

The System of **Anthroposophic Medicine**



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Summary

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

- **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**
- **an overview of the European regulatory context for the sector**
- **information on research, safety and effectiveness of anthroposophic medicine.**

Anthroposophic medicine integrates conventional medicine with an anthroposophic¹ 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 the mental and spiritual dimensions. 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, with the intention of bringing about a 'process of development' within the patient, reinforcing the patient's natural self-healing ability.

Anthroposophic medicine was developed in 1920 by Rudolf Steiner and the medical doctor, Ita Wegman, and is now widely accepted in 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 sparing use of antibiotics; medical insurance policies show minimal medication costs. Anthroposophic medicine, as an integrated complementary medical system, is proven to be both safe and effective and offers considerable added value to the health systems in the EU.

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**

Anthroposophic medicinal products are conceived, developed and produced in accordance with the anthroposophic knowledge of man, nature, substance and pharmaceutical processing. They are produced according to a homeopathic manufacturing method described in the European Pharmacopoeia or in absence thereof, in an official pharmacopoeia. They can also be produced according to a specific anthroposophic manufacturing method. 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 anthroposophic medicinal products are regulated directly within the national health systems in Germany and Switzerland, the EU regulatory framework for medicinal products includes only those products produced according to a homeopathic manufacturing method. This raises a number of difficulties as regards their registration as medicinal products in countries across Europe.

Anthroposophic medicine will only be able to thrive if the EU regulatory framework for medicinal products for human use

- recognises anthroposophic medicinal products as their own category of medicinal products;
- stipulates adequate procedures for the authorisation or registration of the different categories of medicinal products;
- adequately recognises the specific manufacturing methods of these products;
- accepts their long-established safety record;
- takes into account that these are low-profit products with limited economic resources.



As an "integrative medicine", anthroposophic medicine combines in a multi-disciplinary approach conventional interventions with a number of specific therapeutic treatments and anthroposophic medication.

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1 THE CONCEPT OF ANTHROPOSOPHIC MEDICINE

1.1 An integrative medicine

Anthroposophic medicine integrates conventional medicine with an anthroposophic² 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**³; 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**⁴ 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 mental and **spiritual**⁵ dimension in its assessment of the imbalances of the individual patient; treatment for this therapeutic approach is seen as a process rather than a switch from a condition of illness to a condition of health;
- the treatment approach is highly individualised, with a comprehensive and individual analysis; 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;
- emphasis is on an optimal multi-disciplinary approach, adjusting the application of anthroposophic medicinal products and different anthro-

2 **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**

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

4 In anthroposophic medicine the term 'biography' refers to the development of the individual in a lifetime from childhood to maturity and thereafter to physical decay until death. **See Glossary**

5 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**

- anthroposophic therapies according to the actual situation of the patient;
- it emphasises self-responsibility, patient choice and active participation in the healing process; 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 successfully complete a further three years of training as an anthroposophic doctor. It is practised in multi-disciplinary 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.^{6,7}



The patient-doctor relationship is central in anthroposophic medicine

1.2 The diagnostic process

In anthroposophic medicine, the diagnostic process integrates specific anthroposophic diagnostic skills and disciplines 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 physiological aspects of the body (see **Chapter 4**).

6 See National Health Service figures of general practitioner practice in Stroud, UK

7 Kooreman P., Baars E.W. Patients whose GP knows complementary medicine tend to have lower costs and live longer. *Eur. J. Health Econ.* 2012 Dec 13 (6):769-76.

1.2.1 Treatment

Both anthroposophic and conventional parameters provide the basis for a multi-disciplinary therapeutic approach in anthroposophic medicine. As an **integrative medicine**, anthroposophic medicine combines appropriate conventional and anthroposophic medical interventions. 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; these 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, **eurythmy 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;⁸
- conventional medical intervention in diagnosis and, where appropriate, treatment 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 specialised anthroposophic therapists 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).



Anthroposophic clinic and public hospital - 'Filderklinik', Filderstadt, Germany

⁸ It is possible for all health professions to be enhanced 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, mental and **spiritual** activities, which can be highly influenced by education, lifestyle and self-management.

Anthroposophic medicine focuses 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, mental, cognitive and **spiritual** – is seen as a key to becoming strong and healthy.

1.3.1 Nutrition

In addition to the general promotion of good nutrition, anthroposophic medicine lifestyle programmes encourage organically-produced (biodynamic)⁹ 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.¹⁰

1.3.3 Physical exercise

As well as 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 educational approach of 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.

