

INFLUENCE OF TRANSPERSONAL (BIOENERGY-BASED) INTERVENTIONS ON HEMATOLOGICAL & BIOCHEMICAL PARAMETERS OF HUMAN BLOOD SAMPLES UNDER IN VITRO CONDITIONS

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ABSTRACT

Background: Bioenergy correction is embedded in many multi-millennial healing traditions & is still being used today. Modern adaptations have attracted interest within integrative & complementary medicine. **Objective:** Within quantum-holographic & quantum-gravitational frameworks, many transpersonal phenomena have been described but remain experimentally underexplored. Research on distant healing intention (DHI), including distant mental interactions with living systems (DMILS), suggests that focused intention may induce small but statistically significant nonlocal effects. Their mechanisms & clinical relevance, however, are unclear. **Methods:** In this pilot *in vitro* study, we examined whether distinct transpersonal healing practices could measurably influence standard hematological parameters in human blood. Blood was drawn from a single healthy 42-year-old female volunteer over 6 consecutive weeks. Each week was assigned to a different transpersonal healer Subgroup (A–F), comprising individual or group practitioners from various spiritual & bioenergy-based traditions. Each weekly sample was divided into an Experimental aliquot, remotely exposed to a healing intervention for 30 minutes on Day 1 & matched, untreated Control aliquot. Both aliquots were analyzed over 4 consecutive days in an accredited clinical laboratory. **Results:** The most pronounced changes in red blood cell count, white blood cell count, and hemoglobin concentration were observed in Experimental samples of Subgroup A, with smaller but consistent modulations across Subgroups B–F, suggesting subgroup-specific transpersonal influences. Additionally, a gradual improvement in several initially suboptimal parameters was observed in the Day-1 Control samples over 6 weeks, consistent with a possible indirect back-influence on the donor. **Conclusion:** Despite limitations related to its single-donor, pilot design, & modest effect sizes, this study provides proof-of-principle evidence for transpersonal bioenergy correction in controlled hematological model & supports further investigation within integrative medicine & transpersonal psychophysiology.

Keywords: *Bioenergycorrection; Distant Healing Intention; Transpersonal Healing; Vital Energy; Integrative Medicine; Hematology; Pilot In Vitro Experiment*

1. INTRODUCTION

Bioenergycorrection as an ancient way of correcting vital energy flow is well known in many multi-millennial traditions, with some modern modifications [1]. On the wave of the expansion of integrative medicine since the mid-1990s, some bioenergy correction techniques have been subjected to scientific research & have been included in the curricula of medical schools [2,3]. Although the vital force theory was discarded in 19th-century organic chemistry, it now seems to re-enter science in a modified form through integrative medicine & transpersonal psychology [2-4].

Within our nonlocal quantum-holographic / quantum-gravitational (QHQG) framework of acupuncture system, consciousness & vital energy, their energy-informational nature has been analyzed from several complementary aspects, including (i) quantum-informational EM component suggested by MRT therapy & formal analogies with Hopfield-like associative quantum-holographic neural networks; (ii) quasi-classical ionic component associated with gap-junction-like structures & altered conductance at acupuncture points; and (iii) transpersonal “exotic” component related to stabilized energy-informational channels of vital energy (qi, ki, prana) praxes [4-7].

From this perspective, acupuncture-based & consciousness-based approaches may be seen as quantum-informational therapies that impose new healing boundary conditions in the energy-state space of acupuncture system / (individual & collective) consciousness, complementing conventional symptomatic interventions at the somatic level. Additionally, if put in the context of the holographic principle [8], according to which each 3D physical system is isomorphic to holographic information imprinted on its 2D surface, then quantum-holographic information on each body could be imprinted in the corresponding surface layer of the astral-mental body of vital energy (aura).

2. ON TRANSPERSONAL BIOENERGYCORRECTION

Further on, in the context of non-local QHQG theoretical framework [4-7], biophysical origin of vital energy (chi / qi / ki, prana / akasha, mana, ka, pneuma / eter / natura medica / anima mundi / vital force, yesod, baraka, uncreated light, Holy Spirit, Heilstrom, Innate Intelligence, bioenergy / biofield) should be sought within EM-ionic-exotic macro-quantum nature of the acupuncture system / consciousness. We emphasize that many transpersonal phenomena associated with consciousness & psychosomatic bioenergetic correction are well-documented phenomenologically, & that their physical explanation should be sought at the very border of the existing scientific paradigm.

