



What is Endobiogénie?

Dan Kenner, PhD, Lac, draws a history of the origins of Endobiogeny, The examples presented in this article will help the practitioner to understand how he can use this new tool to diagnose the true etiology of imbalances in an organism and how he can select therapies. He also makes clear how endobiogeny is the first attempt to offer with neuroendocrine concepts a definition of the "terrain" and to provide the tool for its quantification: the "biology of functions"

ENDO BIOGENIC MEDICINE: A NEUROENDOCRINE APPROACH TO BOTANICAL THERAPIES

By Dan Kenner, PhD, LAc

Botanical medicine in the US is often practiced as a sort of "green allopathy," in which plant-derived substances are used in place of synthetic pharmaceuticals for control of specific symptoms. But plant medicine has potential far beyond symptom relief when used as part of a comprehensive system based on individualized metabolic and neurohormonal patterns which are the ultimate determinants of health and disease.

Drs. Jean-Claude Lapraz and Christian Duraffourd, two Paris-based physicians, lead a core group of doctors in France who are advancing an approach to botanical medicine that uses a sophisticated system of clinical pattern recognition called "Endobiogenic Medicine." This system has been under development since the early 1970s, according to consensus among this core group of physicians as well as various professional organizations and faculties of pharmacy and medicine in France, Belgium, Greece, Italy, Switzerland, Tunisia, the Ivory Coast and Mexico.

While the Endobiogenic approach pioneered by Drs. Duraffourd and Lapraz is not yet in the mainstream of French medical practice, neither is it isolated on the fringe. Drs. Duraffourd and Lapraz have consulted with French government ministries including the Ministry of Health, the Department of Pharmacy and Medicine, the Ministry of Education, the Office of the Prime Minister and government ministries of the EEC. They have also consulted with various hospitals including the Department of Oncology at the Hopitaux de Paris, where their therapeutic concept has been incorporated into cancer treatment for more than eight years. They have also worked with the Pasteur Institute on AIDS Research, and with other institutions in France and in Sweden, Italy, the Ukraine, Madagascar, Tunisia, and Mali to develop ongoing treatment plans for a whole range of medical challenges like amyotrophic lateral sclerosis (ALS, or Lou Gehrig's disease), leprosy, leg ulcers, cholera, infantile diarrhea, and AIDS.

Drs. Lapraz and Duraffourd have also engaged in research on the anti-bacterial activity of plant essential oils, and evaluation of the clinical activity of medicinal plants. They are studying the anxiolytic and hypnotic activity of passionflower (*Passiflora* spp.) and Lemon balm (*Melissa officinalis*), and the hepatic and metabolic activity of wide range botanical extracts. They are also exploring phytotherapeutic possibilities for treatment of female breast cancer, prostate adenoma, evaluation of, and numerous others.

Endobiogenic Medicine is based on physiology, pathology, developmental biology and various specialties within conventional medicine using an integrative framework. It is a feat of organization and insight that is intended to complement the reductionist worldview of conventional medicine. Dr. Lapraz plans to bring Endobiogenic Medicine to the US in 2003, with a training series beginning in February in San Francisco (the location of the May and September seminars will be announced).

Botanical medicine has a firm place in conventional practice in many European countries. There are over 3,000 physicians in France who use botanical medicine for primary care. "Phytotherapy" or "phytoaromatherapy" as they call it, is now used not only for ordinary self-limiting complaints, but also for treatment of infections without antibiotics, autoimmune diseases, asthma and serious chronic, life-threatening diseases such as cancer. According to Yves Requena, MD, a holistic physician in Aix-en-Provence, who is one of the core members of the Endobiogenic Medicine group and a physician-acupuncturist, "it is essential to know phytotherapy or homeopathy, because so many patients don't want drugs or surgery except as a last resort." The Roots of Endobiogenic Medicine

In the 1960s, early practitioners of phytoaromatherapy in France, such as Paul Duraffourd, the father of Christian Duraffourd, and Jean Valnet among others, endeavored to develop a scientific foundation for clinical phytoaromatherapy. There were a few surprises along the way. For example, when studying antibacterial properties of plant essential oils, they discovered that the presumed "active principles" in several plant essential oils were not a decisive factor in the oils' anti-infectious properties. They also discovered that a minute dose of an essential oil was sufficient to control an infection in vivo compared to the relative quantity required in vitro. They also identified which essential oils killed certain pathogenic microbes in vitro, but found that these results were not reliably transferable to the clinic.

