

Frequencies and CAM United

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This Editorial is in some respects a sequel to “The Essential Unity of CAM” (Smith, 2010) in which I showed how frequency relates to CAM in its many aspects as well as being a comment on the paper on, “An Exploratory Study on Scientific Investigations in Homoeopathy using the Medical Analyzer” by Mishra et al. (pp?).

In that paper, Mishra and co-workers present data to show that it is possible to record the response of physiological parameters to homoeopathic medicines using a Medical Analyzer System which records the variability spectrum of the heart rate (HRV) and the peripheral blood flow (BFV). It is based on electrical impedance plethysmography and measures blood volume changes non-invasively through electrical impedance to which it is inversely proportional. They observe the changes produced in the variability spectrum of HRV and the BFV following administration of placebo and different potencies of certain homoeopathic medicines selected on the basis of cardio-respiratory function.

Over the past 30 years, my understanding regarding frequencies involved in living systems has evolved. Fröhlich (Smith, 2008) realised the importance of frequency coherence in living systems and Del Giudice and Preparata showed that this was concentrated within domains of coherence as a fundamental physical property of water. One consequence is a series of frequencies each proportional to a velocity that the system will support. One such velocity is that of light another is the velocity with which the coherence propagates, of the order of metres/second.. This gives frequency a fractal-like property inter-linking chemical spectra with technological frequencies and thence biological frequencies. Chemicals which can interact with vicinal water acquire a characteristic frequency signature, this includes the “Mother Tincture” for homeopathic potentiation. In general, these frequencies alternate between being stimulatory and depressive of biological activity. This is a chirality effect which combined with the fractal effect makes optically active L- & D- molecules effective at biological frequencies.

Acupuncture meridians and chakra points have characteristic endogenous frequencies by which they can be recognised but, these are normally constrained to the meridian. If there is stress on the target organ or the meridian such as by needling, acupressure or disease, these frequencies spread into the whole-body field. They can be very coherent. The 7.8 Hz Heart meridian frequency for 50 “Healthy Subjects” was ± 260 ppm. The relationship between the acupuncture meridians and the autonomic nervous system is to be found in the work of Dr. Reinhardt Voll (Kenyon, 1983). Homeopathic remedies and their potencies can be selected for stimulating or depressing effects on acupuncture meridians, chakras and associated target organs and on the autonomic nervous system.

The specific homeopathic remedies used by Mishra et al. were purchased by the writer as 6C potencies who then re-potentised them electronically into ‘erased’ water at the potencies they used. The characteristic frequencies of these electronic potentisations were measured. Tables A & B give the frequencies for the potencies listed in their corresponding Tables 1 & 2.

Table A.
Frequencies (Hz) Measured for Potencies in Table 1 (HRV) of Mishra et al.

↑ = stimulatory (hyperactive); ↓ = depressive or stressful (hypoactive).

<i>Aconite 30C</i>	<i>Gelsemium 200C</i>	<i>Pulsatilla 200C</i>	<i>Sulphur 200C</i>	<i>Sulphur 1M</i>
		↑ 2.903×10^{-4}	↑ 4.003×10^{-4}	↑ 4.003×10^{-4}
↑ 1.230×10^{-3}	↑ 1.003×10^{-3}	↓ 4.005×10^{-3}	↓ 3.123×10^{-3}	↓ 5.003×10^{-3}
↓ 2.423×10^{-2}	↓ 2.006×10^{-2}	↑ 2.903×10^{-2}	↑ 3.541×10^{-2}	↑ 3.201×10^{-2}
↑ 7.011×10^{-1}	↑ 4.012×10^{-1}		↓ 6.002×10^{-1}	
↓ 3.312×10^0	↓ 8.024×10^0	↓ 5.000×10^0		↓ 7.801×10^0
↑ $3.804 \times 10^{+2}$				
	↑ $6.002 \times 10^{+3}$			

Looking at Table 1 and Figure 4a in Mishra et al., it is seen that its 30C potency Aconite only slightly enhances the HRV and BFV responses. The common feature in the measured potencies in Table A is that they all stimulate the Sanjiao (Triple-Warmer) meridian through its nominal frequency $\uparrow 6.002 \times 10^{+3}$. This meridian relates to activities in the three body cavities: ingestion, digestion and secretion.

In Figure 4a, Aconite 30C is the only potency enhancing the HRV responses. It only has two frequencies near any meridian. The frequency $\downarrow 2.423 \times 10^{-2}$ depresses the Small Intestine meridian which is listed in Voll's ANS chart under 'sympathetic – superior and inferior mesenteric plexus'. The frequency $\uparrow 7.011 \times 10^{-1}$ stimulates the Fatty Degeneration meridian which appears in patients who have toxic chemicals dissolved in their body lipids.

