



Interactions of Quantum Bioenergy Fields

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Abstract

Allopathic medicine has overlooked the intricate signals arising from the various bodily systems. Mechanical biology has devoured the concept of subtle dimensions, which are entertained by traditional medicines and involve low level and high-level energy interactions. The placebo effects of medicinal drugs are a well-established fact, but these are generally considered to be the result of the misleading effects of medications or are written off as a psychological artefact. The emerging concept of bioenergy fields associated with the material body explains these effects as being generated by quantum mechanical bodies. The universal phenomenon of placebo effects point toward the existence of a non-chemical component working in association with the material body. The experimental evidences in favor of subtle energy spectrum are not fully convincing, but there are indirect evidences suggesting their existence. It has been hypothesized that the key to an early diagnosis and treatment of diseases is correcting the disequilibrium of deranged bioenergy field. This paper is a hypothetical contribution to this effect. Subtle energy studies could enrich NeuroQuantology where these conjectures could metamorphose into improved theoretical models for further testing and elaboration.

Key Words: Bioenergy, Aura-homeostasis, Placebo, Hypnosis, Alternative Medicines.

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DOI Number: 10.14704/nq.2020.18.2.NQ20141

NeuroQuantology 2020; 18(2):157-172

Introduction

Modern advances in anatomy and physiology inspire medical professionals in their quest to discover remedies for specific human diseases, leading them to deviate from older, holistic approaches to healing. Allopathic medicine is based purely on the material body and does not recognise the existence of energy bodies although there are energy fields that cannot be explained by the classic Maxwell-Schrodinger equation. On the whole, biological systems demonstrate non-local, global properties and these are dependable and harmonious with their ability to operate at the quantum level. Furthermore, most interactions between cells occur at a speed greater than the speed of light; thus, cells must communicate through a quantum field in which the linear, predictable characteristics of the Newtonian world do not exist (Dispenza, 2014). The mystery of embryonic development from the

fertilised egg into an organised, vital human being or animals cannot be explained without the involvement of innate energy fields, starting with the initial polarisation of the fertilised egg (Rubik, 1989).

As in the case of construction sites, there may be architectural, engineering and labor forces involved in the making of the human body-there is bound to be forces upon forces. The possible existence of endogenous quantum fields in biological systems merits further evaluation. While quantum physicists consider the massive expanding sea of subatomic particles that make up the universe, adherents of vibrational medicine consider that the gentle Chi, Qi or universal life force energy underlies all of existence.

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Relevant conflicts of interest/financial disclosures: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

Received: 13 January 2020 **Accepted:** 10 February 2020



But mainstream medical scientists are inclined think that subtle energy forces are fictitious or pseudo forces.

Many alternative and complementary systems of therapeutic intervention have their own terminologies for non-classical energy fields, hereinafter referred to as quantum bio-energy fields (QBEFs). QBEFs exclusively refer to the energy field or mechanical quantum body enveloping the material body, which may act as an intermediary between the brain and quantum consciousness. It may have a bearing on understanding the bond between the brain and the mind-consciousness complex, but it is too early to comment on QBEFs' potential contribution to the mechanical part of consciousness. QBEFs may qualify as another axis of the fifth force, one that does not relate to quantum or spiritual consciousness and may be distinguished from the higher cognitive systems.

Unresolved Conundrums

QM is adequate for understanding nature, but it has its limitations for studying human beings. With the progress of medical science, we are identifying more enigmas in the human body, brain and consciousness. Quantum physics, as presented today, may not be the best tool for investigation of the workings of biological structures. Niels Bohr conjectured that quantum theory might provide a conceptual foundation for the appreciation of living systems, and Pascual Jordan applied quantum theory to psychological problems. Overall, biology has been resistant to the intrusions of quantum theory. Classical physics cannot explain the conundrum of free will, but Jordan (1943) argued that the quantum mechanical indeterminism of processes inside the human brain can be amplified so that the unpredictable reactions of a person may be interpreted as manifestations of free will. He offered a comparison of Freudian psychodynamic views of suppression with the concept of complementarity in quantum theory. In a way, Jordan's views indirectly paved the way for the entry of neuroquantology into human biology, for the understanding of which Newtonian physics has little to offer. The fundamental question is whether macroscopic quantum mechanical systems really exist (Lucadou, 1989), and such a query is relevant in the discourse regarding QBEFs.

There are many unresolved riddles in QM. These warrant extended quantum theories to enable us to comprehend the full realities in a more profound

way. Most enquirers into bio-quantum mechanics used to argue that QM cannot operate in the unscientific environment of the healer, and that it requires treatment as a laboratory subject. Recently, there has been a shift in attitude, and QM has been observed to play a significant role in a growing number of biological processes (McFadden & Al-Khalili, 2014). It is generally understood that QM effects occur only in the microscopic domain in which a single elementary particle is involved. Several macroscopic phenomena – such as superconductivity and super fluidity – may be understood only on the conceptual basis of QM and must be recognised as macroscopic quantum effects (Ristik, 1981).

The Einstein-Podolsky-Rosen (EPR) paradox is a thought experiment proposed to reveal an inherent paradox in the early formulations of QM. EPR experiments entail single-particle conditions (Patty, 1977), but the relevant distances between the two spin-measurement devices are in the macroscopic range. EPR is among the best-known examples of quantum entanglement and contradict Einstein's theory of relativity based on speed of light. The paradox involves two particles that are entangled. Under the Copenhagen interpretation of QM, each particle is in an uncertain state until it is measured, at which point the state of that particle becomes certain. At that exact moment, the other particle's state also becomes certain. This is classified as a paradox because it apparently requires communication between the two particles at speeds greater than the speed of light and such a situation puts a question mark on the theory of relativity. The EPR paradox, despite its refutation by Bohr, was the starting point for quizzing the completeness of QM and hidden variable theories. How much of QBEFs may be accommodated in present quantum theories is difficult to gauge.

Quantum Mechanical Body

Efforts to link subtle energies with QM have met with little success. The concept of a second body or conjugate body, popular in psychical research for many years, may offer a solution. Could QBEF itself emanate from a second body? Gerhard D. Wassermann (1993) introduced the concept of lighter shadow matter body and brain to differentiate it from universal shadow matter. Lighter shadow matter body may be analogous to the etheric subtle body, acting as a 'computer program' to direct the development and preservation of the material body



(Kinney, 2014). This view shifts the brain-centric approach in cognitive sciences to a holistic model in which everything is holographic, in the sense that every cell contains the wholeness of the person. Scientific advances in the future may help to reveal the quantum nature of shadow matter, so Wassermann's theoretical framework may survive the test of time. If it is not the shadow matter, the proposed second body may be composed of some other quantum material. Wassermann is right in modifying the terminology as "lighter shadow matter" and the quantum mechanical body I may propose also is of a lighter variety. Our material body though derived from earthly matter (or star dust) is of a highly sophisticated material and similarly the quantum body must also be of highly refined stuff.

