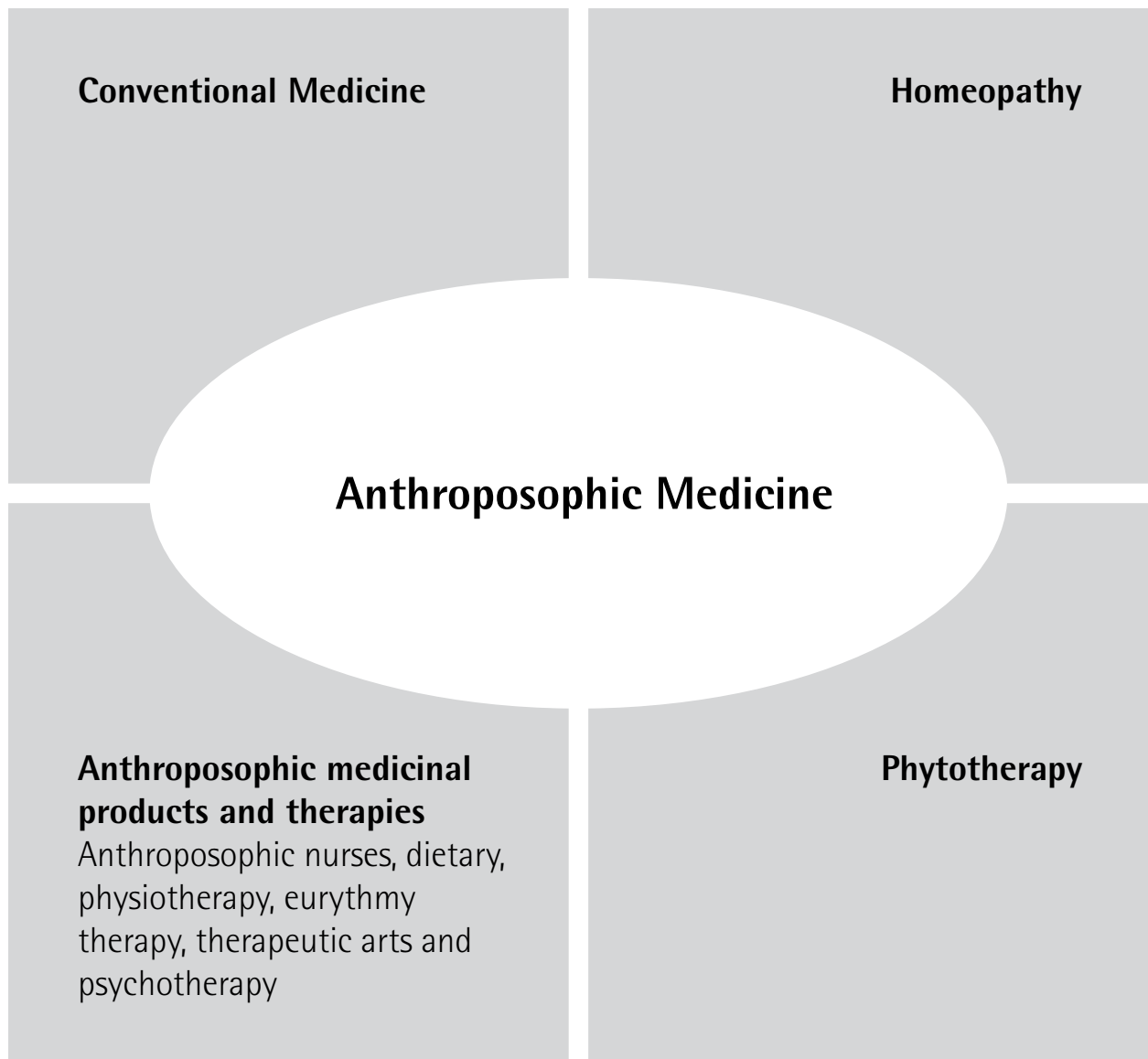


The System of Anthroposophic Medicine



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This publication is a joint initiative of the organisations of anthroposophic doctors, patients, pharmacists and the international coordination for anthroposophic medicine/Medical Section Goetheanum.

It aims to provide:

- an overview of the use of anthroposophic medicine in the prevention, diagnosis and treatment of disease
- a summary of its range of therapeutic approaches
- background on [anthroposophic pharmacy](#)
- information on research, safety and effectiveness of anthroposophic medicine.

It also sets anthroposophic medicine in the context of European regulations.

Summary

Anthroposophic medicine integrates conventional medicine with an anthroposophic* perception of the human being. It starts with a conventional diagnosis, but includes in its assessment of the patient the imbalances of the body and a psychological, mental and spiritual dimension. It takes a [holistic approach](#) to health and offers specific therapies enhanced according to anthroposophic principles. It uses both conventional and anthroposophic medicinal products. Both the treatment approach and the use and selection of medicinal products and other therapies are highly individualised and intend to bring about a 'process of development' within the patient, reinforcing the patient's natural self-healing ability.

Anthroposophic medicine was developed in 1920 and has earned a high level of acceptance within European society. It is used in both primary and clinical care in over twenty EU Member States, and offers a high degree of patient satisfaction.

Research shows that the anthroposophic medical approach is safe and effective and leads to only a sparing use of antibiotics; medical insurance policies show minimal medication costs. Anthroposophic medicine, as an integrated complementary medical system, is proven both to be safe and effective and offers considerable added value to the health systems in the EU.

* Anthroposophy is defined in the Webster Encyclopedic Unabridged Dictionary of the English Language as 'A philosophy based on the teaching of Rudolf Steiner (1861–1925) which maintains that, by virtue of a prescribed method of self-discipline, cognitional experience of the spiritual world can be achieved'. **See Glossary.**

Anthroposophic medicinal products are produced according to anthroposophic pharmaceutical principles and processes, some of which they share with **homeopathy** and some of which are specific non-homeopathic processes that reflect the interrelationship between human beings and the world of nature. They are manufactured according to the standards of Good Manufacturing Practice (GMP), and their quality is controlled by the criteria and parameters of official pharmacopoeias.

Although they are regulated directly within the national health systems in Germany and Switzerland, anthroposophic medicinal products are not yet included in the EU regulatory framework for medicinal products. This raises a number of difficulties as regards their registration across Europe.

It will only be possible to do justice to anthroposophic medicine if the EU regulatory framework relating to medicinal products for human use

- recognises anthroposophic medicinal products
- stipulates procedures for their adequate authorisation or registration
- adequately features their specific manufacturing methods
- accepts their safety by long-established use and
- takes into account the limited economic resources provided by these low profit products.



Althaea / Marsh mallow

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1 THE CONCEPT OF ANTHROPOSOPHIC MEDICINE

1.1 An integrative medicine

Anthroposophic medicine integrates conventional medicine with an anthroposophic¹ perception of the human being. The principal aspects of an anthroposophic medical approach to promoting health, and preventing and curing illness are:

- it is an **integrative medicine** that builds on the well-established facts and methods of diagnosis and treatment of conventional medicine but extends it with a **holistic approach**;
- it is based on a holistic concept of health and so-called **salutogenesis**;² this leads to effective strategies for disease prevention through education and lifestyle programmes and the development of self-management in the prevention of and coping with disease;
- it regards a pathological condition as the culmination of a longer process; the analysis of the process that leads to a pathological condition is of major importance in assessing the specific situation of the individual patient in his or her **biography** and for the subsequent diagnosis and therapeutic process;
- it both assesses the situation of the patient's illness and takes account of the patient's relationship with his or her social and natural environment;
- it includes a psychological, mental and **spiritual dimension**³ in its assessment of the imbalances of the individual patient; the therapeutic approach is seen as a process rather than a switch from a condition of illness to a condition of health; this provides an approach to treatment that is process-related;
- a comprehensive and individual analysis leads to a highly individualised treatment approach; this corresponds to individualised use and application of both anthroposophic and conventional medicinal products and other therapies;
- all therapeutic treatments are aimed at stimulating the ability of the patient to self-heal, the so-called salutogenetic principle;

¹ Anthroposophy is defined in the Webster Encyclopedic Unabridged Dictionary of the English Language as 'A philosophy based on the teaching of Rudolf Steiner (1861 - 1925) which maintains that, by virtue of a prescribed method of self-discipline, cognitional experience of the spiritual world can be achieved'. See Glossary.

² Salutogenesis: the principle of concentrating on factors that support human health and well-being in contrast to factors that cause diseases. For details see Aron Antonowsky, Unraveling the mystery of health. How people manage stress and stay well. Ann Arbor 1987. See Glossary.

³ The anthroposophic understanding of the spiritual dimension is that each human being is a unique immortal individual. This individual undergoes a lifelong process of development in illness and in health. See Glossary.

- emphasis is put on an optimal multi-disciplinary approach, adjusting the application of anthroposophic medicinal products and different anthroposophic therapies, according to the actual situation of the patient;
- self-responsibility, patient choice and active participation in the healing process are emphasised; the autonomy of the patient is central to anthroposophic medicine;
- anthroposophic medicine is practised by physicians with a dual training; they have to be fully qualified as a physician first and then to graduate from a further three years of training as an anthroposophic doctor;
- the therapeutic concept of anthroposophic medicine is practised in multi-therapeutic settings or clinics and anthroposophic physicians are active in general practice as well as in all specialist fields of medicine;
- anthroposophic medicine is a medical system offering sustainable and cost-effective solutions for public health.⁴



1.2 The diagnostic process

In anthroposophic medicine, the diagnostic process integrates specific anthroposophic diagnostic skills and modalities into a conventional medical diagnosis, for a holistic treatment of the individual patient. It pays particular attention to salutogenetic aspects, the mental and **spiritual dimension** of the patient, and his or her interaction with the physical aspects of the body (see **Chapter 4**).

