Report on the 2nd series of events

"Medicine meets homeopathy" Topic: Corona virus

on March 10, 2020, Krone restaurant, Kronengasse 4, 89073 Ulm

Friedrich Witzig (homeopath, biologist and MD, Dettingen/Germany)

The corona viruses are one of three families of the order Nidovirales. They were discovered between 1930 and 1960 (in chickens with bronchitis, in pigs with gastroenteritis and in mice with hepatitis and neurological symptoms and in humans with colds). SARS (severe acute respiratory syndrome), 2012 MERS (middle east respiratory syndrome) and 2019 COVID 19 (corona virus disease) are strains of the coronavirus that changed the host from animal to human and spread pandemically.

The clinical picture of the corona virus infection ranges from asymptomatic to mild to severe cold symptoms to severe, sometimes life-threatening lung diseases (interstitial pulmonary edema, viral pneumonia and pulmonary fibrosis). As a rule, Covid 19 has a slight course. In the case of severe courses, in addition to the infection, accompanying circumstances must also be checked (previously asymptomatic accompanying infections, environmental pollutants, long-term medication taken, therapies against the viral disease), which negatively influence the course of the disease.

Morbidity and mortality

Scientifically reliable statements on the morbidity and mortality (ratio of the number of cases of illness and death to the total number of infected) of the corona virus pandemic can only be determined by means of statistically significant samples, which are probably not available in the case of Covid 19. The panic in the population is therefore unfounded. The RKI's recommendations and political decisions are sensible precautionary measures. Those who do not follow this expose themselves and their fellow citizens to possible risks, which we can only specify with future results.

Are viruses friend or foe?

The vocabulary of medicine when it provides information about viruses is similar to that of war reporting and does not do justice to the importance of viruses in the living system. Virus and evolutionary research suggest that viruses play a more important role in the evolution of all living things from primitive to more highly organized living things than we can understand and imagine. Because there is no living cell without viruses, the development of all life forms was accompanied by viruses, with each higher development the number of viruses in the genome increases. The intestinal mucus, which is densely populated with viruses, is now interpreted as part of the immune system. A retrovirus integrated into the human genome provides its coat protein that prevents the mother's immunological rejection of the fetus.

Resume

The corona viruses are part of the earth's ecosystem. What role they play in this system is unknown. The pathological gaze, which focuses on its disease-causing properties, hides the functions they have in the interaction of all living beings. Based on our current knowledge, it is not possible to answer the question of whether the corona viruses have health-promoting properties in addition to those that cause illness.

Literature. Inquiry with the speaker witzig-dettingen@t-online.de

Manfred Weiss (anesthetist, intensive care physician, Ulm University Hospital)

COVID-19 (Coronavirus SARS-CoV-2).

Summary of current knowledge about infection with the Corona Virus.Manfred Weiss (Anästhesist,

The first case of a disease (Corona Virus Disease 2019, COVID-19) with the new corona virus SARS-CoV-2 was documented on December 1st, 2019 in Wuhan, China. From China, the virus spread rapidly as an endemic and finally spread all over the world, so that on March 11, 2020, COVID-19 was classified by the World Health Organization as a pandemic.
The SARS-CoV-2 virus is transmitted via droplets when sneezing or coughing. The time from transmission to the onset of symptoms (incubation period) is approximately 3 days, can range from 2 to 24 days. A person infected with the virus transfers the virus on average to 2-4 uninfected people, i. H. there is a high risk of infection. The symptoms are similar to those of the flu. The virus primarily affects the lungs and leads to pneumonia, which can result in lung failure, which can be found in the name (SARS = Severe Acute Respiratory Syndrome). Children are infected just as frequently as adults, have fewer signs of illness, are not as ill, but excrete the viruses longer than adults. The Robert Koch Institute (RKI) provides the latest information and recommendations for action on COVID-19 in Germany at https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/nCoV.html and worldwide at Johns Hopkins University https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6.
The virus is detected by a throat swab directly via a real-time polymerase chain reaction (RT-PCR) or indirectly via antibodies in the but within a few hours. According to the World Health Organization (WHO), the detection of the virus in the laboratory is considered a confirmed case.
The forecast is good in most cases. The mortality rate is strongly age-dependent and is 3.6% between the ages of 60 and 69, 8.0% between the ages of 70 and 79, and 14.8% from the age of 80. The most effective protective measures are washing hands with detergents or soaps, avoiding touching the face when the hands are not washed, avoiding a lot of touched surfaces in public spaces and shaking hands, keeping a distance> 1 - 1.8 meters from other people, common areas regularly ventilate, cover your mouth and nose with your own cold symptoms (face mask) or cough in the elbow or cough or blow your nose in a handkerchief. Regions with a high number of cases are declared risk areas. A 14-day quarantine is recommended for returnees from high-risk areas to break the chain of infection and slow the spread of the virus.
According to the Ordinance on Biological Agents, COVID-19 is classified in risk group 3 because the virus can be easily transmitted, there is no vaccine and no specific treatment options. Since 01.02.2020 in Germany, the suspicion of the obligation to report has been subject to §6 of the Infection Protection Act. If a person is tested positive for the virus, the regulatory office issues a domestic quarantine. This must be followed immediately and is punished for violations of up to 2 years in prison.
COVID-19 is spreading explosively. On March 9, 2020, 1,139 cases with virus detection were reported in Germany and 2 deaths, 113,579 worldwide with 3,995 deaths or 3.4% mortality, on March 17, 3030 in Germany 9,257 cases and 24 deaths, worldwide 195,957 with 7,868 deaths or 4, 0% mortality. In comparison, from October to the end of February, 119,280 influenza cases in Germany were confirmed by laboratory diagnostics, with 19,819 (17%) patients to be treated in hospital, whereby 200 patients died. H. 0.17% of the confirmed and 1% of the hospitalized patients, with 87% of those who were over 60 years old. At the moment, due to the massive increase in numbers worldwide, in Germany and other countries, everything is being done to ensure that the spread of protective measures, such as quarantine of returning travelers from high-risk areas, home office, prohibition of mass events, school closings, closings of shops, as well as curfews To slow down the virus by interrupting the infection chain with fewer contacts, so that the capacities of the healthcare system are not exceeded as far as possible and to treat all seriously ill people Without these protective measures, a massive number of sick people are expected in a short time, which would exceed the capacity of the health care system.

