



# What is Homotoxicology?

## A Basic Introduction to the Concepts of Homotoxicology

Toxicology is a branch of medical biology concerned with the study of the adverse effects of chemicals on the body<sup>1</sup>. Homotoxicology is essentially an extension of this concept, where toxic substances are seen to disrupt normal biological function which results in the manifestation of symptoms and signs, and ultimately disease. It is the study of the influence of toxic substances on humans, and the removal of these toxins to regain natural regulation. According to the concepts of homotoxicology, human disease is the result of toxins which originate either from overproduction within the body, or from the environment in which we are exposed<sup>2</sup>.

*'I would like one day to merge homeopathy with mainstream medicine'*

*Dr Hans Reckeweg (German Physician)*

Homotoxicology was developed by Dr Hans Reckeweg, and is strongly linked with but not identical to homeopathy<sup>3</sup>. It was born out of the desire of Dr Reckeweg to identify and develop a bridge between conventional medical science and homeopathy. Due to his immense work and publications, homotoxicology has become a worldwide disseminated approach in medicine. Not only the theory, but also the daily use of anti-homotoxic medications (bio-therapeutics) is present in more than 70 countries all over the world<sup>4;6</sup>, with approximately 80% of orthodox Doctor's in Germany prescribing homeopathic or anti-homotoxic medicines. Today experts in homotoxicology worldwide do further research in this matter and have made homotoxicology an increasingly acceptable approach in modern medicine<sup>4</sup>. It appears the Dr Reckeweg's dream is increasingly becoming a reality, as homotoicology has become a very widely utilised medical tool based on clinical homeopathic practice. Homotoxicology has become a worldwide disseminated approach in medicine<sup>4</sup>

**Homotoxicological definition of disease:**

According to homotoxicology, illness is defined as an overload of the environment in which tissues and cells live and communicate (connective tissue matrix) with toxic substances (homotoxins)<sup>5</sup>. Each disease process runs through six specific phases and is the expression of the body's attempt to cope with these toxins<sup>6</sup>.

Diseases are thus viewed as biologically useful defence mechanisms, and symptoms are seen as the expression of the body attempting to self-regulate and heal itself<sup>6</sup> (a concept not foreign to conventional medicine, and is the bases of the principles and practice of most traditional and natural medical models). Health, on the other hand, is the expression of the absence of toxins, when the body is able to function at its optimum<sup>6</sup> (is there then such a thing as true health?).

Diseases are the expression of biologically purposeful defence mechanisms against endogenous and exogenous homotoxins, or the expression of the organism's effort to compensate for toxic damage it has sustained<sup>4</sup>

Common examples of these homotoxins include any toxic chemical, bacterial toxins (as seen in food poisoning), cellular debris after trauma, lactic acid after strenuous exercise (partly responsible for stiffness of muscles), and other by-products of normal metabolism (e.g. carbon dioxide; urea and nitrogen based waste products; free radicals). Other examples are tobacco exposure, medicines (e.g. hormone therapies), pesticides and heavy metals. There are literally hundreds of thousands of toxic sources.

### **Evolution of disease according to homotoxicology:**

Our bodies are designed to tolerate and cope with these toxins. We are able to regulate toxin exposure from the environment and toxin production from within (metabolic processes) in order to prevent disease occurring. We are constantly regulating our internal environment to maintain optimal function and health (known as the biological process of homeostasis).

When we are overloaded with toxins, or unable to regulate this process of toxin removal from tissues, there is a build up in the system. Over time, toxins accumulate and damage various organ, metabolic, immune and other systems and pathways. This may be localised to a particular organ or tissue, or be more generalised. In the chronic setting, our bodies respond by attempting to eliminate these toxins – we create discharges (e.g. diarrhoea or runny nose) or inflammations (e.g. allergies, skin rashes, fevers). Symptoms produced depend on the individual person and the toxins involved, so are highly variable. If this response is able to remove the imbalances and restore function, then health is returned.

If this response is inadequate, or suppressed through symptomatic medical treatment, toxins may continue to be deposited and start to interfere with cellular function. This is when we may start to see the development of more chronic disease processes and increased rates of degeneration. This concept is well documented in the Six-Phase table of disease evolution<sup>2;4</sup>.

Homotoxicology, therefore, has a very precise basis for which disease manifests itself both acutely and chronically. This model is very useful in the understanding of disease processes in light of the therapeutic principles on which homotoxicology is based.

### **Anti-homotoxic therapy:**

Through practical application of homeopathy, the use of toxic substances that damage tissue in large doses where utilised in increasingly diluted compositions (potencies). This practice is scientifically supported by the Arndt-Schultz law (Rudolf Arndt, psychiatrist; Hugo Schultz, pharmacologist), which states:

- Very weak stimuli stimulate life function (i.e. homeopathic and anti-homotoxic compounds)
- Moderately strong stimuli accelerate these functions (some conventional medicines, such as vaccines)
- Strong stimuli act as inhibitors (most conventional medicines)
- The strongest stimuli suspend life functions

Thus all substances can be therapeutic or harmful, depending on the dosages used.