⁴ See National Health Service figures of general practitioner practice in Stroud, UK, and <http://members.ziggo.nl/peterkooreman/gpcs.pdf>

1.2.1 Treatment

Anthroposophic and conventional parameters provide the basis for a multi-modal therapeutic approach in anthroposophic medicine. As an **integrative medicine**, anthroposophic medicine concentrates on both appropriate conventional and anthroposophic medical intervention. The anthroposophic medical approach includes the following characteristics:

- individualised anthroposophic medication with anthroposophic medicinal products designed and produced in accordance with pharmacopoeia standards; notably, 25% of total anthroposophic medicine prescriptions are injections. They are of particular importance in acute and severe medical situations such as in hospitals;
- anthroposophic treatments for external use include compresses, hydrotherapy, medical washes, medicinal baths (whole body and foot bath), **rhythmical massage therapy** (with oil or ointment) and inhalations performed with specific anthroposophic medicine techniques;
- nursing, physiotherapy and **rhythmical massage therapy**, dietetics, **eurhythmy therapy** (see **Chapter 2** and **Annex 1**), **therapeutic arts** (music, drawing and painting, sculpture, speech) (see **Chapter 2** and **Annex 1**), psychotherapy and further anthroposophic therapeutic and life-style approaches;⁵
- conventional medical intervention in diagnosis and treatment where appropriate of acute and chronic diseases, for example in the diagnosis and treatment of severe conditions, intensive care, surgery, endoscopies, vascular catheterisation etc.
- the input and advice of the therapists of supplementary anthroposophic therapeutic tools in multi-disciplinary health care settings, in order to select the most appropriate treatment; the treatment approach is agreed in close discussion with the patient (informed consent).



Filderlinik Filderstadt, Germany

⁵ It is possible for all health professions to be enlarged by further anthroposophic training.

1.3 Disease prevention and lifestyle

A holistic anthroposophic medicine approach is based on a particular concept of health and disease. Health is seen as the process of integration of physiological, psychological and **spiritual** activities, which can be highly influenced by education, lifestyle and self-management.

Anthroposophic medicine has always focused on how to keep people healthy rather than on why they fall ill. Physicians and therapists empower their patients to take responsibility for their personal health and well-being. Anthroposophic medicine promotes the individual developmental processes of the human being. Developing self-management – physiological, psychological, cognitive and **spiritual** – is seen as a key to becoming strong and healthy.

1.3.1 Nutrition

Besides the general promotion of good nutrition, anthroposophic medicine lifestyle programmes encourage organically-produced (biodynamic⁶) foods.

1.3.2 Smoking and drugs

Anthroposophic medicine discourages the use of tobacco or too much alcohol and disapproves of the use of drugs. There are some very effective anthroposophic medicine drug addiction rehabilitation programmes.⁷

1.3.3 Physical exercise

In addition to the general promotion of physical exercise, anthroposophic medicine has developed a special **eurhythmic movement therapy**, which creates a link between the body's external movements and the inner mental and healing forces of the human organism.

1.3.4 Education

The approach in anthroposophic nurseries and Waldorf schools supports the development of the 'inner clock' of natural rhythms of the human body. Children are encouraged to develop their own creativity before they are subjected to the influence of multimedia. Technical support, TV and computer games are integrated carefully and in an age-appropriate way.

1.3.5 Antibiotics and medication

Anthroposophic medicine strives, wherever possible, to support the patient's own self-healing abilities, using medication only where necessary and appropriate. For example, the use of antibiotics has always been restricted, especially in childhood, even before professional standard

⁶ See <http://www.demeter.net>

⁷ Sieben Zwerge in Germany: <http://www.siebenzwerge.info/>;
Arta in the Netherlands: <http://www.lievegoedzorggroep.nl/index.php/ArtaVerlavingszorg>

guidelines recommended such limitations. Recent evidence underpins the knowledge that therapies which suppress fever in children deregulate the immune system.⁸ In anthroposophic medicine, such interventions are used only if the self-healing processes are too weak. Where possible, fever is not suppressed but supported with anthroposophic medicines and compresses. Research shows that the anthroposophic medical approach leads to only a sparing use of antibiotics.⁹

1.3.6 Prevention of psychological disorders

Self-management contributes to self-healing. This is reflected in the lifelong capacity of the human being to learn and in the way in which an individual seeks to make sense of his or her own **biography**.

Losing interest in development or hope for the future leads to a loss of identity. Anthroposophic medicine offers strategies and guidelines for handling psychological difficulties and accessing inner **spiritual** forces to prevent this. This is important in the prevention of depression, aggression and anxiety.

1.3.7 Effectiveness

Anthroposophic medicine has been practised since 1920 and demonstrates a solid track record of experience in general practice and clinical appliance. Anthroposophic medicinal products and anthroposophic therapeutic concepts have always been research-based. A large number of research studies establish and analyse their use and effectiveness (see **Annex 5**).

8 MJ Kluger, *Annals of the New York Academy of Sciences*, 1998 Sep 29; 856:224–33, Role of fever in disease, <http://onlinelibrary.wiley.com/doi/10.1111/j.1749-6632.1998.tb08329.x/abstract>
Richard Beasley, *the Lancet* Vol 372 September 20, 2008, Association between paracetamol use in infancy and childhood, and risk of asthma, rhinoconjunctivitis and eczema in children aged 6–7 years
Prof. Dr. A. Lohse, Dr. S. Schmiedel, *Hamburger Ärzteblatt* 12. 2009, Fieber senken, möglichst nicht!

9 IIPCOS study: <http://www.ifaemm.de/>

1.4 Research

Since first established, anthroposophic medicine has been a science-based medical system. Both basic descriptive and clinical research are pillars of evidence for anthroposophic medical treatment. As for all medicine, the methodological approach has changed over time, advancing from anecdotal case reports and simply-designed retrospective documentation and cohort studies to the most sophisticated prospective-controlled study designs including randomised controlled trials. Today anthroposophic medicine uses the full spectrum of study designs.

As anthroposophic medicine is a coherent and continuously developing scientific medical system, modern study designs are used not only to collect and prove empirical data, but also to verify new therapeutic concepts in clinical practice. The concept of **cognition-based medicine (CBM)**,¹⁰ a scientific approach for evaluating the effectiveness of therapeutic procedures in single case settings, has been developed within anthroposophic medicine.

There are currently several research institutes¹¹ and many co-operative projects between research institutes and universities in several Member States which work on basic research in methodology, and on experimental and observational studies in the field of anthroposophic medicine.¹² It is also taught at universities in Austria, Germany, Holland, Italy, Latvia, Spain and Switzerland.¹³

An overview of recent research results in anthroposophic medicine can be found in the reviews of Hamre et al. 2009,¹⁴ Kienle et al. 2009¹⁵ and Kienle et al. 2006^{16,17} (see also **Annex 5**).

1.4.1 Safety

The safety of anthroposophic medicine treatments, anthroposophic pharmacology and anthroposophic medicinal products is documented by the findings of research studies which prove that they are generally well-tolerated. All anthroposophic medicinal products are produced

10 Kiene H, von Schön-Angerer T: Single-Case Causality Assessment as a Basis for Clinical Judgment. *Alternative Therapies* 1998;4:41–47

11 Research Centres: Further information at <http://www.ivaa.info>; Gerhard Kienle Lehrstuhl für Medizintheorie, Integrative und Anthroposophische Medizin Universität Witten/Herdecke, DE GmbH; Universität Bern, CH, Kollegiale Instanz für Komplementärmedizin (KIKOM); Institute for Applied Epistemology and Medical Methodology (IFAEMM e.V.), Freiburg DE; Forschungsinstitut Havelhöhe, Berlin, DE; Forschungsinstitut Hiscia Verein für Krebsforschung, Arlesheim, CH; Institut für klinische Forschung (IKF), Berlin, DE; Louis Bolck Instituut (Department of Healthcare & Nutrition), Driebergen, NL

12 Detailed information is supplied on <http://www.ivaa.info> and on the web pages of the research institutes (see footnote 11).

13 For further information see <http://www.ivaa.info>

14 Hamre HJ, Kiene H, Kienle GS. Clinical research in anthroposophic medicine. *Altern Ther Health Med* 2009; 15(6):52–5. http://www.ifaemm.de/Abstract/PDFs/HH09_6.pdf

15 Kienle GS, Glockmann A, Schink M and Kiene H. *Viscum album L.* extracts in breast and gynaecological cancers: a systematic review of clinical and preclinical research. *Journal of Experimental & Clinical Cancer Research* 2009; 28:79

16 Gunver Kienle MD, Helmut Kiene MD, Hans Ulrich Albonico, MD. *Anthroposophic Medicine Effectiveness, Utility, Costs Safety*, 2006 by Schattauer Verlag, Stuttgart–New York

17 For a more concise overview of studies and working groups in anthroposophic medicine please also see the websites of the various research centres (see footnote 11) and <http://www.ivaa.info>

according to Good Manufacture Practice (GMP). An innovative electronic pharmacovigilance system has been established by a network of general practitioners in anthroposophic medicine as a model of best practice in recent years (see Annex 5).

1.4.2 Added value

Any detailed cost analysis of the anthroposophic medicine approach to treatment should compare the cost of conventional and anthroposophic medicine therapies, in-patient hospital and rehabilitation treatment, and sick leave. A number of studies show a cost-reduction in relation to the duration of the treatment.¹⁸ This is particularly relevant with respect to the treatment of chronic disease. Medical insurance policies show minimal medication costs.¹⁹

¹⁸ AMOS: The study established that total costs in the first year did not differ significantly from costs in the pre-study year, when the patients were new to anthroposophic medicine therapy; in the second year, the costs were reduced by 13%. Other, less detailed evaluations also indicate similar or lower costs in anthroposophic therapy settings compared to conventional settings.

