

Quantum Healing- A New Holistic Insight

Shrihari TG*

Department of Oral medicine and oral oncology, India

ISSN: 2576-8816



***Corresponding author:** Shrihari TG, Department of Oral medicine and oral oncology, Krishna devaraya college of dental sciences and hospital, India

Submission: 📅 February 03, 2020

Published: 📅 March 13, 2020

Volume 8 - Issue 4

How to cite this article: Shrihari TG. Quantum Healing- A New Holistic Insight. Res Med Eng Sci. 8(4).RMES.000695.2020. DOI: [10.31031/RMES.2020.08.000695](https://doi.org/10.31031/RMES.2020.08.000695)

Copyright@ Shrihari TG, This article is distributed under the terms of the Creative Commons Attribution 4.0 International License, which permits unrestricted use and redistribution provided that the original author and source are credited.

Abstract

Quantum healing is a holistic healing. If we consider human body, human body works. If we consider human body rather than as parts in treating any disease with reductionist chemical drugs yield better results without adverse effects. Human body consists of energy, each cell of human body emit photon. Most of all diseases start in human mind. Human mind has a blueprint of human body. Mindful meditation with positive thoughts in mind known as quantum thoughts, genuine intention to heal any disease creates positive energy known as quantum thinking, healing take place at spiritual level by production of endorphins. This article briefs about the basic research findings of quantum healing and its application in management of diseases.

Keywords: Endorphins; Cortisol; ACTH; Beta-endorphin; NF-KB; STAT-3; IL-1 β ; IL-6; TNF- α

Introduction

Holistic healing is a whole person healing. Human body works as a whole. If we consider human body as a whole rather than as parts in treating any disease with reductionist chemical drugs yields better results without adverse effects. Holistic healing or whole person healing has much advantage over using reductionist chemical to treat disease. The holistic healing begins to emerge because failure of current system to treat any disease by using chemical drug because of adverse drug reactions. Human body has excellent defense mechanism to combat against any disease. In human body there are around 18-20 billion happy colony of symbiotic cells sync with each other. Each healthy cell of human body emit photon by DNA of cell, disease is an altered emission of photons by human cells. Photons from one human being jump on to other known as quantum tunneling. In this way we can influence other person by our thoughts (human mind). Photons emit from each cell encircle an individual known as quantum entanglement. The concept of Aduality states that matter can be converted into energy and energy can be converted in to matter $[E=M]$ proposed by Nobel laureate Hans peter durr. Body tries to rebuild each time, when it oscillates between energy and particle. According to max plank constant matter is converted to energy, energy is converted to matter 1024 times in a minute, consciousness is fundamental all matters are derived from consciousness. Most of all diseases start in mind ends in mind. Mind is the canvas on which our thoughts are projected and is a part of our consciousness. Human body is a holographic projection of our consciousness. Human mind has a blueprint of the human body [1-4].

Quantum field is the space of collective consciousness. Mindful meditation with our positive thoughts or consciousness known as quantum thoughts, a genuine intention to heal any disease creates positive energy known as quantum thinking, healing takes place at spiritual level by production of endorphins known as quantum healing akin to self-healing or auto healing. Pranic healing, meditation, chi therapy creates positive thoughts, with genuine intention to heal any disease known as quantum healing, healing takes place at spiritual level by producing endorphins. Human environment is the cause for most of all disease. Most important part of human environment is the human mind. Most of all diseases start in human mind. Cancer is a major threat to mankind. Majority of cancers more than 90% of all cancers are due to external environmental factors such as tobacco, alcohol, chemical ingestion such as benzene, arsenic, silica and infectious agents (HPV), chronic psychological stress is also one of the etiological factors.

Advanced cancer treatment modalities such as surgery, radiotherapy, chemotherapy fails to improve the prognosis of cancer with increasing morbidity, adverse drug reactions, and decreased survival rate. We can't kill cancer cells without killing normal cells, cancer cells

and normal cells work alike said by Albert Szent gyorgi [1-6]. Endorphins are endogenous morphine, neuropeptides produced in pituitary gland response to stress and pain. There are three types of endorphins beta-endorphin, enkephalin, and dynorphin binds to mu, kappa, and delta receptors situated on nervous system and immune cells. Beta-endorphin are abundant endorphins, more potent than morphine, synthesized and stored in the anterior pituitary gland, it is a precursor of POMC (proopiomelanocortin). Endorphin receptors are increased during stress such as inflammation binds abruptly with endorphins. Most of all immune cells produce endorphins. In inflammatory state, recruitment of immune cells to the site of inflammation produces endorphins. Binding of endorphins to the receptors situated on the peripheral nerves results in inhibition of substance P, a neurotransmitter of pain and inflammation, produce IL-10, IFN- γ , TGF- β anti-inflammatory cytokines to reduce inflammation [7-11].