Within QHQG theoretical framework, they are of a deeper quantum-gravitational origin (due to Einstein's Principle of equivalence of inertial & gravitational accelerations!) in transitional states of consciousness (from high-dielectric body to low-dielectric out-of-body states!), based on locally generated quantum-entangled wormhole tunnels, quantum-gravitationally stabilized by exotic matter (quantum vacuum fluctuations in strongly curved space-time of wormhole tunnels) with anti-gravitational effects – really observed in transpersonal psycho-kinetic manifestations of vital energy), with exotic aspects of spatio-temporal tunnels & vital energy extended to acupuncture channels (of exotic vacuum-like refractive index! [9]) with transpersonal quantum-entangling inflow of vital energy [4-7,10-14].

It should also be noted that healing effects on the patient's acupuncture system / consciousness are often blocked by quantum-holographically encoded spiritual personal consent to disease as a form of (self) punishment (as evidenced by the subjects' experiences in post-hypnotic regressions), when prayers & self-love for oneself & others are necessary with the aim of ending (self) punishment – thus performing spiritual integration of personality, i.e. dis-entanglement of transpersonal energy blockages, which triggers the process of permanent healing [4-7,10-14].

Such spiritual, indeterministic interventions by introducing new vacuum excitations of vital energy into otherwise deterministic quantum-holographic evolution of collective consciousness (similar to spiritually excited & mentally channeled Ayurvedic, Qigong, Reiki, & modern experiences of local & transpersonal healing, thus non-Schrodinger, imposing necessary, essentially new boundary conditions!) – can permanently remove as a net effect the whole mutual conflict between two people, which is also the greatest source of freedom in optimizing life programs through spiritual cleansing [4-7,10-14].

In particular, let us mention Hawaiian ho'oponopono tradition with remarkable reprogramming of life situations by contextual repenting & forgiving ourselves; or South American ayahuaska & Nigerian Abiku traditions with fascinating spiritual diagnoses & extensions of predestined-short-life programs; or fascinating world bestseller of Anita Moorjani on spiritual changing her life program with return from clinical death & after a few weeks spontaneous healing of terminal phase of cancer; or contemporary spiritual teaching of Bruno Groening with incredible healing channel remained open after his death, in optimizing both individual & collective life programs; or traditional Christian (hesychastic) Mysticism with miraculous healing & optimizing life programs [4-7,10-14].

This significantly contributes to our understanding that even the most severe psychosomatic disorders have their roots in energy-informational blockages, & that healing begins by removing them – first by loving oneself, accepting oneself, & forgiving oneself, which is then manifested by loving others & accepting others (e.g., spiritually dis-entangling / unleashing repentant-forgiving prayer)!

Parallel to our QHQG theoretical development & accompanied phenomenological confirmations, proof-of-principle transpersonal experiments in this field have been conducted with three main classes of protocols: (1) mind-to-mind connections; (2) mind-matter interactions, (3) “distant mental interactions with living systems” (DMILS), in which an agent’s intention is directed at a distant human or biological target [15–19]. Meta-analyses of DMILS studies, including remote intention, remote staring & remote helping protocols, consistently indicate small but statistically significant nonlocal effects on physiological variables such as skin conductance, heart rate & EEG activity (typical effect sizes Cohen’s $d \approx 0.10 - 0.13$).

An extensive empirical literature has emerged on “distant healing intention” (DHI) therapies, i.e., compassionate mental acts directed toward health & well-being of a distant person or organism. Under various labels, DHI assumes that spatial separation between healer & target is not a limiting factor. Clinical trials of DHI in humans yield mixed results, with some reviews reporting small positive effects ($r \approx 0.20$) & others finding no reliable clinical benefit in high-quality randomized controlled trials. Altogether, this literature suggests that nonlocal interactions associated with healing intention are empirically detectable but generally weak & context-sensitive & that their clinical relevance remains an open question.