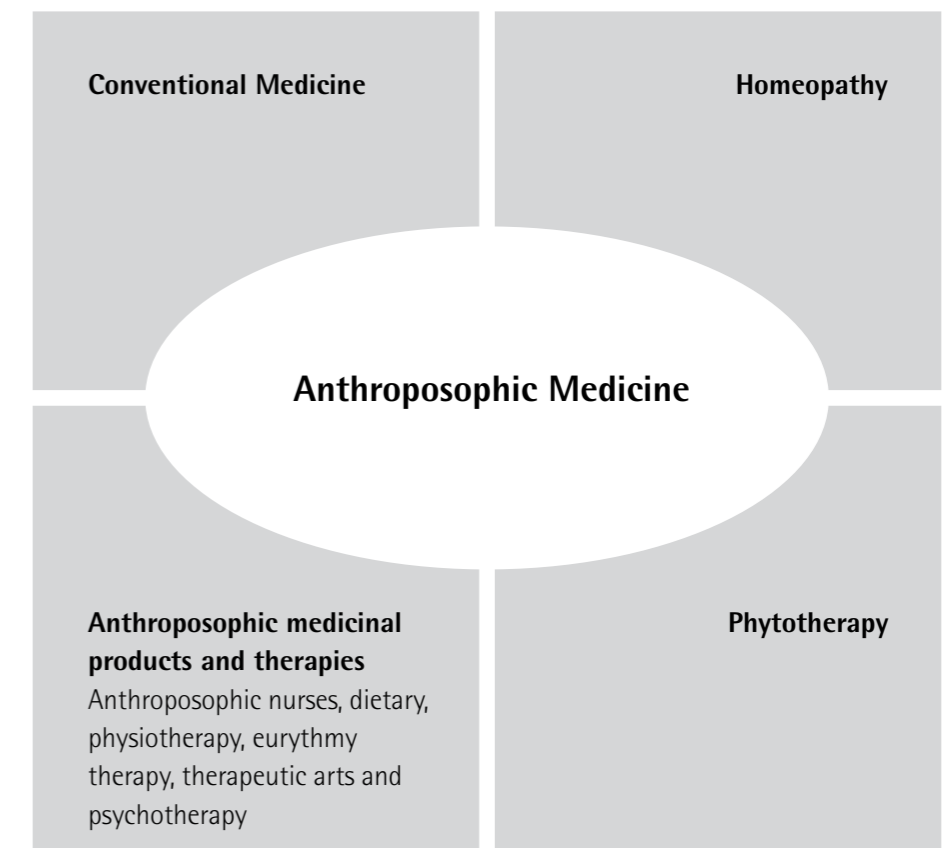
¹⁹ See footnote 4: <http://members.ziggo.nl/peterkooreman/gpcs.pdf>

2 THERAPY APPROACHES IN ANTHROPOSOPHIC MEDICINE

2.1 Anthroposophic medicine as integrative medicine

The multi-disciplinary approach in anthroposophic medicine combines conventional intervention, some homeopathic and phytotherapeutic medical products and anthroposophic medication and a number of specific therapeutic treatments. These approaches can be applied in all health care settings and situations, including emergency and acute intensive care, as well as in the treatment of chronic disease.

The therapeutic medical approaches of anthroposophic medicine include medication, the so-called biographical approach, nursing, physiotherapy and *rhythmical massage therapy*, *eurythmy therapy*, therapeutic arts and psychotherapy.



2.1.1 Medication

Anthroposophic physicians use and apply anthroposophic medicinal products, homeopathic, phyto- and, where necessary, conventional medicinal products. Anthroposophic medicinal products are applied, internally, by injection and externally. They are conceived, developed, and produced according to the intricate interrelationship between human beings and the realms of minerals, plants and animals in nature.

The range of anthroposophic medicinal products is partially determined by the physical characters of substances, whereby conventional medicinal, phytotherapeutic and homeopathic criteria are taken into consideration. Most particularly, anthroposophic medicinal products are characterised by their manufacturing processes involving specific anthroposophic and typical homeopathic pharmaceutical procedures.

They are manufactured according to pharmacopoeia standards (see **Chapter 3**).



2.1.2 Therapy by biographical approach

There are three dimensions to the therapeutic importance given to the **biography**²⁰ of the patient in anthroposophic medicine.

In general, the development of a human being changes at different times of his or her life, with different tendencies for disharmony and disease in each period, for example diseases such as chickenpox in child-

²⁰ See Glossary.

hood, gastric ulcers in maturity or strokes in elderly people. Secondly the mental and **spiritual** development of a human being also follows certain biographical periods in childhood, adulthood and old age. Thirdly the way in which patients overcome their illness also differs according to the period of their life: children tend to experience short disease development with high fevers, while elderly people experience longer lasting or chronic disease. These differences require differentiations in treatment.

In addition, each human being is distinguished by his or her own individual **biography**, expressing his or her unique individual nature. Anthroposophic medicine offers a subtle framework for the correlation between life experiences in the body and at a mental and **spiritual** dimension, and disharmony and disease. Each physician or therapist takes this into account in choosing the best treatment.

Biography treatment by physicians, psychotherapists or other well-trained anthroposophic life coaches helps patients to find an overview of how their life has developed, where they stand now with their illness or disease and how they want to go on living and coping with their specific situation.

2.1.3 Nursing as a part of therapy

Nursing plays an outstanding role in anthroposophic medicine, defined as a kind of conscious 'medicinal devotion'. Attention and attachment towards the patient are not just 'add-ons'; applied in methodological way, they become an essential part of the treatment process. Patients are always attended, treated and guided with the objective of helping them to regain an individual and autonomous existence.

Anthroposophic nursing works with an augmented understanding of care. This means not only washing, warming or moving the patient, but creating a mental and emotional 'shelter' for him or her. Anthroposophic nursing seeks to respect the human existence of the patient in every situation of his or her illness or disease and to provide a genuine accompaniment during this period and in the recovery process. It is especially renowned for its support in moments of transition and during the experience of life events such as birth, severe disease and death.

Anthroposophic nursing is provided in all anthroposophic clinics and hospitals as well as in homes for elderly people, home care services, social care, curative education settings and primary care.

2.1.4 Anthroposophic physiotherapy and rhythmical massage therapy

In addition to conventional movement exercises, anthroposophic physiotherapists offer a special kind of massage called **rhythmical massage therapy** (see **Annex 1**).

Rhythmical massage therapy is aimed at influencing all fluids of the human organism and aids the body's self-healing abilities. It gives the patient better control of his or her body, rectifying imbalances derived from stress and/or illness, thus supporting and restoring the body's own harmony and process to healing.

Various forms of hydrotherapy have also been developed, which complement this form of therapeutic massage.

Two recent research studies report on the positive experience of external applications and **rhythmical massage therapy**.²¹



rhythmical massage

2.1.5 Eurythmy therapy

The term 'eurythmy' is derived from Greek (eu = beautiful, harmonious) and means 'harmonious, beautiful rhythm'. Eurythmy movements create a link between the body's external movement and the inner mental and healing forces of the human organism. Anthroposophic medicine has successfully applied **eurythmy therapy** as a special form of movement since 1920.

Consciously-exercised movements are used to support the healing forces. Different exercises address circulation and breathing, metabolism, general mobility and balance, as well as the individual's emotional and mental capacity, so that the patient can experience and express feelings and emotions. The aim is to regulate the expressions of the body, which have been disrupted as a result of imbalances.

Eurythmy therapy employs speech, gestures and music, translating them into a unique form of movement. Each consonant and vowel is connected to a particular movement. These exercises are specifically

designed to stimulate, strengthen and even regulate every function and process of the human body.

Eurythmy therapy can be used as an additional therapy in a range of indications, for example acute, chronic or degenerative diseases of the nervous, cardiac or circulatory systems, for troubles of the metabolic or musculoskeletal system, for developmental problems or disabilities in children as well as in the field of psychosomatic and psychiatric medicine. This movement therapy may also be applied for prevention and after-care, and is used as a complementary therapy in the treatment of cancer.

Eurythmy therapy is exercised in hospitals, clinics and care centres, therapeutic centres, primary care, schools and nurseries. There is an increasing amount of research data on the benefits of **eurythmy therapy** available (for further reading see **Annexes 1 and 5**).



eurythmy therapy

2.1.6 Anthroposophic Art Therapy

Therapeutic art, such as drawing, music, painting, sculpture, singing and speech, may also be part of anthroposophic healthcare treatment. It can help harmonise imbalance between the physiological, mental and **spiritual** dimensions of a human being. Anthroposophic Art Therapy help patients to mobilise their inner resources and stimulate their active contribution to their own process of recovery. With the use of colours, tones, rhythms, forms, breath or sound, the patient learns to deal with his or her imbalances and to bring about changes that are beneficial to the healing process. Patients of therapeutic art feel less overwhelmed by their illness, especially in cases of chronic disease.

²¹ Hamre HJ, Witt CM, Glockmann A, Ziegler R, Willich SN, Kiene H. Rhythmical massage therapy in chronic disease: a four-year prospective cohort study. *J Altern Complement Med* 2007; 13 (6):635–42. Therkleon T, Sherwood P: Patient's experience of the external therapeutic application of ginger by anthroposophically trained nurses. *Indio-Pacific Journal of Phenomenology* 2005; 4:1–11

Anthroposophic Art Therapy may be applied in many conditions. These include acute and chronic diseases, degenerative, inflammatory or sclerotic diseases, psychosomatic and psychological or developmental problems. There is an increasing evidence base for the benefit of Anthroposophic Art Therapy (for further reading see **Annexes 1 and 5**).



anthroposophic art therapy

2.1.7 Anthroposophic psychotherapy

Over the last century, there has been a steady increase in psychical diseases and the demand for psychological and psychiatric care is growing, especially for personality disorders and disorders of identity formation. Anthroposophic psychotherapy is able to offer a particular set of therapeutic instruments for these needs.

With its **holistic approach** based on the anthroposophic perception of a human being, it pays special attention to periods of mental and **spiritual** development. Conventional psychotherapeutic methods are enhanced by a set of instruments including the biographical development approach.

Anthroposophic psychotherapy is delivered as a result of interdisciplinary cooperation between the medical, therapeutic and psychotherapeutic team. It aims to enable the individual to regain his or her autonomy and empower his or her self-determination.