⁹ See <http://www.demeter.net>

¹⁰ Sieben Zwerge in Germany: <http://www.siebenzwerge.info>; Arta in the Netherlands: <http://www.lievegoedzorggroep.nl/index.php/ArtaVerslavingszorg>

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 when necessary and appropriate. For example, the use of antibiotics has always been restricted, especially in childhood, even before professional standard guidelines recommended such limitations. Recent evidence underpins the knowledge that therapies which suppress fever in children deregulate the immune system.¹¹ 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 approach to medicine leads to only sparing use of antibiotics.^{12, 13}

1.3.6 Prevention of mental disorders

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



Arnica montana is used in anthroposophic medicine

11 Kluger M.J., 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!

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

13 Geyer U.,1 Diederich K.,1,2 Kusserow M.,1 Laubersheimer A.,1 and Kramer K.,3 Inpatient Treatment of Community-Acquired Pneumonias with Integrative Medicine Hindawi Publishing Corporation Evidence-Based Complementary and Alternative Medicine Volume 2013, Article ID 578274, 16 pages <http://dx.doi.org/10.1155/2013/578274>

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

1.4 Research

Anthroposophic medicine has always been a science-based medical system. Both basic descriptive and clinical research are pillars of evidence for anthroposophic medical treatment. As is true for all medicine, the methodological approach has evolved over time, 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.

Anthroposophic medicine is a coherent and continuously developing scientific medical system, and so 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)**¹⁴, 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 institutes and many co-operative projects between research institutes¹⁵ and universities in several EU Member States which work on basic research in methodology, and on experimental and observational studies in the field of anthroposophic medicine.¹⁶ It is also taught at universities in Austria, Germany, Holland, Italy, Latvia, Spain and Switzerland.¹⁷

A large number of research studies establish and analyse the use and effectiveness of anthroposophic medicinal products and anthroposophic therapies. An overview of recent research results in anthroposophic medicine can be found in the reviews of Kienle et al 2006¹⁸ and Kienle et al 2011¹⁹ (see **Annexes 5 and 6**).

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

15 Research Centres: Further information at <http://www.ivaa.info>; Gerhard Kienle Lehrstuhl für Medizinthorie, 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 Bolk Instituut (Department of Healthcare & Nutrition), Driebergen, NL

16 Detailed information on <http://www.ivaa.info> and on the web pages of the research institutes (see footnote 14).

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

18 Kienle G. M.D., Kiene H. MD, Albonico H.U., MD. *Anthroposophic Medicine Effectiveness, Utility, Costs, Safety*, 2006 by Schattauer Verlag, Stuttgart – New York

19 Kienle G.S., Glockmann A., Grugel R., Hamre H.J., Keine H. *Klinische Forschung zur Anthroposophischen Medizin – Update eines «Health Technology Assessment»-Berichts und Status Quo.: Forsch Komplementmed* 2011;18:4–4 (DOI: 10.1159/000331812).

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. The adverse effects are documented by their producers as required by the European Medicines Agency. All anthroposophic medicinal products are produced 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 and cost-effectiveness

A 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 the economic impact of number of days taken off work. A number of studies show a cost-reduction in relation to the duration of the treatment and cost savings, partly due to lower drug costs, fewer specialist referrals, and fewer hospital days and admissions.^{20, 21} This is particularly relevant with respect to the treatment of chronic disease. Medical insurance policies show minimal medication costs.²²

20 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.

21 Kienle G., Albonico H.U., Baars E.W., Hamre H.J. et al, Anthroposophic Medicine: An Integrative Medical System Originating in Europe, Global Advances in Health and Medicine, Vol 2 No 5 November 2013

22 (See footnote 7): Kooreman P., Baars E.W. Patients whose GP knows complementary medicine tend to have lower costs and live longer. Eur. J. Health Econ. 2012 Dec 13 (6):769-76.

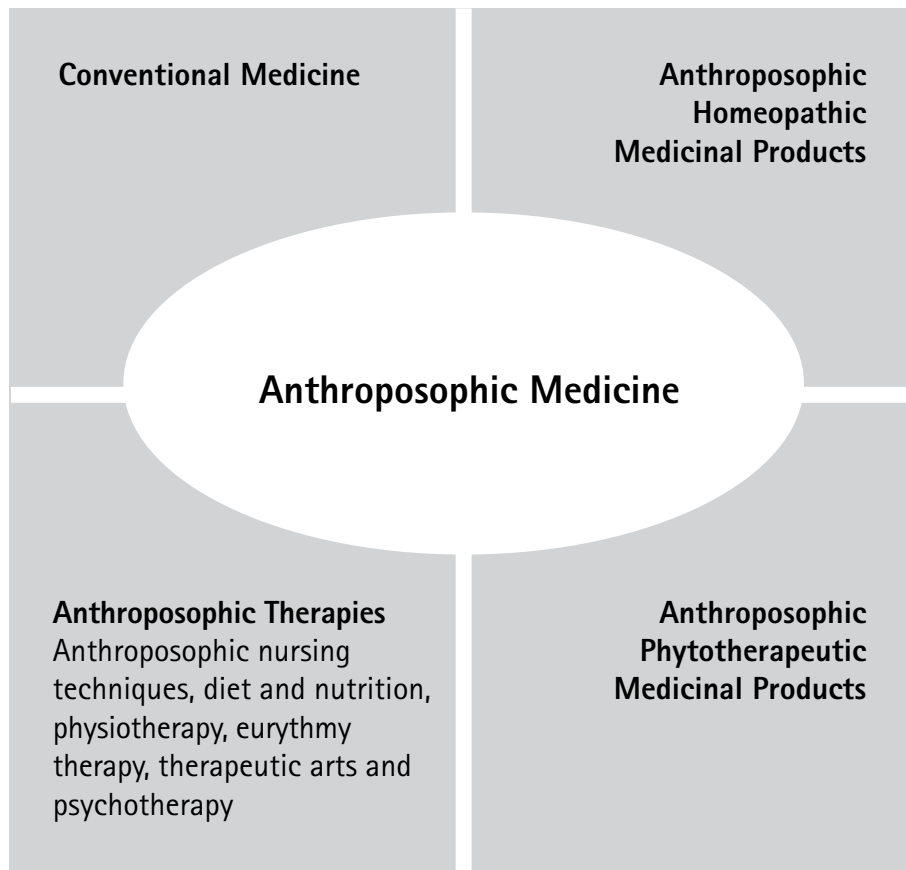
2 THERAPEUTIC APPROACHES IN ANTHROPOSOPHIC MEDICINE

