

Treating chronic inflammatory bowel diseases with BICOM and Multisoft software

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To begin with I would like to give you a brief overview of chronic inflammatory bowel diseases, IBD for short and even more so to give you a demonstration of a simple combined treatment using Multisoft software.

What are chronic inflammatory bowel diseases, the IBDs? Crohn's disease and ulcerative colitis.

Symptoms

The first symptoms of inflammation of the bowel could be:

- Flatulence
- Bloody stools with diarrhoea
- Feeling of exhaustion
- Stomach pains

Other symptoms include:

- Constipation
- Anaemia
- Weight loss
- Skin rashes
- Nausea

Many patients in your practice will certainly come to mind when you read these symptoms. This does not always mean we are dealing with IBD. However today we are working on the basis of more than 300,000 sufferers. Particular attention should be given if the first symptoms come as sudden attacks. This suggests a diagnosis of chronic inflammatory bowel disease.

Clinical pictures

Crohn's disease

With Crohn's disease the inflammation of the bowel can cover the whole digestive tract, i.e. from the mouth to the anus. Mostly however the inflammatory processes occur in the bowel region and are not

usually contiguous. This means there are alternating areas of healthy bowel and areas with signs of disease.

At the foci of inflammation all the layers of the bowel are affected and sometimes these are completely destroyed. This is where purulent areas (abscesses) may form or the inflammation forms passages (fistula) into the adjoining tissue. Furthermore it can be seen that inward bulges in the intestine form so that it becomes narrower (stenoses)

Ulcerative colitis

The clinical picture of ulcerative colitis can be differentiated from Crohn's disease in that the inflammation in more than 95% of cases is limited to the region of the colon. The inflammation extends continuously over the whole of the affected region of the bowel. However, it is solely the mucous membrane of the uppermost layer of the colon which is affected such that there is incomplete penetration of the intestinal tissue.

Since differentiation between Crohn's disease and colitis is difficult on the basis of investigative results, we talk about **indeterminate colitis** in around 10% of cases.

It is typical when diagnosing Crohn's disease or colitis that in many cases it is only after a long period of persistent symptoms that these symptoms can be classified as chronic inflammatory bowel

disease. This is because there are a number of diseases which also go hand in hand with the cardinal symptoms of IBD – diarrhoea. This has meant that in the past it has often taken many years to diagnose IBD from the initial symptoms.

Causes

In spite of intensive research, the causes of IBD are largely unknown. It is probably a case of a mixture of triggering factors.

- Genes – The disease is often hereditary in families, however the exact pattern of inheritance is as yet unknown.
- Environmental influences – It is thought that these also play a part in the outbreak of the disease. There is evidence that the disease occurs more frequently in industrialised countries of the northern hemisphere than in the less industrialised countries of the southern hemisphere.
- Poor diet
- Lack of exercise
- Environmental toxins
- Stress

In the meantime it has been proved that smokers have an increased risk of becoming ill with Crohn's disease.

On the other hand there is insufficient proof that nutritional and psychological factors play a part. We do have experiential evidence however that psychological factors can cause a flare-up

and in this respect I recommend using the programs for depression stored in the Bicom device. If your patient is stressed psychologically or suffering with mental exhaustion, leave the basic program and carry out therapy using the program combination 125, 432 and 911. I change the time to 3 minutes per program. If necessary use the activate vitality program 900.

I would like to point out, however, that we

cannot treat the causes of psychological illnesses with bioresonance therapy. We only provide treatment at the physical level. However, I have always found in my practice that it is precisely these programs that relax the patient and make the subsequent treatment programs more intensely effective.

Another particular problem is the increased risk of cancer with Crohn's and colitis patients. It has been found that after long periods of chronic active illness, there is an increase in colon cancer. Therefore it is necessary that IBD patients have ongoing medical monitoring.

You will all be familiar with Paracelsus, the physician and mystic. He lived from 1493-1543 and because of his convictions and teachings was often a thorn in the side of his colleagues. He coined the expression:

The bowel harbours death.

One thing is clear at any rate: IBD involves a disturbance of a natural barrier of the body provided by the bowel against bacteria and other intruders.

Facts about the intestine

- Length approx. 8 metres (mouth to anus)
- Surface area 300–400 m² (Tennis court 260 m²)
- Has more than 100 million nerve cells
- Colonised with approx. 500 types of bacteria
- In a healthy human being there are 100 billion bacteria per 10 billion cells – i.e. there are around ten times more bacteria in the body than there are cells. These have a greater weight and a greater metabolic capacity than the human liver.
- The mucous membrane of the intestine houses approx. 70 per cent of all the body's defence cells.

Cause and treatment

Where intestinal flora is damaged bacteria can penetrate the wall of the intestine. This then triggers an immune response in the body with the affected areas becoming inflamed. If the immune response gets out of control, the body's own natural defence system can no longer be contained and this leads to chronic inflammation in the internal body regions. The result is IBD.

As soon as a patient's disease is associated with an excessive reaction of the immune system, I ask for an analysis of intestinal flora. Here you can see the results for a male patient aged 38. (Picture)

You will see that the lactobacteria and E. coli are greatly reduced. I frequently find there are reduced levels of this type of bacteria, bifidobacteria and enterococci in stool examinations.

We also see a shift in the pH value into the acid milieu, positive evidence of leukocytes together with increased growth of yeast-like fungi.