3 ANTHROPOSOPHIC PHARMACY

3.1 General aspects

Anthroposophic medicinal products have been on the market in Europe since 1920 and worldwide since 1960. There are about 1700 different products on the market in the European Union, with new ones regularly being developed. They are prescribed by anthroposophic physicians and by a wide range of CAM physicians and conventional doctors. In some EU Member States, they are also freely available for self-medication. According to national regulations in Germany, Heilpraktiker (registered health practitioners) are legally permitted to prescribe certain anthroposophic medicinal products.

The starting materials of these products come from minerals, plants and animal substances. They are developed and manufactured in accordance with the anthroposophic perception of human beings and nature. The anthroposophic approach to pharmacy consists in a **holistic approach** that takes account of the interrelationship between human beings and the realms of minerals, plants and animals in nature. To understand this interrelationship and its implication for health and well-being, imbalance or illness, a thorough understanding and knowledge of anatomy, biology, biochemistry, physiology and pathology is essential from the point of view of both natural science and **anthroposophy**.

3.2 Characteristics of anthroposophic medicinal products

Anthroposophic medicinal products are conceived, developed, and produced in a so called process-oriented way that reflects the interrelationship between human beings and the realm of nature. Starting materials are seen as distinctively shaped by '**formative forces**', for example the inner structures of the mineral or the morphology and substance of plants. It is one of the most central issues within **anthroposophic pharmacy** to make use of these **formative forces** in an appropriate way. This principle guides **anthroposophic pharmacy** to the adequate starting materials and substances for anthroposophic medicinal products and provides it with its distinctive and subtle pharmaceutical processes.

The particular nature of the medicines is taken into consideration in the choice of and in the development process of an anthroposophic medicinal product. The stimulation of the life force in a human being

via anthroposophic medicinal products is a guiding principle of anthroposophic medicine in overcoming illness and disease.

3.3 Production and quality control

Anthroposophic medicinal products are produced in accordance with the modern standards of Good Manufacturing Practice (GMP). Their quality is controlled by the criteria and parameters of official pharmacopoeia (e.g. European Pharmacopoeia (Ph.Eur.), German Homoeopathic Pharmacopoeia (GHP/HAB), French Pharmacopoeia (Ph.F.), Pharmacopoeia Helvetica (Ph. Helv.) and the *Anthroposophic Pharmaceutical Codex (APC)*) (see also **Annex 2**). Anthroposophic medicinal products are not developed by testing on animals.

Detailed pharmaceutical information for quality control and regulatory needs is provided in the *Anthroposophic Pharmaceutical Codex (APC)*.²² Professional competence in anthroposophic pharmacy is provided by the associations of anthroposophic pharmacists which are also responsible for training and research and development (see **Annex 2**).

²² <http://www.iaap.org.uk/downloads/codex.pdf>

4 A HUMAN BEING ACCORDING TO ANTHROPOSOPHIC MEDICINE

4.1 The holistic perception of a human being

In anthroposophic medicine, as in conventional medicine, the physical and biochemical aspects of the human body provide the basis for diagnosis and therapy. In anthroposophic medicine, a holistic perception of a human being encompasses, in addition to the physical body, the psychological or mental and *spiritual* dimensions, the capacity for self-healing and recovery – best epitomised by the term ‘life-force’ – and the ability for continuous development. Individuals are further characterised by their own *biography* and their distinctive nature as a social being.

This leads to a set of analytical determinants which are used to incorporate this holistic perception of the human being into both diagnosis and treatment. These determinants perceive human beings according to their individual development and their relationship with the social and natural environment. They pay particular attention to the fact that human beings carry within them elements of all parts of the realms of minerals, plants and animals in nature. This approach makes possible a sophisticated and differentiated treatment of imbalance, disorder or illness, according to which the appropriate anthroposophic medicines and therapies are applied.

Human	Nature
Physical level visible and measurable	World of Minerals
Life forces level living organism biological identity recovery physiological functions	World of Plants
Mental level awareness, perception passion feeling movement psychological organisation	World of Animals
Individual level biography self-awareness creativity self-determination	Unique world of Humanity

The different elements of the relationship between human beings and the world of nature and the distinctiveness of a human being can be summarised as follows:

In anthroposophic medicine, the interrelationship between human beings and their natural environment, the realm of nature, is reflected in the fact that human beings share the inorganic elements of their body with the world of minerals, their existence as a living organism with the world of plants, and their awareness, mobility and the capacity to feel sympathy and antipathy with the world of animals.

4.2 The systems governing the human body

4.2.1 Four driving forces

Taking into account the anthroposophic understanding of human beings, their 'humanity' and relationship with their social and natural environment, anthroposophic medicine observes and works with four distinctive elements to stimulate and influence treatment and healing:

- **Physical, inorganic elements of the body**

Anthroposophic medicine is governed by physical and chemical principles and the laws of nature for any aspect of the physical body that relates to its form or structure

For example, a broken arm has to be splinted to allow it to mend.

- **Life forces to stimulate self-healing**

In addition, anthroposophic medicine looks at a set of forces responsible for generating life and enabling human beings to develop and recover from illness. These 'life-forces' are considered essential in anthroposophic medicine to revive or activate self-healing in the human body in order to overcome pathological symptoms or illness.

For example, rest, sleep and rhythm play an important role in any recovery of accident or disease. Treatment with anthroposophic medicinal products and anthroposophic medicine therapies stimulates these healing forces.

- **Psychological or mental dimension**

The psychological and emotional dimensions of a human being also have an influence on health. These are reflected in the ability to feel joy or distress, sympathy or antipathy, the ability to recognise something consciously, or to wish or detest. Modern medicine, like anthroposophic medicine, acknowledges the importance of the mental and psychological disposition of a human being and its direct influence on recovery from illness and the ability to achieve health and well-being. Anthroposophic medicine takes account of these dispositions and abilities in diagnosis and treatment.

For example, stress, pain or sorrow lead to increased amounts of cortisol, the stress hormone; this suppresses immune system activity, leading to delayed recovery and a reduction in the ability of the body to react to the invasion of viruses, bacteria and injury.

• **Human individuality**

A fourth component, specific to human beings, and a strong element affecting their existence, is self-awareness. To say 'I am' is a particular feature of mankind, acknowledging the 'Ego', or the Self of an individual. The ability to distinguish between oneself and others, the faculty to communicate by speech or the capability to take decisions out of free will rather than simply to follow the principles and laws of nature; these are all part of the unique position of human beings in relation to the world of nature.

This self-awareness points towards a further **spiritual** level in human beings. The development of this level can also be taken as a driving force, instrumental for treatment and healing, because this level contributes to the restructuring of the functions of the human body and of its organ systems.

For example, this can be observed in the working of the immune system. A strong self-management and sense of coherence will bring about a more positive outcome of treatment.²³

4.2.2 Threefold systematics of the organ systems

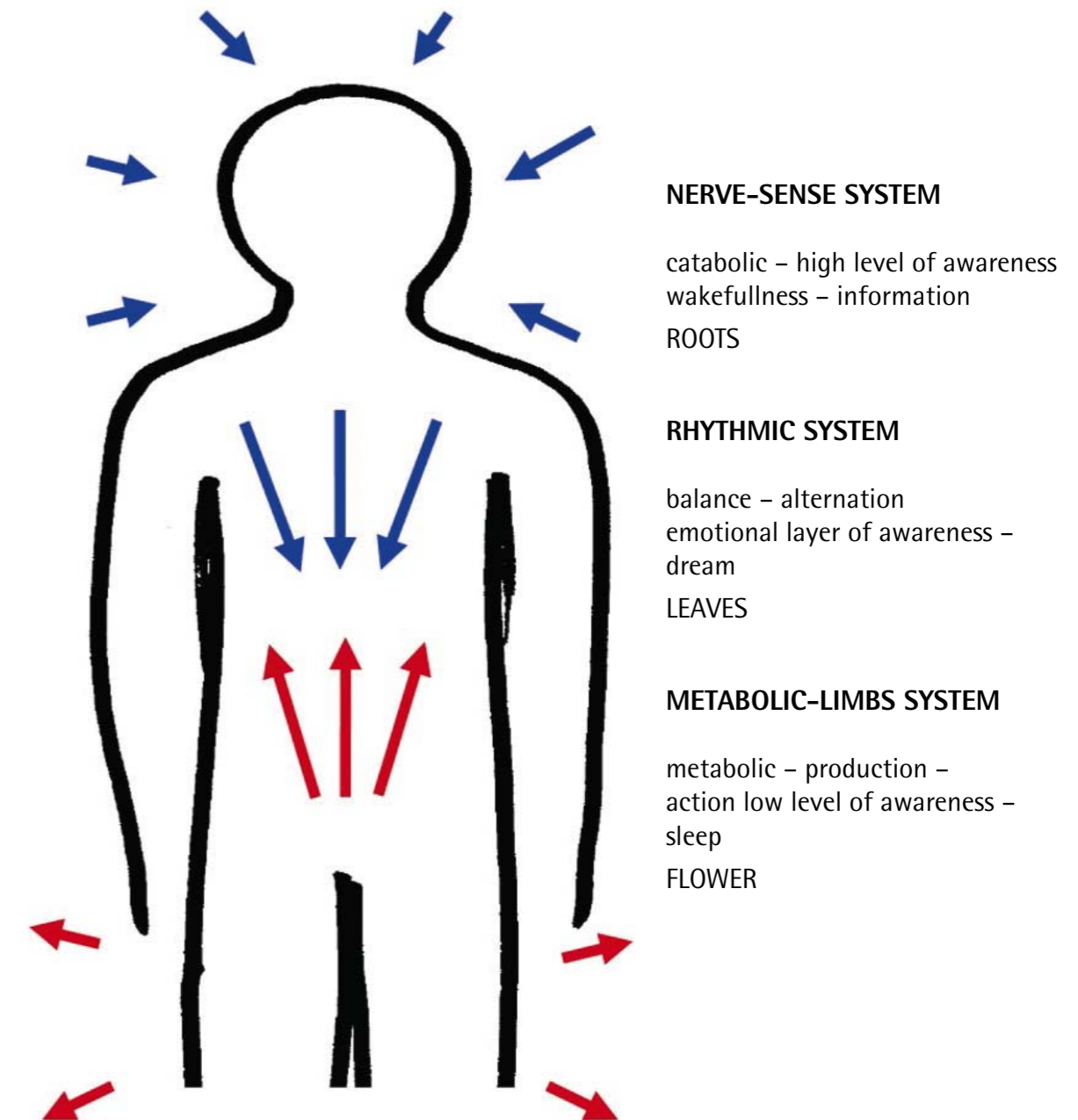
As a second analytical instrument or tool, anthroposophic medicine assesses the functional and rhythmic aspects in the morphological and physiological or biochemical systems of a human body. In particular, it considers a threefold distinction between these systems and their functioning. One good example can be found in the **catabolic**,²⁴ the **metabolic**²⁵ and the rhythmic systems.