2.1 Anthroposophic medicine as integrative medicine

Anthroposophic medicine has been practised since 1920 and demonstrates a solid track record of experience in general and specialist practice.

Its multi-disciplinary approach combines conventional intervention, some **homeopathic** and **phytotherapeutic** medicinal products, 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 **biographical** approach, nursing, physiotherapy, **rhythmical massage therapy**, **eurythmy therapy**, therapeutic arts and psychotherapy.



2.1.1 Medication

Anthroposophic physicians use and apply anthroposophic medicinal products, **homeopathic**, **phytotherapeutic** and, where necessary, conventional medicinal products. Anthroposophic medicinal products are applied internally, externally and by injection. They are conceived, developed, and produced in accordance with the anthroposophic understanding of man, nature, substances and pharmaceutical processing.

The range of anthroposophic medicinal products is partially determined by the physical characteristics of substances, and takes account of conventional medicinal, **phytotherapeutic** and **homeopathic** criteria. Most particularly, anthroposophic medicinal products are characterised by their manufacturing processes which involve specific anthroposophic and/or typical **homeopathic** pharmaceutical procedures. They are manufactured according to pharmacopoeia standards (see **Chapter 3**).



Anthroposophic medicinal products are applied, internally, externally and by injection

2.1.2 The biographical approach

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

Firstly, 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 childhood, 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 ways in which patients overcome their illness also differ 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 diseases. These differences require differentiations in treatment.

In addition, each human being has a distinct individual **biography**, according to his or her own life experience. Anthroposophic medicine offers a subtle framework for the correlation between the physical experience and experience at a mental and **spiritual** level, in order to understand disharmony and disease. Each physician or therapist takes this into account when choosing the best treatment.

Biography treatment by physicians, psychotherapists or other trained anthroposophic life coaches helps patients to develop an overview of how their life has developed, where they stand in relation to their illness or disease and how they want to live and cope with their specific situation.

2.1.3 Nursing as a part of therapy

Nursing plays a central role in anthroposophic medicine. Attention and attachment towards the patient are not simply 'add-ons'; rather, they are applied in a methodical way and become an essential part of the treatment process. Patients are always attended to, 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' around 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 seeks to influence all fluids of the human body 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, and 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**.²³



Rhythmical massage

2.1.5 Eurythmy therapy

The term 'eurythmy' is derived from Greek ('eu' meaning beautiful or 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, metabo-

²³ Hamre H.J., Witt C.M., Glockmann A., Ziegler R., Willich S.N., Kiene H. Rhythmical massage therapy in chronic disease: a four-year prospective cohort study. *Altern J. Complement Med* 2007; 13 (6):635 – 42. Therklason 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

lism, 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 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 are increasing research data on the benefits of eurythmy therapy (see **Annexes 1 and 5**).

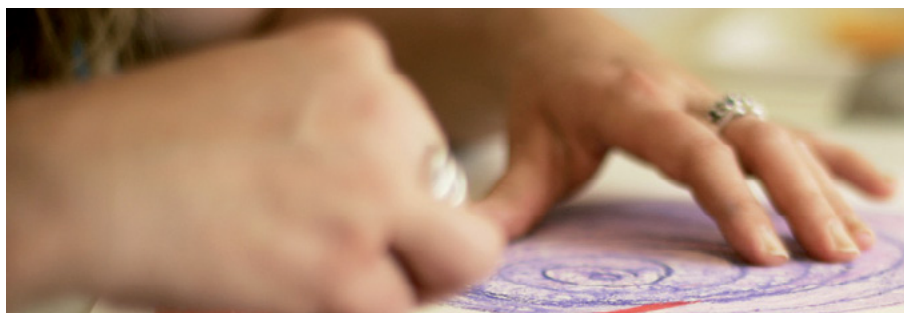


Eurythmy therapy

2.1.6 Anthroposophic art therapy

Therapeutic art, such as drawing, music, painting, sculpture, singing and speech, may also form part of anthroposophic health care treatment. It can help harmonise imbalance between the physiological, mental and spiritual dimensions of a human being. Anthroposophic art therapy helps 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.

