

COMPARATIVE AND INTEGRATIVE MEDICINE. I. FROM DIFFERENT VIEWS TO A COMMON ESSENCE

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ABSTRACT

In different cultures and ages, a large variety of healing systems can be found, a quite recent example being the scientific Western medicine. If several of them are compared with, it turns out that there are similarities as well as discrepancies. These have to do with basic views of health and disease, of mankind and nature. It turns out that there are 4 basic views: the systematic (V1), systemic (V2), symbolic (V3), and symbiotic one (V4). In the last millennia, there was a shift from V4 to V1, accompanied by changing healing systems. Scientific medicine is based on V1, complementary medicine on V2 & V3, ethnomedicine includes V4, too. Now the question is whether the various healing systems can be combined or even integrated for the benefit of public health. In effect, it turns out that there is a common feature: the consideration of a small number of principles, elements and types. Their characteristics can be compared in different healing systems so that a (partial) translation and even a common essence can be obtained. This is done using a graphical representation.

KEYWORDS

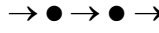



Healing systems; comparative medicine; basic views; types; Traditional Chinese Medicine; Ayurveda.

FOUR DIFFERENT VIEWS

It is difficult to understand traditional healing systems that seem to be so far away from our scientific medicine. But even if we stick to Western universities, scientists of different faculties or departments speak 'different languages'. This has to do with the fact that there are several world-views and ways of thinking. They may be condensed to four groups, views V1 to V4. Table 1 characterizes these views in more detail. V1 is the logic view of (natural) sciences. The expressions in the second line of V1 show that *separation* (in space, time or arguments) is characteristic for this view. Further characterizations can be found at the bottom of the table, *objectivity* probably being the most typical one. Scientific medicine tries to stick as close as possible to V1, which is sometimes successful, sometimes not.

The subsequent view V2 is polar or complementary to V1. In V2, the *connection* is emphasized. Connection can be found in communication, thus the social sciences use this view. Furthermore, new developments in the natural sciences like chaos research are characterized by a paradigm shift from V1 to V2. The complex and subjective behavior of human beings can be understood better within this paradigm. Thus, many psychotherapeutic methods can be subsumed under V2. As exhibited in Table 1, V1 and V2 can also be characterized as *systematic* and *systemic* views, respectively. Thus, the word 'system' has two polar meanings, one separating, the other connecting its parts.

Table 1. Views V1 to V4: four approaches to reality reflecting four ways of thinking.

V1:		classical (natural) sciences	(logic / SYSTEMATIC)
	"Everything is limited in space and time."		'either – or', 'if – then'
V2:		social sciences, chaos research	(dynamic / SYSTEMIC)
	"Everything is interconnected and moves in cycles."		'as well – as'
V3:		the arts	(constructivistic / SYMBOLIC)
	"Everything is a symbol and means something else."		'on the one hand – on the other hand'
V4:		specific religions, spirituality	(holistic / SYMBIOTIC)
	"All is one, forms unity."		'two sides of the same coin'

V1)	Objectivity, separation, hierarchy, reductionism, reproducibility, predictability.		
V2)	Subjectivity, (interactive) connectivity, recursion, exchange, complexity, cycles.		
V3)	Analogies, mirroring, metaphors, rituals, interpretation of texts and dreams, placebo.		
V4)	Identification, mystic and transpersonal phenomena, possession, ecstasy, integration.		

Approaching V3, we go farther away from science. Here we come to literature and language, where analogies and metaphors are frequent. Hermeneutics (the interpretation of texts) belongs to V3, as well as rituals and constructivism. Within V3, there is no immediate connection between an action and its meaning, the connection is constructed in a symbolic way. In medicine, an example of V3 is the prescription of placebo: It has no objective effect from the standpoint of V1 but may help because it is regarded as true remedy by the patient. The aspect of matching and fitting (compare 'on the one hand – on the other hand') has also to do with V3. Many healing systems of other cultures and ages (like Traditional Chinese Medicine and the Medicine of the Ancient Greeks) are characterized by a combination of V2 and V3. The idea of circulation of qi or of humors within the body corresponds to V2, the use of analogy tables to V3. In these tables, the correspondence of elements, humors, organs, temperaments, etc. is exhibited, see Kratky (1996, Table 1). However, this is quite far away from our scientific way of thinking. As a consequence, an argument that stems from V3 is quickly devalued and labeled as being esoteric.

