characterised by the immense complexity and cost of the many techniques, medical specialists, devices and drugs which are used to keep people alive and/or to improve their quality of life however this system is under an immense strain as the demand for healthcare exceeds the funds and resources which are available to support the current system. It is a system which is designed for evolution rather than revolution. There is a need for radical and disruptive technologies which can reduce the cost of diagnosis, improve throughput in primary and secondary care, improve therapeutic outcomes, guide people how best to manage their health and lifestyles, and do so at considerably lower cost.

Medicine has evolved in an entirely random way, incorporating the latest knowledge and/or fashionable ideas, and as a result comprises a hotch-potch of techniques and devices which, in some way, can be deployed to screen or treat the health of the patient [1] however there is not yet an accepted understanding of how the body functions and is regulated. Consequently, such tests are non-linear; often incorporate a significant range of limiting factors; and are prone to misdiagnose the conditions. The treatments are often ineffective [2]. If the drug is used in a lower than prescribed frequency or concentration it is ineffective; if above the prescribed level it is often toxic; they treat the consequences of autonomic dysfunction rather than their cause; side-effects occur; the effectiveness of drugs declines over a period; however it is wise not to become obsessed by the limitations of drugs. There will never be drug-free healthcare service(s). It may have its limitations but for many it is indispensable, especially so in the A&E context. The big challenge is to improve the scientific understanding of how the body functions; to provide options for those who want to use drugs and then when drugs don't work to find something else; and then for those who want to have a healthy option, to fall back on biomedicine when it doesn't work; however if the body is highly regulated, as it is, there must be a precise mechanism which explains how the body functions and how the various physiological parameters are regulated. The problem faced by medicine [3] is that it seeks to correlate a series of non-linear test results which it assumes can be used as accurate determinants yet the evidence suggests that such an approach has only limited validity and applicability. The tests are rarely 100% accurate or entirely reproducible. The system is bogged down by the

immense amounts of poor or incompatible data [4]. There is the need for a better understanding than can be provided by the contemporary range of biomedical tests, drugs and treatments.

There is an immense amount of knowledge in the medical research database – the data is valid -however, as yet, there is scant recognition of the limitations of biomedicine. The evidence is there. It just needs researchers to assemble this knowledge into a usable format. For instance: (i) it is the level/rate of protein expression which is most significant; (ii) there are few, if any, cases where a single gene is responsible for a particular medical condition; (iii) the rate of protein reaction/reactivity is significant; (iv) proteins may unwind and be unreactive; (v) there are physiological systems which are responsible for specific physiological parameters, e.g. blood pressure, blood glucose, sleep, pH, etc.; (vi) the brain uses a frequency-based mechanism to regulate the coherent function autonomic nervous system and physiological systems, i.e., it is a biophysical mechanism in which the biological entity which is the brain deploys a biophysical mechanism to regulate its function; whereas biomedicine has focused upon: (i) determining the chemical nature of the genes which express a particular protein, rather than considering gene conformation and energetics; (ii) relating a particular gene to a particular disease when it is now recognised that most medical conditions are polygenomic, multi-systemic and multi-pathological; and (iii) determining the level of a particular biochemical marker rather than considering the full spectrum of biochemical changes which accompany pathological onset. It effectively ignores (iv) the complex morphology of the genes; (v) whether a protein is coiled and reactive or uncoiled and unreactive; (vi) the biological conditions e.g. pH and mineral levels, which influence the rate at which

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proteins react with their substrates; (vii) the significance of the physiological systems, i.e., measuring the level of systemic function (blood pressure, blood glucose) rather than identifying the contributory causes; and (viii) the neuro-regulatory function of the brain.

Medical research reacts to the power of reputation rather than considering the scientific validity of a proposed intervention. It is a biased [5], fashion-led industry [6,7] which acts on a limited knowledge-based, i.e., the etiology of most medical conditions is often incomplete and inadequate. It adopts biomarker tests which are promoted by diagnostic test manufacturers. Moreover once one test becomes the adopted standard for a particular condition it becomes increasingly difficult to be displaced by better tests – the inconvenience, complexity and cost of doing so act as impediments to progress. It adopts therapeutic interventions which perform a function, perhaps providing temporary relief, rather than considering the scientific integrity and precision of such techniques e.g. a treatment may relieve a particular condition which results in side-effects which need to be treated. It is a system of immense complexity and cost which incorporates what is available, what can be afforded, and what a particular clinician decides to advocate – often more of the same - rather than considering the merits of more novel, radical and disruptive diagnostic and/or therapeutic modalities.

The Russian researcher Grakov [8] identified (i) that the brain acts as a neuro-regulator [9] continuously regulating the body's complex function and systems; (ii) that changes of colour perception are associated with pathological onset as a result of the emission of biophotons of light from these biological systems [10,11]; and (iii) that pathological onset is invariably polygenomic, multi-systemic and multi-pathological [13-16]. Such knowledge has been incorporated into a complex, precise and sophisticated mathematical model of how the brain regulates the autonomic nervous system and physiological systems which initial research has illustrated is 2-23% effective as a screening modality by comparison with the range of diagnostic tests used by the test clinics and hospitals [17-20]; and as a therapeutic modality which initial research has illustrated is typically 83-96% effective depending upon the nature and extent of the conditions being treated [20-24].

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