The Use of German Biological Medicine in the Treatment of Tick Borne Disease

Ann F. Corson, MD
January 22, 2012
Tick Bites
Tick Bites

http://www.medsci.org/v06p0123.htm

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Our Three Local Ticks

Dog tick  *Dermacentor variabilis*
Our Three Local Ticks

Deer tick  *Ixodes scapularis*
Our Three Local Ticks

Lone star tick  *Amblyomma americanum*
Ticks are Cesspools of Disease

• Borrelia burgdorferi (B lonestari in US, B garinii, B afzelii in Europe, others? 300+ strains worldwide, 100 in US)
• Babesia microti, B duncani, B divergens, others?)
• Ehrlichia chaffeensis - Human Monocytic Ehrlichia
• Anaplasma phagocytophilum - Human Granulocytic Anaplasmosis, (A phago Variant-1)
• Bartonella henselae (B quintana, many others)
Ticks are Cesspools of Disease

- *Mycoplasma fermentans* (Gulf War Syndrome, other *Mycoplasma* species)
- *Rickettsia rickettsia* - Rocky Mountain Spotted Fever
- Spotted Fever/Typhus Fever Group *Rickettsia*
- *Coxiella burnetii* - Q fever
- *Francisella tularensis* - Tularemia
- Viruses: - deer tick virus, Powassan virus, other encephalitis viruses?
- Nematodes? *Protomyxzoa rheumatica*?
O’ Conner et al., Emerging Infectious Determinants of Chronic Diseases
_Emerg Infect Dis_ 2006; 12(7): 1051-1057

- “…infection may simply represent the first misstep along a continuum from health to long-term illness and disability.”
- “…infectious agents likely determine more cancers, immune-mediated syndromes, neurodevelopmental disorders, and other chronic conditions than currently appreciated.”
- “If a mere 5% of chronic disease is attributable to infectious agents, in the US alone 4.5 million of the 90 million people living with chronic disease might benefit from strategies designed to prevent or appropriately treat selected infections.”
“Recent immunologic, epidemiologic, microbiologic and neuropsychiatric studies point to infectious etiologies of several important neuropsychiatric disorders...several infectious diseases including human influenza virus, HIV, syphilis and Lyme disease are associated with neuropsychiatric symptoms following transmission of infectious agents to the central nervous system. ...evidence also points to potential for peri-, pre-, and postnatal infections as causes for several neurodevelopmental disorders.”

- “These chronic neurologic abnormalities began months to years after the onset of infection, sometimes after long periods of latency, as in neurosyphilis…The likely reason for relapse is failure to eradicate the spirochete…with antibiotic therapy. This last article is one of many studies that show continuing symptoms are most likely due to persistence of the spirochete.”
Pachner, A. Neurological Manifestations of Lyme Disease, the New “Great Imitator”

• “If, as it now seems, the Lyme spirochete is indeed highly neurotrophic and able to remain dormant in the CNS for long periods, we may well see a sizable number of individuals who currently have latent neuroborreliosis presenting in the future with symptomatic infection.”
TBD Patient Complexity

• Polymicrobial biofilms are everywhere
  – Mucous membranes
    • Gut
    • Sinuses (MARCoNS)
  – Brain
  – Blood
  – Tissues
    • Skin

• Polymicrobial infections
  – All classes of pathogens

Figure 2: Biofilm of Borrelia burgdorferi, mainly granular forms, with transition to spiral forms at the edge of the biofilm community, darkfield image.

Copyright Alan MacDonald, MD 2008
TBD Patient Complexity

• Gut dysbiosis
  – Altered terrain
    • mucosal biofilms, redox potential, dysbiotic overgrowth, parasitic infections
  – Gut Associated Lymph Tissue confusion
    • Up-regulated TH-2 with or without TH-1 abnormalities
    • Shifting food allergies
      – gluten, dairy, egg intolerance
  – Leaky gut with altered basement membrane permeability
TBD Patient Complexity

- Gut dysbiosis
  - Infections of mucosal, muscular, serosal surface of bowel wall
  - Vasculitis of blood supply of gut
  - Infections of nervous tissue controlling gut function from brain to autonomic ganglia
  - Alterations in gut motility
    - “Bell’s Palsy of the gut”
    - Gastroparesis
TBD Patient Complexity