The hypothesis proposed in this paper is that healing information derives from a higher dimensional source and is transmuted into biologically usable electromagnetic energy as it is disseminated through the different levels of the bio-field. Thus, there may be low energy and high energy fields. Low energy fields may be a contribution from our own quantum mechanical body, while high energy fields may derive from an external quantum source – the fifth force. Based on the limited experimental evidence available, a bio-field may be composed of layers composed of force fields, potential fields and quantum fields embedded within one another.

Different Speculations

The conventional belief is that bioenergy is composed of bio-currents that reside in all individuals and form the dynamic force of life. Various called subtle energy, prana in Ayurveda and chi in Chinese medicine, bio-energy results from the movement of a vital world and is not a by-product of chemistry – subtle energy is vital energy. It is assumed that this force shrouds every cell of the body and operates as the 'hard wiring' of all sentient beings; it functions as the communicator of information between energy points and fields. This force also exists outside the body as an electromagnetic field, an extension of bioenergy commonly thought of in theosophy of as the ethereal body or aura. The key to better health may be perceived as the maintenance of a balanced flow between energy points inside the body and the external energy field.

It has been detected that the total power emitted from an electrical system is sometimes greater than the power input; this anomaly is referred to as 'over unity'. Comparable glitches in temperature, inertia, mass and gravity measurements have been

identified (Aspden, 1991). It has been postulated that the additional electrical energy comes from an inflow of higher-dimensional 'zero-point' energy (King, 1990). This is supported by the theory that the zero-point dimension which existed before the Big Bang may currently co-exist with the physical dimension (Byrne, 2018). Although zero-point energy is normally considered to be a background to a universal electromagnetic field, its higher dimensional counterpart may be a quantum field. Thus, human QBEFs may be composed of a series of at least three different types of energy: classical electromagnetic force fields, potential fields and quantum fields. In fact, energy therapists have proposed that, in addition to the already-accepted human energy fields, there may be subtle putative bio-fields, subtle energy bodies and aspects of the lower and higher self.

The existence of psi phenomena has been proven beyond doubt (Utts, 1991; Radin, 2013), but few scientific theories accommodate these phenomena, and mainstream scientists remain sceptical due to their non-local effects. They are germane to current discussion on QBEFs. The umbrella term "Psi" principally refers to a paranormal phenomenon that has direct bearing on mind-brain relations and should not be confused with QBEFs, although hypothetically it may contribute to the mechanical part of consciousness. QBEFs and Psi are phenomenologically similar. Psi is composed of a sensory aspect—extrasensory perception (paranormal cognition—ESP or Psi gamma) and a kinetic aspect—psychokinesis (paranormal action—PK or Psi kappa). ESP includes telepathy, clairvoyance, precognition and retro-cognition (real time and time-displaced phenomena). It can also actively seek out or monitor people or events of interest to the percipient. Psi kappa may be considered as allied to QBEFs, but psi gamma may be independent of them. David Peat (1989) called the psi-related faculties only "surface phenomena" considering them manifestations of something far deeper. Nonlocality refers to coherence between distant entities and Albert Einstein dismissively called it "the spooky action at distance." QM may give a hand in explaining psi phenomenon but may be inadequate to explain super-psi which belongs to "something deeper."

Subtle Energy Spectrum

Humans are psycho-spiritual entities with several layers of energy bodies with increasing subtilty (Lockhart, 2010). The material body and energy bo-



dies are in a complementary relationship; if the material body is the container, vital energy is the content (Collinge,1998) Allopathic medicine is concerned only about energy metabolism and does not have any other model of energy generation. Energy metabolism is the entirety of an organism's chemical processes. These chemical processes are generally classed as being either anabolic or catabolic. They take the form of complex metabolic pathways within the cell. Beverly Rubik (1989, 2002) postulates that biological systems may be regarded as complex, non-linear, dynamic, self-organising systems of energy and field phenomena. According to her, each life form may possess an innate biological field and this bio-field entails a complex, dynamic, weak energy field involved in maintaining the integrity of the whole organism. Such a higher organisation would regulate its physiological and biochemical responses. William Tiller (1993) proposed the concept of the subtle energy spectrum, which cannot be verified with present-day instrumentation either. The vacuum state contains dense, amorphous and chaotic energy potential which normally has no interaction with the physical unless it is harnessed by some means. The term 'subtle energy' is a broad concept that encompasses QBEFs and, for certain practitioners of Eastern medicine, even involves spiritual energy, but QBEFs specifically do not incorporate spiritual energy. 'Spiritual force' is a more appropriate term than 'spiritual energy'. In this paper, spiritual forces are distinguished from QBEFs.

Subtle energy spectrum consist of interactive extrasomatic energy system and an independent quantum energy system while the former is an extension of the electrical and the magnetic fields emanating from bodily process and the latter is an energy system that is tapped into it from a universal quantum force by some unknown process. If we expand these models, there are at least three possible examples of subtle-energy spectrum formation. One results from low-grade electromagnetic fields that emanate from the material body. It is well known in physics that wherever there is electricity, the formation of a magnetic field is inevitable; the existence of this electrical field in the body has been confirmed through ECG and EEG technology. The second formation of QBEFs emanates from the quantum mechanical body that envelopes the material body (also known as the 'ethereal body' in survival research and parapsychology), while the third form of subtle energy comes from an external source acquired from universal quantum energy –

the suggested fifth force.

The relationship between these different fields may be defined using Bohm's (2005) model of the implicate order embedded within the explicate order. In this scenario, classical electromagnetic fields exist at the level of the explicate order in which the potential field is embedded, which in turn has the quantum field embedded within it. According to Bohm, the implicate order is made up of a series of levels, each embedded in the next, in which each level is increasingly more subtle and fundamental. Sub-atomic particles are guided by an underlying pilot wave containing active information. If one adds to this model the concept of hyperspace from quantum physics, eventually a subtle level in the implicate order is reached which is higher dimensional. It may be hypothesised that quantum fields exist in this higher dimensional level.