Here, anthroposophic medicine distinguishes between organs or organ systems, which are related to the **nerve sense system** (catabolic function) and organs or organ systems which are connected to the regeneration system (metabolic function). A third distinctive system, the rhythmic functions in the body, or cardiovascular/respiratory system, is oriented to balance the divergent activities and functions (polarities) of the nerve sense (catabolic) and regeneration (metabolic) systems and to facilitate a harmonic functioning of the three systems in the human body.

With this concept, illness is not only regarded as a malfunction of one single organ but is perceived as an imbalance between and within different organ systems, including the question as to whether the **rhythmic system** is fulfilling its task to balance and harmonise properly.

²³ Larsson, Kallenberg, 1996, Sense of coherence, socio-economic conditions and health. European Journal of Public Health 6: 175 – 180
²⁴ Catabolic: Destruction of body cells and substances, as a basis for life function like cognition and movement (see Glossary).
²⁵ Metabolic: Regeneration system (see Glossary).

The functioning of these three systems or levels can be depicted like this:



This threefold mapping is also reflected in the manufacture of anthroposophic medicinal products and in the application of these products by anthroposophic physicians. The following demonstrates the considerations when choosing an appropriate anthroposophic medicinal product:

- **Raw material**
 - nerve sense level; ego-organisation: Minerals
 - rhythmic level; level of feelings: Plants
 - metabolic level; level of **life forces**: Animals
- **Herbal raw material**
 - nerve sense level: Roots
 - rhythmic level: Leaves
 - metabolic level: Flowers
- **Potency²⁶**
 - metabolic level: Mother tincture < D10
 - rhythmic level: D11 – D20
 - nerve sense level: > D20
- **Route of application**
 - Nerve sense level: External
 - Rhythmic level: Injection (parenteral)
 - Metabolic level: Oral

Anthroposophic medicine uses a broad variety of anthroposophic medicinal products from minerals, animals and different parts of plants in a variety of routes of application and various concentrations or potencies according to the disease, part of the body and body function affected and to the age and condition of the patient.



Quartz

²⁶ In anthroposophic medicine, dilutions are used, usually diluted in a ratio of 1:10. These are called potencies (See Glossary).

5 ANTHROPOSOPHIC MEDICINE IN PRACTICE

5.1 History

The foundations of anthroposophic medicine were established by Austrian philosopher and scientist Rudolf Steiner (1861 – 1925) together with the Dutch physician Ita Wegman (1876 – 1943). The first anthroposophic hospital was founded in Arlesheim, Switzerland in 1921.

A new anthroposophic pharmaceutical approach was developed by Rudolf Steiner and Austrian chemist Oskar Schmiedel (1887 – 1959), in collaboration with a number of other physicians. Their aim was to complement the results of pharmaceutical and medical research with the findings of anthroposophic research in humans and in nature. In response to requests from doctors for adequate remedies for medication and treatment of their patients, a first pharmaceutical laboratory for professional manufacturing of anthroposophic medicinal products was attached to the anthroposophic clinic in Arlesheim in Switzerland.

5.2 Availability

Anthroposophic medicine has been practised since 1920 and is today available in 20 European and over 60 other countries around the world.

Anthroposophic medicine is practised at many places in multi-disciplinary settings in therapeutic centres or clinics, where physicians and anthroposophically-trained health professionals work together. There are also independent practitioners. Anthroposophic physicians are active in general practice and in all specialist fields including internal medicine, intensive care and surgery, cardiology, dermatology, neurology, obstetrics and gynaecology, oncology, orthopaedics, paediatrics, psychiatry and rheumatology.

Anthroposophic medicine is also integrated in primary care settings, in intensive care and first aid medicine, in hospitals (including university teaching hospitals), in anthroposophic medical departments in conventional hospitals and in psychiatric hospitals. Anthroposophic hospitals and hospital departments exist in Italy, Brazil, Germany, the Netherlands, Sweden, Switzerland and the United Kingdom. The availability of anthroposophic medical practice in Europe varies according to the different legal requirements in the various EU Member States for the practice of anthroposophic medicine.

5.3 Training and quality control

High professional standards amongst anthroposophic medical professionals are achieved by in-depth training and a set of practice guidelines for anthroposophic physicians.

A national medical licence as a physician is a prerequisite for practising anthroposophic medicine. After acquiring a national doctor's licence, an anthroposophic physician as general practitioner or as specialist in any branch of medicine graduates from an additional two to three years' special training in anthroposophic medicine within an institution authorised by the national anthroposophic medical associations to achieve an internationally agreed certificate as an anthroposophic physician. Postgraduate training courses are available for all specialists.²⁷ The responsibility for training physicians rests with these national anthroposophic medical associations and the international community of anthroposophic physicians. Anthroposophic physicians follow the high standards of medical services as stated in the 'Guidelines for Good Professional Practice in Anthroposophic Medicine'.²⁸ In addition, anthroposophic physicians adhere to the 'Model Guidelines for the Practice of Complementary Therapies by Medical Doctors in the European Union',²⁹ a joint convention of the European complementary and alternative medicine doctors' associations.³⁰ The availability of anthroposophic medical training varies according to the different legal requirements in the EU Member States.

Training, professional qualification and certification for other medical professionals in anthroposophic medicine are provided by the training curricula and quality control criteria of the national professional bodies of the particular anthroposophic therapies professions. Training institutions have to be accredited by the international anthroposophic medical community, represented by the Medical Section at the Goetheanum³¹ in Dornach, Switzerland and the International Coordination of Anthroposophic Medicine (ICAM). An official professional diploma is a prerequisite for all professions, whether physiotherapy, psychotherapy, dietary, nursing etc.

Hospitals, anthroposophic medical departments in hospitals and other medical settings practising anthroposophic medicine follow the normal quality control systems of hospitals and institutes and can also apply the particular and independent anthroposophic quality control system:

AnthroMed®.³²

²⁷ <http://www.gaed.de>

²⁸ <http://www.ivaa.info>

²⁹ <http://www.camdoc.eu>

³⁰ CAMDOC brings together European Committee for Homeopathy (ECH), the European Council of Doctors for Plurality in Medicine (ECPM), the International Council of Medical Acupuncture and Related Techniques (ICMART) and the International Federation of Anthroposophic Medical Associations

³¹ <http://www.medsektion-goetheanum.org>

³² <http://www.anthro-med.de>

6 PATIENTS OF ANTHROPOSOPHIC MEDICINE

Patients who seek the services of providers of anthroposophic health care are as diverse as patients who use other forms of medicine. Anthroposophic medicine is not a medicine for a select group of people; its goods and services can be used by anyone who wishes to seek self-management and active participation in the therapy and the healing process.

Some patients seek to use the whole range of anthroposophic medical services available, whilst others use only specific services or medicinal products which they find helpful to their specific circumstances.

The reputation of anthroposophic medicine – in areas where it is represented – is generally good to very good, according to patient satisfaction surveys. In 2007 two anthroposophic clinics were ranked second and third best clinics in Germany.³³



Anthroposophic Medicine is provided in both primary and in clinical care.

³³ <http://www.damid.de>

7 LEGAL REQUIREMENTS FOR ANTHROPOSOPHIC MEDICINE

7.1 EU regulatory framework

The various traditions of CAM in Europe and around the world have led to a complex legal situation for anthroposophic medicine in the last fifty years.

Anthroposophic medicine is practised in nearly all EU Member States, but legally recognised as a medicine to various degrees only in Austria, Denmark, Finland, Germany, Italy, Latvia, Romania, Switzerland and UK. Swedish law rules out the practice of CAM treatments by a physician; only one clinic, Vidar Clinic,³⁴ has a special legal permit to apply anthroposophic medicine. In general, anthroposophic medicine health services are reimbursed by public health insurance in a few insurance systems only. Anthroposophic medicine doctors are reimbursed in France, Finland, Germany, the Netherlands, Sweden and the United Kingdom. Private health insurance for anthroposophic medicine is only possible in Austria, Belgium, Denmark, France, Germany, Italy, the Netherlands and Switzerland.

As regards the EU, the legal situation of anthroposophic medicine is complicated by the divided competences in public health between the EU Member States and the EU institutions. On the one hand, the EU Member States are still responsible for their national health systems – and therefore the regulation of anthroposophic medicine. On the other, the national competent authorities have to follow EU regulations setting standards for the authorisation, production and marketing of medicines for human use in the respective national markets. The EU framework still does not regulate anthroposophic medicine as much as it needs to. This has far reaching consequences for the availability of anthroposophic medicinal products and, in consequence, for anthroposophic medicine in the EU.

