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Conference report

Potentiating health and the crisis of the immune system: integrative approaches to prevention and healing of modern diseases

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The aim of the Dead Sea forum is to establish a base for international conferences, held so far in Israel, to explore the many aspects of (self)healing in health care and medicine. The goals of the conferences are to encourage a better understanding of health and medicine. The self-healing capacities of people play a central role in this approach. The third conference was held in October 1996 (Zichron Yaacov, Mount of Carmel) on the 'Potentiating Health and the Crisis of the Immune System'. The organizers stressed that 'The world is an era of integration, synthesis, better understanding and willingness to listen. There is a new potential to cooperative politically, socially and in the most important areas of health and medicine. Currently, there is a tremendous interest in potentiating health. Yet, this is far from being achieved. The list of today's modern sicknesses is long: disordered immunity and resistance, chronic diseases (mainly rheumatic problems, multiple sclerosis), allergy, asthma, eczema, cancer and AIDS. Since most conventional methods have failed to prevent and/or treat these health problems, new approaches are required. These approaches will integrate conventional and alternative techniques, inspired by a more compassionate and holistic view of the human being, nature and our planet. The issue of stress, mind-body health, vitality and energy of diet and lifestyle, as well as self-care and health education, should be our major concerns' [1]. The 3rd Dead Sea Conference, provided an overview of wide spectrum of subjects, stressing the importance integrative approaches to prevention and healing of modern diseases.

1. Integrative models

In several presentations theoretically oriented integrative models were presented. Elliot Dacher (USA) stressed in a historical perspective the results of the traditional objective, reductional, positivistic approach in medicine. The negative consequences were corrected by the post-modern approach, emphasizing multidimensional causes of diseases, intentionality, holism and personal empowerment [2].

Christine Page (UK) viewed, as stated in her abstract that 'Illness is often seen as a failure or weakness. Yet, many would recognize the experience as a 'wake up' call and as an opportunity for change. Indeed, when we look beneath the surface there is much to be learnt from the signs and symptoms which both patient and carer, a clear picture as to the direction taken. We are, as humans, more than just our physical body. We possess a very powerful mind with instincts, emotions, logic and intuition integrated with our essential spirit. Physical illness often

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1An impression of the Third Dead Sea Conference, October 20–24, 1996, Zichron Yaacov, Israel.
occurs in response to a deeper impulse from within urging the individual to change or consideration of their actions. By understanding the subtle energies, especially in relation to the chakra system, it is possible to recognize the links between personality and illness, and illness and soul growth there by enhancing the potential of the experience. In her contribution she presented a review of the psychosomatics of several diseases, emphasizing the important spiritual: impulses emotional expression, autonomy in the self-healing capacities of men and women. She concluded the preventive medicine cannot occur until all health care professionals acknowledge the power and the effect of the mind, body and spirit when they function in harmony. Education of the patient must start with the career, [3].

Robbert LaFaille (Belgium) reviewed the new science of health. In his view health promotion and preventive medicine developed during the last decades. A lot initiatives and policy measures were taken. Not always on a sound scientific basis. The call for a 'new science of health' is an invitation to develop a more solid basis for health oriented action. In his overview of developments he drawn attention new insight in placebo-effects, the world wide life-style changes (also in the WHO healthy cities project), the increasing body-awareness (meditation, revalidation), the importance of research using biographies. He gave a rather optimistic view on a changing world with less pollution, healthy life style, and spiritual inspiration.