Weak (non-thermal and non-ionising) electromagnetic fields produce a variety of biological effects at all levels of biological complexity and may include clinical, cellular and sub-cellular outcomes. Therefore, endogenous electromagnetic fields may play an important role in the body's remarkable self-healing capabilities. Using QM as a basis, Tiller assumed that the vacuum state with magnetic vector potential is to play the role of the bridge between physical energies and subtle energies (Tiller,1993). The extrasomatic subtle fields are normally very weakly coupled to our physical fields, so we generally recognise only small effects. Yet, under a positive set of conditions, they may be strongly coupled and demonstrate substantial effects. With the aid of an intermediate transducer like living systems, they become apparent.

Jeffrey S. Keen (2018) proposes that subtle energy extends beyond living organisms and includes all physical objects, even abstract mathematical shapes. He offers a deep examination into different kinds of subtle energies. They range from lines across the landscape to auras, vorticular energies, psi-lines and other manifestations. A dowser's perception of subtle energy is different from that of the healer. Keen argues that all objects on earth – including inanimate objects, life-forms and even abstract geometrical shapes – are surrounded by auras. Subtle energy appears to permeate our world in interesting ways. According to Keen, the auras of physical objects include seven concentric ovoid shells, each associated with a colour. Unlike inanimate objects, human intent allows us to modify our own and others' auras. He considers that our subconscious minds have the faculty to examine these



subtle energy fields, invoking the notion of a cosmic field of information that supports our life processes, comparable to Bohm's implicate order.

Mechanism of Interaction

The bio-mechanism at play in the interaction between energy fields and molecular structures is a matter of speculation. Energy fields acting directly on molecular structures which in turn may alter the conformation of molecules in functionally significant ways may be a possibility. Bio-information mediated through very small energy parcels/signals networking openly with bio-energy fields is also a likelihood (Rubik, 1989). Stimulating thought in a molecule in the brain is a quantum operation. A person becoming depressed as a result of receiving constant negative words from a colleague is an example of a quantum operation in which negative thoughts activate brain molecules. We are entering an era of interdimensional physics in which the primary and originating bases of the mind and some of its components are interdimensional energy. The neurosynaptic nature of the brain is derived from the demodulated energy of the mind, which activates the cellular body of the physical anatomy. Interdimensional physics may shed more light on the electromagnetic structure of the mind contained within the brain and attached to it (Ruth, 1989).

The link between QBEFs and biological cells is a puzzling issue because the equation cannot be completed without intermediaries. The cytoskeletal system and microtubules, which are helpful concepts in this enigma, are present throughout the body. Penrose Hameroff's Orch OR theory posits that microtubules snatch quantum consciousness, which may be a fifth force. There is an apparent stagnation of ideas at this discussion point. If the biological cells themselves serve as miniature wormholes to the quantum dimension, that offers a way to make further progress in this line of research. A wormhole, also known as an Einstein-Rosen bridge, could theoretically serve as a passage capable of transmitting energy-information parcels through quantum-dimension shortcuts, thereby allowing for the truncation of long space-time journeys through the material universe. There may be primary and secondary wormholes, just as there are primary and secondary quantum leaps.

Monendra Grover et al. (2019) postulate that universal consciousness is the source of everything and is an infinite dimensional computer; universal consciousness is an entangled system, and the en-

tire universe – including biological cells – is involved in that entanglement. Biological organisms may therefore perform as quantum computers. They argue that wormholes exist in biological cells and throughout universal consciousness. Every form of matter has the potential to reach the highest level of consciousness, if the origin of space, time and matter are described in terms of the consciousness vector (Grover, 2013). In Ayurveda, channels for the flow of vital energy are called nadis and certain points where they intersect are called marma. It is possible that primary wormholes may be positioned at these points, channeling to the source of vital forces, as stimulation at these points is thought to link with internal organs and help the flow of vital forces cleansing stagnated negative energy.

Evidence

Some vagueness in confirming the existence of QBEFs is inevitable; theoretically, vital energy cannot be measured with physical instruments as the latter belong to a different realm. Humans themselves are potential sources and conscious detectors of subtle energies. At an unconscious level, humans also respond to subtle energies at a muscular level (Tiller, 1993). In conventional dowsing studies the dowsing response is a muscular action connected by a sequence of biological processes based on some type of magnetic field gradient. Osteopathic practitioners have shown that patient muscle tonus can change when specific minerals are merely held close to the body. This class of procedure falls under the general type of applied kinesiology. The vital body's morphogenetic fields correlate with physical forms and measuring correlated forms as they change with vital body movements would give us insight into the vital body (Goswami, 2011). The concept of QBEFs has not yet gained scientific credibility, but there is observational evidence from placebo effects, hypnotic experiments, complementary and alternative medicine, manifestation of birth marks and stigmata formation may be regarded as indirect evidence.

Experimental Evidence

Kirlian photography is an example of an attempt to demonstrate QBEFs (Krippner & Rubin, 1974). It was discovered accidentally by the Russian scientists Semyon Davidovich Kirlian and Valentina Kirlian in 1939. The Kirlian aura has been explained in physi-



cal terms as nothing but corona discharge. Controlled experiments have demonstrated that the effects claimed are influenced by the amount of moisture, which affects electrical conductivity. Amit Goswami (2011) appears to have a sympathetic view of the Kirlian photographic phenomenon. He states, 'Changes in vital energy as in mood swing do change the programs that run the organ representations whose functions also change, reflecting the mood swing. The photograph is measuring the change in the physical level, but because the physical level changes are correlated with the vital level changes, indirectly we are measuring the latter.' It must be pointed out that the instruments in use are still inadequate, and there are no valid hypotheses to explain bio-energy fields (Hansen & Lieberman, 2013). The underlying hypothesis of many experiments is that the bio-energy field consists of components of the electromagnetic spectrum and are photonic in nature. Negative findings relating to Kirlian photography do not invalidate the aura phenomenon.