Anthroposophic art therapy may be applied in many different conditions, including acute and chronic diseases, degenerative, inflammatory or sclerotic diseases, psychosomatic and mental or developmental problems. There is an increasing evidence base for the benefit of anthroposophic art therapy (see **Annexes 1 and 5**).



Anthroposophic art therapy

2.1.7 Anthroposophic psychotherapy

Over the last century, there has been a steady increase in mental 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.

Anthroposophic psychotherapy 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.

The delivery of anthroposophic psychotherapy relies on 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 doctors and by a wide range of **complementary and alternative medicine** and conventional doctors. In some EU Member States, a range of products is also available for self-medication. According to national regulations, for example in Germany, registered health practitioners (Heilpraktiker) are legally permitted to prescribe certain anthroposophic medicinal products.

The stimulation of self-healing (**salutogenesis**) in a human being via anthroposophic medicinal products is a guiding principle of anthroposophic medicine in overcoming illness and disease.

Anthroposophic medicinal products are conceived, developed and produced in accordance with the anthroposophic knowledge of man, nature, substance and pharmaceutical processing. The starting materials come from minerals, plants and animal substances. The process by which they are developed, and produced reflects the relationship between human beings and the realms of minerals, plants and animals. To understand this interrelationship and its implications for health and well-being, imbalance or illness, a thorough understanding and knowledge of anatomy, biology, biochemistry, physiology and pathology, as well as botany, mineralogy and pharmaceutical processes is essential. The application of the medicinal products within anthroposophic medicine is the result of that knowledge. Therefore a fruitful work between doctors and pharmacists is mandatory when conceiving new medicinal products.

3.2 Characteristics of anthroposophic medicinal products

According to anthroposophic principles, active substances may be starting materials which are used as such, or starting materials which have been transformed into active substances by a process of **anthroposophic pharmacy**, including compositions.

An anthroposophic medicinal product can contain one or more active substances. It can be employed in any dosage form, including external (topical), internal and parenteral dosage forms.

Starting materials for anthroposophic medicinal products are distinctively shaped by different **formative processes**, for example the inner structures of a mineral or the morphology and substance of plants, which are a result of different processes in time and space.

It is a basic principle of anthroposophic pharmacy to make appropriate use of these **formative processes**, which are part of the biography of the substance. It is from this perspective that appropriate starting materials and substances for anthroposophic medicinal products are selected; this provides **anthroposophic pharmacy** with its distinctive and subtle pharmaceutical processes.

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 Annex 2).

Detailed pharmaceutical information for quality control and regulatory needs is provided in the different Pharmacopoeias and the APC²⁴, as well as in individual company monographs.

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).



Viscum album - Mistletoe

Potentisation

Dilutions

²⁴ <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 physiological 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 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 Body Dimension Visible and measurable	Minerals
Life Processes Dimension Living organism Biological identity Recovery Physiological functions	Plants
Mental Dimension Awareness, perception Passion Feeling Movement Mental organisation	Animals
Spiritual Dimension Biography Self-awareness Creativity Self-determination Individuality	Humanity (unique world)

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

4.2 The systems governing the human body

4.2.1 Four different dimensions

Taking into account the anthroposophic understanding of human beings and their special relationship with their social and natural environment, anthroposophic medicine observes and works in four different dimensions to stimulate and influence treatment and healing:

- **Physical body dimension**

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 processes dimension**

In addition, anthroposophic medicine considers the forces responsible for generating life and enabling human beings to develop and recover from illness. These 'life-processes' are considered essential 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.

- **Mental dimension**

The mental and emotional dimensions of a human being also have an influence on health. This is 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 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.

- **Individual or spiritual dimension**

A fourth component, specific to human beings, and a strong element affecting their existence, is self-awareness. Only human beings can acknowledge the Self as an individual. The ability to distinguish between oneself and others, the faculty to communicate by speech and the capability to take decisions out of free will rather than simply to follow the principles and laws of nature 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** dimension in human beings and is also 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.²⁵

4.2.2 Threefold systematics of the organ systems

As a second analytical tool, anthroposophic medicine differentiates between the functional and rhythmic aspects in the form and structure (morphology) of a human body and the physiological or biochemical systems. It assesses, for example, the **catabolic**²⁶, the **metabolic**²⁷ 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.