In summary, SPARS-CoV-2 with a high infection rate with a high number of unreported cases and many easily infected people leads to an explosive, prolonged spread that resulted in a worldwide pandemic. Protective measures are intended to slow down the spread of the SARS-Cov-2 virus so that the capacities of the healthcare system for the care of the seriously ill (COVID-19) are not exceeded.

Franz Porzsolt (hematologist / oncologist; clinical economics. Institute of Clinical Economics e.V.).

Safety is one of the basic human needs. There are several models in which these basic needs are mapped and sorted according to their importance. Safety is mentioned in all models under the basic needs, such as air, water, food, clothing and housing. The word basic need means that we are ready to adopt many other values e.g. To give up property in order to be able to satisfy the basic needs.

Difference between safety and risk.

If we humans feel threatened by "uncertainties", we demand more safety or security. Mostly it means police protection (security), shielding and other measures that give us the "feeling of safety". Safety is therefore a subjective perception that depends on various factors, e.g. depends on the personality structure and on various environmental factors. In contrast, the “risk” is the “probability of experiencing an adverse event. “Risk” is an objectively measurable quantity that is the same for everyone under defined conditions - but is perceived differently by everyone. The risk is relatively easy to measure, e.g. as the product of a noticeable damage (e.g. death, illness, or malaise) and its probability of occurrence. Perceived safety can also be measured; however, this requires more complex psychometric methods, which are not very easy to standardize and which also require statistical knowledge.

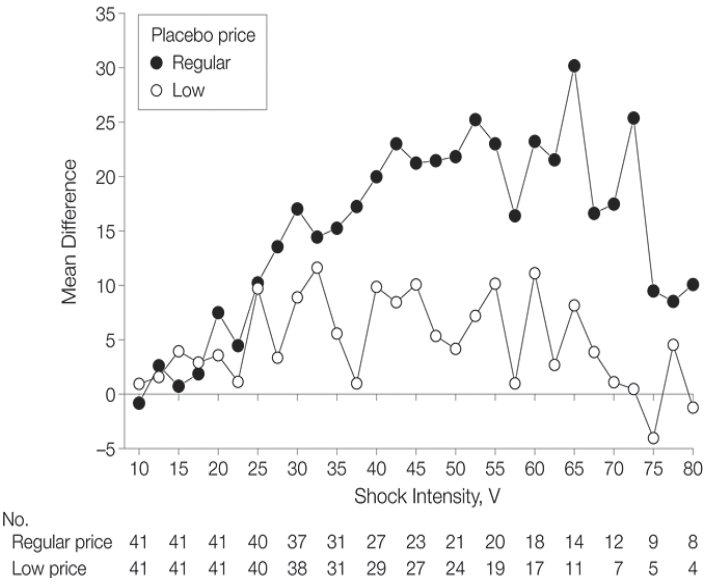
Franz Porzsolt (Hämatologe/Onkologe; Klinische Ökonomik. Institute of Clinical Economics e.V.).