Frequently used medications in homotoxicology are specifically designed homoeopathic complexes (fixed combinations of remedies). All these remedies are diluted and succussed (potentiated) according to the rules of homoeopathy<sup>6</sup>, although the dilutions are typically very low as compared to single homeopathic remedies. The complexes used are thus specific low potency homeopathic remedies with specific bio-medical therapeutic uses. Although not important for the purposes of this article, there are also some key differences between homeopathy and homotoxicology.

According to homotoxicology, illness is defined as an overload of the connective tissue matrix with toxic substances, the homotoxins. In order to support elimination of these homotoxins, complex homeopathic medicines were developed<sup>5</sup>.

The strategies used in the treatment of disease based on the principles of homotoxicology are essentially threefold<sup>6</sup>:

- Prevention of further homotoxicological challenges
- Elimination of homotoxins
- Regulation of tissue negatively affected by homotoxins

### **How do anti-homotoxic medicines work?**

This is still an area of ongoing research into the various mechanisms that would explain the clinical effects of homotoxicology. Anti-homotoxic medicines are specialised preparations that are available from health professionals with experience in homotoxicology. This ensures that patients receive the maximum health benefits offered by this system of natural medicine<sup>7</sup>.

Preparations can be broadly divided into three main categories<sup>8</sup>:

- Those that have **detoxifying** functions of the lymphatic system and the connective tissues (tissue regulation).
- Other preparations act on the modification of the immune system, a process termed **immune-modulation**<sup>9</sup>.
- Then certain preparations are specifically designed to act on **specific conditions or tissues**, such as the thyroid or joints for example.

A great number of health problems respond well to anti-homotoxic therapy. The phase of a patient's symptoms or disease determines which particular anti-homotoxic preparation a health practitioner will use. When utilised correctly, three main phases of treatment are indicated<sup>8</sup>:

- Phase 1: Detoxification
- Phase 2: Immunomodulation<sup>9</sup>
- Phase 3: Specific focus on organ, tissue or enzyme system affected in the disease

### **Use of homotoxicology at the Clinic of Natural Medicine:**

At the Clinic of Natural Medicine, homotoxicology is utilised as an adjunct to treatment of various diseases when indicated. Not all patients undergo homotoxicological treatment as less certain aspects of the condition and history of the patient indicate this process is required.

The principles of homotoxicology are utilised most frequently in the form of biopuncture, especially in complaints affecting muscles or tendons (e.g. strains, sports injuries, arthritis, tension headaches, etc) and immune dysregulation (e.g. allergies and autoimmunity).

In chronic conditions, homotoxicology may be used as part of a long term, multidiscipline approach to the improvement of the symptoms and ultimately the expected medical process. This is based on the individual assessment of each patient.

### **References:**

1. <http://www.toxicologysource.com/whatistoxicology.html> [accessed January 2011]
2. Ferrara P, Marrone G, Emmanuele V, et al. 2008. Homotoxicological remedies versus desmopressin versus placebo in the treatment of enuresis: a randomised, double-blind, controlled trial. *Pediatr Nephrol* 23(2):269-74.
3. Reckeweg HH (1986) *Homotoxikologie, Ganzschau einer Synthese der Medizin*, 6th edn. Aurelia Verlag, Stuttgart.
4. Introduction to homotoxicology – <http://www.iah-online.com/cms/docs/doc26605.pdf> [accessed April 2009]
5. Valentiner U, Weiser M, Moll I, Schumacher U. 2003. The Effect of Homeopathic Plant Extract Solutions on the Cell Proliferation of Human Cutaneous Fibroblasts in vitro. *Forschende Komplementärmedizin und Klassische Naturheilkunde* 10:122-127
6. Ernst E, Schmidt K. 2004. Homotoxicology – a review of randomised trials. *Eur J Clin Pharmacol* 60: 299–306.
7. <http://www.heel.com.au/homotoxicology/index.shtml> [accessed January 2011]
8. Basic Preparations in Homotoxicology – <http://www.iah-online.com/cms/docs/doc26610.pdf> [accessed April 2009]
9. Porozov S, Cahalon L, Weiser M, et al. 2004. Inhibition of IL-1beta and TNFalpha secretion from resting and activated human immunocytes by the homeopathic medication Traumeel S. *Clinical and Developmental Immunology*. 2004;11:143-149.
10. Pascual-Carpe F, Vicente-Ortega V, Campos-Aranda M, Yañez-Gascón J. 2006. In vivo treatment of melanoma (B16F10) with a homeopathic agent and with a cytokine (IFN-alpha). *Oncology Research*. 2006;16(5):211-6.