They began to suspect that it was a fallacy to attempt to match the antiseptic properties of essential oils and tinctures to specific microbes. Instead they found that they had to match the properties of the herbs to the dynamics of the patient's pathophysiology. This is the traditional model of the terrain, in which the global properties of the internal condition are considered to be the primary factor underlying a given disease state. In other words, the germs are a marker of an infection, not its cause. It became necessary to match the essential oil or extract not to a single type of microbe, but to the patient's body condition taken as a whole, since it is the individual's physiologic condition that produced the culture medium in which the pathogens proliferated.

Toward a Model of Physiologic Terrain

The problem was how to create a whole system model of the terrain. Medical acupuncturists and other practitioners of Chinese medicine classify their patients according to criteria defined by the Chinese medical paradigm. There are various symptoms and diatheses classified as Wood, Fire, Earth, Metal and Water. They also classified therapeutic plants according to Wood, Fire, etc. so that there are Wood Yang plants, Wood Yin plants and so forth.

The early pioneers of Endobiogenic medicine sought a similar comprehensive descriptive system, but one that would be accessible to Western-trained physicians not familiar with Eastern medical concepts. They began to develop a model based on the neuroendocrine system. Like Chinese medicine, Endobiogenic Medicine uses a system of correspondences that allows doctors to customize the treatment according to the patient's unique clinical presentation instead of trying to match a remedy to a disease name.

The system was developed based on years of careful clinical observation. With a view of the interconnectedness of all of body systems and an integrative view of physiology, Endobiogenic medicine is also the result of 30 years of day-to-day clinical practice, both private practice and hospital-based care.

The neuroendocrine model is actually more detailed than the Chinese medicine model and it is based on an integrative interpretation of blood test data. Dr. Christian Duraffourd developed a method of interpreting blood test results according to new advances in academic physiology.

In the Endobiogenic model, patients are evaluated through a detailed history and a physical examination that includes palpation, and testing of many classical reflexes, procedures not frequently used in today's physical examination. Thorough palpation examination is also used to evaluate the condition of various hormone receptor sites. For example, according to research in developmental biology, a swollen ascending colon can be a sign of excess follicle-stimulating hormone (FSH) secretion since this area is rich in FSH receptors. Mydriasis (abnormal dilation of the pupils) can be one indication of an imbalance between the sympathetic and parasympathetic nervous systems. Parotid gland congestion can be a sign of dysfunction of the exocrine pancreas.

Functional Indices: Measuring Physiologic Relationships

Another key patient assessment tool is the system of blood test interpretation called the "Biology of functions" which was developed by Dr. Duraffourd based on his research. He observed that conventional blood testing methodology reflects neither a true picture of the patient's clinical presentation nor a true evaluation of risk. From 11 test parameters, 154 "indices" of various aspects of the matrix of metabolic relationships can be calculated. The indices collectively give a "behind the scenes" view of the dynamic forces underlying the patient's condition. They also indicate and prioritize therapeutic interventions with a higher degree of specificity.

Each blood test parameter can come back in the normal range, but after the data is permuted and recombined, it could reveal a picture of high cancer likelihood, excess thyroid function or the like. They have used the test on over

5,000 patients and feel confident about what they are doing. I have done about 20 patients and the results seem to match the clinical presentation.

Each index represents the relationships between various physiological functions. Dr. Duraffourd's indices include the "index of genital hormone relationships," "index of genital-thyroid relationships," "thyroid index," "estrogenic index," "fibrosis index," "cell turnover index," "index of hypothalamic influence," "index of platelet mobility," "index of thyroid activation," "index of estrogen fraction loF1," "index of estrogen fraction loF2," "adrenal cortex index," "apoptosis index," "index of demyelination," "index of DNA fracture," "index of carcinogenicity," "index of carcinogenic expansion," "index of cell wall fracture," and so forth.