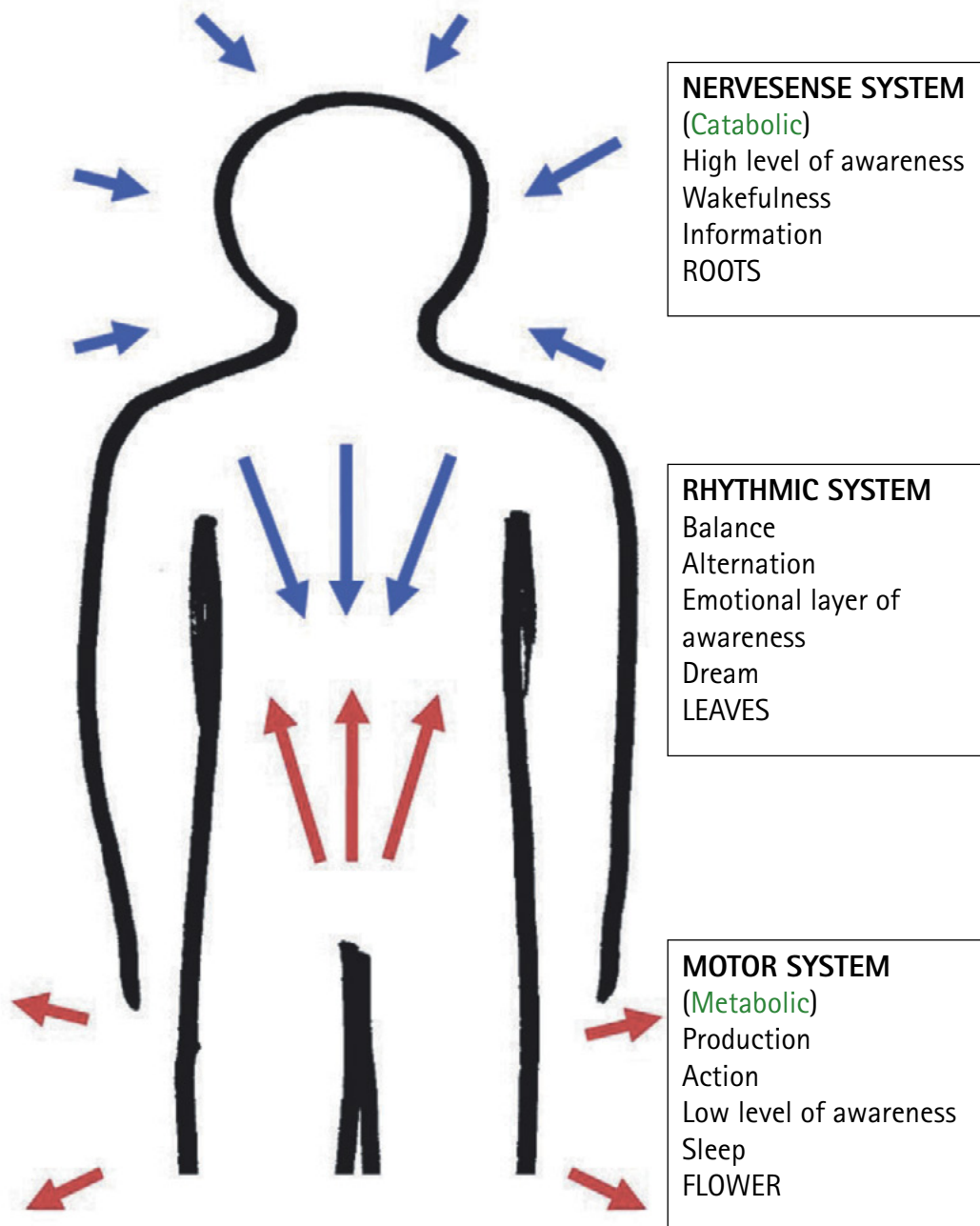
With this concept, illness is not only regarded as a malfunction of one single organ but is perceived as an imbalance between and within different organ systems, including the question as to whether the **rhythmic system** is fulfilling its task to balance and harmonise properly.

²⁵ Larsson, Kallenberg, 1996, Sense of coherence, socio-economic conditions and health, *European Journal of Public Health* 6: 175-180

²⁶ Catabolic: Destruction of body cells and substances (see **Glossary**).

²⁷ Metabolic: Regeneration system (see **Glossary**).

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



These three systems are also reflected in the manufacture of anthroposophic medicinal products and in the application of these products in medical treatment. The following considerations are taken into account 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
- **Potency²⁸**
 - 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.



Mineral Quartz is one of the substances used in anthroposophic medicinal products

²⁸ 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 the right 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 and Switzerland. 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.²⁹

²⁹ <http://www.ivaa.info>

As concerns the availability of anthroposophic medicinal products, a study³⁰ by ECHAMP, the European Coalition on Homeopathic and Anthroposophic Medicinal Products, found that the availability of homeopathic and anthroposophic medicinal products in various EU Member States is threatened by the lack of registration, or by an incomplete or outstanding re-registration process. In particular, the availability of anthroposophic medicinal products not covered by the rules for homeopathic medicinal products is limited by a lack of legal provisions for those products in the EU. The presence of anthroposophic medicinal products on the market and their national authorisation or registration in some Member States are related to national policy already in place before the publication of the specific homeopathic Directive in 1992.

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.