Nimrod Sheinman (Israel), an experienced psychotherapist for cancer patients presented a lecture on 'Archetypes, metaphors and inner dialogues-guided imagery and the potentiation of health'. He stressed that there is a growing field of clinical and scientific evidence pointing to the efficacy, complexity and power of mind/body medicine. Beyond all the research findings and the medical investigations, the field raises some key concepts and differentiations, with crucial clinical impact and outcome:

- The nature of suffering and the role of medicine: Curing vs Healing
- Illness and meaning: Illness and opportunity:
- Diseases as a 'story teller' of our cells and of ourselves
- Can the self affect the course of healing: On looking inward and being scientific

The integration of these concepts into medical practice needs a unique therapeutic language—one that would be able to touch and bridge the body and mind, transform biology, experience and quality of existence, and unite the science of medicine with the art of healing. It is the premise of this presentation that guided imagery—the language of metaphors, symbols and inner dialogues—perhaps the most subjective of all our clinical tools, is potentially one of the most powerful in tapping the person's true source of being and in initiating a process of both healing and transformation. He presented excellent paintings by cancer patients, illustrating their changes during guided imagery and psycho-synthesis inspired psychotherapy.

Stephen Fulder (Israel) reviewed 'The health consequences of competing conventional and alternative definitions of health'. He stated in his abstract 'Health and resistance to disease are not often defined. They are relatively invisible concepts implicit in medicine. Conventional medicine has an operational definition of health as lack of obvious pathological symptoms. This can lead to a frustrating lack of interest in health and its manifestations. It can have drastic effects on our experience of illness and health. An utopian definition is sometimes used, such as by the World Health Organization, but it has no practical outcomes'. He described other views on health as a response to the extremely mechanistic view of the human being within modern medicine. They all have major effects on our health. For example the perspective of symptoms theory and the salutogenic concepts of Antonovsky reduces the power of the individual human being to protect his health, and gives responsibility to society and its institutions for health problems. This has led to health promotion schemes, which have had disappointing results. Alternative medicine involves a rich and ancient source of experience into the nature of health and human resistance to disease. Most alternative therapies
see the individual and his life's journey as the key to health or sickness. They acknowledge that health is essentially a mystery, like life itself, but that there are ways to life, and to seek treatment, which can increase our resistance, our health and our well-being. The alternative therapies imply an open-ended view of health, stating that it is defined only in relation to the context of that individual at that moment. There is a belief in the natural will to be well, the self-healing powers, which are affirmed and supported. There is usually a more 'natural' or unfabricated orientation, with less confidence in drastic and unsafe treatments, and less intervention, i.e. more respect for the integrity and experience of the human being. These views are essentially vitalistic, and as such run counter to the mechanistic world view of modern life. This can create a real struggle for patients, and nowhere is this better illustrated than in the prevention of chronic diseases. For example a mechanistic orientation to cancer prevention can lead to fitness obsessions and the consumption of vitamins. A vitalistic orientation, in contrast, will lead to the direction of an harmonious and balanced life. In any treatment the same conflict can emerge. Alternative medicine itself can be mechanistic for example in formula acupuncture or 'quick-fix' chiropractic, and as such unsatisfying to many patients. It is very helpful to expose and explore these underlying themes, so that both patients and practitioners learn more deeply the basis of the various ways on offer at present to prevent and treat disease [4].

Roger Newman Turner (UK) presented views on ‘Health and healing: developing our potential’. Health has been defined as the realization of the capacity for maximum enjoyment of life with or without infirmity. In spite of having greater physical, biochemical, and spiritual resources to enable to attain and maintain health, the burden of chronic disease and the crisis of the immune system continue unabated. An examination of the reasons we become unwell suggests it is no longer sufficient to confront the agents or symptoms of disease or even to facilitate the inherent self-healing mechanisms. With so much now capable of overwhelming these it has become essential to examine and develop ways in which the healing response can be potentiated. While the means to enhance healing now exist at the biochemical, physical, and psychological levels perhaps we also need to develop our own potential as healers. He stressed the epistemology of the subjective, beside the objective, coldly, clinician view: 'diagnosing the patients instead of the disease'. The ethos of healing should include: respect, responsibility, receptiveness, curiosity, flexibility, culture, insight in the subjective meaning of the illness.