Endorphins are produced during mindful meditation, pranayama, intense physical exercise creates a psychological relaxed state known as "Runner's high", love, tender, care, music therapy, pranic healing, acupuncture, sympathy and empathy in caring the patient. In the PNS, binding of beta-endorphin to the mu receptors situated on peripheral nerves results in inhibition of substance p, a neurotransmitter of pain and inflammation. In the CNS, binding of beta-endorphin to the mu receptors situated on central nervous system results in inhibition of GABA inhibitory neurotransmitter, produce dopamine neurotransmitter involved in analgesic activity, stress buster activity, self-reward, euphoria, tranquility of mind, cognitive development, and addiction.

Endorphin receptors situated on most immune cells. Binding of beta-endorphin to the receptors situated on innate and adaptive immune cells such as neutrophils, macrophages, mast cells, T cells, B cells, dendritic cells, natural killer cells results in inhibition of pro-inflammatory cytokines such as IL-1 β , TNF- α , and COX-2 inflammatory mediators, activation of innate and adaptive immune cells (immune stimulatory activity) release of opsonin, granzyme-B, IFN- γ , and antibodies involved in antibacterial activity, antiviral activity, antitumor activity, and anti-inflammatory activity [12-15].

Beta-endorphin inhibits chronic psychological stress induced activation of sympathetic nervous system and activation of parasympathetic nervous system of ANS through inhibition of HPA-axis mediated release of cortisol, ACTH, and noradrenaline, stress releasing hormones inhibit inflammatory mediators such as IL-1 β , IL-6, TNF- α , and COX-2, which inhibits NF-KB and STAT3 key transcription factors involved in chronic inflammatory diseases such as heart disease and Alzheimer's disease, cancer, autoimmune disease, infectious disease, and diabetes mellitus.

Beta-endorphin inhibits chronic psychological stress induced NF-KB a key transcription factor activation through inhibition of HPA-axis via ANS, mediated release of cortisol, ACTH, noradrenaline stress releasing hormones activate inflammatory mediators such as IL-1 β , TNF- α , IL-6, and COX-2, which further activates NF-KB, STAT-3

key transcription factors. NF-KB a key transcription factor induced expression of inflammatory mediators involved in conversion of TH1 lymphocytic type to TH2 lymphocytic type mediated by IL-4, STAT6 transcription factor; release IL-4, IL-6, IL-5, IL-13 pro-inflammatory cytokines along with TH17 cells involved in chronic inflammation, tissue damage, and immune modulation. Growth factors such as EGF, FGF, VEGF involved in cell proliferation and cell survival. Altered induced regulatory T cells (Tregs) formed from TH1 cells through TGF- β inflammatory mediators release IL-2, IL-4, IL-5, IL-13, IL-10, IL-17 proinflammatory cytokines involved in immune modulation, otherwise normal regulatory T cells involved in self-tolerance and immune homeostasis. Proteolytic enzymes such as UPA (Urokinase plasminogen activator) MMP's 2,9 (matrix metalloproteases 2,9) involved in tissue damage. IL-1 β , TNF- α pro-inflammatory cytokines activates NF-KB a key transcription factor, IL-6, EGF inflammatory mediators activates STAT3 transcription factor, both transcription factors work together involved in cell proliferation by activation of Cyclin D, E cell cycle regulatory protein and cell survival by activation of BCL-2, BCL-XL anti-apoptotic proteins, angiogenesis by IL-8, COX-2, VEGF [1-5]. All these changes lead to autoimmunity and tumor progression [16-18].

Beta-endorphin inhibits chronic inflammatory mediators induced activation of NF-KB a key transcription factor involved in tumor initiation, tumor promotion, and tumor progression, which antagonize P53 tumor suppressor gene, a guardian of the genome mutated in more than 50% of all cancers by expression of inflammatory mediators such as NO (nitric oxide), ROS, RNS free radicals, AID (Activation induced cytidine deaminase) enzyme expressed by NF-KB transcription factor. Beta-endorphin induced expression of epithelial E-cadherin helps in cell adhesion, loss of epithelial E-cadherin mediated epithelial to mesenchymal transition (EMT) induced tumor invasion.