Any anthroposophic doctor has first qualified as a doctor with a national medical licence, whether as a general practitioner or as a specialist in any branch of medicine. An additional two to three years' specialised training in anthroposophic medicine is then necessary, to achieve an internationally agreed certificate as an anthroposophic physician, within an institution authorised by the national anthroposophic medical associations. Postgraduate training courses are also available for all specialists³¹. The responsibility for training physicians rests with these national anthroposophic medical associations and the international community of anthroposophic physicians. Anthroposophic physicians follow a high standard of medical services, outlined in the 'Guidelines for Good Professional Practice in Anthroposophic Medicine.'³² In addition, anthroposophic physicians adhere to the 'Model Guidelines for the Practice of Complementary Therapies by Medical Doctors in the European Union,'³³ a joint convention of the European **complementary and alternative medicine** doctors' associations.³⁴

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 profes-

30 The Availability of Homeopathic and Anthroposophic Medicinal Products in the EU, ECHAMP, November 2012

31 <http://www.gaed.de>

32 <http://www.ivaa.info>

33 <http://www.camdoc.eu>

34 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 (IVAA)

nals 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 Goetheanum³⁵ 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 anthroposophic quality control system: **AnthroMed**[®].³⁶

³⁵ <http://www.medsektion-goetheanum.org>

³⁶ <http://www.anthromed.de> (see Glossary)

6 PATIENTS OF ANTHROPOSOPHIC MEDICINE

Patients report high satisfaction with anthroposophic healthcare. Research shows that patient satisfaction is generally high and therapeutic expectations are fulfilled.³⁷ In a recently completed Dutch survey, 2099 patients reported very high satisfaction with anthroposophic primary care practices.³⁸

In 2007 two anthroposophic clinics were ranked second and third best clinics in Germany.³⁹ The Havelhöhe Community Hospital in Berlin, Germany has been recognised as a hospital with a designated oncology focus in the state hospital plan since 2011.

Patients of anthroposophic health care are as diverse as patients who use other forms of medicine. Anthroposophic medicine is 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. Nevertheless studies show that patients treated with anthroposophic medicine are more severely affected or have been ill for a longer period before starting therapy.⁴⁰



Anthroposophic medicine is provided in both primary and clinical care.

37 Kienle G.S., Albonico H.U., Baars E.W., Hamre H.J. et al, Anthroposophic Medicine: An Integrative Medical System Originating in Europe, *Global Advances in Health and Medicine*, Vol 2 No 5 November 2013

38 See footnote 36

39 <http://www.damid.de>

40 See footnote 36

7 LEGAL REQUIREMENTS FOR ANTHROPOSOPHIC MEDICINE

7.1 EU regulatory framework

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

Although it is practised in nearly all EU Member States, anthroposophic medicine is 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,⁴¹ has a special legal permit to apply anthroposophic medicine. In general, anthroposophic medicine health services are reimbursed by public health insurance in only a few insurance systems. Anthroposophic medicine doctors are reimbursed in France, Finland, Germany, the Netherlands, Sweden, Switzerland and the United Kingdom. Private health insurance for anthroposophic medicine is only possible in Austria, Belgium, Denmark, France, Germany, Italy and the Netherlands and for certain services, in 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 regulations still do not acknowledge anthroposophic medicine as they need 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 specific categories for homeopathy or traditional herbal medicinal products qualify for simplified registration. The major-

⁴¹ <http://www.vidarkliniken.se>

rity 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 the ruling of the European Court of Justice in 2007.³⁵ These regulations do not take account of the special features and manufacturing methods and the individual-centred practice of anthroposophic medicinal products and are, therefore, not appropriate.

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 as a special category;
- stipulates adequate procedures for their authorisation or registration;
- adequately recognises their specific manufacturing methods;
- accepts their long-established safety record;
- takes into account that these are low-profit products with limited economic resources.

7.2 A suitable regulatory framework – the work of ESCAMP

Such a framework is needed to guarantee the future availability of these medicinal products for patients and doctors. Suitable regulatory frameworks for anthroposophic medicinal products exist in only one EU Member State (Germany), although also in Switzerland. The European Commission has acknowledged the existence of therapy systems whose medicinal products have no adequate regulation, and in 2008 it proposed that the suitability of a separate legal framework for medicinal products of certain traditions such as anthroposophic medicine should be assessed.⁴²

In this context, ESCAMP (European Scientific Cooperative on Anthroposophic Medicinal Products)⁴³ was founded in 2010 to facilitate the development of an adequate regulatory framework for anthroposophic medicinal products in the EU. The work of ESCAMP includes three tasks:

- i. Development of methods and standards for the **scientific assessment** of efficacy/effectiveness, safety and cost-effectiveness of anthroposophic medicinal products;

⁴² Case C-84/06 *Antroposana and others The Netherlands* [2007] ECR I-07609

⁴³ ESCAMP is an incorporated charitable association with headquarters in Freiburg (DE). ESCAMP members are independent experts in pharmacy, clinical use and scientific research on AMPs.

- ii. (Based on i), elaboration of appropriate categories and criteria for a future **regulatory framework** for anthroposophic medicinal products in the EU;
- iii. Implementation of these methods and regulatory criteria in reference documents and product monographs.