• Liver/gallbladder abnormalities
  – Parenchymal liver infection, autoimmunity
  – Gall bladder disease: chronic infection, atonic GB
  – Genetic mutations or acquired abnormalities cause complex imbalances of Phase I and II detoxification pathways
  – Hormonal dysregulation and imbalances
  – Lipid metabolism abnormalities
    • Elevated cholesterol/LDL
  – Biliary stasis, insufficient or infected bile
    • Dyspepsia, nausea, constipation, abdominal discomfort
TBD Patient Complexity

• Systemic inflammation unregulated
  – Disordered lipid metabolism
    • Cholesterol, LDL elevations
  – Insulin resistance
  – Cytokine imbalances
    • Elevated TNF-alpha, IL-10, C3a, C4a
  – Oxidative stress
    • Mitochondrial dysfunction
      – Infection, drug or nutritionally induced
TBD Patient Complexity

- **Vasculitis**
  - Endothelial infection/toxin deposition
  - Hypercoagulability
    - Babesia, HHV-6, heavy metals, genetic factors

- **Toxic, encumbered extracellular matrix**
  - Immune system debris such as ag:ab complexes
  - Heavy metals
  - Other pollutants - protean!
**TBD Patient Complexity**

- **Immune system dysfunction**
  - Anergy/confusion GALT and/or MALT
    - Need to correct cytokine imbalances and down-regulate inflammation while up-regulating activity against specifically targeted pathogens
  - Autoimmunity
    - Thyroid, endothelium, gut, tissue, nervous system
  - Allergic up-regulation
    - Environmental, food, multiple chemical sensitivities
  - Bone marrow metabolic dysfunction
    - Persistent thrombocytopenia, general neutropenia, or lymphopenia, anemia, neoplastic cell lines
TBD Patient Complexity

- Peripheral nervous system
  - Altered gut motility
  - Vascular instability
    - Raynaud’s, POTS
  - Any cranial nerve can be affected

- Central nervous system
  - Oxidative stress
  - Decreased glutathione levels
  - Altered homocysteine/methionine metabolism
  - Impaired methylation, sulfation, elevated sulfate/ammonia levels
TBD Patient Complexity

• Neuro-endocrine dysfunction
  – Hypothalamic-pituitary axis
  – Adrenal gland stress, resistance or exhaustion
  – Thyroid insufficiency with/without autoimmunity
  – Sex hormone deficiencies, at all ages
  – Insulin and leptin resistance
  – Renin-angiotensin system
  – Antidiuretic hormone abnormalities

• Neuro-humoral dysfunction
  – Bone marrow dysregulation
TBD Patient Complexity

• Biotoxin illness in susceptible HLA types
  – Biotoxins are water and lipid-soluble ionophores from indoor toxic mold, Bb, Bm and *Pfiesteria sp.*
• Alter DNA expression of fat cells turning on production of inflammatory cytokines that up-regulate systemic inflammation, increase insulin resistance, increase bad lipid levels, alter levels of VEGF and PAI-1
• Bind to and damage leptin receptors in the hippocampus and hypothalamus leading to breakdown of the proopiomelanocortin system with resultant deficiencies in two very important master hormones
TBD Patient Complexity

• Biotoxin illness in susceptible HLA types
  • Deficiency in regulating hormones
    – MSH (melanocyte stimulating hormone)
    – VIP (vasoactive intestinal peptide)
  • Ongoing damage of hippocampus, hypothalamus and both anterior/posterior pituitary

TBD Patient Complexity

- Kryptopyrroluria/Hemopyrrolactamuria - KPU
  - Genetic or acquired defects in heme synthesis that result in loss of zinc, biotin, manganese, magnesium, B-6, arachidonic acid and others
  - Elevated levels of KPU/HPL in urine

TBD Patient Complexity

• Heavy metal toxicity
  – Dental amalgams
  – Vaccinations
  – Contaminated food, air, water

• Traumatic history
  – Physical
  – Emotional
  – Psychological

• Diet, habits, substance abuse
German Biological Medicine

- Integration of western basic science and medicine with traditional European herbal medicine, classical homeopathy, terrain based medicine, and bio-energetic medicine all molded by the philosophies of ancient Chinese medicine
German Biological Medicine

- Terrain based treatment
  - Maintenance of cellular energy
  - Digestion and assimilation
  - Transport and communication
  - Fluidity/plasticity of regulatory responses
  - Elimination of metabolic toxins