Beta-endorphin delay aging by lengthening telomeres, which otherwise shorten with aging. Other mechanism of delay aging by inhibiting ROS (reactive oxygen species), RNS (reactive nitrogen species) free radicals from inflammatory cells such as neutrophils, macrophages, and dendritic cells during oxidative stress via NADPH oxidase pathway involved in cell aging, tissue damage [2-7], DNA damage, gene mutation, and cell death [19-21]. Quantum healing is a current concept of holistic preventive, therapeutic, health promotive, and palliative approach for treating diseases such as chronic inflammatory conditions such as heart disease, and Alzheimer's disease, infectious diseases, autoimmune diseases, including cancer begin to emerge and should be included in the future therapeutic modality for its inexpensive and without adverse effects.

Conclusion

Human body consists of energy. Energy has a blueprint of matter; each time human body oscillates between energy and matter human body tries to rebuild in a different way. According

to a duality matter is not made out of matter but energy. Matter can be converted to energy and energy can be converted to matter said by Nobel laureate, Hans Peter Durr. Quantum healing is akin to self-healing or auto healing. Human mind is a holographic presentation of human body; it is a canvas on which human thoughts are projected. Most of all diseases start in human mind. Mindful meditation with positive thoughts known as quantum thoughts genuine intention to heal any disease at spiritual level by production of endorphins. Thorough understanding of human mind in quantum healing helpful for future therapeutic application in management of various diseases.

References

- Hegde BM (2015) Human mind and quantum healing. *JACM* 16(3): 182-183.
- Shrihari TG (2017) Quantum healing approach to new generation of holistic healing. *Transl Med* 7(3): 198.
- Shrihari TG (2017) Quantum healing-A novel current concept of holistic healing. *International Journal of Complementary and Alternative Medicine* 10(2): 329.
- Shrihari TG (2018) Endorphins- A novel hidden magic holistic healer. *Journal Of Clinical and Cellular Immunology* 9(2): 547-552.
- Shrihari TG (2018) Endorphins-A forgotten hidden magic holistic healer: Minireview. *Advanced Complement and Alternative Medicine* 2(5): 1-4.
- Shrihari TG (2018) Beta-Endorphins-A novel natural holistic healer. *Journal of Microbial and Biochemical Technology* 10(2): 10-14.
- Shrihari TG (2017) Endorphins on cancer: A novel therapeutic approach. *J Carcinog Mutagen* 8: 298.
- Shrihari TG (2017) Dual role of inflammatory mediators in cancer. *Ecancermedicine* 11: 721-730.
- Zhang, Chang Q (2013) Role of beta endorphin in control of stress and cancer progression in fetal alcohol exposed rats. Thesis 8: 13.
- Shrihari TG (2016) Inflammation related cancer-Highlights. *J Carcinog Mutagen* 7: 269.
- Stojanovich L (2010) Stress and autoimmunity. *Autoimmunity Reviews* 9(5): 271-276.
- Segerstrom SC, Miller GE (2004) Psychological stress and human immune system: a meta-analytic study of 30 years of inquiry. *Psychological Bulletin* 130(4): 601-630.
- Stojanovich L, Marisavijevich D (2008) Stress as a trigger of autoimmune disease. *Autoimmun Rev* 7(3): 209-213.
- Zhang C, Murugan S, Boyadjieva N, Jabbar S, Shrivastava P, et al. (2015) Beta endorphin cell therapy for cancer prevention. *Cancer Prev Res (Phila)* 8(1): 56-67.
- Moreno-smith M, Lutgendorf SK, Sood AK (2010) Impact of stress on cancer metastasis. *Future Oncol* 6(12): 1863-1881.
- Ondicova K, Mravec B (2010) Role of nervous system in cancer aetiopathogenesis. *The Lancet Oncology* 11(6): 596-601.
- Lennon FE, Moss J, Singleton PA (2012) The μ - Opioid receptor in cancer progression: Is there a direct effect? *Anesthesiology* 116(4): 940-5.
- Dowlati y, Herrmann N, Swardfager W, Liu H, Sham L, et al. (2010) A meta-analysis of cytokines in major depression. *Biol Psychiatry* 67(5): 446-457.
- Kuebler U, Zuccarella HC, Arpagaus A, Wolf JM, Farahmand F, et al. (2015) Stress induced modulation of NF-KB activation, inflammation-associated gene expression, and cytokine levels in blood of healthy men. *Brain Behav Immun* 46: 87-95.
- Archana S, Deepali V (2014) Endorphins: Endogenous opioid in human cells. *World Journal Of Pharmacy And Pharmaceutical Sciences* 4(1): 357-374.
- IwaszkiewiczKS, Schneider JJ, Hua S (2013) Targeting peripheral opioid receptors to promote analgesis and anti-inflammatory actions. *Front pharmacol* 24(4): 132.

For possible submissions Click below:

[Submit Article](#)