

MEETING ABSTRACT

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Conventional medicine and complementary medicine: more similarities than contradictions

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Ilkka Tuomi said that is impossible to divide knowledge into two clearly separated fields, one for expressed knowledge and the other for unexpressed knowledge [1] and this concept leads us to consider that the differences between Complementary Medicines (CAM) and Conventional Medicine (CM) are often mistakenly given as true, so we will deepen this theme searching for common elements between CM and the most widespread CAM: herbal medicine, acupuncture and homeopathy.

For herbal medicine concepts are simple: the herbal products are in practice normal drugs, with their therapeutic effects and their side effects, and their use follows the rules of pharmacology.

For acupuncture we have now a modern theory to explain its mechanism of action, because recent works indicate that the insertion and rotation of the needles in the subcutaneous tissue is able to promote the production of cytokines with various biological effects, showing in a pathophysiological way the action of this practice [2].

Regarding homeopathy the speech is more complicated, possibly due to the theoretical structure at the base of it.

Francois Laplantine [3] succeeded in his book, "Anthropology of Illness", in envisaging a key of lecture surely original and interesting, showing that the transition between the homeopathic and allopathic therapeutic models is allowed.

In practice, the MC and homeopathic medicine are only in apparent contradiction. Here's an example: behind the constitutional classification of individuals in Carbonic, Sulphuric and Phosphoric, established in Homeopathy and based on biomorphological parameters, there is a clear reference to genetics, seen as individual predisposition to developing specific diseases, therefore

mesoblasti (ed Sulphuric) are, in example, at increased risk of cardiovascular disease and endoblasti (ed Carbonic) are at greater risk of metabolic diseases [4,5].

Obviously it becomes indispensable to check if it's possible that the assertion that behind one aspect of "morphological" type there is a corresponding aspect of the functional or, anyway, pathophysiological type (concept of Biomorphology). In example, the ratio between the length of the 2nd and 4th finger of the hand leads to differentiate individuals and their susceptibility to specific diseases [6].

We can comment that the same types of knowledge, ideas, innovations, are found among intellectuals, among the peasants in the villages, in the forests between the tribesmen and even in universities among scientists [7].

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