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Acupuncture

A Plea for Electro-Acupuncture According to Voll; Music of the Dandelion

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In recent years Electro-Acupuncture According to Voll (EAV) has somewhat fallen into oblivion – similarly to nosodes. However, even through the computer era this method can quickly and inventively support therapists: It helps with diagnostics of among other things chronic seriously ill patients. Examples from 50 years of practice experience prove the efficacy.

It has become quiet around Electro-Acupuncture According to Voll (EAV). Nevertheless, as a specialist in general medicine it is a method that I would not want to be lost. As well, it has helped me for many long years to determine the multicausality in chronic seriously ill patients. I think of the man with liver cirrhosis, a sickly yellow with ascites, how he told me he was dismissed from the clinic “to die”, and ten years after EAV treatment he showed me his normal liver lab values. A focal [infected] canine tooth was discovered as the main cause! Or, of the patient with conglobate acne who later led a normal life. Or, of the treatment of a neurodermatitis which brought me into a TV appearance.
These are only some examples of a successful practice. Of course, the masters of EAV are getting on in years and the younger generation follows the temptations of simplification which promise short treatment times, however with quality loss. This approach circumvents the multicausality of chronic ailments and of the long-term effects of, for example, foci.

Despite proven successes these 50-year old efforts to reach a place in the official medicine have brought nothing. There is no institution which confers a “scientific acknowledgement”.

**Electro-Acupuncture According to Voll**

EAV is an examination and treatment method which complements the diagnostic approach to the patients (= a system and regulations diagnostic). Even with chronic diseases that you can confidently classify as therapy resistant with respect to conventional medicine, new ideas are demanded.

EAV diagnoses at the acupuncture points, which have another electrical behavior than the surrounding skin. According to Prof. Dr. Hartmut Heine from the University of Herdeke the acupuncture points are passages of fine veins and nerves through the Fascia corporis superficialis of the skin. The assumption that the vegetative fibers are irritated by pressure and the measuring current has been corroborated. Depending on the sensitivity of the control circuit belonging to the point (nerve), the conductivity is diminished as resistance against the current. We observe this as unstable indicator behavior that “healthy” points do not have.

The Electro-Acupuncture According to Voll is thus a medical functions test for disturbed vegetative regulations. In the general practice this alone is a source of knowledge for “vegetative dystonia” and other embarrassing diagnoses made for patients with strong psychological stress without organic findings. Many annoying functional complaints with zero organic findings, which considerably affect the quality of life of our patients, are documentable and detectable with it. In this case the resonance comparison medication/patient is in the center of our efforts. It works, the mode of action is still speculative.

**Use of Nosodes**

A speciality of EAV is the use of nosodes. They are a sterilized homeopathically processed disease product and cause a specific immune modulation. The stimulus effect is exactly customized by the single potencies. That is necessary for treatment and brings healing success. Unfortunately, they hardly still exist.

Besides phytotherapy, we depend on homeopathic preparations and spagyric medications. They have the best effects and healing chances. Nevertheless, homeopathic potencies have the best effect. But here also the method dwindles.
Homeopathy has many followers among patients and many recover by it. Many scientific works exist for homeopathy, also with animals, which still does not bring a breakthrough. In scientific thought there is no place for immaterial healing remedies. But experience is different.

However, if homeopathy functions beyond the pharmacological material limits, we assume from that fact that the pharmacological material of every medication contains an information portion which the human organism is able to understand – and in fact more, the further the substance is stretched by dilution. With every dilution step the potentization strengthens the information portion of the remedy and the material portion diminishes.

The nosodes are stimulus bodies which have a material and an information portion. The first one strengthens the major body resistance and is also responsible for the first reaction. The other informs the immune competent organs about the illness. The last function particularly takes effect with chronic illnesses which are suffered by the defective immune system.

With examination by the EAV method, we almost always come upon the fact that the same disease symptoms need quite different nosodes, because one nosode is not enough but that several must come into use.