The ESCAMP strategy for **scientific assessment** of anthroposophic medicinal products follows a whole system approach, with three evaluation stages:

- i. Description of anthroposophic medicine and anthroposophic medicinal products;
- ii. Evaluation of therapy with anthroposophic medicinal products as a whole system;
- iii. Evaluation of single anthroposophic medicinal products and groups of anthroposophic medicinal products.

As at publication, ESCAMP is elaborating a detailed, justified proposal for a **regulatory framework** for anthroposophic medicinal products. The proposal has been developed according to two main principles:

- The whole spectrum of anthroposophic medicinal products should be covered;
- Amendments and additions to the EU Community code relating to medicinal products for human use should be kept as limited as possible.

7.3 National regulatory examples

7.3.1 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 **complementary and alternative medicine** in the Swiss constitution, anthroposophic medicine is recognised in the Swiss legal health system as a specific medicine and accepted as a provider of the public basic health services.⁴⁴

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

⁴⁴ www.parlaments.ch/d/wahlen-abstimmungen/volksabstimmungen/2009

medicinal products are registered according to this simplified procedure and representatives of the Umbrella group of all professional organisations in complementary medicine, including Swiss Anthroposophic Medical Association, are members of the advisory committees of the Swiss regulatory authority (EAK).

7.3.2 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 Therapierichtung). This means that the treatment and medicinal products of the special 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.⁴⁵

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.

⁴⁵ See 9.2 and § 4 of the German law on medicinal products, Gesetz über den Verkehr mit Arzneimitteln

8 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, *eurhythmy therapy* and anthroposophic physiotherapy and *rhythmical massage therapy*.

8.1 Anthroposophic art therapy

8.1.1 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.

8.1.2 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.

8.1.3 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.

8.1.4 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 H.J., Witt C.M., Glockmann A., Ziegler R., Willich S.N., 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

8.2 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 H.J., Witt C.M., Glockmann A., Ziegler R., Willich S.N., 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

8.3 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 heartbeat. 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. It 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 a very exact and creative technique. 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. It 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

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9 ANNEX 2: ANTHROPOSOPHIC PHARMACY

The **Anthroposophic Pharmaceutical Codex (APC)** is issued by the International Association of Anthroposophic Pharmacists (IAAP),⁴⁶ the umbrella organisation for the national professional anthroposophic pharmacists' associations in Europe.

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

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 transformed into active substances by a process of **anthroposophic pharmacy**.

⁴⁶ <http://www.iaap.org.uk>

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), oleo-resins, essential oils or distillation products. Plants may be pre-treated by special procedures;
- 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.);
- 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 homeopathic preparations (Plantae medicinales ad praeparationes homeopathicas).

Methods of Preparation

For anthroposophic preparations, homeopathic and anthroposophic methods of preparation can be used as described in:

- the homeopathic preparation methods described in GHP/HAB or the Ph.F.
- the anthroposophic manufacturing methods described in the Ph. Helv, GPH or in the B. Hom. Ph.
- Specific anthroposophic production processes which have been recognised by the authorities:⁴⁷

Chapter 17.7 Manufacturing methods for anthroposophic preparations of the Ph. Helv. gives an overview of the manufacturing methods used in anthroposophic pharmacy and describes the preparation methods in detail. It was published in the Supplementum 11.1 of the Ph. Helv. in 2013 and contains all specific anthroposophic manufacturing methods

⁴⁷ See the Anthroposophic Pharmaceutical Codex (APC) of the International Association of Anthroposophic Pharmacists (IAAP) (<http://www.iaap.org.uk/downloads/codex.pdf>); Ph. Helv. Suppl. 11.1 Monograph 'Anthroposophische Zubereitungen' and Chapter 17.7 'Herstellungsmethoden für anthroposophische Zubereitungen' 2013

like fertilization of plants with metals, metal mirrors, special heat treatments like digestions methods, rhythmic methods as well as different composition manufacturing methods.

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.

9.2 Existing legal definitions of anthroposophic medicinal products

To date only German and Swiss medical law gives a definition of an anthroposophic medicinal product.⁴⁸

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.

⁴⁸ See also: <http://www.escamp.org/anthroposophic-medicinal-products.html>

10 ANNEX 3: ANTHROPOSOPHIC MEDICINE PATIENTS' ORGANISATIONS

The roots of the anthroposophic patients' movement stem for the most part from groups of practitioners or support groups for local 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 has 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: while patients' organisations are usually focused on one specific illness or group of illnesses, the anthroposophic patients' movement is concerned with the preservation and promotion of good health in general and the promotion of the right to select 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.⁴⁹

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.

