Treatment of pollen allergy with Multi-Integrative Kinesiology Activity (MIKA) and voice frequency analysis (VFA) as controlling method of

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Background: Treating pollen allergy (PA) only with conventional medical therapy as for example specific immunotherapy (SIT), cortisone or antihistaminic drugs doesn’t achieve sustained success in long term observation, see picture 1.

As there is no full success, but only part success and a high relapse to PAS under the treatment with only Mainstream Medicine (MM), a practise study should show, if a CAM method like MIKA, added to MM as an Integrative Medicine (IM), can improve the health of suffering patients with pollen allergy symptoms and stabilize them in a long term observation (Kienle, S. G. 2008).

Contrary to most of the Mainstream Medicine therapies, MIKA doesn’t only treat the immunological symptoms but also the emotional-functional stress parameters (EPS), meaning the stressors of the psycho-social environment of a PAS.

Objective: A controlled practice study will determine whether MM as for example SIT, cortisone or antihistaminic drugs and CAM treatments as MIKA brought together into a form of Integrative Medicine (IM) are more successful related to individuals and can improve the long-term result.

For this purpose pollen allergy sufferers (PAS) pretreated with SIT, cortisone and/or antihistaminic drugs will be examined whether the PA exclusively is an immunological / morphological stress response or still influenced by:
1. individual emotional and functional responses (EFR)
2. the correlation: allergen - psycho-social environment (PSE)

so that only SIT will not achieve a permanent cure.

Hypothesis:

1. MIKA can significantly improve the effect of specific immunological treatment (SIT, cortisone, antihistaminic drugs).
2. MIKA improves and stabilizes the success of treatment on more than a one year basis and reduces significantly added pharmacological drugs as cortisone or antihistaminic drugs to SIT

MIKA does not only work clinically with the immunological system but also to psychological and emotional-functional problems coming from the inner or outer milieu.
**Method of Measurement:** To determine the patient’s individual emotional and functional responses and their involvement in the allergy related psycho-social environment the diagnosis system Voice Frequency Analysis (VFA) by Heinen (Heinen and Scherf 2007), see picture 2, was applied in addition to sensitivity- and symptom-scores.

![Image](image1)

**Fig. 2 +3:** Left: The voice of a PAS is recorded twice during 5 seconds: first with open and then with closed ears. Right: With a specific kind of Fast Fourier Analysis (FFT) two different spectral spectrums/power spectrums of the voice are brought into a green and a yellow curve diagram. Right: before, left after therapy.

**Design of study:** Treatment of 26 patients with remaining symptoms. VFA-measurements: 7-10 days before MIKA, day of first MIKA, day of last MIKA, during maximum pollination in 2008 and 2009. 11 of them have been treated by SIT, 15 by cortisone and/or antihistaminic drugs, see picture 4.

<table>
<thead>
<tr>
<th>Pollen</th>
<th>Start with 1. group M0</th>
<th>M1. group 1</th>
<th>M2. group 1</th>
<th>M0. group 2</th>
<th>M1. group 2</th>
<th>M2. group 2</th>
<th>M3</th>
<th>M3</th>
<th>M4</th>
<th>M4-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>trees</td>
<td>29.02.2008</td>
<td>start of treatment</td>
<td></td>
<td>28.03.2008</td>
<td>treatment</td>
<td></td>
<td>end of treatment</td>
<td>end of treatment</td>
<td>Polmax1</td>
<td>Polmax2</td>
</tr>
<tr>
<td>trees + grass</td>
<td></td>
<td>treatment</td>
<td></td>
<td></td>
<td>treatment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>trees + grass + herbs</td>
<td></td>
<td>treatment</td>
<td></td>
<td></td>
<td>treatment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>grass + herbs</td>
<td>5</td>
<td>treatment</td>
<td></td>
<td></td>
<td>treatment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>week/2008</td>
<td></td>
<td></td>
<td>10</td>
<td>11</td>
<td>12</td>
<td>13</td>
<td>14</td>
<td>15</td>
<td>16</td>
<td>17</td>
</tr>
<tr>
<td>februar</td>
<td>march</td>
<td>april</td>
<td>may</td>
<td>june</td>
<td>july</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Time of measurement:** Start and end of the treatment and the voice vocalise

- **MP 0:** SFA measurement one week before start of treatment - Day of admission and the anamnese
- **MP 1:** SFA measurement on the day, before first treatment
- **MP 2:** SFA measurement after the first treatment and afterwards, before and after every following treatment
- **MP 3:** SFA measurement approximately one week after the end of all treatments
- **MP 4:** SFA measurement during maximum time of pollen season; total of 4 measurements, at 1-2 within 1-3 minutes