DHI-type effects have also been reported in non-human models. A recent meta-analysis of “non-whole-human” studies (cells, tissues, plants & animals) found that actively treated samples showed overall improved outcomes compared to controls ($r \approx 0.26$), although average methodological quality of these studies was modest & risk of bias cannot be excluded. Against this background, well-controlled in vitro paradigms using standardized biomedical endpoints may provide useful bridge between phenomenological reports of transpersonal healing & complex clinical settings.

In particular, human blood offers a sensitive integrative indicator of hematological & biochemical status that can be repeatedly sampled & analyzed under controlled laboratory conditions. Motivated by both QHQG theoretical framework & DHI/DMILS empirical literature, the present pilot study explores whether several distinct transpersonal healing practices can measurably influence standard hematological & biochemical parameters in human blood samples & whether such effects might exhibit dynamic patterns over several days, including potential “back-influences” from repeatedly corrected samples onto the donor’s organism.

3. EXPERIMENTAL TRANSPERSONAL PROCEDURE

On this line, the aim of our in vitro experiment was to investigate the effects of transpersonal influences from several healing practices [5] on blood samples collected from the same volunteer over 6 consecutive weeks. An experimental procedure was designed for 6 weeks with 6 successively engaged transpersonal Subgroups, with blood collection from a voluntary 42-year-old woman donor on Monday mornings at the beginning of each week. The blood taken was divided into 2 groups, the Control (which was biochemically usually analyzed every morning during the 4 consecutive days) & the Experimental (which was transpersonally acted upon 30 minutes only during the 1. day, with monitoring standard biochemical changes of that sample during the 4 consecutive days, performed within the official Headquarters Aqualab laboratory, Belgrade, Serbia, by using combined electric impedance, spectrophotometric & indirect potentiometric laboratory methods).