Zvi Bentwich (Israel) presented a paper on ‘Conventional medicine at a crossroad-meeting the challenge of complementary medicine’. He stated that ‘Conventional Medicine is now facing a critical stage in its development, with the growing awareness of its shortcomings, despite the tremendous technical and scientific achievements it has gained. The remarkable success of the technological disciplines, particularly in the area of diagnosis, the fantastic developments, especially in the intervention surgical disciplines, and the new fast developing scientific fields, such as that of molecular biology, are all testimony for the tremendous progression biomedical sciences have made. And yet, as an indicator for the shortcomings, a growing proportion of the population in all western countries, seek the help of alternative-complemental medicine, in solving various health problems that have not been solved by regular medicine. Several reasons may account for this striking discrepancy between the tremendous scientific achievements on the one hand and the public dissatisfaction, on the other hand. The most important reason being the neglect of the human aspect of disease and alienation of the medical systems, and the chronic nature of diseases most common in the affluent societies of the west. The continuous growth of the complex and huge medical centers, as best representatives of modern medicine, has not helped to overcome these shortcomings. This phase in the development of conventional medicine should therefore be viewed as a phase of true challenge and possible change of direction. Complementary medicine presents one aspect of this challenge: (1) It presents empirical claims
that need to be substantiated by regular clinical investigation. (2) It opens up questions of unrecognized and undefined mechanisms of disease not properly and seriously dealt with before scientifically. (3) It raises the issue of mind body interactions as a central factor in disease. (4) It presents concrete examples for a better doctor-patient relationship. These challenges should be met and special efforts to make the most of them should be encouraged. Conventional medicine should try to integrate as much as possible from complementary approaches including some of the more distant philosophies behind these disciplines.

More specific integrative models were presented by Geraldine Mitton (South Africa) on Food as medicine for body and soul, to restore a state of balance and harmony in the body. Guillermo Michel Sinner (Mexico) approach was philosophical: 'The wounded body: towards a phenomenology of health and illness'. He started from Maurice Merleau-Ponty, viewing illness as a mode of being - in - the - world, emphasizing the existential ground of the 'symbolic function' and structure of illness.

The presented theoretical models were one of the most interesting aspects of the conference. However, sometimes a lot of 'words, words...' and not time enough time to define or re-define the compelling concepts of these integrative approaches.

2. Integrative techniques and workshops

Beside the more theoretical approaches of the integrative models, also integrative techniques and workshops were presented. In the workshops the participants could taste the several therapeutic approaches of the specialists in the field of self-healing techniques.

- Assessment of the potention of the patient for health (Roger Turner, UK)
- Reflex therapy in healing and health (Christine Jones, UK)
- Psycho-energetic therapy (William Yang, NL)
- Journalling with illness (Naomi Calligaro, UK)
- Parasympathic stimulation through the 'Vodder' original manual lymphatic drainage, (Virginia Cool, France)
- Taoist elements in leading process through art movement and music (Nira He'eman, Israel)
- Cancer: the road of natural healing (Shin-ichihiro Terayama, Japan)
- Role of love in healing (Naomi Calligaro, UK)
- Mei-Hua-Zhuang: Chinese body movement for strengthening the immune system (Yossi Morgenstern, Israel)
- Circle dancing for healing: dances for Bach flower remedies (Martine Winnington, Switzerland)
- New holistic educational model for promoting women's reproductive health (Michal Schonbrun, Israel)
- Bioenergetic therapy (Adrienne Williams)

A great variety of integrative techniques were presented at the conference. More than 25 lectures were held. Several of them were well-known and often already accepted techniques in medicine: reflexiology, massage, meditation, hydrotherapy, biofeedback, and bioenergetics. Less well-known techniques may concern apitherapy (less venom therapy) for intractable chronic painful diseases, Rolfing (structural reintegration of the body posture), shark cartilage (for cancer patients), and functional electrodynamical testing. There were great differences in the presentations of the evidence of the several integrative techniques. In general, in only a few cases empirical results were shown. This may not mean that the empirical evidence does not exist, but that the need for facts is lower in case of preaching for the own community. However, also a feature of traditional medicine.