Pendulum Experiment

If the bio-energy field is not photonic, but instead is a field of force capable of altering the momentum of objects, only a highly sensitive detector can confirm its existence. This was the basis for Norman Hansen and Joshua Lieberman's pendulum experiments, in which a torsion pendulum was suspended above a seated human subject. Their hypothesis was that the pendulum could alter the momentum of a physical object (Hansen & Lieberman, 2013). In their pendulum experiment a video camera was connected to a computer in order to detect and measure the pendulum's movements with high precision, and the information gained was stored in data files for analysis. Hansen and Lieberman claimed to have consistently detected the following effects with every subject in every experiment: (1) substantial shifts in the centre of oscillation of the pendulum (as large as 2.2 cm – 7 degrees – with a force equivalent to 45 mg); (2) many new frequencies of oscillation in the pendulum in the presence of a subject; (3) dramatic changes in the amplitudes of oscillation of the pendulum throughout the experiment (increase, decrease and increase again, which resembled chemical relaxation processes); and (4) persistence of all these effects for 30 to 60 minutes after the subject had left.

One of the exceptional observations from the pendulum experiment was the continued effect of the human presence for 30 to 60 minutes even after the

subject left whereas with other forces, such as air currents, the pendulum would immediately return to its classic, non-driven motion. Hansen and Lieberman argued that these findings were inconsistent with the physics of a simple harmonic oscillator, such as a torsion pendulum, which returns to simple harmonic oscillation immediately after any exterior disturbance is withdrawn. They attributed this extraordinary effect to a force field that was generated by the subject seated under the pendulum. Their results support the view that the bio-energy field is a force. Furthermore, they noted that some subjects, especially those who had pursued meditative practice for many years, exerted very different effects during a meditative state in comparison with those produced in a non-meditative state.

Van den Berg and van der Sluys (2015) replicated the pendulum experiment to challenge the results of Hansen and Lieberman. They took special precaution to exclude a traditional rationale involving convection currents generated by the heat emanating from a human head. Correctly, they placed a layer of plastic between the head and the pendulum. They discovered that the effect vanished. They concluded that the plastic either cut the pendulum off from the mysterious bio-energy field or that it simply cut off the heat source. In his reply to the Van den Berg and van der Sluys study, Hansen (2015) argued that if one were to place a thick plastic shield between the subject and the pendulum, the 'pushing force' (of the bio-energy field) would initially be against the shield, and the pendulum would only respond to whatever force remained.

For the force to survive passage through the shield and then push against the pendulum, the fundamental principles of physics would have to be violated. Hansen (2015) put the following defensive arguments. 1. A force can be used only once, and if it is utilised to push against the shield, it cannot subsequently push against the pendulum. 2. Hansen also noted that van den Berg and van der Sluys failed to consider the persistent aftereffects. Hansen argued that, according to the fundamental principle of pendulum physics, if the pendulum is driven by an outside force and the force is removed, the pendulum will immediately return to classic non-driven motion. He adds that any accumulation of heated convection currents would swiftly diffuse after the subject exited. Hence, Hansen is of the view that convection currents do not explain the aftereffects. Hansen described the effects of the subject's bio-energy field as being somehow 'im-



printed' on the pendulum. Finally, he stated that the van den Berg and van der Sluys study failed to acknowledge the varied frequencies with which the pendulum oscillates in the presence of a human subject; these effects cannot be explained by convection currents caused by air temperature variations.

Lately, a few diagnostic devices that are helpful in establishing the very existence of QBEFs have been developed. The devices and techniques used in QBEFs research need further substantiation. They fall into three categories: (1) high-voltage electrophotography; (2) acupuncture point conductivity measurements; and (3) bio-photon measurements. They do not provide conclusive or compelling evidence for the existence of QBEFs. Without analysis of intricate signals between the physiological and organ systems, it is difficult to provide deeper insight into a patient's health. Recently, measurement of bio-energy fields that have bio-physical bearings were utilized to demonstrate the possibility of providing holistic medical screening (Lee et al., 2005).

Indirect Evidence

The discovery of the causative agents of infectious diseases, made possible through the invention of the microscope, marked the triumph of allopathic medicine. Until then, infectious agents could not be visualised in their physical form. In a similar way, QBEFs, which currently do not have a known observable form, may be visualised in future through advanced scientific invention. At present, scientific investigation has only been able to indicate the possibility of the existence of such fields. We must rely on observational or indirect evidence to support the hypothesis of QBEFs itself in order to continue our scientific investigations. Mainstream sciences may expect at least weak objectivity and observer invariance for the inclusion of new ideas.

1. Placebo Effects

The placebo effect is a well-established phenomenon, but its mechanism is unknown; there are no conceptual scientific models for it. They are often described as fantasy or psychological artefacts. A similar phenomenon is faith healing, about which medical science is in denial despite authentic evidence for it. Newtonian science lacks the conceptual model and intellectual tools to measure invisible forces; anything that cannot be visualised is deemed not to exist. Energy therapists claim that the human body is made of energy – that it is much

more than an envelope of flesh that encloses our glands and organs. This force or energy field is a barrier made up of energy, plasma or particles that protects a person from attacks and intrusions, and functions as a means of containment or confinement. Therapists do not use their energy for healing purposes but serve as facilitators, focusing on correcting the imbalance of QBEFs in their patients. Spiritual forces are more relevant in faith healing, while QBEFs are relevant to placebo effects and the mechanisms of traditional and alternative medicines.

Placebos may include inert drugs and sham procedures and they have been employed in experimental drug studies to compare the effects of the inactive substance with those of an experimental drug. Such trials including placebos are crucial in psychopharmacological studies. In placebo-controlled trials, the patients enrolled are randomly and unknowingly assigned to receive either the new medical intervention being tested or a placebo. Such a blinding is meant to prevent patients from knowing what treatment they have received because that prior knowledge could influence the study results. It is important to test whether the new drug does demonstrate an effect greater than that of a placebo. These placebo controlled drug trials allow the investigators to ascertain whether the new medication produces an effect that is greater than that of the placebo. In modern medical research, however, the double-blind, placebo-controlled, randomised clinical trial has been established as the gold standard for the assessment of any new treatment. Recently placebo and other non-specific effects elicited by the 'healing context' have been independently subjected to scientific study. A better understanding of the mechanism of placebo effects is required. Cutting-edge quantum physics has the potential to unravel the unknown effects of placebos. Disease and illness have different medical significance and meanings. Disease is understood scientifically in terms of pathophysiology and illness is understood phenomenologically, as a lived experience (Carel, 2008). Placebos are aimed at the symptomatic relief of conditions such as anxiety, pain, fatigue and so on without alteration of the pathophysiology of diseases (Miller, 2009). From a pure reductionist perspective, a placebo may be embodied by the grey cells of the human brain, which itself have immense curative power once stimulated. Placebo effects have been interpreted as a psychological artefact or a magical phenomenon. If a model of QBEFs is incorporated, placebo effect would have



clinical usefulness in the sense that it would become an effect that may be harnessed to aid recovery process. Randomised trials and brain-scan studies have provided physiological evidence for the actual placebo effects in several cases. It is increasingly being recognized that what we call the 'placebo effect' may involve changes in brain chemistry induced by QBEFs. That implies the placebo effect may be a quantum reality that is created by the mobilisation of QBEFs (Dispenza, 2014). The placebo effect is believed to be brought about when the subjective mind produces medicinal agents and accelerates the healing process.