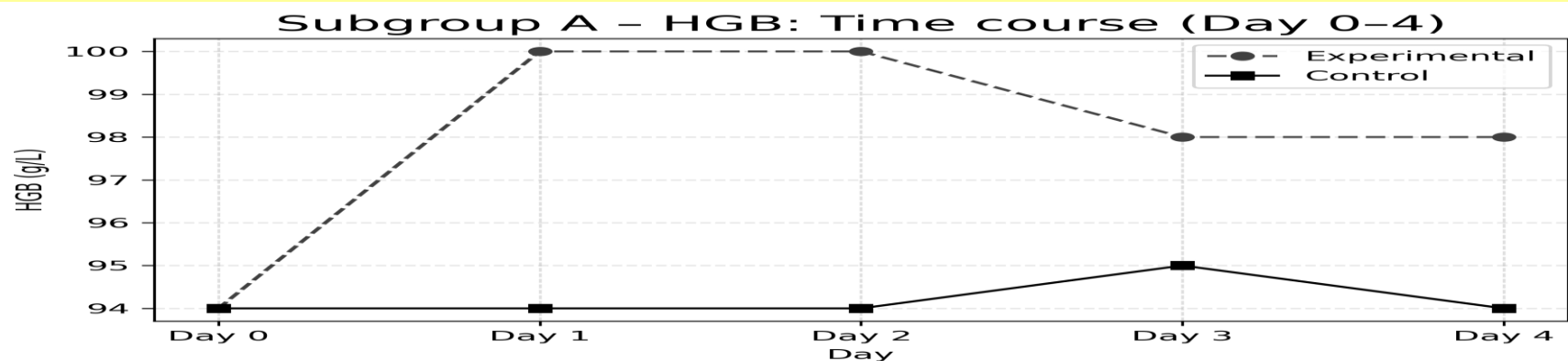
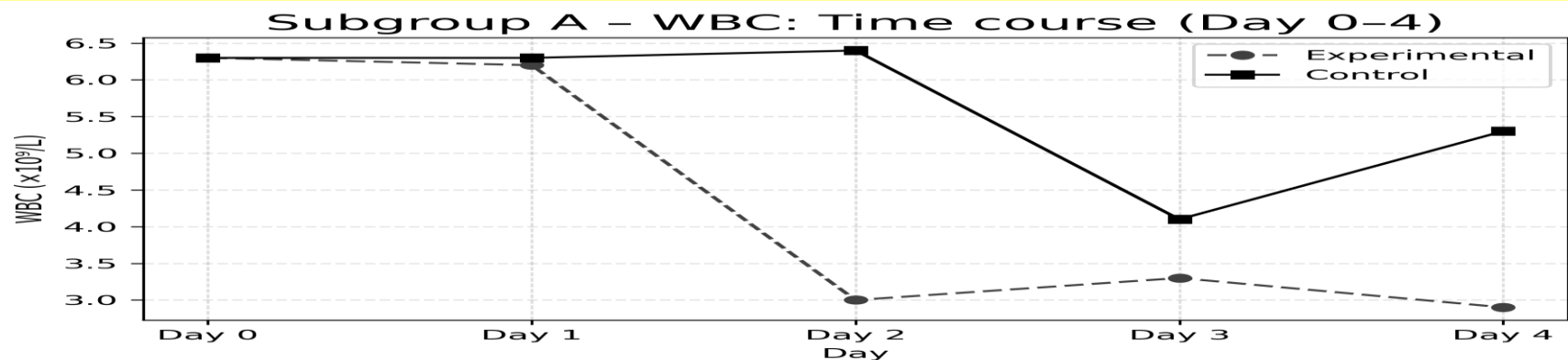
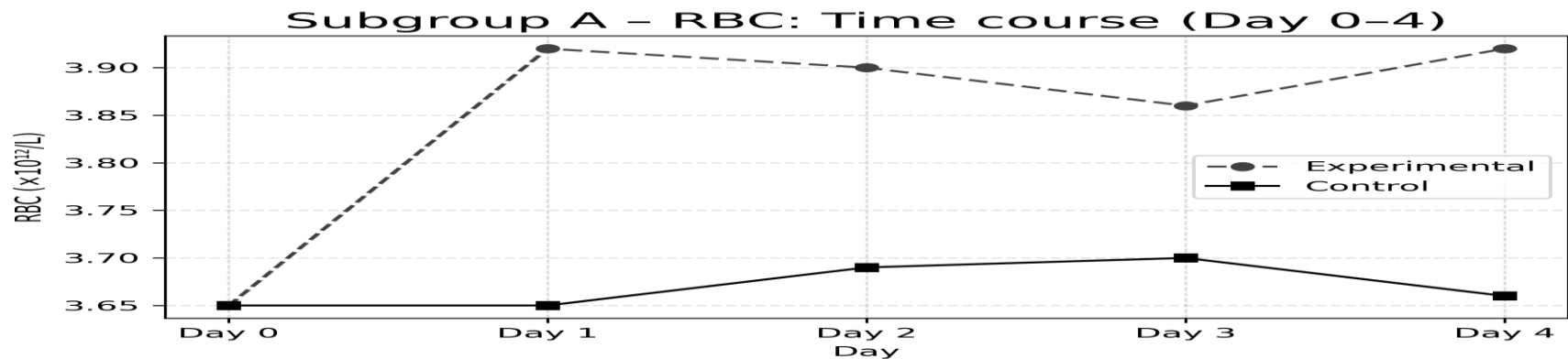
This procedure was applied consecutively for six weeks to all 6 transpersonal Subgroups in turn: Subgroup A (Slavoljub Pavlović, individual spiritual healer, Toronto, Canada), Subgroup B (headed by Nemanja Blagojević, with group of 6 praying practitioners from the Spiritual & Educational Center “Flower of Life“, Belgrade, Serbia), Subgroup C (headed by Ivan Radan, with group of 5 praying practitioners from the Bruno Groening Circle of Friends, Serbia), Subgroup D (headed by Margarita Milenković, with group of 5 Reiki practitioners from the Reiki Association, Serbia), Subgroup E (Mirjana Misev, individual spiritual healer, Belgrade, Serbia), Subgroup F (Vladan Vidović, individual QiGong practitioner, Belgrade, Serbia).

4. DISCUSSION OF TRANSPERSONAL RESULTS

In Figure 1 (a – f) the time course of the most changeable blood parameters (red blood cells (RBC), white blood cells (WBC) & hemoglobin (HGB)) are shown during the monitored 4 days for all Subgroups A – F. Each panel of Figure 1 (a – f) displays the mean values for one of the most changeable parameters (RBC, WBC, HGB) within a given Subgroup in the Experimental (dashed line) & Control (full line) blood samples. Day 0 corresponds to their initial morning values in the Control blood sample, whereas Days 1 – 4 represent their subsequent values in the Control & Experimental samples.