3. Cancer

Cancer is traditionally an illness with several alternative and self-healing approaches [5]. A lot of patients rely on it and are users of com-
Complementary care in cancer. Van der Zouwe estimates that in the Netherlands about 15% of the cancer patients use alternative approaches. At the conference, Shin-ichiro Terayama (Japan) presented his history of spontaneous regression of metastasized kidney cancer (seven years ago). He described his story of recovery from cancer with cello playing. He confessed how he loved his cancer instead of fighting it. He changed to a vegetarian ‘macrobiotic’ diet, selected good mineral water, and most importantly watched the sun rise in the morning: ‘It was in front of the morning sun that I made an exciting discovery. I found I was becoming very positive, very relaxed and healing energy was entering me first through my heart, and then all seven chakras. I began to play cello again after a long absence. These things were practiced harmonously by intuition and not by instruction’. He concluded that it is the time for modern medicine to recognize the ancient wisdom of human beings to bring about their own recovery from cancer.

Another personal journey concerned ‘Reality and myths about breast cancer’, the story of Galia Sefchovicl (Mexico). She described how cancer is related to the amount of loving energy that people need to survive. She raised a lot of questions: How can we get in touch with this energy and maintain its constant flow? How can we get stronger in our faith? How can we grow with our families and friends during this process? How to search in the sea of alternative medicine and approaches? What to do with the fear of death or the guilt of survival? Beside these impressive personal stories, also more structural educational and counseling in cancer care were presented.

Susan Silberstein (USA) gave an excellent review on ‘Non-conventional cancer therapies: criteria for evaluation and rationales for implementation-helping patients decide’. She stated in her abstract that as the failure of radiation and chemotherapy to cure most cancers has become more apparent in recent years, dozens of alternative cancer therapies have commanded increasing attention. However, the complex world of unorthodox modalities can be confusing to patients and practitioners alike. Overwhelmed with information from the broadcast and print media, and torn by conflicting recommendations from conventional and unconventional sources, patients left to their own devices often make bad choices or no choices. Yet there is a place in oncology for unorthodox approaches as either adjuncts or alternatives to traditional treatment. Three different therapeutic avenues in oncology with three distinct goals illustrate the shortcomings of conventional therapies targeting tumor reduction, the ways in which selected adjuvant treatment support host resistance, and the potential for biological repair with use of appropriate alternative modalities. Review of the major unconventional treatment classifications reveals an intriguing parallelism between experimental mainstream therapies—hypertherminas, hormone therapies and immunotherapies—and the best of the unproven therapies—clinical nutrition, botanical medicine and psychoneuroimmunology. Criteria for evaluating unorthodox therapies need to be stringent, with the ideal program focusing on the essential distinction between a host-oriented and a tumor-oriented approach. When tumor reduction remains the primary goal, results with alternative therapies have been inconsistent and sometimes not significantly better than with orthodox methods. The programs which have produced the most consistent results are those that recognize the body as a self-healing mechanism by giving it the essential tools for immunocompetence and self-repair. By respecting the common ground on which conventional and non-conventional approaches can meet and by seeking an appropriate marriage between the body’s own natural healing potential and the best that medical science has to offer, health professionals can play an important role in helping their patients to design individualized intervention plans and to make the most effective therapeutic choices’.

A Dutch presentation was about a model for ‘Existential counseling in cancer patients’ (Visser). Peoples with cancer experience a lot of existential problems. The Dutch regular health care facilities (hospitals, mental health organizations) do not offer a specific help for them. At
the Helen Dowling Institute people with cancer may receive psychotherapy based on experiential and existential schools in the counseling tradition.

In a retrospective study among clients the counseling has been evaluated. The aim was to get insight in the psychosocial changes due to the counseling, and to measure the satisfaction of the clients. Standardized questionnaires were used, combined with semi-structured interviews, audiotapes and scored by two independent judges. The clients report a number of emotional, cognitive and social changes. These changes were related with the satisfaction of the clients with the therapy. The ‘presence’ of the therapist seems to be the main explaining mechanism to integrate the meaning of living with cancer in the clients and to raise their quality of life.