The positive evidence of leukocytes alone suggests a differential diagnosis of IBD or an infectious bowel disease. Of course other inflammatory diseases in the gastrointestinal tract, e.g. chronic inflammatory gastritis can produce positive evidence of leukocytes.

It is astonishing that this patient, who has been suffering from symptoms since 2006 and who was diagnosed with IBD in 2007 took part as a yachtsman in the 2004 Olympic Games in Sydney and 2008 in Peking. This is a disease which would not really be associated with a high performance sportsman in such peak condition. His first symptoms were back pain so an examination of the stools may also be helpful where there are such diffuse symptoms.

I often ask the patient to provide a stool sample so that the result is available prior to starting treatment. So from the start the immune system can be stabilised by the

administration of intestinal bacteria. For the bifidobacteria and lactobacteria, I recommend Symbiolact comp., where there is a deficiency in enterococci, Symbioflor 1 and for a lack of E. coli, Symbioflor 2.

If there is an excess of candida albicans it is absolutely vital to treat this first. This is done firstly by the introduction of missing intestinal bacteria, and secondly by a special diet and Bicom therapy.

Use of Multisoft software in practice

At this point I would like to demonstrate to you the use of *Multisoft Software* (Demonstration on the device).

We have saved 3 substances for Candida albicans and one recipe in the software. Recipes are a composition of various substances which can be specifically used for each particular illness.

For candida therapy I use programs 971 and 972. A pure substance from the test set is added to the substances from the software in the Ai program 971 and placed in the input cup. Using A program 972 we oscillate Nystatin and propolis. I add both substances to the input cup and in addition the recipe for candida from the software. When you have selected the recipe, by pressing the Alt key and the right mouse button you can see which substances are saved to which recipe.

Please don't forget the candida diet. It usually takes 4 weeks until the candida has fallen to an acceptable level in the intestine. I have often found that patients feel much better after the diet and some of the symptoms they came to my practice with have already disappeared. One mother told me that her child suddenly felt very hungry and just went and ate half a Nutella loaf for breakfast. Also the child's urge for physical exercise increased immensely.

Let's take a look now at the programs for bowel diseases saved in the software. To do this we have to go the Bicom *Pilot*. Then under the selection menu for the

Fachbereiche [Specialist Areas] you will find diseases of the large and small intestine. Now you can see all the available programs for this specialist area. You can test these individually on the patient. The programs for ulcerative colitis are 461 and 563 and, as a follow-up, program 432. After a positive test I often also carry out treatment using the programs *Increase powers of resistance* 570 and *Improve intestinal flora* 561/562.

You can see that there are a number of programs available. I use a maximum of 5 programs for therapy. The basic program, a program from the specialist area, the two programs for candida and in addition an allergen program (998). The time for program 998 is between 5 and 9 minutes.

In the case of IBD 75% of intolerances are to milk and 25% to wheat. It is often milk intolerance which weakens the mucosa and allows bacteria to penetrate into the intestine wall. Therefore treatment of food intolerances plays a key role in the treatment of IBD.

In the *Bicom Test* under *Substance* you can now search for instance for the appropriate oscillation patterns for ulcerative colitis or under *Category Selection* in *Total Test / Toxins / Organ Nosodes / Internal Medicine* you can search for all the conditions saved for stomach and bowel diseases. Sometimes it is quite interesting to test all the substances for the range of complaints. Because it is an Ai oscillation pattern we are dealing with here we do this using program 170. I would not then say to the patient *"Oh, you have this condition too,"* because I know that the saved oscillation pattern, the information, will trigger a reaction in the patient and treatment can be structured accordingly. I combine oscillation patterns from the same *Category* into the treatment programme.

The treatment program for the diseases found must be tested out. I find program combination 963, 944 and 998 very

effective and I also like to test programs 977, 978 and 979 at the same time.

Using the recipes is somewhat easier. Under *Bicom Test* you will find *Recipes* and also the Search function. Likewise for the substances you can find bowel diseases in the Category selection menu under the Ranges of Indication. Here you will find irritable colon, ulcerative colitis and also intestinal flora. As already mentioned, I apply the recipes using program 972. I usually combine this treatment with the candida diet.

We must pay particular attention to the *Goodies*. This is where we find the real goodies. I have a female patient who works in the *Bundestag* [Federal Parliament]. During one treatment, because she was feeling depleted, I simply used vitamins and "energetic doping" for the nerves. When she came the following week she said *"Do exactly what you did last week, I felt so well."*

I integrate treatment with recipes in virtually every therapy and this is also very well accepted and tolerated by the patients. It's always worth browsing in the software and having a look through both the 5500 substances and the approx. 900 different recipes. You will always discover something and come up with new ideas.

You can also oscillate the recipes onto *Bicom minerals* and *Bicom oils* and so give the patient an effective product which he can use at any time.

Whenever I work with substances or recipes I still always use both hand plates for treatments using the modulation mat (red cable). I see a huge increase in effectiveness because by using the palms of the hands it is possible to reach all areas of the body. This can be seen very clearly on the *"Function circuits and reflex zones"* poster.

Even if oscillations are needed from the patient I always pick these up from the hands (black cable). Remember that each living cell stores all information about a

person and so this can be picked up from anywhere on the body.

Please don't look for quick solutions when treating IBD. It takes time to strengthen the various levels and build them up. However I see treatment with Bicom in my practice as a very effective treatment for IBD.

Outlook

I hope my demonstration has been useful to you and I'm firmly convinced that it is not death which the bowel harbours, but good health.