

The new *BICOM Multisoft program* – practical trial

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INTRODUCTION

I am sure you will agree with me that our work in medicine is centred on the need for holistic diagnosis and therapy. Not reparatory medicine at this or that point but healing the whole individual – as far as we are able to achieve this. Bioresonance therapy can play a central role here, both at a diagnostic and a therapeutic level. And here, in turn, the BICOM device is at the forefront. With its numerous different test options and huge number of pre-installed therapy programs it meets this need for a holistic approach. The range of diagnoses and therapies is suitable both for newcomers to the field of energetic medicine and “old hands”. Anyone can use it. Novices will find therapy programs and information on every indication in the manual, while experienced users are offered an immense range of individual settings and test options. This demonstrates that BICOM really is a sophisticated product. Of all the BRT devices I am familiar with, the BICOM really is “number one”.

However, nothing is so good that it cannot be improved.

New computer-assisted diagnosis and therapy

Computers are often viewed with suspicion – particularly in naturopathic circles – yet they can be an extremely useful tool. A number of years ago the introduction of electronic repertorisation programs and electronic materia medica was received with considerable scepticism by homeopaths. Today hardly anyone in homeopathy can imagine taking a patient’s history and analysing a case without using a computer. I too use them. You must simply not let yourself become a slave to them. The human element should always be the most important factor, in this case first the patient and then you, the therapist.

So it was that, just under two years ago, Herr

Brügemann came to me asking if I could imagine testing and treating with the frequency spectra of substances which were stored electronically and, if so, if I would be prepared to develop a suitable plan for computer-assisted BICOM resonance diagnosis and therapy, combining holistic thinking and the latest technology. After hesitating briefly – I could not imagine how you could store the frequency spectrum of milk or wheat, for example, digitally and reproduce it via a computer’s soundcard –, I found the project so exciting however, that I agreed. And as for my insistence that medicine, even if controlled electronically, should be holistic and in tune with the needs of patient and therapist, I was already preaching to the converted with Herr and Frau Brügemann.

Diagnosis with stored frequency patterns

Phase 1 of the project now consisted of finding out whether digitally stored frequency patterns were even suitable for use in diagnosis. I was able to carry out a test series using the program. To put it briefly: it works. Please do not ask me how. I do not understand the technical principles behind it. Nor do I know how the entire frequency range of a symphony orchestra can be captured digitally on a CD yet I enjoy listening to classical pieces reproduced with the highest sound quality and resolution.

Diagnostic plan

In phase 2 the aim was to create a diagnostic plan which would meet the demands for a holistic approach and the different requirements of novices and experienced users. I can now present the result to you. The plan was submitted to several experienced colleagues who were asked to give their opinion and suggestions. Their ideas were for the

most part included. So I should like to thank these colleagues.

“*Before treatment the gods made a diagnosis*” goes an old and very true saying. I should like to modify it: “*Before diagnosis, the gods took the case history.*” This is also part of the diagnosis, the most important part in fact. And here I do not mean the traditional concept of case history which contents itself with superficially asking about symptoms. Instead I mean case history in the classic homeopathic sense, in other words, a detailed case history which enables me to record information on the patient as a whole person – his physical, emotional, mental state as well as his degree of integration into his material and psychosocial environment. If we want to treat chronic diseases successfully, there is no “psychological – somatic”, both aspects are always present and there is no “internal – external”, only “not only – but also”.

So you should take an extremely accurate case history. Primarily this has nothing to do with bioresonance therapy. It is (actually) a general duty of all physicians.

The case history (which also includes an accurate family case history) will give you the information you need for testing. Where should I look? Environment? Allergy? Psychological state? Inoculations? Hereditary conditions? And so on? As regards bioresonance, it makes no sense to “blindly” test the several thousand test substances in the search for a possible disturbance. It should be done in a targeted fashion, having regard for the therapist’s time as well.

Next comes the physical examination. This too is a matter of course for the physician. We take a wider view: it is not just the organs which matter: enlarged liver, heart murmur, renal bed sensitive to tapping. Record “alternative” findings, scars (especially on meridians), painful Head’s zones, acupuncture trigger points, Weihe’s pressure points, foot reflex zones, lingual and auriculo-diagnosis, discrepancies in body symmetry, note intuitive factors, body language, etc.