**Multicausal Connection**

In contrast to conventional medicine which would like to explain all illnesses by one cause and at the same time to cure leading symptoms with big expenditures, Voll with his Electro-Acupuncture has already opened our eyes decades ago for these multicausal connections. Practically there are different bacteria, viruses and deposits of pollutants with which the organism is not finished. They strengthen reciprocally in effect. At the same time the “trivia” must be treated: Primarily the long-term effects, for example a focus must be cancelled, only then the illness heals. This needs time.

The cumulation of different pollutants blocks the defence mechanisms which then prepares the way for chronic infections and foci. Psychic problems are often released by pollutants. The *Materia Medica of Homeopathy* delivers a competent microtoxicology. It was developed through “human experimentation”. The test persons took the poisons in sub-toxic doses and collected the symptoms and sensitivities. Thus, you can bring vegetative patient complaints into connections with subclinical intoxicateds. The Electro-Acupuncture According to Voll Is a specific immune modulation in combination with a phytotherapeutic accompanying therapy.
EAV in the Computer Era

*Reinhold Voll, MD* is the founder of Electro-Acupuncture According to Voll. His master work was to localize over 1,000 points, and to bring them into relationship to the organs and organ parts. His endeavor was to make a clinical diagnosis: If you had an unstable measurement value at the measurement point for bronchi, then you had a bronchitis. This sometimes applied, but very often not! The patient was still ill and wanted to be treated. With an acute bronchitis it was often established that the bronchial measurement point was unobtrusive, however others are apparent for it. That is why we have compiled a measurement profile.

Since there are computers, we work with a standard measurement profile: 120 points on the hands, feet and head are measured. In this connection, every acupuncture meridian and the vessels discovered by Voll are included in the profile. They are easily accessible and measurable. The measurement data of the standard profile is real and is reproducible within the scope of the measuring tolerance. They can be collected and evaluated. These data are the “silver” of EAV. It would be optimal, like the ECG, if all the EAV therapists could agree on a standard profile, in order that much data [could be] gathered for a statistical evaluation. Our current statistical evaluations with the help of information technology are promising.

The standard profile is measured at the beginning of every treatment. At the same time you experience [something] special: Often you find unstable indicator behavior (= time-related change of the measurement values), in points in which you do not expect this. For example, with the previously mentioned liver case, the points you would associate with the liver were unobtrusive in spite of the clearly visible clinical liver symptoms. However, the point which represents the jaw was clear! The jaw reconstruction brough the healing. What other method would have uncovered this?

X-Rays of the jaw seldom show a focus. Besides, according to Eastern wisdom, the canine tooth belongs to the meridian pair liver/gall bladder. The long-time Chinese experiences with organ connections and long-term effects are not grasped out of the air, but are summarized into the meridians. These are represented in our measurement profile. With chronic patients, points attract attention, which apparently have nothing to do with the clinical diagnosis. However, their treatment is successful and the disease improves.

**Virtual Medication Test**

EAV has pushed into another experimental phenomenon: The “Virtual Medication Test” which exists since 1988. Though it was confirmed by many observers from physician to naturopathic circles, however it was still only cautiously accepted by therapists. In this connection it relates to the resonance comparison of patient/medication with the medications saved on the electronic
media. You can present it thus: A remedy is read in and is saved as a digital music data file\(^1\). The endings of these data files are with Microsoft Windows “.wave” or also as explored by me “the widespread music file”, the “.mp3”. Even if the dandelion has long ago wilted, the music of the dandelion is ready to be called up from the computer.

We already had indications of this development earlier: Ampule testing was strenuous for the user, the fatigue factor was greater than it corresponded to the physical and spiritual output. Gloves could relieve this somewhat.

A Sender-Receiver system\(^2\) for the extensive ampule boxes\(^3\) which sent extracts of the medication information into the measurement circuit, was widespread in the 1980s. The Sender also had an effect on the therapist. This was burdening. That is why the Sender has disappeared bit-by-bit from practice, however it became the basis for the Bioresonance devices like BICOM, Retec and MORA which achieve rather good healing results in special cases.

