



## Photonic medicine and conventional medical treatments

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It goes without saying that the combination of photons and medication often proves useful, and sometimes even necessary.

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We will mention, as an example, the benefit for physicians faced with situations requiring the reactivation of chemical clocks and metabolic cycles, in cases of energy disturbance and dysfunction where the effort limit is exceeded and the disturbance is sustained, leading to the development of metabolic acidosis and free radical discharge in the tissues.

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These situations are increasingly common today due to new forms of sports or endurance training.

The resulting enzymatic dysfunction necessitates the administration of certain vitamins and trace elements to the patient, which are essential for functional reactivation. For example, cocarboxylase (vitamin B1) is needed to release CO<sub>2</sub> and initiate the formation of active acetates.

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It may be necessary to combine this with the reactivation of Coenzyme A and to administer a supplement of pantothenic acid (Vitamin B5).

The same applies, both in metabolic disorders and in the rehabilitation of athletes, with regard to hydrogen transporters, which are essential for ATP production and for the quality of water formation at the end of the respiratory chain.

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Vitamins B2, B3, B5, and B6 can, under these conditions, reveal their full effectiveness...

This complementarity also extends to other substances such as trace elements, whose triggering or potentiating action benefits enzymatic activity in all situations of electromagnetic disruption, whether chronic or accidental.

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They are particularly effective in the fight against free radicals. Photons are delighted to benefit from their combined action.

Conversely, let us not forget the fundamental role that tissue energy reactivation induced by photon administration can play in the extreme battles fought by physicians and oncologists in particular.

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With photonic support or reinforcement, chemotherapy or anti-neoplastic inactivation is not only better tolerated but proves more effective, more precise, and better tailored.

It should also be remembered that all infectious diseases, bacterial or viral, are better and more quickly controlled with photonic therapeutic assistance.

As we mentioned earlier, the photon plays a role in almost every battle fought by the physician, for the benefit of patients.

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Not only does it contribute its share of effectiveness and efficiency, but it also enhances the action of medication through the selective quality it allows, as well as the added precision and modulation of care.

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When we see a patient, it is important to ask them if they are taking any medications, as some of them disrupt the VAS perception.

These are most often beta-blockers, which reduce the VAS's perceptual capabilities and its use as a diagnostic and monitoring tool.

**It is important to understand that any substance that neutralizes or blocks receptors in the sympathetic nervous system will make the correct and efficient practice of photonic medicine difficult.**

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The most often prescribed beta-blockers are:

acebutolol, atenolol, bisoprolol, carvedilol, labetalol, metoprolol, nadolol, pindolol, propranolol and timolol (many eye drops used to treat ocular hypertension contain it).

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Besides beta-blockers, we must also mention the importance of neuroleptics and all substances designed to create a chemical straitjacket.

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Special case of anti-cancer chemotherapies:

The toxic agent likely paralyzes the autonomic nervous system at the sympathetic level, making it difficult to perceive the VAS.

In these cases, it may be necessary to proceed by moving up the color spectrum from the coolest to the warmest colors on the auricles until the VAS is triggered again, which will then allow us to work with the patient.

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Furthermore, morphine-based drugs used in very painful conditions, whether cancerous or not, alter the VAS profile, which loses its rigidity and appears softer.

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### Special case of Parkinson's disease:

During long-term anti-Parkinsonian drug use, the red and caudate nuclei experience limited natural secretion, resulting in a complete absence of central nervous system activity.

In this case of a complete absence of central nervous system activity, corresponding to irreversibility and the absence of VAS, nothing can be done.

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However, before reaching this absence of central nervous system activity, vascular slowing occurs, during which VAS are most often not spontaneously observed.

It is still possible at this stage to intervene by applying Turquoise 44 followed by Red 24 sagittally to the skull until VAS reappears, which will allow for the application of patient-specific treatment.

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**Special case of antidepressants taken long-term:**

Venlafaxine and its active metabolite reduce  $\beta$ -adrenergic sensitivity after acute (single dose) and chronic administration.

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