- Extracellular matrix
  - Primary organ of regulation of terrain

- Energy distribution
  - Chronic illness is result of incorrect distribution and severe deficits of energy in body
Extracellular Matrix

- Proteoglycan molecule
- Proteoglycan complex
- Polysaccharide molecule
- Collagen fiber
- Plasma membrane
- Integrin
- Microfilaments of cytoskeleton

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German Biological Medicine

• Paracelsus – Swiss physician, alchemist 1493-1541
  – Father of spagyrisim
    • “Chemistry is not to make gold but to make medicines”
  – Father of toxicology
German Biological Medicine

- Samuel Hahnemann, MD
  1755 - 1843
  - Founder of homeopathy
  - Everyone is subject to a universal “vital energy” which needs to be balanced to promote the body’s self-healing responses. Imbalance or disruption of this energy creates disease.

http://dranoop.com/

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German Biological Medicine

- Günther Enderlein, PhD 1872-1968
  - Theory of Pleomorphism
    - Founded Sanum, later Sanum-Kehlbeck
    - First to use fungal and bacterial products in homeopathic remedies

http://dranoo.com
German Biological Medicine

• Bernhard Aschner, MD 1883 - 1960
  – cleanse the body of toxins
  – leaky gut

German Biological Medicine

- Hans-Heinrich Reckeweg, MD
  1905 - 1985
  - Multiple remedies in one formula
  - Homochord
    - Multiple potencies of one remedy mixed together
  - Homotoxicology
    - Excretion
    - Reaction
    - Deposition
  - Concepts from Shang Han Lun

www.homeoint.org/photo/r/reckeweghh.htm
Shang Han Lun

Zhang Zhongjing

- Lived c. 150-219 AD toward the end of the Han Dynasty (206 BC - 220 AD)
- Reportedly authored Shang Han Za Bing Lun
- Said to be written on silk scrolls, bamboo or wooden slats
Shang Han Lun

Wang Shuhe

- Lived during Western Jin dynasty (269-316 AD)
- Wrote Mai Jing: The Pulse Classics
- Divided Zhang’s classic into Shang Han Lun and Jing Kui Yao Lue
Shang Han Lun

Sun Simiao

- Lived 581 to 682 AD
- Mastered medical classics by age 20
- Founder of nutritional medicine
- Praised Shang Han Za Bing Lun as a profound medical work
Homotoxicology

Shang Han Lun

Humoral phases

1. Excretion  Tai Yang
2. Inflammation  Yang ming
3. Deposition  Shao Yang

- Biological divide -

Cellular phases

4. Impregnation  Tai Yin
5. Degeneration  Shao Yin
6. Neoplasm  Jue Yin

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# Homotoxicology

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<td>Body stores and deactivates toxins: connective, adipose and vascular tissue</td>
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<td>Cold transforms into heat as disease deepens, half excess and half deficiency</td>
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**4 Impregnation Tai Yin**
- Latent or active toxic foci develop in “locus minoris resistentiae”
- Depletion of vital heat, deepening cold damage, loss of digestive fire, warming needed

**5 Degeneration Shao Yin**
- Destruction of intracellular enzyme function and mitochondrial energy production
- Deepening of cold damage, heart and kidney deficiency

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<td>Depletion of vital heat, deepening cold damage, loss of digestive fire, warming needed</td>
<td>Deepening of cold damage, heart and kidney deficiency</td>
<td>Worsening of devitalization, cold damage with trapped heat toxins</td>
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German Biological Medicine
 Treatment Principles

– Restore vitality
  • Rebuild vital energy and heat

– Restore health to the extracellular matrix
  • Clear biofilms, toxins, infection, tissue injury and scars
  • Restore communication throughout entire matrix

– Restore health to the endothelial system
  • Clear hypercoagulability, biofilms, toxins, infection
  • Heal endothelial lining
German Biological Medicine
Treatment Principles

- Restore metabolic function of
  - Gut Associated Lymph Tissue (GALT)
    - Remove immune up-regulating antigens (food allergies)
    - Restore healthy mucosa, heal leaky gut
    - Break up pathogenic biofilms, remove infectious and dysbiotic organisms
    - Repopulate with healthy pre- and probiotics
    - Restore digestive vitality, normalize fluid flows, optimize absorption nutrients and peristaltic motility
German Biological Medicine
Treatment Principles