EAV works with a weak measuring current which is possible entirely as a carrier of the medication information. Experiments to evaluate the modulated medication oscillations oscillographically have not been successful up until now. They seem to be hidden in the background noise. On the other hand, the exactly effective frequency per medication and potency can be extensively determined through high and low pass filters\(^4\).

**Connection with Alchemical Knowledge**

At least these experiences are a clear indication that the remedy contains information and on stimulation emits it through electromagnetic waves. Could the old alchemists who assigned the three principles of Salt, Sulfur and Mercury to each material be right? Nevertheless, Salt was the material portion, Sulfur the appearance in the world (e.g. the fragrance of essential oils) and Mercury was the invisible form-building portion, however to have an effect in the world a carrier

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1) CLW Translator Note: Although the system mentioned by Dr. Rossmann is highly regarded and widely used, the development in Japan of newer and more powerful “recording” technology has led to higher quality medication frequency information with less “noise”. This is a process used by such companies as Staufen, Med-Tronik, BioKat and MBA

2) CLW Translator Note: The original sender-receiver system was envisioned and developed by Franz Morell, MD and Erich Rasche of the then fledgling Med-Tronik Company. Later developments led to the first MORA BioResonance devices. Subsequent bioresonance devices such as mentioned here were later developments which did not incorporate the full BioFilter mechanism of MORA.

3) CLW Translator Note: On visiting the offices of earlier EAV practitioners like Dr. Rossmann, Dr. Morell, the dentist Dr. Kramer, and many others, we literally found rooms where the walls were lined with shelves containing rows and rows of the Satufen, Heel and Wala boxes of ampules. Although individually arranged into test sets in large wooden cabinets, Dr. Walter Sturm had over 30,000 actual remedies at his seated test position. Testing of remedies was time consuming and complicated – but highly effective.

4) CLW Translator Note: These filters were developed by Franz Morell, MD and Erich Rasche of Med-Tronik, GmbH in conjunction with their ongoing development of the MORA BioResonance devices.
(electromagnetic strength) is required. Traditionally these carriers were high energy solvents like ether and alcohol. With this “great work” there was often talk of mysterious salt fires, and you understood from this the formerly unknown strong acids and lye. This supposition suggests that at the same time electrical current was produced and used.

Thus, it would be clear: The electrical current with its electromagnetic fields and/or oscillations transports the immaterial medication information, Mercury.

With this observation the resonance comparison of EAV could be explained. Alchemical [spagyric] knowledge is as old as acupuncture. The principles were forgotten over and over again, forbidden and rediscovered. The natural sciences have reduced to the Salt and perhaps still the Sulfur range but do not even take into consideration the Mercurial level. With this an acknowledgement of our results cannot be calculated, although they, like the natural sciences, demanded an experimental way to be investigated and used daily.

If you once recognize electromagnetism as the mediator of Mercury, thus it is understandable that the information can also be stored on suitable media. This is only realizable with today’s computer technology. I had contact with this procedure for the first time in 1988. I did not have knowledge of alchemy at that time yet, and my university knowledge was rather hindering the understanding of the new.

**How Does Virtual Resonance Comparison Function?**

Practically, with virtual resonance comparison it is a matter of stimulating a medication in such a way that it delivers the information into the circuit where it is grasped as analog information and is stored digitalized. If the medication information is called up from a data file, it again becomes reconverted into signals which are delivered in the measuring circuit.

For calling up the stored information of a medication a force [or energy] is necessary. This is so for all information: If we think an “A” nobody finds out. Only if we input a force (a mechanical energy) with speech and the vocal cords move into oscillation, then this vowel comes into the world and the information “A” spreads (through wave transmission). Then you still need a recipient who also understands “A”. Thus functions every information transfer.