The last view (V4) seems beyond reach at all. In a strict version, the parts are not just connected to each other (V2), but are even identical. In a more differentiated version, the identity is more paradoxical, being the identity of different things or persons (mystic and transpersonal phenomena). Ethnotherapeutic manifestations like possession trance can also be attributed to V4. The best biological example of this holistic and integrative aspect can be found in symbiosis. Thus, V4 can be characterized as the *symbiotic* view, compared to the *symbolic* V3. Views V1 to V3 have been developed by the author; see Kratky (1998). Inclusion of V4 was possible considering the old Hawaiian tradition of Huna, see King (1998), Kratky (2000c, chap. 1).

In curative practice, a descending sequence from V4 to V1 can be found during the last 20000 years, see Table 2. At about 1800, the humoral pathology (V2) originating from the Ancient Greeks was still alive, but had become unsatisfactory. This was the starting point for scientific medicine (V1) as also for homeopathy (V3). That homeopathy has to do with V3 can be seen from the simile or similia principle, where the remedy picture should fit the symptom picture as close as possible. At about 1970 to 1980, another development could be observed: the revival of V2 in the sciences (chaos theory), later in medicine (psycho-neuro immunology). However, there is no longer a strict distinction of views, but rather a diversity of paradigms at the same time. A closer look shows that even scientific medicine cannot be strictly reduced to V1: The communication between physician and patient may be unsatisfactory, but it is present (V2). Moreover, during communication *words* are used, which refers to

the symbolic level (V3). Furthermore, Dossey (1997, chap.2) claims that, in our terminology, V3 and V4 have already become important in certain methods of complementary medicine. This has to do with the influence of the mind (biofeedback) and transpersonal effects (prayer, distant healing). Interestingly enough, there is increasing interest in distant, mental and spiritual healing, see a survey in Ebnetter et al. (2001).

Table 2. Succession of healing systems (and their views) during the last 20000 years.

Archaic era:	since about 20000 years ago:	shamanism and religious / magic medicine (V4,3), see Achterberg (2002, chap.1).
Classical antiquity:	about 2000 years ago:	roots (V3,2) of the of the present healing systems, the Asian ones having remained almost unchanged.
Modern times:	since about 200 years:	scientific medicine (V1) and homeopathy (V3).
Postmodern times:	since about 20 years:	revival of V2 in Western science (chaos theory, psycho-neuro immunology), or else: diversity of paradigms.

Now, we return to Table 1. One can regard it as a hierarchical logical description of views. This attitude corresponds to a V1-like meta-view MV1, being consistent for Western logic, where V1 is on top of the hierarchy. From a Buddhist point of view, however, V4 is on top, which is paradoxical in the light of MV1. Anyway, V1 and V4 have the greatest distance in the representation of Table 1. This changes dramatically when we use a meta-view MV2. There, a cyclic succession of views is to be expected. Thus, V1 and V4 are very close together when looking 'from the other side'. This reminds of Columbus sailing westward in order to come to Asia, which is lying in the east (the earth being spherical). Furthermore, Table 1 may be regarded as a table of correspondences, a row of analogous expressions being exhibited for each view. This attitude corresponds to a meta-view MV3. At last, we come to meta-view MV4. There, all views are considered as 4 versions of the same basic truth. This 'coincidence of opposites' has again a paradoxical aspect, now of MV4 in place of V4.

Before we proceed to the comparison and integration of various healing systems, the *consistency* of the different views shall be considered. The separation typical for V1 results in a very restricted view. Within this view, objective and unequivocal sciences result. There is no African chemistry that is different from the European one. The outcome of a communication process (V2), however, depends on the participants of the discussion. This is reflected in the fact that there are many different kinds of psychotherapy. This ambiguity can also be found in V3. There is no logic basis for the correspondences, only an intuitive one. Thus, the correspondence tables differ from one healing system to another one. There is, however, considerable overlap, as we will see. The same is the case for the religions, which are typically V3 due to their symbolic, ritual and constructivistic features: There are differences, but there is a common core behind. This core becomes evident in V4, the aspect of unity and integration. There can be no 'different unities' when everything is included. The mystics of all ages and cultures verify this. They have often troubles with the leaders of their own religion, but no problem to understand the mystics belonging to other religions: They all have essentially the same experiences.