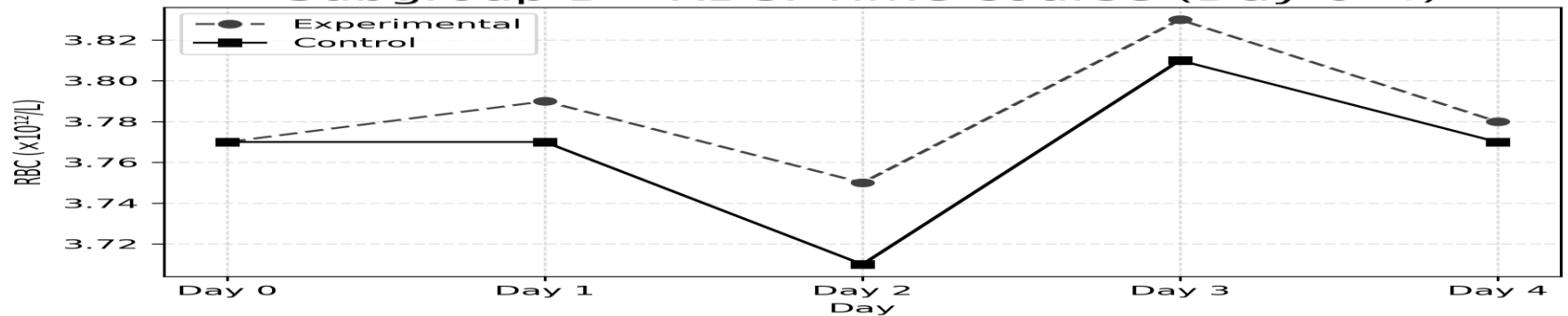
The Experimental samples of Subgroup A showed the most pronounced changes in these blood parameters, whereas those in Subgroups B – F showed less pronounced changes. Nevertheless, their changes in our Pilot experiment demonstrate clear transpersonal influences on the distant blood samples!

Additionally, dynamic changes of the most changeable blood parameters (RBC, WBC, HGB) on Day 1, of the Control blood samples for all Subgroups A – F, are presented in histograms of Figure 2 (a – c). They showed unexpected improvement after several weeks, possibly as a result of accumulated backward influences from the Experimental blood samples on the donor's blood (as a kind of intuitively unexpected residual entanglement between the transpersonally treated Experimental collected blood & the voluntary donor)!

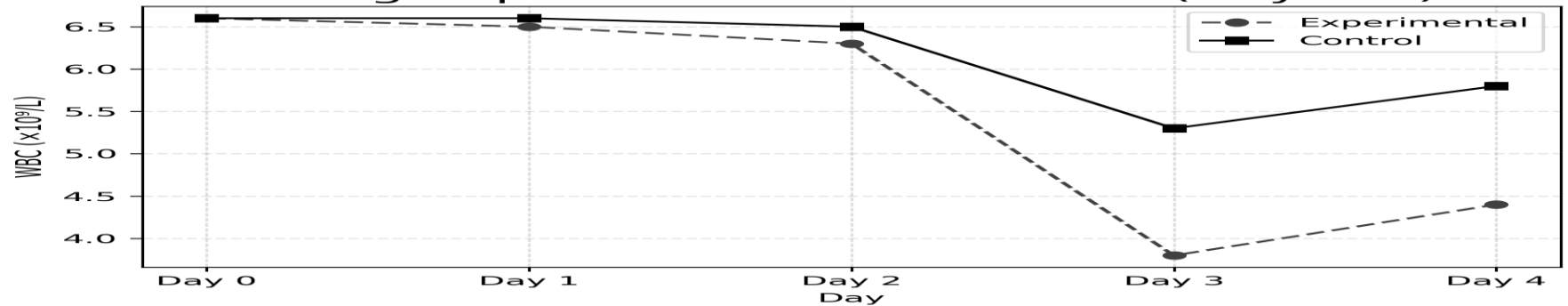


(a)