The measurement circuit of our devices generates a force with which the quiescent information is mobilized and is brought to the recipient. Now, the idea is to preserve the information which is contained in the dwindling nosode treasury for EAV through storage, for example, on a storage medium of a computer (= virtual medications), and to make it retrievable at anytime.

This is realized through the enormous storage capacity of today’s computer technology: Beside the measurement device stands only a small computer. This is an immense relief if you remember the former cost-intensive ampule equipment of the measuring place.
For the resonance comparison the medications are called a Wave [data] file and the saved Wave file is up-modulated into the measuring current. The term “Waves” comes from the ending “.wave” with which Microsoft Windows saves the corresponding files. The Waves behave like normal ampules in the honeycomb (= antenna). If you shut off the Wave, the effect ends. This is easily controlled and thus an EAV Therapy can be put together.

Special computer programs support that, for example “Homopath®”. Here a reasonable diagnostic is supported with virtual medications, which restructured there are processed. There are thousands of stored medication files delivered in the usual potencies. We have understood that this functions in our practice a thousand-fold.

According to the motto: “The most common in frequent and the unusual is rare” we must then make a selection and thus form a usable arrangement of the Wave files. Of course, there are always new chemical materials with varying toxicity which you would like to have as a test substance. With the Homopath Software this is not a problem: The preparation is put into the input beaker of a Bioresonance device, the output is connected with a microphone input (line in) to the computer, the name and the potency are registered and the recording is started. The process runs with slight time involved.

The input beaker which functions as an antenna represents a certain problem. It not only takes up the medication, but also the environment and overlays them. The patient also lives in this environment and it is to be primarily assumed that for him these oscillations are not harmful. Nevertheless, there are devices which switch off the undesirable information. You can receive details about that from, for example, the Kindling Company in Germany.

**Advantages for Users**

For the resonance therapist the transfer of medication information to any carrier is not news; this is also for the assorted Wave files. They are organized by the above-mentioned software, which is further developed for us over about [30] years. It offers the user a way through the EAV examination and a more efficient pre-selection of the virtual medications. Standardization on the basis of our Standard Profile permits a computerized action which delivers valuable data to the AI-evaluation.

The therapist is relieved from routines and can follow a path. The software places the greatest value to remain as true as possible to the successful original method of Voll, as well as to make at the same time our long-standing experience and advancements transparent and provide the current information. Our long time empirical Standard Measurement Profile facilitates access for the less skilled.

5) CLW Translator Note: See also the wellness devices from Medical Electronics, Germany such as the BOS 318 and 518 and the NSA 07.
It is a benefit that Electro-Acupuncture According to Voll obtains the health information quickly and simply. Thus, in the eyes of orthodox medicine this makes it suspicious, because this easy information gain is unusual.

The virtual resonance comparison provides a lifeline for EAV which loses popularity with the dwindling nosode treasury. On the other hand, it shelters the possibilities which we cannot overlook even today. Considering the technical optimization of the electromagnetic fields for information transfer and the achieved information density, the thought is obvious that it also serves the low frequency endogenic electrical field. The heart is the main generator of these fields, which is proven with the ECG. The active mechanism is uninvestigated.

Result

EAV is an examination and treatment method which expands our knowledge about the patient and opens complementary therapeutic methods. In his time Voll could not have completely foreseen the advancements of EAV, but he pushed open the door to treatment with information medications which work without material.

Keywords: Diagnostic, phytotherapy, spagyric, homeopathy, medical technology, bioresonance.

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Dr. Heinrich Rossmann has a practice for regulation medicine in Munich. For 35 years he was a National Health general practitioner and family doctor. Since 1970 he has worked with the functional part of Electro-Acupuncture According to Voll. The goal is to build it up into the physicians’ practice process.

Since 1980 he uses the program “Homopath” for electronic data processing that he helped develop. He has given numerous courses in Germany and abroad and has published three books about Electro-Acupuncture According to Voll. For 10 years he acted on the Board of Directors in the working group for the support of research and teaching of experience medicine at the LMU in Munich.