Ton Staps (Netherlands) described the principles of and the experiences with ‘Psycho-energetic therapy and the search for meaning’. This is a method to aid patients mobilize their physical, psychological, social and spiritual resources in order to cope with many and often drastic changes in their lives. It includes regular counseling/psychotherapy and a variety of body/mind interventions. The latter are divided to assist the release of physical and emotional tensions and the build-up of a reservoir. They also play an important role in the search for meaning. A basic construct in the PET is the five dimensions model; attention, communication, emotions, body, mind. Although the five dimensions are equal important, in coping, the dimension mind has a leading role. The basis of the coping-process is the search for meaning which takes place. Corresponding with the partly different tasks of the cerebral hemispheres, the distinction is made between the logic mind and the metaphorical activity of the logic mind the self is placed opposite of the non-self, where in the metaphorical mind the self is aware of the relation with the non-self. The therapy helps the patient to find the dynamic balance between the active logical process of giving meaning of being ill and the awareness of being a part of a meaningful whole.

More medical approaches in the alternative cancer approaches was the treatment of carcinoma with human placental extract (Harris Coulter, USA). Just a placenta mediates between the host (pregnant woman) and the trophoblast or embryo, so its products can mediate between the host and the tumor. Specifically, injection seems to cause B-cells of cancer patients to produce anti-suppressor antibodies which form complexes with the ‘blocking factors’ protecting the tumor from the action of the host immune system. These and other products of the cancerous cells are then eliminated from the body through the liver, and the tumor, deprived of its protection, is thereafter vulnerable to the action of the host immune system. This treatment is most effective in carcinoma and melanoma, less indicated in sarcoma and leukemias. Patients recently diagnosed with cancer, who have the primary tumor surgically removed, and who have not had either radiation or chemotherapy, respond particularly well. It may also be used prophylactically—in persons whose cancers have been treated with success in the past but who are concerned about relapse. A few cases were presented about the affectivity of this approach in cancer treatment.

William Lane (USA) presented his cancer treatment by means of ‘Whole shark cartilage, minerals and all, as a therapy with non-responsive cancer’. Shark cartilage and its use with non-responsive solid cancerous tumors. (Generally stage IV case) Has become widely known in alternative medicine. The mechanism of action, believed to be angiogenesis inhibition. The FDA has given phase 2 approval to a study on metastasized, and non-responsive prostate cancer and Kaposi’s Sarcoma for a unique specially processed shark cartilage product called Benefini. Also a clinical trial on prostate cancer has been started. The FDA approved protocol including tumor reduction, PSA tumor marker response, quality of life measurements including Kaposi’s Index, blood work and other criteria.

Cancer draw the attention of a lot of alternative and complementary approaches. A life threatening disease urges people look for help in their existential crisis, a area with a lot of proven and speculative approaches.
4. Immune approach

The title of the third Dead Sea Conference stressed ‘the crisis of the immune system’. However, this was the less well developed part of the meeting. It lacked of a general review on the state of the art of modern immunology. Most of the participants needed more background information on immunology in order to understand what it means ‘the function of the immune system’. Nicholas Plotnikoff (USA) presented interesting, however complex, information on ‘Methionine enkephalin - a new cytokine with antiviral and antitumor activities’. He showed that ‘enkephalin has been identified to be derived from its prohormone, pro-enkephalin A in macrophages and T helper cells. Its immunological profile is similar to interleukin 2 and gamma interferon. Met-enkephalin specifically increases numbers of cytotoxic cells (CD8 and NK) that are effective against viruses and tumors. Antiviral activity was demonstrated against Herpes, AIDS, CMV, coronavirus, FluA, and Japanese Encephalitis either alone or in combination with known anti-virals. Anti-tumor activity was seen against melanoma, sarcoma, lung cancer, colon, leukemia, and neuroblastoma. Clinical studies in AIDS and cancer patients were discussed’.