– Restore metabolic function of
  • Liver
    – Clear detoxification blockades (genetic and acquired)
    – Balance phase I and II detoxification pathways
    – Normalize hormone regulation and metabolism
    – Normalize lipid metabolism
    – Improve bile production, flow and gallbladder function
    – Clear toxins and infections
German Biological Medicine
Treatment Principles

– Restore metabolic function of
  • Mucocutaneous Associated Lymph Tissue (MALT)
    – Sinus biofilms, up-regulated response to inhaled allergens
    – Oro-pharyngeal and cervical lymphatics
    – Respiratory airway reactivity
  • Bone marrow
    – Restore normal immune cell line production
German Biological Medicine
Treatment Principles

– Restore metabolic function of
  • CNS
    – Lower oxidative stress
    – Lower ammonia and sulfate levels
    – Repair myelin sheaths and cell membranes

– Restore regulatory function to
  • Neuro-immune, neuroendocrine and neurovascular systems

– Cycle: harmonize/resolve - release/provoke
German Biological Medicine
Treatment Tools

• Homeopathic and herbal medicines
  – Spagyric homeopathic and herbal medicines
    • PEKANA

• Immune-metabolic, immunobiologic medicines
  – Adaptogens - microbial derived homeopathics
    • San Pharma, Syntrion

• Nutritional medicines
  – Nutritional repletion, Paleolithic dietary principles,
    clean water (pH), lifestyle modifications
PEKANA Spagyric Homeopathic Medicines

- Founded 1974 by Dr. Peter Beyersdorff
  - Combined homeopathic and high-energy spagyric remedies in revolutionary fashion
  - Spagyrisms: art of capturing the entire energetic essence inherent in herb
    - Uniting the fermented herbal tincture with the vital minerals extracted through incineration and purification to create a medicinal tincture
  - PEKANA spagyric homeopathics remedies
    - Drain, regulate and regenerate organs, allowing one to clean and restore normal function to the matrix
    - Resolve acute illness more rapidly without sequelae
PEKANA Spagyric Homeopathic Medicines

• Founded 1974 by Dr. Peter Beyersdorff
  – PEKANA spagyric homeopathics remedies
    • Restore normal regulatory set points in the metabolism, the hormonal and immune systems, retraining our physiology thus restoring body’s intrinsic self healing ability
    • Energize and rejuvenate the body
    • Anyone’s physiology is better after taking these remedies
SanPharma Immunobiologic Medicines

- Founded in the mid-1970s by Gerhard and Edelgard Schroeder
  - Isopathic remedies derived from dilutions of microbial cell wall fragments
  - Later refined (1999) to contain only metabolic products and “innards” of microbes without cell wall lipopolysaccharides
  - all SanPharma remedies are made from highly dilute metabolites of specific fungi and bacteria to ensure gentle, highly effective therapy
Syntrion Immunobiologic Medicines

• Ronald Ullmann - founder of Syntrion
  – “Cellular reprogramming” medicines
    • Safely induce down-regulation of systemic inflammation
    • Reduce immune system hyper-reactivity
    • Take immune system out of anergy
    • Restore metabolic balance and regulation to the matrix
    • Allow for wider regulatory choices which result in a more balanced immune system so it can respond appropriately to resolve acute and chronic foci of infection
  – Mechanism of action
    • Demonstrated by proteomics experiments at the University of Vienna, Austria
GBM References

Gary and Rain Klepper, DC, CTN  “..unwind the log-jam of chronic illness, appropriately dealing with the web of interconnected issues of deficiency, inflammation, fatigue, toxicity, infection and devitalization.”

Gary and Rain Kepper, DC, CTN
www.bioresourceinc.com
GBM References

- Peter Gosch’s history of German Biological Medicine and PEKANA pharmacopeia
  *Vital Energy Medicine*

- [http://www.bioresourceinc.com](http://www.bioresourceinc.com)

- [http://syntrion.eu/usa](http://syntrion.eu/usa)
TBD References

• http://www.lymeinfo.net/lymefiles.html
  – Compilation of all literature about spirochetes/TBD from Jefferson Medical School Library

• http://www.ilads.org/lyme_disease/lyme_testimony.html
  – Thousands of pages of peer reviewed literature

• www.lymedisease.org
  – CALDA’s website

• www.ilads.org
  – International Lyme and Associated Diseases website