It is estimated that up to 40 per cent of the effects of medicinal drugs may be a placebo effect. Patients associate side-effects of drugs with more efficacy of the medicine they receive and that in turn may stimulate and boost the placebo effects (Davies, 2013). Side-effects indirectly inform trial subjects that they have received the active substance rather than the inert one issued to the control group. Such a situation itself can be deceiving to the actual trial experiments. A recent meta-analysis has shown that most of the favourable outcomes of common psychopharmacological drugs, particularly antidepressants, are placebo effects (Carlat, 2010). During the past decade, brain imaging techniques have aided the study of the neurobiological mechanisms underlying placebo effects (Colloca et al., 2008; Faria et al., 2008). The placebo effect often seems to be associated with measurable changes in brain chemistry and there have been observed quantifiable changes in neurotransmitters, hormones and immune regulators (Benedetti, 2009).

In the 'open-label' placebo studies, patients were told that they were taking a placebo and given the suggestion that the placebo effect is highly potent. In one small study of patients with irritable bowel syndrome, Kaptchuk et al arrived at a conclusion that even the open-label placebo produced a placebo effect (Kaptchuk et al., 2008; 2010; 2018). They observed that placebo treatment was 20 per cent more effective than no treatment. Several studies have revealed that placebos can activate release of natural pain-relieving agents such as endorphins in the brain. These results substantiate the observed large placebo effect in the treatment of depression. Studies of placebo treatment have been extended to other medical conditions. Placebos effects have been studied in Parkinsonism which is a condition linked with low levels of dopamine. Placebo treatment have been noted to have induced heightened production of dopamine in Parkinsonism. Doctor-

patient relationship was found to be an important factor of the placebo effect. Placebo effect in the clinical practice may be depending on three main modules and they are assessment and observation, administering placebo, and therapeutic relationship.

Placebos also relate to the disposition to heal, no matter what treatment is offered, if those being treated consider the treatment effective (Blomqvist, 2018). Regarding the effects of drugs, expectations appear to have a significant influence. A certain percentage of people will respond to any intervention if they believe that such a therapeutic procedure is going to help them. Thus, the placebo effect may depend on the condition, the strength of belief, and the subjectivity of the response along with other factors. Once someone benefits from an intervention, that person starts to associate intervention with a benefit and such a psychological conditioning would add to the placebo effects. Such an association between benefit and the therapy would become stronger with subsequent exposure making the intervention more beneficial. The placebo effect is directly related to the subjective experience of patients. This is often the case for conditions that are defined mainly by symptoms, such as depression, and for problems that are defined primarily by the pain they produce, such as migraine headaches and back pain. Genetic traits have been suggested to produce some discrepancy in placebo sensitivity (Wang et al., 2017). If a patient has negative expectations regarding a treatment, that could result in a more negative effect- nocebo effect.

2. Hypnosis

Hypnosis has been helpful in gaining a deeper understanding of the phenomenon of placebos and the role of expectations in therapeutic outcomes (Yapko, 1992). Hypnosis is considered as a mega placebo. Hypnosis and the placebo effects are a powerful duo. Irving Kirsch came up with what he called the 'response expectancy theory' to explain what the two have in common (Kirsch, 1997). His theory promulgates the view that people experience what they expect to experience. For example, medical professionals or psychologists establish themselves as figures with authority, and their patients trust them. They also believe that medicine will be effective; both patient and doctor expect the medicine to work – and it usually does.

According to Kirsch, clinical hypnosis is a 'non-deceptive placebo'. It is a test to identify one of two



things: (1) the effectiveness of the medicine and (2) the patient's response to the medicine/placebo. With hypnotherapy, however, patients know what they are getting into, and there is no sugar pill or saline solution on offer. However, it still works in similar ways to other placebos, and the results vary according to the patient's trust in the therapist. For example, hypnotherapists heighten the expectations of their clients by establishing trust and building rapport through communicating openly, which allows the therapist to understand the subject's issues as deeply as possible. They also try to boost the client's belief by explaining the effectiveness of an intervention. Trust, belief and expectation obviously augment the effect of hypnotherapy. As with the placebo effect, the mechanism of hypnosis may involve harnessing QBEFs. Quantum is linked with hypnosis when meditative techniques are used alongside because quantum is indicative of the interconnectedness of everything in the natural, physical and mental realms and beyond (Jain, 2006). Cognitive depression involves various negative trance states and hypnotherapy has great research value in understanding depression but questionable value in its treatment.

3. *Sense of Physical Identity*

Brain is thought to be responsible for storing and recalling all our experiences. According to the proponents of cellular memory, the body itself may hold memories that may have a powerful subconscious influence on our desires, needs and responses to external stimuli. Each day, within our body 50 billion cells die. This might be expected to result in eventual loss of the physical identity of the individual as all cells constituting our sense of physical identity are replaced with new ones. In spite of this, we do not perceive ourselves as being new or as having any different form from that which we have always had. It is logical to hypothesise that there must be an inherent internal mechanism carrying our physical identity, or memories of it, and passing it on to the newly formed cells.

According to Gary Schwartz and Linda Russek, the unhindered sense of identity despite the expiry of billions of cells every day implies that some form of communication between all our cells maintains our experience of bodily consciousness immaculately while billions of cells are replaced with newer ones (Schwartz & Russek, 1999). There may be a permanent record of cellular events that is maintained in some form of a duplicate body associated with the visible body. In our bodies these records may be

tapped by the newly formed cells, maintaining the continuum of cellular consciousness (Pandarakalam, 2015). QBEFs may contain the tapestry of these cellular memories and maintain our sense of physical identity, despite the disappearances of billions of cells on a regular basis. They exist on a sub-cellular level and may form the 'para-histology' of the material body. 'Muscle memory' is recognized by drivers travelling in the same route regularly. Drivers run the vehicle reflexively and mechanically when they are accustomed to the roads for a long time while their mind is preoccupied with other subjects. QBEFs may be a player in this phenomenon. There is free exchange of subcellular information parcels between QBEFs and the material body whereas the information exchange is constrained between brain and the unconscious mind. Such a body-set facilitates automatic driving even though it is undesirable.