When you have recorded all this and perhaps sorted the information a little, you can then begin bioresonance diagnosis. The computer program basically offers you two options. Depending on your previous experience and your ideas on the development of the particular patient’s condition, you can test causally or in relation to the organs involved. Those of you who favour a more orthodox approach will find it easier with the latter. But

this test method is often also helpful even for the more experienced amongst us.

The rough structure of the test procedure is outlined diagrammatically in the appendix (**fig. 1**, **fig. 2**). There is not enough space in this volume of papers to list all two thousand plus test substances in detail. The program automatically adopts the correct device setting (BICOM parameters, A, Ai) for testing.

The “BICOM test” program section

Nevertheless I should like to take a closer look at some important details of the “BICOM test” program section.

Dr Lange’s orthomolecular test set is included in its entirety. This should be part of all basic testing. For our bodies cannot function without “fuel”!

Overview testing is important: it tells us where the stresses and disturbances actually are. It follows the “5 element theory”.

Please always test the “basic physical stresses”: geopathy, electrical smog, radiation stress. It is virtually impossible for the body to regulate itself without eliminating these factors.

Always include miasmas or “hereditary toxins” in testing. If you get a positive result here, the patient can only be rid of, for example, his allergies with lasting effect if you include them in the treatment.

You should test out everything else in a targeted fashion. Don’t test “mechanically” but filter on the basis of the case history and examination. For example, it makes little sense looking for pollen allergies if there are no appropriate symptoms. Extensive testing is only recommended if the clinical picture is totally unclear. The range of test substances is deliberately restricted to important and common ones but still runs to around 1700, all the same. Should this prove inadequate in a particular case, there is the option to switch to a more extensive database offering over 6000 test substances.

Many substances contain cross-references which tell you what “cross-allergenicities” exist or what deeper causes might lie behind the condition, a valuable addition, both from the point of view of causal connections and test speed. In this way you will arrive at the central point of the disturbance quickly and accurately. This is a completely new feature not, to my knowledge, offered by any other product.

There is often uncertainty about the order in which to treat conditions. You can obviously test this out

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kinesiologically, by swinging a pendulum or better
still by using the *BICOM Multisoft program*.