**Picture 4:** Picture 4 shows the times when diagnosis and therapy by MIKA has been done.

**Treatment method:** 26 PAS, pretreated with SIT, cortisone and/or antihistaminic drugs and/or having a relapse, have been treated with MIKA as CAM-Method, see picture 4, 5 and 6, (Allroggen, B., Allroggen, G. 1991 and Allroggen, B., Allroggen, G. 1980 -1995, Kinesiology & Allergie 2000, Stay away from AK /Applied Kinesiologie 2008).
Fig. 5: Model of how MIKA (CAM) works clinically: Fixations of the neural network, built up by a conditioned conflict, can appear 7-15 years after the initial trauma has happened, as a structural-morphological disease, i.e., for example PA, cancer, rheuma, ..., etc.). The aim of MIKA is to find a solution of the conditioned conflict. Therefore the conflict has to deliberated by channelling through the centre of conscious decision (nucleus acubens “Belohnungszentrum”) instead of the centre of fear, flight and flight (nucleus acubens) (Antonowsky. 1997 and Hüther, G. P. 1999).

Initial appearance of allergy

Used only on allergywork with substances (only one example of the complex allergy process work)

<table>
<thead>
<tr>
<th>years</th>
<th>conception</th>
<th>birth</th>
<th>2 month</th>
<th>4 month</th>
<th>6 month</th>
<th>1 year</th>
<th>ecology</th>
<th>start/end point Ki/Bl</th>
</tr>
</thead>
</table>

Fig. 6: Most of conflicts/traumata happen during pregnancy and the first 4 years of one’s life. The initial appearance of allergy is shown by this diagram. Therefore the clinical work of MIKA to a PAS starts at the early time of pregnancy (Rossi, E. L. 1991).

Fig 7: It shows how the MIKA method is done to PAS, using meridian-specific techniques. Here MIKA looks for psycho-social processes which determined PA and, if necessary, corrects 5 specific subjects of the PA disease.
Results

Fig. 8: The diagram shows how many PA, treated by MIKA have been successful.

Fig. 9: shows that MIKA in addition to mainstream medicine as an Integrative Medicine (IM) significantly works clinically to the different symptoms of PAS and stabilizes them on a long term basis.

Fig. 10: The difference of the pollen-allergy total symptom score, before and after treatment 2008 to 2009

Fig. 11: This diagram demonstrates how many PAS [%], see y-axis, changed their psycho-social ESP. The different possibilities can be seen on the x-axis.

Fig. 14-16: These pictures show the different diagrams of the base to acid ratio, the reduction to oxidation ratio and the stage of stress at different times of measuring. The change of the different ESP from M0 to M4 is significant, see therefore also Fig. 12 and 13.
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Fig 12: This table shows that there is a significant correlation between the different ESP as acid, base, reduction, oxidation or their ratio of the 26 PAS and their changes during the observation time M0 to M4 2008 and 2009. However, there is no significant correlation between GSS, Health estimation(subjectively or objectively) before or after treatment with MIKA. The same result can be found by quantifying specific blood parameters of PA (for example IgE, Th2/Th1, eosinophiles, etc.)in MM.

Fig 13: “W” stands for “wave” and means dissolving metabolism done by catabolic hormones, “P” stands for “point” and means structuring metabolism done by anabolic hormones, see fig 14-16. The symbol “(?”) intents how the inner, “?” how the outer milieu is felt by someone. With the combination of both (??) each person can be characterised by his behaviour and metabolism. „W“ means also making development (i.e. trying to become free, dissolving old structures, having new ideas, etc.) „P“ means making attachment (i.e. fastening of structure, to bring order into life, make ideas true, etc.) (Hüther,G)

Discussion:
The study suggests that MIKA which in addition to specific immunological treatments as a Integrative Medicine (IM) concerns:

1. The patient’s individual emotional and functional responses (ESP) and thereby the entire internal and external milieu of the organism (neuro-psycho-endocrine immunology).
2. Stabilizes pollen allergy suffers (PAS) on a long term basis.

The individualized emotional-functional diagnosis by VFA:

1. Is an appropriate tool to monitor the clinically work of MIKA and by this perhaps of all other methods of CAM, too
2. Is an additional attention to individual emotional and functional responses - in the sense of an Integrative Medicine (IM) –
3. Can be of great importance for success in the treatment of pollen allergy patients and perhaps of other chronic diseases.

During next studies it would be of interest, how far it is possible to prove the special MIKA fixation-treatment with changes in the neuronal network activity by MRT, PET or EEG.
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References:

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