4. *Alternative and Complementary Medicines*

Vital body is a popular term in alternative medicines to indicate the QBEFs activity. Vital body system is subtle and in general, we may only have internal subjective experiences of the subtle. These subjective experiences cannot demonstrate the minimum requirements of science-weak objectivity and observer invariance- conclusions should be independent of observer effects. Such a situation makes the medicine systems based on QBEFs hard to pass the cast iron tests of mainstream sciences. There are no clear boundaries between alternative and complementary medicines. They may include a variety of treatment procedures that fall out of conventional medicines. Systems of whole medicine may include Ayurveda, Chinese medicine or homeopathic medicine. Some of them may include biologically based herbs or vitamins. Plants embody a rich source of a wide variety of secondary metabolites and many of the conventional drugs that are currently used are derived from herbs. Manipulative body-based treatment procedures may incorporate chiropractic or massage. Popular forms of energy medicines are reiki (biofield therapy), pranic healing, acupuncture and bioelectromagnetic therapies (magnetic, AC or DC fields), hands on healing, paranormal healing, spiritual healing, distance healing, qigong, quantum touch and other modalities. There are so many terms applied to anomalous healing methods that often the individual methods are only just differentiated.

Chinese medicine is quantum medicine using the two-fold quantum wave(yang) and particle (yin)



aspects of chi to classify the vital energy imbalance. It also considers the organ representations of the vital morphogenic fields and is all about keeping yang and yin in balance. Acupuncture is thought to influence vital energy movements. Many lines of scientific and clinical evidence show that extremely tiny energetic stimuli to injured or sick organisms can promote healing. John Chang is reported to be an enigmatic acupuncture practitioner in Indonesia. With his 'qi' energy, Mr Chang is recognised to have great healing powers. He is capable of radiating great quantities of heat through the palm of his hands to the extent this acupuncture practitioner was able to set objects on fire (McMillan,2011).

In Ayurveda, channels of flow of prana are called nadis that revolves around the points of body described as the chakras. There are seven energy centres and they are those places where consciousness simultaneously collapse the vital body and the physical body in the process of which representation of the former is made in the latter (Goswami,2011). Like meridians of Chinese medicine, chakras are nonlocal and are another dimensional layer of information associated with these locations (Drouin, 2014). In other words, both these traditional medicines are centred around QBEFs.

Users of homeopathy claim to benefit from it, but there is no clear evidence of its efficacy over placebo. If the efficacy of homeopathy is comparable to the efficacy of placebo and if placebo treatments are effective in some conditions, then homeopathy as a whole may be considered as a placebo treatment (Antonelli and Donelli, 2018). According to David Shaw, homeopathy is faith healing without religion (Shaw,2014). It is my contention that the QBEF approach to homeopathy would be more productive than Lucadou's pseudo-machine model approach (Lucadou, 2019). Homeopathic system considers healing the memory molecules of diseases embedded in QBEFs once an apparent cure has been achieved and other medical systems pay no attention to such a phenomenon. Reinterpreting homeopathy as a non-deceptive placebo treatment would define certain limits and possibilities of this practice.

"Healing with intent" is referred to as spiritual healing, psychic healing, paranormal healing, hands on healing, non-contact therapeutic touch, natural healing and laying on of hands (Blunel,1999). Shamanic healing, which bears similarities to paranormal healing, involves intense self-hypnosis to induce altered states of consciousness that are sometimes augmented by herbal psychedelics.

Shamanism had a central role in both cultural and personal human evolution, especially in cognitive integration, healing practice, and self-transformation (Krippner and Combs, 2002). The goal of shamanic healing rituals is to perceive and interact with, what the shamans believe to be, a spirit world and channel these transcendental energies into this world. Shamanistic healing includes procedures for altering physiological, psychological, and emotional responses. All these procedures involve QBEFs, quantum consciousness and possibly spiritual consciousness. Healers recognize the possibility of positive and negative energy exchange between people and with the therapists as well. Complementary therapists take cautionary measures to ward off undesirable energy exchange. Such an insight may help to clarify illness process and healing process.

Introducing the term "neurognostic structures" (or innate knowledge modules of consciousness), Winkelman describes shamans as "technicians of consciousness" who utilize "neurognostic" potentials for individual and community healing and for personal and social survival (Winkelman, 2000). According to Winkelman's neuro-phenomenological framework, shamanic experiences involve a shift toward increased slow-wave activity across the frontal lobes, coupled with increased dominance of limbic system activity, and a shift toward parasympathetic dominance in the autonomic nervous system. Shamanic altered states of consciousness may involve the synchronization of left and right frontal lobe EEG activity, along with a general shift toward right brain dominance. Other neurological changes involve upsurges in certain neurochemicals, such as endogenous opiates, as well as stalling of the inhibitory effects of serotonin in the frontal lobes (Winkelman, 2000; Krippner and Combs, 2002). Thus, shamanic healings offer neurological evidence of QBEFs participation.

Alternative and complementary medicines support indirectly the existence of QBEFs. They all essentially work on the principles of QBEFs or take advantage of belief systems associated with it. What is needed is separating the grain from the chaff. At least their beneficial effects prompt us to suspend our disbelief about QBEFs. Despite the triumph of allopathic medicine, there has been lately a resurgence of interest in traditional medicines. By integrating them with allopathic medicine, we may be able to aid recovery and healing.



5. Birth Manifestations

Professor Ian Stevenson's studies of children who remember previous lives and their associated birth marks and birth defects (Stevenson, 1997) have been described in a previous paper in this journal. These birthmarks usually correspond to the wounds the previous personality sustained in their earthly life, and those may have contributed to the death of the person. One third of the 3000 cases he studied demonstrated such birth manifestations. These biological markers challenge the prevailing biologists' view that genetics and environmental factors are enough to explain the differences between human individuals. Stevenson recorded that some of these birthmarks fade with time and a few others become more prominent showing the contribution of the subject's skin to the birthmarks; there is an interaction between bodily cells and subcellular energy system. One third of the 3000 cases he studied demonstrated such birth manifestations. Stevenson recorded that some of the birthmarks fade with time and a few others become more prominent, showing a contribution by the subject's skin to the birthmarks – there is an interaction between bodily cells and subcellular energy system.