The EU Community code relating to medicinal products for human use (especially Directive 2001/83/EC and Directive 2004/24/EC) differentiates between a general authorisation procedure for medicinal products and special simplified registrations for homeopathic and traditional herbal medicinal products. The specific approaches used in the manufacture of anthroposophic medicinal products are not recognised in this code, meaning that only anthroposophic medicinal products which fall under the categories of **homeopathy** or traditional herbal medicinal products qualify for simplified registration. The majority of prescribed

anthroposophic medicinal products must be authorised according to the authorisation procedure for all medicinal products, defined in the EU framework regulations. The national competent authorities are obliged to apply these regulations, all the more so since a recent ruling of the European Court of Justice.³⁵ These regulations are not adapted to the special features and manufacturing methods and the individual-centred practice of anthroposophic medicinal products and are, therefore, not adequately applicable.

It will only be possible to do justice to anthroposophic medicine if the EU regulatory framework relating to medicinal products for human use

- recognises anthroposophic medicinal products
- stipulates procedures for their adequate authorisation or registration
- adequately features their specific manufacturing methods
- accepts their safety by long-established use and
- takes into account the limited economic resources provided by these low profit products.

7.2 National regulatory examples

7.2.1 Switzerland

Anthroposophic medicine is recognised in the Swiss health system by the fact that the official Swiss Medical Association publishes the qualification certificate of an anthroposophic medicine physician. As a result of the Swiss referendum in May 2009 to include CAM in the Swiss constitution, anthroposophic medicine will be recognised in the Swiss legal health system as a scientific medicine and accepted as a provider of the public basic health services.

The Swiss legal system for the marketing of medicinal products provides a simplified registration procedure for CAM medicinal products because of their low risk factor. This simplified registration process is based on up-to-date scientific and technical standards as well as on consideration of the nature of the particular therapy. Anthroposophic medicinal products are registered according to this simplified procedure and representatives of the Swiss Anthroposophic Medical Association are members of the advisory committees of the Swiss regulatory authority (EAK).

7.2.2 Germany

The legal regulation of the German health system (*Deutsches Sozialgesetzbuch*) recognises anthroposophic medicine, along with **homeopathy** and **phytotherapy**, as a 'special therapy method' (*Besondere Therpierichtung*). This means that the treatment and medicinal products of the special

³⁴ <http://www.vidarkliniken.se>

³⁵ Case C-84/06 Antroposana and others The Netherlands [2007] ECR I-07609

therapy methods are available within the health service and eligible for reimbursement by the health insurance institutions. This also applies to anthroposophic medicinal products which do not require a prescription.

Furthermore, the German law for medicinal products stipulates a distinct regulation for the medicinal products of these special therapy methods and, in extension of the EU legal framework, includes anthroposophic medicine and **phytotherapy** in this regulation. It provides a legal definition of anthroposophic medicinal products.³⁶

This pluralistic approach in the German health system enables anthroposophic medicine to be present in in-patient and out-patient health care in Germany. 2000 medical doctors are active in anthroposophic medicine in Germany and the application of anthroposophic medicine is well-established in general health care. The health insurance system in Germany is open to special and individual insurance schemes for anthroposophic medicine and allows the insurance institutions to include integrated health care schemes enabling health insurance funds to reimburse anthroposophic medicine treatment.

³⁶ See page Seite Seite 48 and § 4 of the German law on medicinal products, Gesetz über den Verkehr mit Arzneimitteln

8 GLOSSARY

AnthroMed®

AnthroMed® is the trade mark of the anthroposophic hospitals which are guaranteed by the quality control system for anthroposophic clinics. See <http://www.anthromed.de>.

Anthroposophic Pharmaceutical Codex (APC)

The APC gathers relevant pharmaceutical information about anthroposophic medicinal products in pharmacopoeial structure and language. Download at <http://www.iaap.org.uk/quality/index.html>.

Anthroposophic pharmacy

Anthroposophic Pharmacy is the discipline related to conceiving, developing and producing medicinal products according to the anthroposophic understanding of man, nature, substance and pharmaceutical processing. See <http://www.iaap.org.uk/pharmacy/index.html>.

Anthroposophy

'Anthropos' and 'sophia' mean 'man' and 'wisdom' respectively in ancient Greek. The etimological meaning of the term 'anthroposophy' is 'wisdom of man'.

Anthroposophy is defined in the Webster Encyclopedic Unabridged Dictionary of the English Language as 'A philosophy based on the teaching of Rudolf Steiner (1861 – 1925) which maintains that, by virtue of a prescribed method of self-discipline, cognitional experience of the spiritual world can be achieved'.

Biography

In the context of anthroposophic medicine, the term biography relates to the development of the individual in a lifetime from childhood to maturity and thereafter to physical 'decay' until death. During a lifetime each age has a specific physical, psychic and spiritual constellation leading to a differentiated understanding e.g. of the meaning and thus therapy of a disease in one age or another. During a lifetime the individual gradually takes hold of his or her inner self at the expense of physical vitality. This process may need professional counselling.

Complementary and alternative medicine (CAM)

CAM offers a range of complementary and/or alternative approaches for maintaining health and for preventing and treating illness. CAM

disciplines have an individualised and **holistic approach** to healthcare, and work to induce and support the self-healing process of the individual. They include modification of lifestyle, dietary change, bodily treatments, health psychology approaches and the use of naturally sourced, low-risk medicinal products. They can often be used as a first option for people suffering from a wide range of health problems or as a complement to conventional treatment. Anthroposophic medicine is seen as one of the CAM modalities.

Catabolic system

(see **nerve sense system**)

Cognition-based medicine (CBM)

Cognition-based medicine (CBM) is a newly-developed methodological system of scientific medicine. Its primary element is the criteria-based assessment of therapeutic causality at the level of the individual patient. Principles and criteria of single-case causality assessment have been analysed and explained. CBM enables a methodological professionalisation of clinical judgment, as well as the explanation of physician experience and expertise. CBM study designs expand the current range of clinical research, extending from criteria-based causality assessment in single cases to new forms of cohort evaluations.³⁷

Demeter

Trade mark of organic dynamic agriculture. It takes account of the working of the planets of the universe initiated and is developed by anthroposophy. <http://www.demeter.net>

Eurythmy therapy

Eurythmy therapy employs speech, gestures and music, translating them into a unique form of movement. Each consonant and vowel is connected to a particular movement. These exercises are specifically designed to stimulate, strengthen and even regulate every function and process of the human body. For more information see <http://www.hermeshealth.co.uk/euryth.htm#therapy>.

Formative forces

Structuring forces which give form and shape to mineral substances. In **anthroposophic pharmacy** raw materials are considered to be the result of the formative forces of the mineral, plant, and animal worlds. These forces are similar to the formative forces acting on the human organism,

whether healthy or diseased. The study of **formative forces** is the specific discipline within **anthroposophic pharmacy**.

Holistic approach

Approach to a human being that integrates all levels – physical, psychological, mental and social.

Homeopathy

Homeopathy is a whole medical system that originated in Germany. The fundamental idea of homeopathy is the Similarity Principle, which implies that substances capable of causing disorder in healthy subjects are used as medicines to treat similar patterns of disorder experienced by ill people. Homeopathic medicines are aimed to direct and stimulate the body's self-regulatory mechanisms. Homeopathy is highly individualised and takes account of the symptoms and signs of the disease, the patient's physical build, personality, temperament and genetic predispositions.

Integrative medicine

An approach in medicine that implements both therapies based on pathophysiological understanding of the disease and therapies exploiting the salutogenetic potential of the diseased person, e.g. with anthroposophic medicines and therapies.

Life forces

Life forces are vitality forces that make human beings grow, feel healthy and regenerate after straining, injury and illness. They enable self-healing and recovery.

Metabolic system

The metabolic system is that part of the body function that brings regeneration, cell growth and healing.

Metabolic disorders

Diseases of the inner metabolism of the human being such as diabetes mellitus, high cholesterol etc.

Nerve sense system or catabolic system

Nerve sense system or catabolic system is that part of body system where body cells and substances are destroyed, as a basis for life function like awareness and cognition.

Phytotherapy

Phytotherapy is therapy with herbal medicinal products.

³⁷ Helmut Kiene, Komplementäre Methodenlehre der klinische Forschung, Cognition based medicine, Springer-Verlag 2001, Helmut Kiene, What is cognition-based medicine?, Zeitschrift für ärztliche Fortbildung und Qualitätssicherung 2005; 99 (4-5):301-6

Potency

In anthroposophic medicine, dilutions are used, usually diluted in a ratio of 1:10; these are called potencies D1, D2, D3 up to D30. Dilutions above D23, that is a substance that has been diluted 23 times in a ratio 1 ml to 10 ml, no longer contain molecules of the original substance. Natural science has, so far, no explanation for the efficacy of these higher dilutions. But 150 years of experience in [homeopathy](#) point to the fact that this special dilution process of higher dilutions has an influence on the [life forces](#).

Processual way

Process oriented way.

Rhythmic system

A term used in anthroposophic anthropology and physiology that relates to the balancing rhythmic activities in human physiology between the awareness of the senses and nerves and the [metabolic system](#). The rhythmic system acts in any organ and function, though is mainly located in the cardiorespiratory system.

Rhythmical massage therapy

Gentle, deep soft massage technique with rhythmic movements, alternating the principles of strengthening and loosening, like the breathing rhythm or heart beat. This subtle rhythmical quality of touch, working with forces of levity as opposed to gravity, penetrates deeply and stimulates the life processes within the tissues. Rhythmical massage therapy aids the body's self-healing abilities.

Salutogenesis

The principle of concentrating on factors that support human health and well-being in contrast to factors that cause diseases. Salutogenesis is a term coined by Aaron Antonovsky, a Professor of Medical Sociology (see Aron Antonowsky, *Unraveling the mystery of health. How people manage stress and stay well.* Ann Arbor 1987). The 'salutogenic model' is concerned with the relationship between health, stress and coping.

Spiritual

The anthroposophic understanding of the spiritual dimension is that each human being is a unique immortal individual. This individual undergoes a lifelong process of development in illness and in health. In the context of anthroposophic medicine, the term 'spiritual' mostly relates to the sources of development of the individual personality, e.g. in a crisis, leading to major sense of responsibility, goodness, social awareness, self-awareness and self-confident knowledge about one's origin and future.