There is often more than one single index associated with certain key physiologic functions. For example, there are 10 different indices related to thyroid function, as well as separate indices related to thyroid stimulating hormone (TSH) and thyrotropin releasing hormone (TRH) function. There are also several indices of carcinogenesis that can be factored in with numerous other indices related to estrogen influence. The overall picture allows the practitioner to evaluate risk, assess progress during treatment, and refine the treatment plan to accommodate a large number of interacting physiological forces.

Reshaping the Neuroendocrine Terrain

Endobiogenic medicine individualizes treatment based on the big picture of a patient's neuroendocrine milieu rather than on disease classifications. For example, if a patient is in a sympathicotonic condition are indicated. If a patient shows poor regulation of the hypothalamus-thyroid axis, extracts or oils to regulate TRH (thyrotropin releasing hormone) secretion are used.

The core principle in Endobiogenic therapy is to correct the terrain so that it no longer supports the growth of particular pathogens or engenders chronic disease states. In this way, physicians are able to prevent disease recurrences, and help the body move toward self-regulation in chronic disease.

Even though the system of diagnosis and treatment is based on neurotransmitter and hormone activity, Drs. Lapraz and Duraffourd do not recommend the use of actual hormones. Prescription drugs are also seldom recommended. Instead botanical extracts are prescribed based on their effects in regulating the neuroendocrine system. They are successful in this to the extent that they now are able to manage thyroidectomized patients without using thyroid hormone, and diabetics without insulin. They have been able to treat the complications of menopause entirely with botanical extracts and essential oils, and to wean asthmatic patients from drugs. Routinely, they treat intractable skin problems, neurological problems, cardiovascular problems,

digestive problems, hepatitis, genitourinary problems, musculoskeletal problems, and many cases of cancer without conventional chemotherapy.

Drs. Duraffourd and Lapraz use pharmaceutical grade plant extracts and essential oils to modulate nervous system and endocrine function. The core group of physicians who have committed themselves to the Endobiogenic approach have worked for years to establish the precise effects of various botanicals as regulators or modulators of neuroendocrine activity.

In addition to regulating the neurohormonal milieu, botanical medicines are also used for symptomatic treatment and for "drainage." Drainage refers to the process by which congestion is relieved. This could be simply sinus congestion or bronchial congestion that can be cleared up by an expectorant. But congestion can also refer to a condition in which neurotransmitter or hormone receptors are unable to respond to a particular stimulus. Insulin resistance is one example of this, but most hormones can be affected by impaired receptor uptake. Another example is pelvic congestion in which the venous or lymphatic structures in the pelvis, or swelling of any of the pelvic organs can cause impairment of function. Botanical prescriptions are crafted to drain areas of congestion, treat symptoms and address imbalances in neurohormonal function.

Dr. Lapraz states that they have used the Functional Biology Panel in over 25,000 patients and that they feel confident in its clinical utility. He cautions that it alone does not constitute a diagnosis, because the 154 indices still have to be interpreted and analyzed. However, he and his colleagues have found that it is extremely useful in follow-up evaluation and in adjusting the treatment when the patient is not able to come for an office visit.

References:

Duraffourd C, d'Hervicourt L, Lapraz J-C, Cahiers de Phytotherapie Clinique, Volumes I - V, Editions Masson, Paris, 1983-1996

Duraffourd C, d'Hervicourt L, Lapraz J-C, Phytotherapie et Dermatologie, Editions Masson, Paris, 1982

Duraffourd C, Lapraz J-C, Traite de Phytotherapie Clinique - Medicine et Endobiogenie, Editions Masson, Paris, 2002

Kenner D, Botanical Medicine: A European Professional Perspective, Paradigm Publications, Brookline, MA, 1996

Introduction to Endobiogenic Medicine audiotapes with 68 page booklet available from Ormed, P.O. Box 1021, Forestville, CA 95436; Tel. (707) 575-7070 www.ormedinstitute.com

● For further information on the series of Endobiogenic Medicine training courses to be led by Dr. Jean-Claude Lapraz contact:

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