Researchers believe that these birthmarks appear because the extracerebral psychophore that is the canvas where the person's memories are collected (the soul's mind) has a blueprint that continues to exist in the post-mortem period. This blueprint influences the creation of the foetus in the next incarnation. QBEFs may be the intermediary in such situations. They may be serving the two-way transmission between the 'blueprint carrier' and the cellular body. This blueprint influences in the creation of the foetus in the next incarnation. QBEFs could be suggested as the intermediary in such situations. It may be serving the two-way transmission between the "blueprint carrier" and the cellular body. In a wider sense, the birth marks and congenital deformities in the Stevensonian cases of children remembering previous lives are analogous to stigmata and can shed light into the process of stigmatisation even though the former is most often permanent. According to Stevenson, the template of the physical body (psychophore) of the deceased individual carries the impression of the fatal wounds, and these later manifest on the physical body of the reincarnated individual.

6. Stigmata

Stigmata are apparent bodily wounds, scars and pain in locations corresponding to the wounds suffered by Jesus Christ during his crucifixion – notably on the hands, wrists and feet. An individual bearing the stigmata is sometimes known as a stigmatist or an experient of stigmata. Fraudulent cases have been recorded. In the few genuine occurrences of stigmata, the mechanism is unclear. The list of experients includes St Francis of Assisi and Padre Pio. Again, QBEFs may be the facilitator, in these instances transmitting the images of the wounds in an unconscious crucifixion. From the research perspective of a "top-down approach," the fundamental confusion is between whether the stigmata have a paranormal origin, or they are a psychosomatic phenomenon. We have supporting evidence to suspend the scepticism over the paranormal origin of the stigmata, and they are derived from a group of observations such as: 1. Telepathic impressions 2. Maternal impressions 3. Birth marks and birth defects of reincarnation type cases 4. Post-near-death experience 5. Medium's taking on the symptoms of a communicator's fatal illness (Pandarakalam, 2002). Autonomic nervous system is supposed to be the mediator for the diversion of the tension building up in the psyche in psychosomatic afflictions; the possibility of QBEFs involvement cannot be ruled out even in the case of psychosomatic and somatopsychic conditions as a mediator between the higher systems and the material body.

Stanley Krippner (2002) has investigated a Brazilian case of stigmata. The experient in this case was raised not as a Christian, adding to the credibility of the case. AmyrAmiden was raised as Muslim and his stigmata have some commonalities with those of other experients. Krippner offers psychophysiological explanations including various types of psychogenic bleeding, post-traumatic bleeding, somatisation and/or dissociation. A telesomatic explanation is also feasible because AmyrAmiden claims that the 'apports' (material objects) he has formed have been produced with the aid of 'caretaker spirits' (Pandarakalam, 2002). Telesomatic manifestation rarely occurs and should be considered in authentic cases of stigmata. It is possible that there may be a variety of stigmata-telesomatic, psychosomatic, and psychophysiological. Whatever the explanation is, ultimately, these images must be translated into the cellular level and that requires a mediator – QBEFs.



7. Automatic thoughts Versus Intuitions and Inspirations

The distinction between QBEFs and consciousness is very vague. Grover and Grover have earlier hypothesized that biological organisms can be viewed as both quantum computers and black hole quantum computers, which organize themselves into quantum and classical modes (Grover & Grover, 2011). In astrophysical terms, material body is analogues to a biological universe where every cell is like a star. In this ideation, the QBEFs are comparable to parallel universes and transportation between them occurs through miniature wormholes. Such hypothetical wormholes may also encompass ideas like Aldous Huxley's "Doors of Perception" (Huxley,1954) and Zizzi and Pregmolato's depiction of "very fast switches from the quantum logic of the unconscious to the classical logic of consciousness" (Zizzi & Pregmolato,2012). Reductionist neuroscientists consider the amygdala to be the unconscious and the hypothalamus to be the conscious mind. In the theatre of mind, they may be serving as platform structures or these brain structures might hypothetically be serving as the seats of wormholes to consciousness existing in another dimension; thereby provide a link to higher functions.

The origin of sudden intuitions that humans experience is unknown, but it may be a proof of the existence of wormholes within human beings. Wormholes between the consciousness of living organisms and the universal consciousness may lead to this intuition (Grover, Kumar, 2014). They are instances of quantum leaps at an unconscious level and the established quantum leaps themselves may be an evidence for wormholes within human beings. There may be different levels of intuition. Humans are capable of intuitions from childhood. One such early intuition is the feeling that humans are autonomous beings, meaning that they have volitional freedom and intentionality. For that to happen, consciousness must be an independent principle and even independent of QBEFs. Creative inspiration may be due to such wormhole communications. Automatic thoughts, intuitions and creative inspirations have phenomenological similarities, but the mechanisms of their productions may vary. Automatic thoughts may be generated by the neurocomputers. They have a superficial logic and are a normal occurrence. They need to be filtered carefully to break off the superficial logicity. Intuitions are habitual and have a quantum psychodynamic. They may have a superficial illogicality and only when closely analyzed become logical. Clair-

voyants intuitions occur to gifted people. Inspirations are less frequent and may have a paranormal component. They are reflective of a higher consciousness and even may have contribution from external consciousness. Grover et al submit that the universe can be portrayed as a blend of rational thinking, intuition and aesthetics (Grover et al, 2014). Sudden occurrence of intuitions of physical illness later to be confirmed by diagnostic methods have been reported and such rare phenomenon point to the possibility that QBEFs may be executing an internal subtle scanning of our material body.

Homeostasis

According to Ruth (1989), man is a fourth-dimensional energy system that functions in a third-dimensional restrictive environment within a five-sensing electronic instrument and has an unconscious that exists in the fourth dimension. Human existence is now recognised as highly dependent on invisible forces that exist together in a cosmic soup and are held together within energy matrixes of varying densities that vibrate at different speeds. Therefore, QBEFs, if they exist, may play a major role in maintaining homeostasis in the human physiology, and it would be of great clinical interest to evaluate their role in immune system functioning.

According to the quantum model of reality, all diseases involve a lowering of frequency, as the long-term effect of continuous stress is deceleration of the frequency of the body. Stress may lead to the disequilibrium of QBEFs to the degree that the body contains more particles and less waves, and this may result in lower energy and information for atoms, molecules, and chemicals to interact in a holistic cooperative manner. That is, the disequilibrium of QBEFs may result in disease. Accordingly, organisms may heal themselves through the mobilisation of QBEFs; that is, a therapeutic intervention may not bring about direct healing, but it may put in place the conditions by which an organism can heal itself through leveraging its own QBEFs. All healing, therefore, may ultimately involve self-healing. Ideally, QBEF studies should be an integral part of human physiology studies. Additionally, homeostasis should be redefined as the state of steady internal physical and chemical conditions maintained by different regulators, including QBEFs.