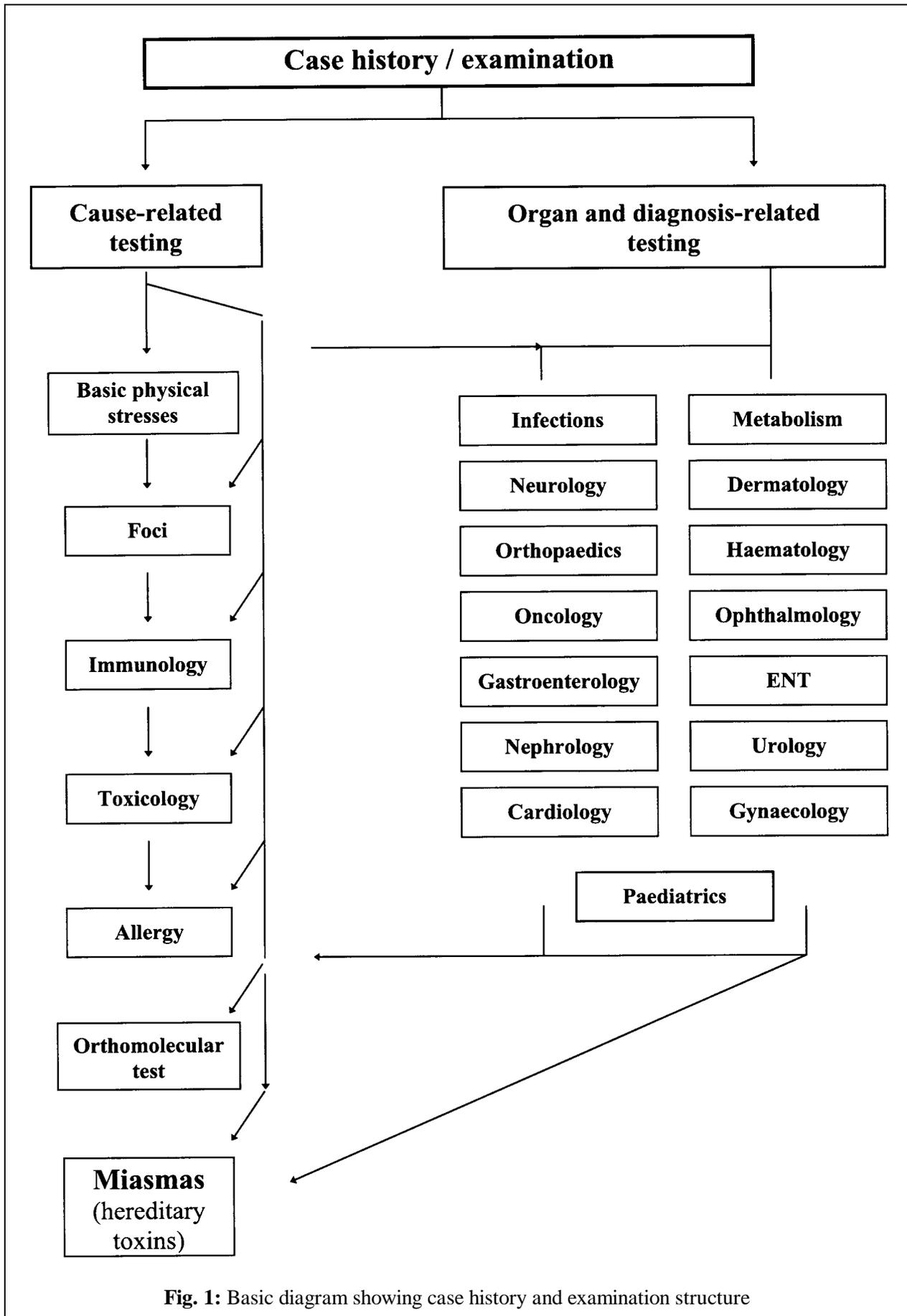


Fig. 1: Basic diagram showing case history and examination structure

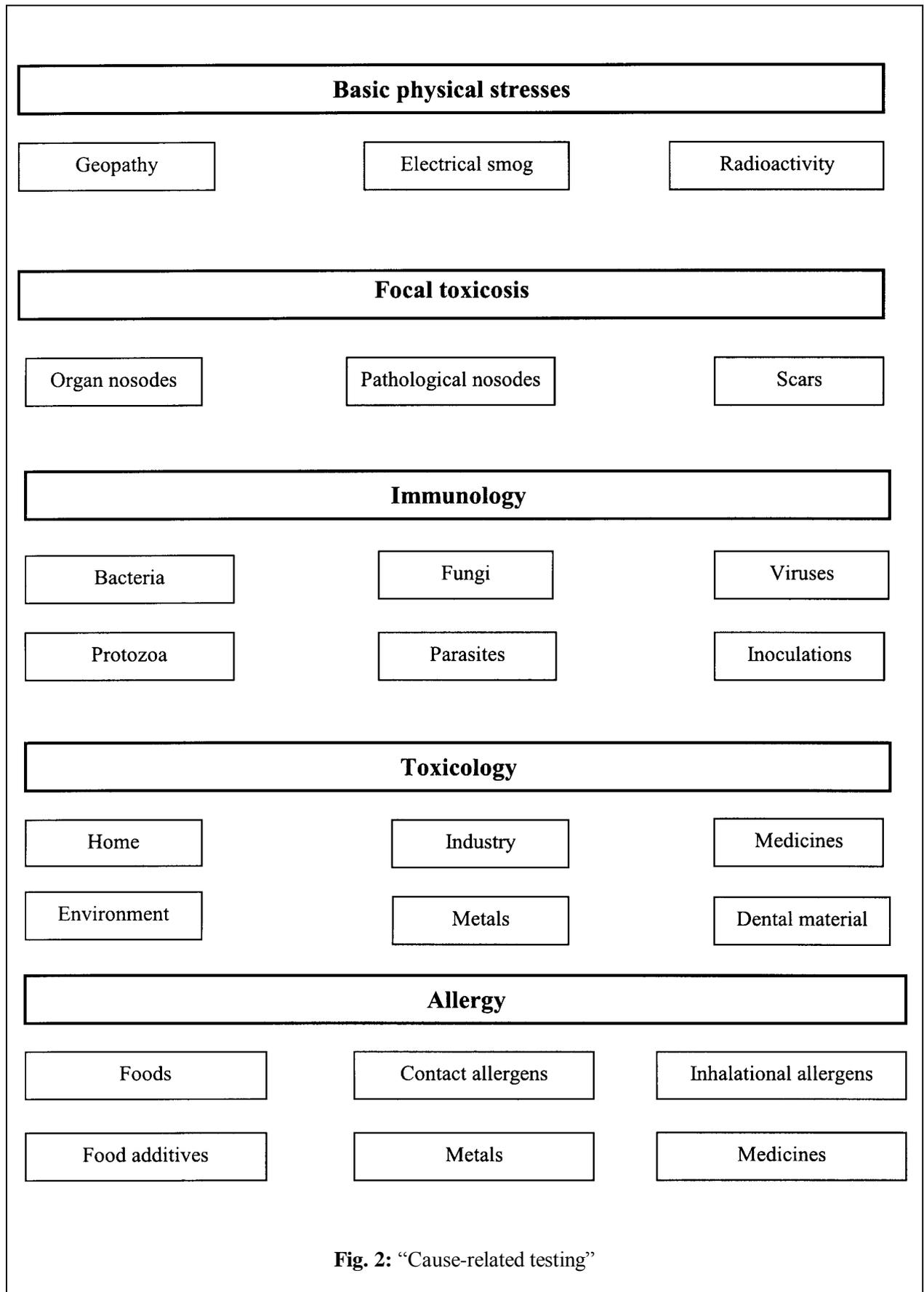


Fig. 2: "Cause-related testing"

Using a special electronic circuit it is possible to determine actual priorities for each individual therapy session. Hyperintensive reactions or exacerbation caused by eliminating at the wrong time are largely avoided since you can “question” the patient through the test as to what has priority.

An additional positive feature is the inclusion of substance frequency spectra which can be applied with the therapy and replace medicines which would otherwise have to be placed in the input cup. The experimental values here are very good.

I would gladly tell you more about my system for classifying diagnosis and therapy however this would take up a whole seminar or workshop.

The “BICOM Pilot” program section

Another section of the program – “*BICOM Pilot*” – contains the control functions for electroacupuncture measurement and therapy settings for the BICOM. It is possible to control all the functions of the BICOM by computer.

The test section is an exact copy of the original. Test results are recorded electronically and can be reproduced in various different informative diagrams on the screen or using the printer. This is helpful for the therapist and never fails to impress the patient if they can take a colour printout showing the state of their health home with them. Overall development can be illustrated clearly by comparing several test series.

Seeing the pressure curve illustrated is informative for the tester, especially if inexperienced. When the “plateau” is reached, you know the measured value is accurate. So a high degree of reproducibility is achieved.

All test results, with the exception of EAV readings, can also obviously be determined using other test methods such as biotensor, kinesiology, pulse test and stored.

In the therapy section you can adjust all the settings of the different parameters as you would on the BICOM itself, only more easily. When using the BICOM 2000, in which the electrode unit is simplified, program strings can be performed to save time.

PRACTICAL TRIAL

Now to the tenor of my paper: the practical trial. Some points have already been addressed. I now had just over a year to test the digitised substance frequencies and document the results. The follow-

ing assertions relate to a group of 72 patients on whom I performed tests and therapy with frequencies stored on the computer. Most of the testing was conducted with the biotensor (50 patients = 70 %), the remainder with electroacupuncture (30 %). Throughout the entire therapy period, all treatment and testing was performed using the computer. In the initial testing the same substances were tested and checked to compare them with the traditional test sets (Schumacher, Keymer, Lange). There was considerable agreement. The differences largely related to unmodified foods, such as we repeatedly find in our test sets. If the case history gives rise to suspicions on this score, always test the unmodified foods.