⁴⁹ <http://www.eliant.eu>

11 ANNEX 4:

EUROPEAN ANTHROPOSOPHIC MEDICINE
UMBRELLA ORGANISATIONS

Doctors

Internationale Vereinigung Antroposophischer Ärztgesellschaften
International Association of Anthroposophical Medical Societies
Fédération Internationale des Associations Médicales Anthroposo-
phiques
<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 ECHAMP, the European
Coalition on Homeopathic and Anthroposophic Medicinal Products**

<http://www.echamp.eu>

**European Scientific Cooperative on Anthroposophic Medicinal Pro-
ducts (ESCAMP)**

<http://www.escamp.org>

12 ANNEX 5: THE SCIENTIFIC STATUS OF ANTHROPOSOPHIC MEDICINE

The scientific research field of anthroposophic medicine stands in several scientific traditions. First of all, anthroposophic medicine is founded in the tradition of the natural sciences and conventional medicine. They form the general basis and starting point for (research in) anthroposophic medicine. Anthroposophic medicine is fully compatible with the scientific facts derived from this tradition, and for a large extent with the concepts developed in this tradition (concepts and positions that categorically exclude all spiritual explanations are of course not compatible with anthroposophic medicine concepts). It is also part of other traditions such as holistic thinking in science, preventive and curative health promotion, and diagnostic and therapeutic orientation at the individual patient.⁵⁰

The concept of anthroposophic medicine, based on the integration of knowledge from conventional science and medicine with knowledge from **spiritual science (anthroposophy)** has been described in several anthroposophic medicine textbooks.⁵¹ It is conceptually in accordance with newer relevant theories concerning complex biological systems, such as epigenetics, emergentism and systems biology. Its methodological approach is conceptually also in line with recently developed systems biology-oriented and pattern recognition methodologies and the renewed interest in the role of expert knowledge in clinical reasoning and science.⁵²

The most recent comprehensive systematic review of clinical studies of anthroposophic medicine treatment included a total of 256 studies published until the end of 2010.⁵³ Of these 256 studies, 74 were prospectively comparative studies (including 38 randomized clinical trials; RCTs), 90 prospective and 52 retrospective studies without comparison groups, and 49 retrospective comparative studies with a comparative group. In 38 of these 256 studies, anthroposophic medicine was assessed as a whole therapeutic system (including anthroposophic medicine medication and non-medication therapies). For the rest there were 10 studies of non-medication treatment, 133 studies of mistletoe therapy for cancer and 84 studies of other anthroposophic medicinal products. The results of the studies are predominantly positive and there are barely any risks and side effects; if present, they are mild to moderate. The authors of this syste-

⁵⁰ Baars et al., submitted

⁵¹ Steiner and Wegman, 2000

⁵² Heusser, 2011

⁵³ Kienle et al., 2006, 2011

mic review concluded that anthroposophic medicine therapy for a broad spectrum of disorders showed predominantly good results, with few side effects, a high measure of client satisfaction and a favourable cost-effectiveness profile, compared to conventional treatment.

Within anthroposophic medicine, a number of multidisciplinary health-care programs have been developed, describing particular diagnostic and therapeutic approaches for specific indications like for example depression, cancer, hay fever and attachment disorders. Anthroposophic medicine diagnostic and therapeutic methods for use in healthcare practice have also been developed and some of these methods are currently being validated. New research methodologies or innovations of existing methodologies have been developed. In the last decade several research infrastructures have been built to perform scientific research projects on a structural basis.⁵⁴

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For further references please see **Annex 6**.

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13 ANNEX 6:

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

14 GLOSSARY

AnthroMed®

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. The third edition was published in 2013. Download at <http://www.iaap.org.uk/quality/index.html> .

Anthroposophic pharmacy

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' in ancient Greek. The etymological 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

The development of the individual in a lifetime from childhood to maturity and thereafter to physical 'decay' until death; during a lifetime, each period of development has a specific physiological, mental and spiritual constellation leading to a differentiated understanding e.g. of the meaning of and thus therapy for a disease in one age or another. During a lifetime, an 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)

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.

Demeter

Trademark 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>

ESCAMP

The European Scientific Cooperative on Anthroposophic Medicinal Products; this initiative aims to develop the scientific basis for a regulatory framework for anthroposophic medicinal products in the EU

Eurythmy therapy

Exercises that employ speech, gestures and music, translating them into a unique form of movement; 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 processes

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 a specific discipline within [anthroposophic pharmacy](#).

Holistic approach

An approach to human beings that integrates all dimensions – physiological, mental, **spiritual** and social.

Homeopathy

A medical system that originated in Germany; the fundamental idea of homeopathy is the Similarity Principle, 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 combines therapies based on patho-physiological understanding of disease with therapies exploiting the **salutogenic** potential of the diseased person, e.g. with anthroposophic medicines and therapies.

Life forces

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 part of the body function that brings regeneration, cell growth and healing.

Metabolic disorders

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

Nerve-sense system or catabolic system

The part of the body system where body cells and substances are destroyed

Phytotherapy

Therapy with herbal medicinal products

Potency

In anthroposophic medicine, substances are made more powerful as a medical product by a process of diluting and shaking in a rhythmical way, which brings the original substance out of natural gravity and more open

to the self-healing life process. Substances are 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**.

Rhythmic system

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 heartbeat. 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. The term was coined by Aaron Antonovsky, a Professor of Medical Sociology (see Aron Antonovsky, *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.