Starting from the ambiguity of V2 and V3, one can come to the light of clarity in two ways: going to V1 or V4. Both ways are characterized by the same word (with two different meanings): *enlightenment*. Language is unmasking in another example, too: the word 'alone'. It means the feeling of total separation. The etymological root of the word, however, is 'all & one' (Onions 1974). This is just a characterization of V4, see Table 1. That complete separation can hardly be distinguished from total unity can also be seen from the symbols used in Table 1: Removing the arrows in $\rightarrow \bullet \rightarrow \bullet \rightarrow$ results in separate parts $\bullet \bullet$ that do not know from each other. Thus, every part is for itself, characterized by the symbol \bullet of unity (V4).

HEALTH GEOMETRY: CIRCLE REPRESENTATION

To understand different healing systems, we have to go away from V1, which is only used by scientific medicine, see Table 2. Since the roots of the present healing systems are V2 and V3, we will turn to these views, starting with V2. This means that the (cyclic) dynamics of the humors (body liquids), qi and prana plays an important role for health, see the Traditional European, Chinese and Indian Medicine (Ancient Greeks, TCM and Ayurveda, respectively). In these healing systems, a small number of principles and elements plays an essential role, see Kratky (1996, 1997). Especially in Ayurveda it is evident that there are three regulation principles (called *doshas*) controlling health and disease: vata, pitta and kapha. In Tibetan Medicine, they are called *nyepas* (wind, gall and phlegm), which reminds of the 3 early Greek elements and humors (later, gall was split up into yellow and black gall, resulting in the usual 4 Greek humors including blood and phlegm). Table 3 shows the characteristics of the three mentioned principles.

Table 3. The three doshas (Ayurveda) and nyepas (Tibetan Medicine).

Dosha Nyepa	Vata Wind	Pitta Gall	Kapha Phlegm
Strong Side	Versatile Sensitive	Critical Humorous	Persistent Content
Weak Side	Timid Hypersensitive	Intolerant Choleric	Stubborn Melancholic

One can see that no principle is 'better' than the others are, but the every dosha has its strong and weak sides, also concerning health and disease. The doshas are characterized by many properties, see Chopra (2000, part I) for details. There is a series of correspondences in accordance with V3. To allow for V2, too, a graphic representation is preferable to a tabular one. Figure 1 shows the circle representation of the three doshas compared with analogous classifications in homeopathy and TCM: the 3 *miasms* (psora, sycosis and syphilis) and yin vacuity, yang repletion and yang vacuity. For more information, see Kratky (1997; 2000b, chap. 2; 2002). Indian and Chinese expressions are distinguished by different brackets. In the circle representation, one can see that each dosha is adjacent to the other ones, so there is a higher symmetry than in Table 3. In general, a person is dominated by two doshas (defining his *type*). Additionally, the relative importance varies during the day, year, and lifetime (Kratky 2000b). As to the latter, the ruling dosha is shifting from kapha to pitta and then further to kapha. In the circle representation, this means a starting point (birth) at flora, indicated by a black ball. Then, a counter-clockwise movement follows, see the arrows in Figure 1. The aiming point (death) is again at flora, now reached from the other side. In Kratky (2002), this will be considered further.

In the following, we will connect the circle representation with the views V1 to V4. To do this, we start with TCM (Maciocia 1993, chap.2). The sensory functions are especially helpful, see Figure 1. They are attached to the Chinese elements (phase changes, pairs of meridians). Those elements lying on opposite sides of the circle are particularly related to each other, being polar or complementary:

- | | | | |
|--------------------|--------------------|------|------|
| {water} – {fire} : | hearing – speaking | V2 | (1a) |
| {earth} – {metal}: | smell – taste | V3 | (1b) |
| {wood} – {flora}: | sight – vision? | V1/4 | (1c) |