Similar results were found for the treatment data. In my practice, the average recovery rate with traditional therapies is 85 %, a further 7 % show an improvement, 4 % are unsuccessful and 4 % cannot be checked. Therapy using digitised frequencies is no different. These figures were checked using test procedures and especially using patients’ statements and their state of health, for ultimately it is this which represents the deciding criterion (fig. 3).

I was only able to test the “*BICOM Pilot*” section briefly. The test and therapy section make the same reliable impression as the corresponding functions of the BICOM itself. After working with the software I have only this to say: it has been adapted very well, all the BICOM functions can be activated using the keyboard or mouse. Therapy and diagnostic data from a session can be saved and compared in later sessions. I particularly like the electroacupuncture pressure curve which can be used to optimise the test results and especially the option to print out test data for the patient or their medical records to provide a quick overview. That goes down particularly well with patients: accurate computer-generated readings which can be recorded on paper! A computer printout speaks volumes!

“WE’RE ALL PULLING IN THE SAME DIRECTION”

As I said at the start, nothing is so perfect that it cannot be improved. We hope that, as practising therapists, you will help us by making suggestions, putting forward improvements. This is particularly true for the cross-references. If you notice that certain allergies or conditions are always linked with one another, please let us know! You know

Therapeutic success with digitised frequency patterns

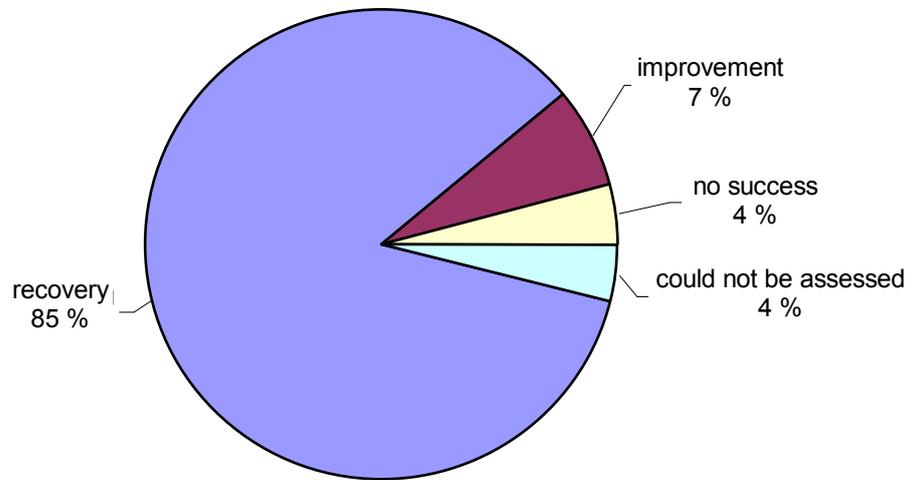


Fig. 3: Therapy results with BICOM Multisoft

about milk allergy which is very often, in fact almost always, combined with *Geotrichum candidum*, Ascarides and tuberculin or hen's egg white allergy based on the tetanus inoculation or cat hair allergy through mercury contamination. In a short time we could create a vast comprehensive database based on the experiences of a large number of contributors and discover causal links which would especially benefit the treatment of the chronically sick with degenerative or auto-immune disorders. That is what we are aiming for! Incidentally, this is something which particularly struck me about bioresonance circles right at the start (over 10 years ago): "We're all pulling in the same direction." There is very little rivalry between practitioners of BRT. Information and experiences are exchanged freely and unreservedly. Such an atti-

tude is not so easy to find in other areas of medicine!

All in all, I feel that the BICOM Multisoft software represents a significant advance: firstly through the opportunity to operate the BICOM, including the test and therapy section, from a computer, secondly through the diagnostic classification system with which you can really get right to the root of all diseases – in so far as we humans are ever capable of curing disease.

Holistic diagnosis and therapy, computer-assisted to save the therapist time and effort and offer the patient causal treatment and a good chance of recovery – is this a pipe-dream which has now become reality?