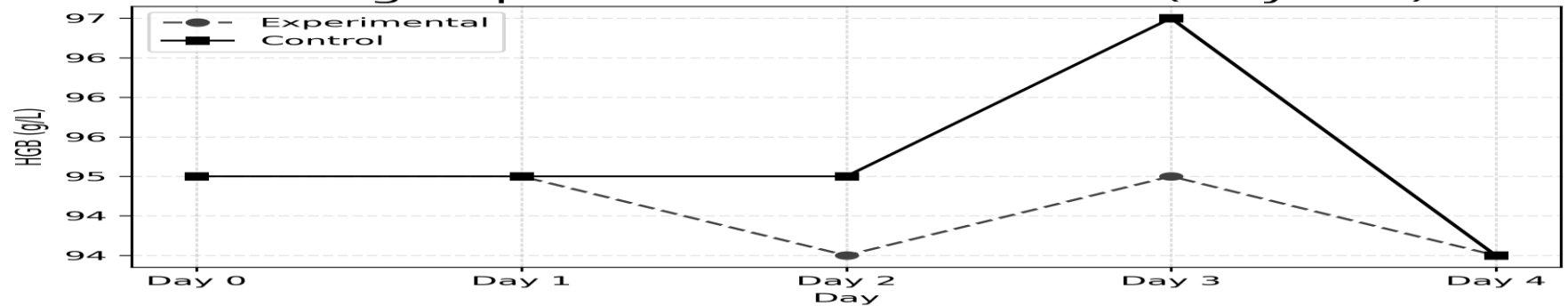
Subgroup B – RBC: Time course (Day 0–4)