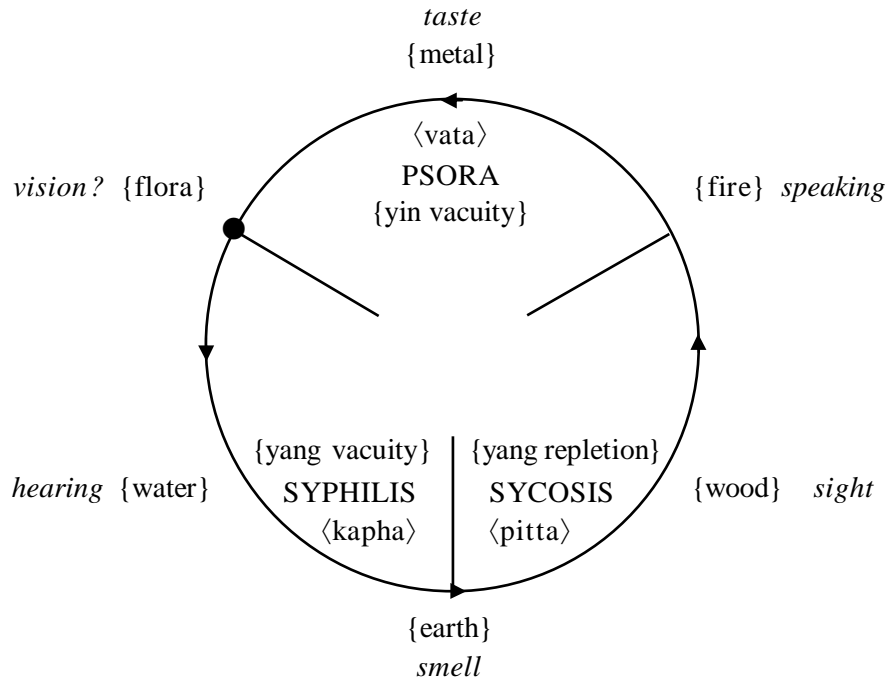


Figure 1. Circle representation of the three principles in Ayurveda, homeopathy and Traditional Chinese Medicine (TCM). For the latter, the elements (6 pairs of meridians) and their sensory functions are displayed, too. ●: Birth and death occur at {flora}, see the text.

Now we include the sensory functions attached to the elements, see also Figure 1. If we neglect flora in a first step, we can see the usual five senses with one exception: *Touch* is missing, instead *speaking* is included. We start with the easiest relation, (1a). Combining hearing with speaking results in (cyclic) communication, which refers to V2. The polar pair reflects the passive and active sides of the same process. Now we proceed to (1b). It is difficult to discriminate smell from taste when we eat something, which has to do with the intimate co-operation of nose and tongue. Expressions like flavor, savor, aroma and perfume refer to the close proximity of the two sensory functions. Mixing up two things has to do with to V3, see Table 1. Moreover, *taste* also stands for *touch* in a hidden way: First, in TCM {metal} is attached to the skin, which is responsible for touch. Second, one of the (old) meanings of taste is touch. Third, the etymological origin of taste is supposed to be a blend of two Latin words: *tangere* (touch) and *gustare* (taste); see Onions (1974). For comparison: The German word 'tasten' means 'to touch'. Thus the characterization of V3 '...and means something else' (Table 1) is perfectly fulfilled. Smell and taste are two similar, but not identical sensory functions.

The last relation, (1c), is the most difficult one. V1 and V4 are left open for this pair of elements. As we have already seen, V1 and V4 are far way or very close together depending on the meta-view, MV1 or MV2. Furthermore, in V4 there is mystics and paradox. {wood}, which is closely related to fighting in TCM, corresponds to V1, our Western world. Thus V4, the symbiotic and mystical view, is left over for {flora}. In TCM, usually only 5 elements are considered (compare Ayurveda and the late Ancient Greeks with ether as 5th element). The 6th element has never got an unequivocal name; the author has suggested *flora* (Kratky 1997, 2000a). Additionally, no sensory function is attributed to this element in TCM. It should complete the senses and be 'the other side' of seeing or sight. Useful associations are: second sight, sixth sense, vision. Then, the polarity of {wood} and {flora} is reflected by *outer* and *inner* sight. The *usual* eye is capable of a distant view (V1: separation), the *inner* eye grasps the whole universe by looking inside. There we encounter the paradox of V4 once more.

The considered healing systems combine V2 with V3, see Table 2. Thus, they are not perfect concerning V1 and V4, maybe just not so interested in these views. For instance, the 6th element is usually lacking. In the early versions of TCM, however, there had been 6 elements (with corn as 6th element), a subset of 8 trigrams. The latter is an indication of a complete set (four pairs, V1-V4), see Kratky (2000a, chap. 3). To sum up, the circle representation turns out to be a useful tool to compare different healing systems. It also reflects the four views V1-V4. In the subsequent paper, this 'health geometry' is extended from the circle to the full disc, which results in further benefits (Kratky 2002).

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