Regarding Table 2 of Mishra et al., the common feature of these potencies (see Table B) is that all these potencies contain the frequency characteristic of the Heart meridian 7.802 Hz. The Heart meridian covers not only the activities of heart and circulation, but also consciousness and mental activity. In this case, it does not seem to matter whether the frequency is stimulating or depressing. Frequencies around 3×10^{-3} affect the sympathetic branch of the ANS and those around 3×10^{-1} affect the parasympathetic branch of the ANS. Although appearing in depressive phase in Aconite 1M and Phosphorous 200C they do not seem to have altered the predominance of the effect of the Heart meridian frequency.

Table B
Frequencies (Hz) Measured for Potencies in Table 2 (BFV) of Mishra et al.

↑ = stimulatory (hyperactive); ↓ = depressive or stressful (hypoactive).

<i>Aconite 1M</i>	<i>Gelsemium 1M</i>	<i>Phosphorous 1M</i>	<i>Phosphorous 200C</i>	<i>Sulphur 1M</i>
↑ 3.114×10^{-4}	↑ 3.030×10^{-4}	↑ 5.501×10^{-4}		↑ 4.003×10^{-4}
↓ 3.114×10^{-3}	↓ 2.413×10^{-3}			↓ 5.003×10^{-3}
↑ 3.114×10^{-2}	↑ 5.113×10^{-2}	↓ 3.004×10^{-2}	↑ 1.502×10^{-2}	↑ 3.201×10^{-2}
↓ 3.114×10^{-1}	↓ 4.013×10^{-1}	↑ 4.302×10^{-1}	↓ 3.005×10^{-1}	
↑ 7.802×10^0	↑ 7.801×10^0	↓ 7.802×10^0	↑ 7.802×10^0	↓ 7.801×10^0
↓ $6.001 \times 10^{+1}$		↑ $1.502 \times 10^{+1}$		
↑ $6.001 \times 10^{+3}$				↑ $6.002 \times 10^{+3}$

Table C
Frequencies (Hz) Measured for Potencies of *Aconitum napellus*

↑ = stimulatory (hyperactive); ↓ = depressive or stressful (hypoactive).

6C	30C	200C	1M	10M
		↑3.001 × 10 ⁻⁴	↑3.114 × 10 ⁻⁴	↑3.003 × 10 ⁻⁴
				↓6.314 × 10 ⁻⁴
	↑1.230 × 10 ⁻³	↓3.001 × 10 ⁻³	↓3.114 × 10 ⁻³	↑2.312 × 10 ⁻³
				↓7.611 × 10 ⁻³
↑1.303 × 10 ⁻²	↓2.423 × 10 ⁻²	↑3.001 × 10 ⁻²	↑3.114 × 10 ⁻²	↑4.812 × 10 ⁻²
	↑7.011 × 10 ⁻¹	↓3.001 × 10 ⁻¹	↓3.114 × 10 ⁻¹	↓3.001 × 10 ⁻¹
↓1.505 × 10 ⁰	↓3.312 × 10 ⁰	↑3.001 × 10 ⁰	↑7.802 × 10 ⁰	
		↓3.001 × 10 ⁺¹	↓6.001 × 10 ⁺¹	↑3.001 × 10 ⁺¹
↑2.340 × 10 ⁺²	↑3.804 × 10 ⁺²	↑3.001 × 10 ⁺²		↓3.131 × 10 ⁺²
			↑6.001 × 10 ⁺³	↑3.603 × 10 ⁺³

Table C lists the frequencies for potencies appearing in Figures 4 a & b of Mishra et al. Looking at Figure 4b, the effect of Aconite 200C is interesting in that it depresses the response below that of the placebo. While it contains frequencies depressing the whole ANS, it also has an unusual precise decade pattern of frequencies. This occurs in *compositae* potentisations and in potentisations from single crystals of quartz and silicon and in somatropin HGH. The Aconite 1M potency stimulates the BFV and although containing the ANS depressive frequencies, it contains both the Heart meridian frequency (↑7.802 × 10⁰) and the Sanjiao frequency (↑6.001 × 10⁺³). These seem to be able to over-ride any effects of the ANS depression frequencies. It also contains two short decade sequences.

The importance of this work by Mishra and co-workers is that they use a standard clinical tool for the assessment of effects of homeopathic potencies. ‘Google’ will find much information on BFV and HRV. One source remarks that, “It is believed that HRV will become as common as pulse, blood pressure or temperature in patient charts in the near future”. Electrically sensitive patients give instant feedback which is why it was possible to readily determine the frequencies to which they were sensitive. BFV and HRV offer similarly rapid feedback in respect of the effectiveness of applicable homeopathic remedies and for that matter CAM therapies in general so, the clinician no longer has to say, “Try these tablets and come back in a month and tell me if they did you any good”.

References

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