FURTHER INFORMATION

9 ANNEX 1: SPECIAL THERAPIES IN ANTHROPOSOPHIC MEDICINE

All medical professions can be enhanced by further training in the anthroposophic view of the human being and his or her development as a personality. Furthermore, anthroposophic medicine has also enlarged medicine with a set of special therapies developed with this perception of a human being.

The following presents further information and some references on the most common of these therapies: Anthroposophic Art Therapy, [eurythmy therapy](#) and anthroposophic physiotherapy and rhythmical massage therapy.

9.1 Anthroposophic Art Therapy

9.1.1 Therapeutic drawing and painting

With the aim of achieving inner balance, therapeutic drawing and painting serve to promote an intensive process of self-examination on the part of the patient. At the same time, the patient's inner engagement with forms and colours provides a chance to influence the body's vital functions. Drawing and painting can release creative forces in each human being, releasing them from the limitations of past experiences, and acting as catalysts for things yet to be realised, which then enter the consciousness and take effect through the very activity of art. Cognitive functions, feelings and psychosomatic conditions are specially influenced by drawing.

9.1.2 Music therapy

Music, be it through voice, melody, harmony, sound or rhythm, appeals to the emotions rather than the intellect. Neither prior knowledge nor musical talent is required to participate in music therapy. The range of instruments is wide and they are easy to play. Together with the therapist, the patient improvises or simply listens to melodies, sounds and rhythms. The choice of instrument depends on the patient's individual situation, the degree of severity and the stage of the illness.

The aim of music therapy is to open oneself to stillness or sound. Every rhythmic process helps stimulate, strengthen, and maintain this vigour.

Music therapy is a vital component in both paediatrics and in the treatment of adults with internal physical and mental disorders. It can be

especially helpful in treating respiratory, heart and circulation diseases. In intensive care, music therapy can have a direct physical influence. Patients' respiration becomes deeper and more regular with less artificial mechanical dependency. Blood pressure normalises and stress relaxes.

9.1.3 Sculpture

Sculpture is used to provide patients with a physical experience by getting to grips directly with the material in question. Pulse and breathing change, and heat is generated. Materials used include stone, soapstone, wood, clay, beeswax, plasticine and sand. These help the patient to understand the illness better, to accept and overcome it, and to approach life with renewed courage. Clay modelling for example can be very helpful in anorexia. The artistic engagement with different materials works positively on both the physical and mental feelings of the patients.

9.1.4 Therapeutic speech

Speech is one of the most important forms of human communication. It is more than just a vehicle for information; it is an expression of the entire personality. Every person's voice, speech patterns, and enunciation are unique. Palate, tongue, lips, and teeth create sounds that form the flow of air into words. All this happens as we inhale and exhale – in fact speech is articulated exhalation. Breathing therefore plays a particularly important role in speech.

Rhythm and metre of a text have an impact on breathing. A poem written in hexameter, for instance, reinforces the harmony between pulse and breathing in an ideal, natural ratio of 1:4 (18 breaths to 72 beats of a normal pulse), and therefore has a measurable stabilising and regenerative effect on cardiac and circulatory rhythms. Research has established that in therapeutic recitation of hexameter, inequality in rhythm of respiration was harmonised and became much more synchronal with heart rhythm. This implies that therapeutic hexameter recitation has a positive influence on blood pressure regulation.

Research studies in Anthroposophic Art Therapy

Hamre HJ, Witt CM, Glockmann A, Ziegler R, Willich SN, Kiene H. Anthroposophic therapeutic arts in chronic disease: a four-year prospective cohort study. *Explore* 2007; 3(4):365–71

Cysarz D, von Bonin D, Lackner H, Heusser P, Moser M, Bettermann H: Oscillations of heart rate and respiration synchronize during poetry recitation. *Am J Physiol Heart Circ Physiol* 2004; 287:H579–H587

9.2 Eurythmy therapy

The term eurythmy is derived from the Greek (eu=beautiful) and means 'beautiful rhythm'. The 'beauty' is the harmony of internal and external, of the **spiritual** experience and its expression in physical movement. Eurythmy was developed as a dance for the theatre, being subsequently extended for educational and therapeutic purposes.

Eurythmy therapy employs speech, gestures and music, translating them into a unique form of movement. Particular movements are assigned to each consonant and vowel. Geometric shapes are attributed to the vowels: for example, in the case of A, the arms are spread wide and stretched upwards, forwards, backwards, or diagonally downwards; for O the arms form a large circle with fingertips just touching; for E hands are outstretched and the wrists crossed. Consonants are generally expressed through movement: D for example is represented by a forwards gesture, R by arms rolling circles vertically downwards, and G by arms stretching, pushing outwards.

On the basis of medical diagnosis provided by the medical doctor and the individual's diagnosis, the eurythmy therapist selects a few of these sounds and gestures and practices them together with the patient in order to achieve the desired therapeutic effect. The aim is to regulate the body's powers of expression, which have been disrupted as a result of illness. The eurythmic movements create a link between the body's external movements and the inner vital workings of the organism. Therapeutic eurythmic exercises may involve the whole body, or combinations such as arms and hands, legs and feet, fingers and toes; steps and leaps may also be added. In the process, the sequence of movements are adapted to the patient's condition: **eurythmy therapy** can also be carried out sitting or lying down, even with severely ill patients or those receiving treatment in intensive care.

The exercises are specifically designed to stimulate, strengthen and regulate every bodily function and process. Depending on the exercise programme selected, circulation and breathing, metabolism, general mobility and balance may be addressed. As all the organs and their systems are stimulated by active movement, the eurythmic movement patterns influence the functions of specific organs, as well as the individual's emotional and mental capacity to express and experience.

Research studies in eurythmy therapy

Seifert et al: Effects of complementary **eurythmy therapy** on heart rate variability, *Complement Ther Med* (2008), doi:10.1016/j.ctim.2008.09.005

Hamre HJ, Witt CM, Glockmann A, Ziegler R, Willich SN, Kiene H. *Eurythmy therapy* in chronic disease: a four-year prospective cohort study. *BMC Public Health* 2007; 7(61):DOI 10.1186/1471-2458-7-61

Majorek M, Tuchelmann T, Heusser P: Therapeutic Eurythmy –movement therapy for children with attention deficit hyperactivity disorder (ADHD): a pilot study. *Complement Ther Nurs Midwifery* 2004 10(1):46-53

9.3 Anthroposophic physiotherapy and rhythmical massage therapy

In addition to conventional movement exercises, anthroposophic physiotherapists offer *rhythmical massage therapy*.

Rhythm is central to healthy life processes. Each cell and organ has its own physiological rhythms; the whole organism needs the sleeping/waking rhythm. Disturbances of these rhythmical functions can indicate potential or actual illness.

The therapist can strengthen or calm either one of the two major functional activities of the body; those associated with the nervous system, or those active in the metabolism. One of the most important techniques is to alternate the strengthening and loosening in a rhythmical way like the breathing rhythm or heart beat. This stimulates the life processes within the tissues.

This 'rhythmical massage therapy' was developed from classical Swedish massage to a special massage technique by Ita Wegman, M.D., medical doctor schooled in physiotherapy and Swedish Massage and Gymnastics.

Rhythmical massage therapy employs many of the basic massage terms and strokes such as effleurage, petrissage or kneading and friction, with the general exception of percussion and tapotement (pummelling, tapping, slapping). The above terms have been greatly broadened and at the same time finely tuned to the very exact and creative technique of rhythmical massage therapy. For example the effleurage encompasses not only soft tissue streaming strokes but also varied and defined movements of forms of the figure eight, known as lemniscates, performed using one or two hands. The frictions can be understood as being formed by the dynamic movements of a vortex. This engenders a deep tissue suction quality.

All of these employ and involve qualities of intermittent binding and loosening. Rhythmical massage therapy works oppositional to the forces of gravity with 'forces of levity'. This strengthens and supports life processes in the body.

Although reminiscent of lymph drainage, the benefits of rhythmical massage therapy are not confined to the lymphatic flow but are rather aimed at influencing all fluids of the human organism. In addition, the massage oils developed for anthroposophic medicine do not just aid

lubrication, but also act as carriers of healing substances. Various forms of hydrotherapy have also been developed, which complement this form of therapeutic massage.

Rhythmical massage therapy aids the body's self-healing abilities. It gives the individual better control of his or her body, rectifying imbalances derived from stress and/or illness, thus supporting and restoring the body's own harmony and process to healing.

Rhythmical massage therapy is known for its harmonising and integrating effects as well as for improving circulation and lymph drainage, elimination of toxins and inducing a pleasant state of relaxation and a renewed sense of well-being.

It can be a vital component in the treatment and management of most chronic illness disorders and in cases of asthma, angina, sleep disturbances, disturbances of the arterial and venous blood supply, headaches of various types, spinal problems and other muscular skeletal problems, auto immune conditions, i.e. rheumatic conditions etc. Massage can also play a role in the care of the cancer patient and can be used in the treatment of certain psychiatric conditions, for example depression and addiction.

The therapist needs to engage in a thorough understanding of the human being from both a conventional, natural scientific perspective and an anthroposophic *spiritual* scientific perspective apparent in health and illness.

The way in which the massage is approached and delivered is as important as the techniques themselves. The practitioner needs to learn to be guided by knowledge and principles of sensitivity, awareness, warmth and professionalism.

Research studies in anthroposophic physiotherapy and rhythmical massage therapy

Hamre HJ, Witt CM, Glockmann A, Ziegler R, Willich SN, Kiene H. *Rhythmical massage therapy* in chronic disease: a four-year prospective cohort study. *J Altern Complement Med* 2007; 13 (6):635-42

Therkleson T, Sherwood P: Patient's experience of the external therapeutic application of ginger by anthroposophically trained nurses. *Indio-Pacific Journal of Phenomenology* 2005; 4:1-11

10 ANNEX 2: ANTHROPOSOPHIC PHARMACY

The *Anthroposophic Pharmaceutical Codex (APC)* is issued by the International Association of Anthroposophic Pharmacists (IAAP),³⁸ the umbrella organisation for the national professional anthroposophic pharmacists' associations in Europe.