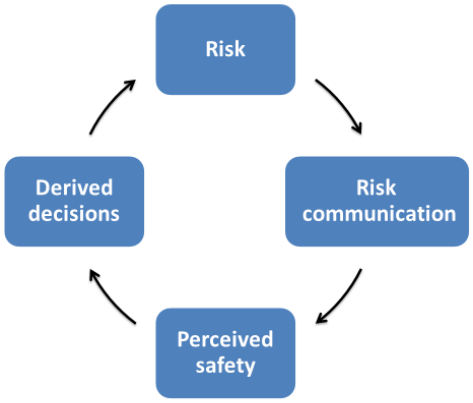
Sicherheit ist eines der menschlichen Grundbedürfnisse. Es gibt mehrere Modelle, in welchen diese Grundbedürfnisse abgebildet und nach Bedeutung geordnet sind. Die Sicherheit ist in allen Modellen unter den Grundbedürfnissen, wie Luft, Wasser, Nahrung, Kleidung und Wohnung genannt. Das Wort Grundbedürfnis besagt, dass wir bereit sind, viele andere Werte z.B. Besitz aufzugeben, um die Grundbedürfnisse stillen zu können.

The safety loop.

Using a clever experiment of our colleagues and a model derived from several experiments, we try to show the relationship of objective risk and its subjective perception. First of all, the experiment: Two student groups of 42 participants each agreed to indicate their pain sensation on a scale from 0 (= no pain) to 10 (maximum imaginable pain) after each series of measurements without or with a pain reliever. In order to standardize the pain caused, little electric strokes were administered in increasing strength (10 to 80 volts): a series without and a series with pain relievers. One of the two student groups was informed of getting an expensive pain reliever; the second group was informed to get a discount product. The horizontal axis describes the administered strength (10 - 80 volts) of the electric shocks. The vertical axis describes the difference in perceived pain without / with pain reliever: A value = 0 means that the pain without / with pain reliever was identical. The curve describes that the expensive pain killer was significantly "better" than the inexpensive one. In order to interpret the result correctly, one has to know that this experiment was carried out at one of the world's best research institutes. Research means, not to help the sick, but to gain new knowledge. All students received a placebo; no one has received a pain reliever. But the information that both groups received about the price of the pain reliever was different! Please think about the power of information. When I get sick, I want a doctor who can relieve my pain with the power of information.

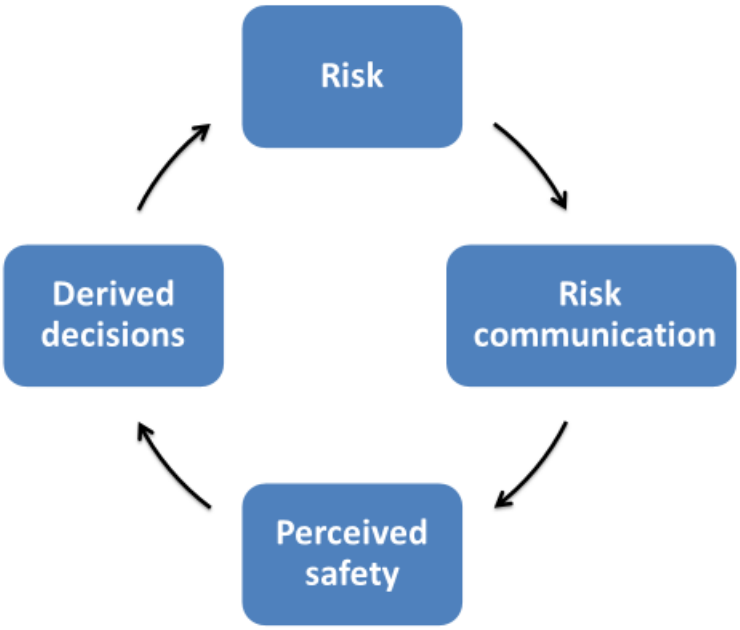
The first figure describes the pain experiment, the other two figures explain the function of the "safety loop". Coming soon in **MEDICINE MEETS HOMEOPATHY: The "Perceived Safety".**





Safety loop

- The safety loop describes the association and the mutual influence of an **objective risk** described by incidence x size of damage and the **subjective perception** of this objective risk (‚perceived safety') described by the quality and quantity of factors that influence the [subjective] perception of an objective risk.
- A risk induces the communication of this risk.
- The communication weights chances and risks and offers several possible decisions
- The subjective perception of the risk (‚perceived safety') will govern the derived decision. Note this decision is based on the subjective percep-tion of the risk but not on the objective risk.
- The derived (subjective) decision will influence the objective risk.



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