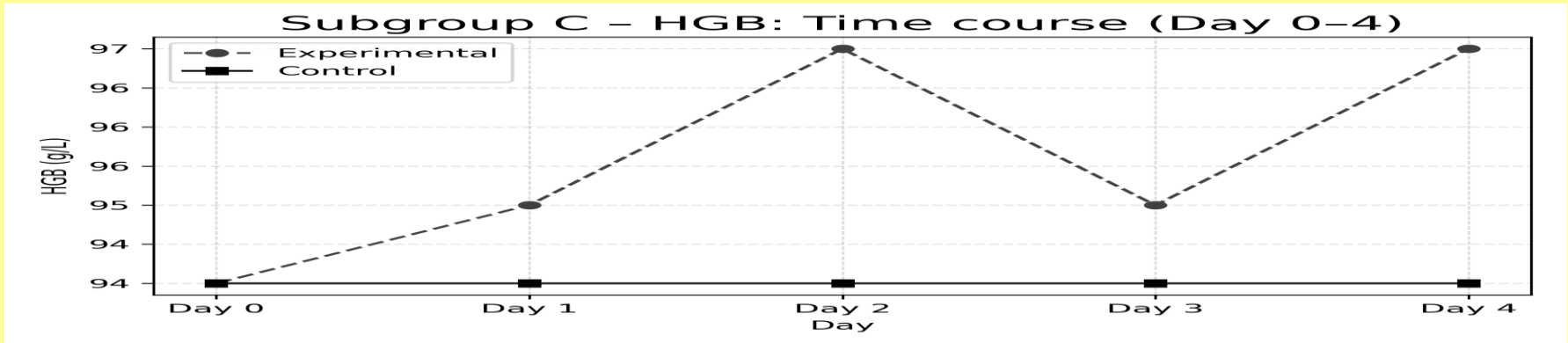
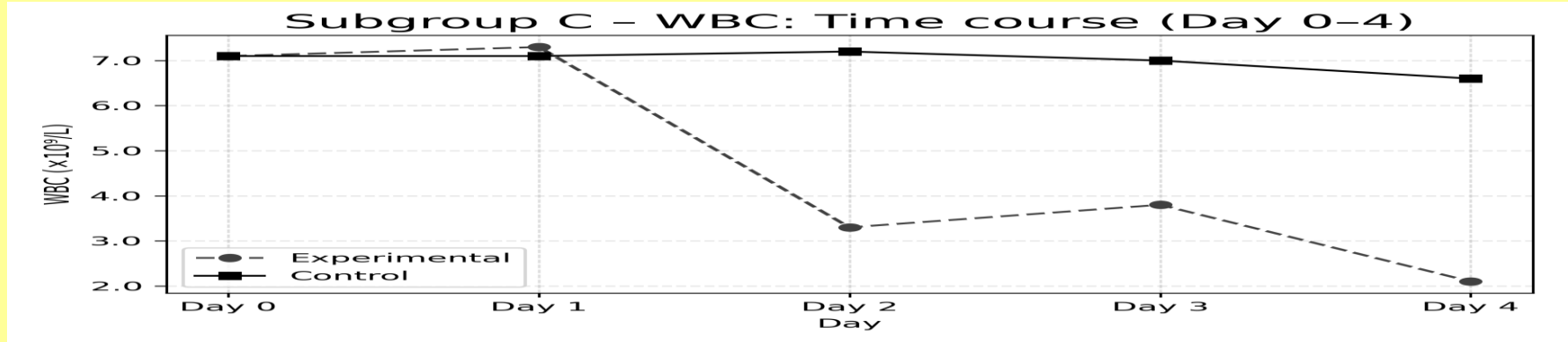
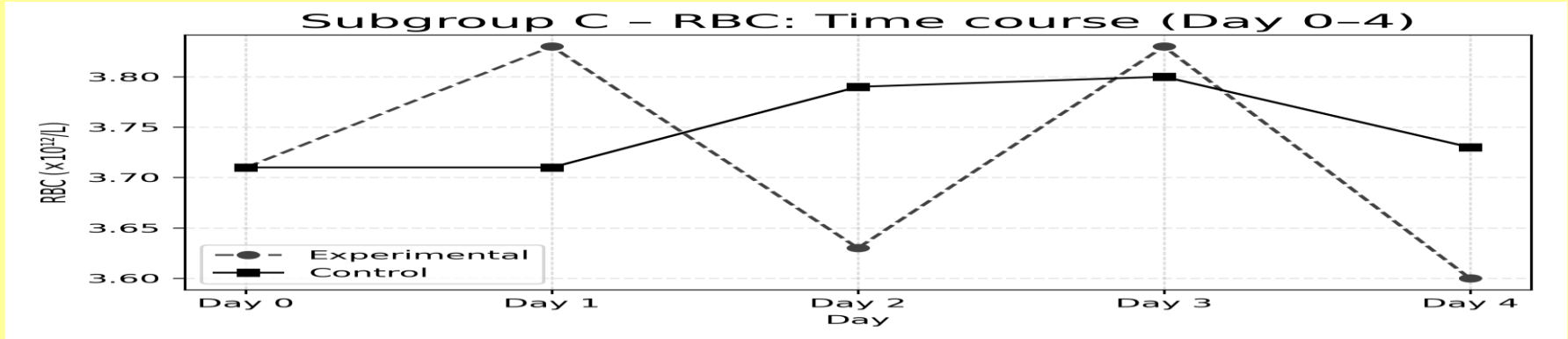
Subgroup B – WBC: Time course (Day 0–4)