A more speculative view was presented by Annemarie Colbin (USA) on ‘Setting up the immune system: perinatal influences’. She described in her abstract that human beings are born with a functioning yet immature immune system already in place. Several influences around the time of birth will enhance or weaken it. The genetic influence of the parents and ancestors is a given, and not under their control. Influences that are under a reasonable amount of control include the basic health of the parents as a result of their diet and the use (or non-use) of drugs and alcohol. During pregnancy, the mother’s diet and use (or non-use) of drugs and alcohol will more specifically affects the fetus. The type of birth experience, natural or with drugs, vaginal or caesarean, will affect the child’s central nervous system. Perhaps the most important early immune enhancer is breast-feeding and specifically the infant’s intake of colostrum; the symbiotic feedback loop between mother and infant sets up the basic working of the immune system for life. Therefore, a history of bottle feeding may indicate a priori a weaker immune system. It is the suggestion that health professionals always inquire if their clients have been breast or bottle fed, and long of each. Three other influences upon the immune system were discussed: (a) the infant’s diet once solid are introduced; (b) the use of antibiotics; (c) the use of vaccines.

Another presented immunological view was on ‘Cancer, psychosocial factors and immunity: steps on a hard way’ (Visser, NL). There is a substantial increase in psycho-oncologic research and intervention studies that focusing on the role of psychosocial factors in disease progression. However, along with this growth have come inconsistencies in research findings. There is also a lack of a biological explanation of the results of psychosocial interventions in cancer patients. Results were reported on the intervention and psychosocial determinants studies on: breast cancer, cervical cancer, melanoma and prostate cancer. The studies are based on a stressor-support-coping model, developed in cooperation with researchers at the University of Miami (USA). It was discussed which psychosocial factors contribute to the course of cancer, and which factors may be influenced by therapeutical interventions. Also the difficulties were stressed to study the course of cancer, and to measure and use immunological data.

5. Conclusion

Participation in the Third Dead Sea Conference was a stimulating, exciting and sometimes astonishing experience. The small group of participants (about 60) created a warm personal and open group climate. There was respect for the great variety of ideas and approaches, practically as well as theoretically. Only a few times the presentations raised heavy discussions, like in the discussion on the possible side effects of vaccination and on the limitations and difficulties of immunological approaches. The traditional re-
search approach was scarce, however, there were also good examples of empirical studies, like Carl Stonier’s study on the effects of counseling for angina pectoris and myocardial infarction [1], the presented studies on education and counseling for cancer patients [6] and Kim’s presentation on Bee Vernon therapy for painful diseases [7].

The so called crisis of the immune system did not get much attention. Is there a general crisis? In which populations? How to measure? So, several unanswered questions. Immunology seems to be a metaphor in the new-aged engaged health care providers. There is still a big gap between integrate approaches using the human (self) healing potentation and its measurable effects in immune functioning as well as the course of diseases. Due to this gap, there is a strong need for education and counseling on the integrative approaches to prevention and healing in modern diseases.

References

[1] Stonier C, Potentiating health and the crisis of the immune system: integrative approaches to prevention and healing of modern diseases. Program and abstract book. October 20–24, 1996, Zichron Yaaco, Israel.
[2] Dacher ES, Whole healing. Bergenfield, NJ: Penguin, 1994.
[3] Page CR, Frontiers of health: from healing to wholeness. Essex: Safron Walden; The C.W. Daniel Company Ltd, 1992.
[4] Fulder S, The handbook of alternative and complementary medicine. Third edition. Oxford: Oxford Science Publications, 1996.
[5] Van der Zouwe N, Omvang en achtergrond in het gebruik van alternatieve kankertilipatieen. Thesis. Amsterdam, 1991.
[6] Sheard TAB, Unconventional therapies in cancer care. In: CE Lewis, C O’Sullivan, J Barraclough: The psychonimmunology of cancer. Oxford University Press, Oxford/New York/Tokyo, 1994.
[7] Kim CMH, Apitherapy (bee Vernon therapy)—literature review; part one and part two. Alternative therapies in clinical practice 1996; 3: 36–46; 13–20.