Integrating quantum consciousness into physiology would be a genuine paradigm shift, far greater in



scope than even the Copernican revolution.

Certain Clinical Thoughts

The concept of QBEFs has great explanatory value and clinical significance. Grover and Kumar (2014) postulate that the nonlocal communication between universal consciousness and living organisms is disrupted during stress. This communication is restored by the appearance of new wormholes on stress alleviation (Grover & Kumar, 2014). Healing involves the formation of a new creative computer program, and such programs are generated in the quantum field and communicate through biological wormholes. The eye movement desensitisation and reprocessing (EMDR) technique, which is practised to relieve psychological stress, may work on such principles. Various types of energy medicine have proven that tiny prods, repeated over time, can alter the dynamics of the organism and jolt it into a healing state. These changes may last after the stimulus is withdrawn. This is the basis of energy medicine and may be the principle behind EMDR. Brain-stimulating techniques, such as transcranial magnetic stimulation, may also involve stabilisation of QBEFs.

The mechanisms underlying certain autoimmune disorders and the ways of counteracting them may be embedded in the QBEFs and their interaction with body cells. Symptoms of bipolar disorder involve a swing between high-energy and low-energy states, and hypothetically, disequilibrium of QBEFs may contribute to its symptom formation; the aetiology may be even an underlying medical condition. The cognitive emptiness and emotional flatness of bipolar depression are suggestive of QBEF involvement. The rapid cycling bipolar disorder can be better explained when QBEFs are thought to be involved rather than if chemical variations alone are attributed as the causative agents for the swings. Metaphorically, the build-up and release of energy is comparable to the automatic filling and emptying of a fluid tank disrupted due to some mechanical errors.

When hereditary factors are clearly involved, a psychiatric condition may be inferred to have an upward aetiology. Symptoms of schizophrenia are linked with the mechanical part of consciousness, and schizophrenia has upward causation (Pandarakalam, 2019). In general, depression may have downward causation. The cognitive aspects of depression have quantum links (Pandarakalam, 2018). Investigators appear to be barking up the

wrong trees. According to Ayurvedic medicine, cancer is “*akapunnu*,” meaning inner dermatitis; the source may be QBEFs. Independent cell phone experiments with rats have proven tumour formation due to chronic electromagnetic assaults on their brain. Such an observation indirectly supports the hypothetical possibility of QBEFs involvement in cancer development. It is not without some underlying logic for the recent trials of acupuncture as an integrative practice on cancer patients. Quantum healers believe that there is a network of intelligence within everybody’s body to defeat cancer, heart diseases etc. Chronic remitting and relapsing diseases may have QBEF involvement with outward manifestations. More lasting cures could be achieved if QBEF concepts are integrated into Allopathic medicine.

Concluding Remarks

Placebo effects form a common ground for allopathic medicine, hypnosis, traditional medicines and alternative medicines. Placebo effects are not psychological artefacts, but a quantum reality. Placebo-controlled drug trials provide scientific proof of this. Experimental evidences for the existence of QBEFs is currently unsatisfactory and we must rely on indirect evidence to hypothesize their reality. Sophisticated scanning techniques may be a distant possibility. Research has confirmed that many of the currently available alternative treatments are statistically indistinguishable from placebo treatments. The mechanisms of traditional medicinal practices such as Ayurveda and Chinese medicine may involve leveraging bioenergy fields and placebo effects (while shamanic healing also involves the principles of hypnosis). Additionally, a scientific analysis and synthesis of the essential principles of homeopathy and traditional medicines has the potential to make substantial breakthroughs in modern medicine. QBEFs could be a back door to the mind, and complementary physical treatments based on QBEFs could influence the healing process of the mind and body. Study of human bioenergy fields may help us to understand the body-mind relationship, and QBEFs may act as an intermediary between them. Establishing QBEFs on a scientific basis would widen the horizons of allopathic medicine.

While reductionists believe that placebo effects point towards the immense power of the brain, the stance of non-reductionists is that these phenomena are suggestive of QBEFs. As we explore the brain-mind-consciousness complex further and dis-



tinguish between quantum and spiritual forces, we may discover that quantum consciousness is the fifth force. Spiritual energy may be a sixth force and it evolves in another dimension and are incorporated into the universal dimension; it is a passerby force. There must be a continuum between QBEFs, quantum consciousness and higher consciousness; there is consciousness upon consciousness.

Universe may encompass two forms of energy, the Ultimate transcendental or original energy and the human system energy which exist energetically within the ultimate vibration (Stang,2019). The proofs of Higgs boson and the Higgs field are close to pointing these realities. The existence of Higgs boson has unified the weak and electromagnetic interactions. The subatomic particle of boson creates the hologram producing the illusion of material form. The energy matrix of subtle energy spectrum point towards the Ultimate Source energy and it should be allowed to connect with the Ultimate Source for healing. Life begins as pure essential system with an expansiveness of consciousness; it is the true self. A self-constructed self is added on to it as life progresses. The essential self is basically connected to the transcendental creative force, but the corruptions of self-constructed self and all its commentary and other external entity forces try to sever the "placental connections" between the pure self and the Ultimate source (Modi,2000), and such a situation thwart the essential self from functioning. True and long-lasting healing should also be aimed at cleansing the rust of life and reinstating the bond between the two energy systems.

According to Ruth Norman, if man is an electronic device formed from an Infinite electronic system, his five-sense body is a lower frequency structure, the essential identity of the sixth and higher seventh sense structures are indicative of the non-atomic nature of man and are revealed through creative works (Ruth,1989). Immanence of God is closely related to God's omnipresence in the universe, though distinct from it. Humans live within God or God lives in every human being. Earthman's body is only the physical appearance of the universe. Interdimensional balance can be achieved only through the realization that each one is part of a larger whole; such a recognition gives a jump start to the healing process. Quantum and spiritual energy are the prime factors that live microscopically and macroscopically within man. Humans are fundamentally spiritual beings with quantum and material wrappings; health is dependent on the harmony of the three spheres of existence. The

extrasomatic subtle energy body system challenges the 'one body concept' of Allopathic medicine.

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