10.1 The General Monograph on Anthroposophic Preparations in the Swiss Pharmacopoeia (Ph.Helv.)

defines

- anthroposophic preparations
- starting materials
- methods of preparation
- dosage form

as follows:

(This is an unofficial translation of the monograph "Anthroposophische Zubereitungen", Anthroposophic Preparations, in the Swiss Pharmacopoeia, published in Supplement 10.2.)

Anthroposophic Preparations

Definition

Anthroposophic preparations are developed and composed according to the principles of anthroposophic cognition of humans, animals, substances and nature and are appropriate to be used in accordance with these principles.

They are produced according to methods used in anthroposophic pharmacy.

An anthroposophic preparation may contain one or more active substances as well as vehicles and other excipients.

According to anthroposophic principles, active substances may be starting materials which are used as such or starting materials which have been trans-

³⁸ <http://www.iaap.org.uk>

formed into active substances by a process of anthroposophic pharmacy, including compositions.

Compositions are active substances which are obtained when two or more starting materials or preparations, with or without excipients, are processed together in a pharmaceutical process of anthroposophic pharmacy (e.g. Ferrum-Quartz).

Vehicles are excipients which are used to produce active substances (e.g. in the process of potentiation, substances such as water, alcohol, whey, lactose, rice starch or glycerine are used). Further excipients are used in the preparation of dosage forms.

Starting Materials

Starting materials for the production of anthroposophic preparations are substances of natural or synthetic origin, in particular:

- Minerals, rocks, metals, natural waters (e.g. sea water);
- Starting materials of botanical origin are usually from certified biodynamic or organic cultivation or from sustainable wild plant harvesting: dried or fresh plants or parts of plants, including algae, fungi and lichens; plant secretions, juices, extracts (fractions), oleoresins, essential oils or distillation products (e.g. Pix betulae). Plants may be treated by fertilising them especially with metal preparations or minerals during cultivation;
- Starting materials of zoological origin: whole animals, parts of animals (e.g. organ preparations), glandular secretions from animals, extracts (e.g. lecoris oleum), calcareous deposits (e.g. Conchae); organ preparations are starting materials taken from healthy warm-blooded animals raised according to adequate and suitable, usually biodynamic standards: fresh or dried organs or parts of organs (including bones, glands), organ extracts, tissue or parts of tissue, preparations from fresh blood;
- Starting materials which can be characterised chemically (e.g. Cuprum metallicum, Aesculinum);

Starting materials used for the production of anthroposophic preparations must comply with the following requirements, where applicable:

- the general requirements for starting materials of the Pharmacopoeia (Ph.Eur. and Ph.Helv.), the German Homoeopathic Pharmacopoeia (GHP/HAB), the French Pharmacopoeia (Ph.F.) or the British Homoeopathic Pharmacopoeia (B.Hom.P.);
- the general requirements for homoeopathic preparations of the Pharmacopoeia, in particular the requirements of the general monograph *Homoeopathic preparations* of Ph.Eur;

- specific requirements of particular monographs of the Pharmacopoeia, the GHP/HAB, the Ph.F. or an appropriate quality monograph of the manufacturer, when there is no particular monograph in a pharmacopoeia. This quality monograph must comply with the requirements listed in Appendix 1 part II C 2 of the Ordinance for complementary and phytochemical Medicines (Komplementär und Phytoarzneimittelverordnung, KPAV), SR 812.212.24.

For starting materials of zoological origin, adequate measures must be taken to minimise the risk of the presence of agents of infection, including viruses, in the anthroposophic preparation (see Ph.Eur. *Viral safety* (5.1.7)).

For this purpose it must be demonstrated that

- the method of production includes a step or steps that have been shown to remove or inactivate agents of infection;
- where applicable, starting materials of zoological origin comply with the monograph of the Ph.Eur, *Products with risk of transmitting agents of animal spongiform encephalopathies (Producta cum possibili transmissione vectorium encephalopathiarum spongiformium animalium)*;
- where applicable, the animals and tissues used to obtain raw materials comply with the food law requirements of the competent authorities for animals for human consumption;

In addition, for cells, tissue and organs, it must be demonstrated that the used production methods devitalise the material (devitalisation in the sense according to article 2, paragraph 2, letter a of the law relating to transplantation, SR 810.21).

Starting materials of botanical origin must comply with the monograph of the Ph.Eur. *Herbal drugs for homoeopathic preparations (Plantae medicinales ad praeparationes homoeopathicas)*.

Methods of Preparation

Methods of preparation used in anthroposophic pharmacy include:

- homeopathic preparation methods of the Pharmacopoeia (Ph.Eur. and Ph.Helv.), the GHP/HAB or the Ph.F.
- anthroposophic methods of preparation described in the GHP/HAB or the B.Hom.P., (methods 1, 2, 3, 4, 5a, 5b, 6, 8a and 12)
- Specific anthroposophic production processes¹: These are methods based on an anthroposophic understanding of medicinal products, such as:

¹ See for example the Anthroposophic Pharmaceutical Codex of the International Association of Anthroposophic Pharmacists (IAAP) (www.iaap.org.uk/downloads/codex.pdf)

- heat and cold treatments (wet and dry processes, including rhythmic treatments and specific fermentation processes)
- specific methods used for manufacturing products from plants, minerals and metals
- crushing, dissolving or surface-drying of starting material without further processing
- specific mixing processes.

Dilutions and triturations can be produced by potentiation from concentrated preparations by applying an anthroposophic production process.

Anthroposophic pharmacy mainly uses decimal attenuation, rarely centesimal or vicesimal attenuation.

Dosage forms

An anthroposophic preparation may be used in all dosage forms described in the Pharmacopoeia or the GHP/HAB, which correspond to the perception of anthroposophic medicinal products.

All dosage forms of anthroposophic preparations must comply with the monograph of the relevant dosage form of the European Pharmacopoeia, unless otherwise justified.



Viscum album – Mistletoe

potentiation

dilutions

10.2 Existing legal definitions of anthroposophic medicinal products

To date only German and Swiss medical law give a definition of an anthroposophic medicinal product.³⁹

Germany: Law on the circulation of medicinal products (Gesetz über den Verkehr mit Arzneimitteln)

Art. 4, (33) An anthroposophic medicinal product is a medicinal product that has been developed according to the anthroposophic knowledge of man and nature and that is produced according to a homoeopathic manufacturing procedure described in the European Pharmacopoeia or in absence thereof in a pharmacopoeia officially used in the Member States or according to a special anthroposophic manufacturing procedure and that is meant to be used according to the anthroposophic principles concerning man and nature.

Switzerland: Law of the Swiss Institute of Medicinal Products concerning the simplified authorisation of complementary and phyto medicines (Verordnung des Schweizerischen Heilmittelinstituts über die vereinfachte Zulassung von Komplementär- und Phytoarzneimitteln)

Art. 4, 2f: Anthroposophic medicinal product: Medicinal product, whose active substances are manufactured by a homoeopathic manufacturing procedure, or according to an anthroposophic manufacturing procedure described in the German Homoeopathic Pharmacopoeia or in the British Homoeopathic Pharmacopoeia or according to a special anthroposophic manufacturing procedure and that is composed and developed according to the anthroposophic knowledge of man, animal, substance and nature and meant to be used according to these principles.

³⁹ See also: <http://www.escamp.org/anthroposophic-medicinal-products.html>

11 ANNEX 3: ANTHROPOSOPHIC MEDICINE PATIENTS' ORGANISATIONS

The roots of the anthroposophic patients' movement stem for the most part from support groups for local practitioners or groups of practitioners. This is particularly true in Germany, Switzerland, Austria and the Netherlands, where over the years, the support groups came together to establish national umbrella associations. In other countries, associations were established directly at national level. Over time, the focus of these organisations changed from support groups for doctors to associations representing the demands and wishes of their members at national level.

Anthroposophic patients' associations differ from most other types of patients' organisations in one important aspect: patients' organisations are usually focused on one specific illness or group of illnesses, whereas the anthroposophic patients' movement is concerned with the preservation and promotion of good health in general and the promotion of the right of freedom in selecting the therapy of one's own choice.

The European Federation of Patients' Associations for Anthroposophic Medicine (EFPAM) was founded in 2000 as an umbrella organisation for all existing national associations. It has members in 15 countries and one outside Europe. The combined membership of these national organisations is around 50 000.

More than one million people support anthroposophic medicine and use its services and products occasionally or on a regular basis as shown in the recent ELIANT survey (<http://www.eliand.eu>).

Most members of the individual anthroposophic patients' organisations

- advocate the right to self-determination in medicine, i.e. to be able to use the type of medicine they trust most, whether in a specific situation or more generally
- take their own health and health maintenance very seriously
- choose, where possible, gentler interventions such as anthroposophic medicine over more invasive forms of medical intervention.

12 ANNEX 4: EUROPEAN ANTHROPOSOPHIC MEDICINE UMBRELLA ORGANISATIONS

Doctors

Internationale Vereinigung Antroposophischer Ärztegesellschaften
International Association of Anthroposophical Medical Societies
Fédération Internationale des Associations Médicales Anthroposophiques
<http://www.ivaa.info>

Pharmacists

International Association of Anthroposophic Pharmacists
<http://www.iaap.org.uk>

Patients

European Federation of Patients' Associations for Anthroposophic Medicine
<http://www.efpam.eu>

Anthroposophic medicine and professional organisations

Medical Section of the School of Spiritual Science at the Goetheanum
<http://www.medsektion-goetheanum.ch>

Anthroposophic producers are member of European Coalition on Homeopathic and Anthroposophic Medicinal Products

<http://www.echamp.eu>

13 ANNEX 5: RESEARCH INTO ANTHROPOSOPHIC MEDICINE

Further reading and references concerning anthroposophic medicine can be found at <http://www.ivaa.info>.

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