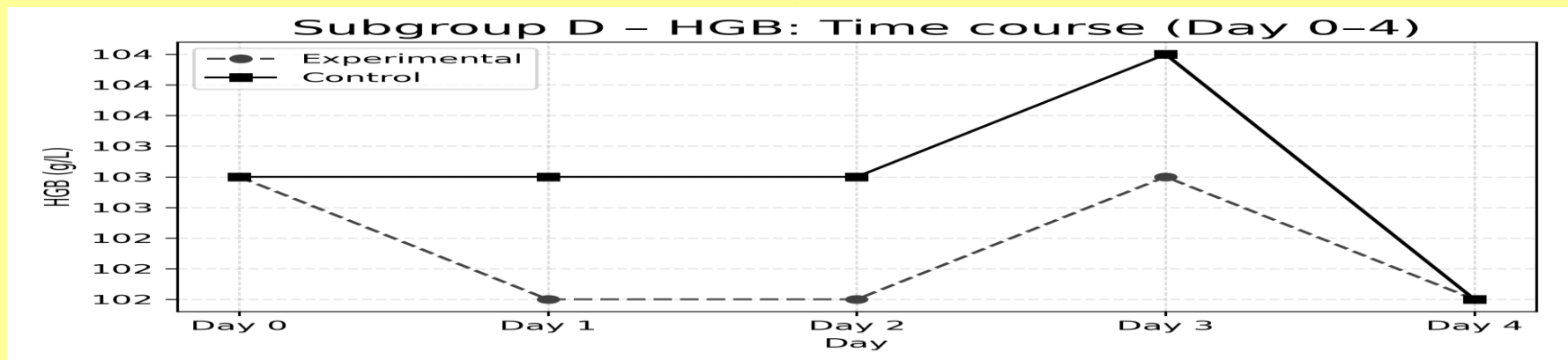
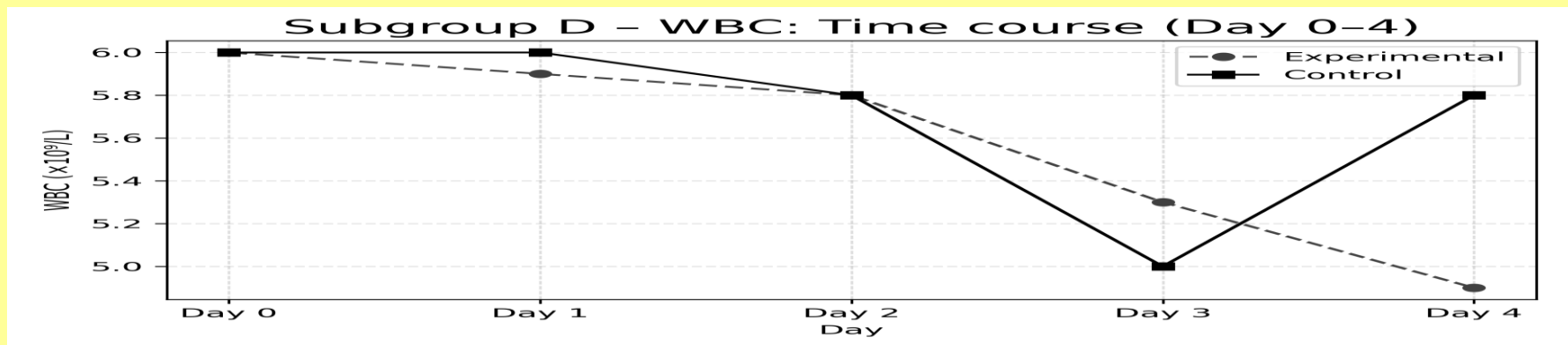
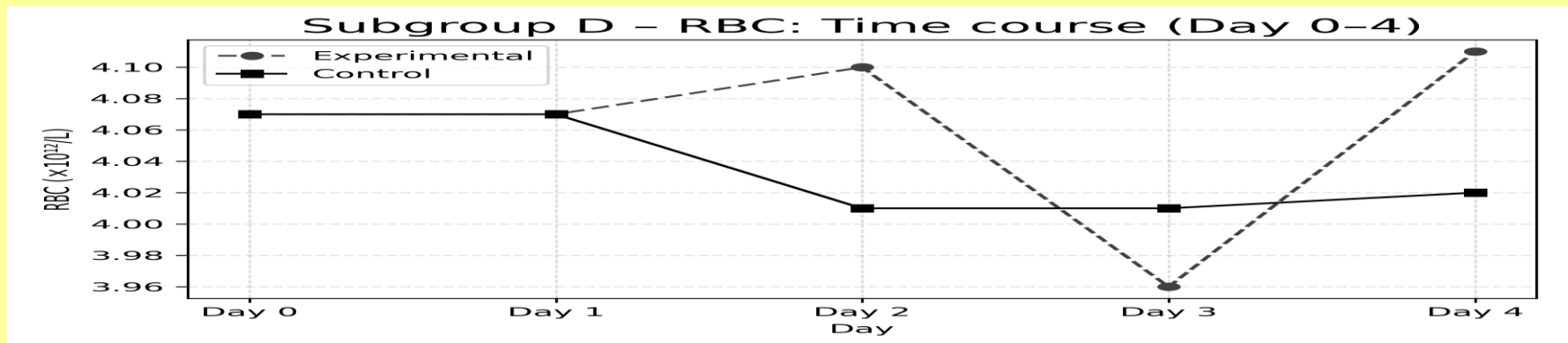
Subgroup B – HGB: Time course (Day 0–4)



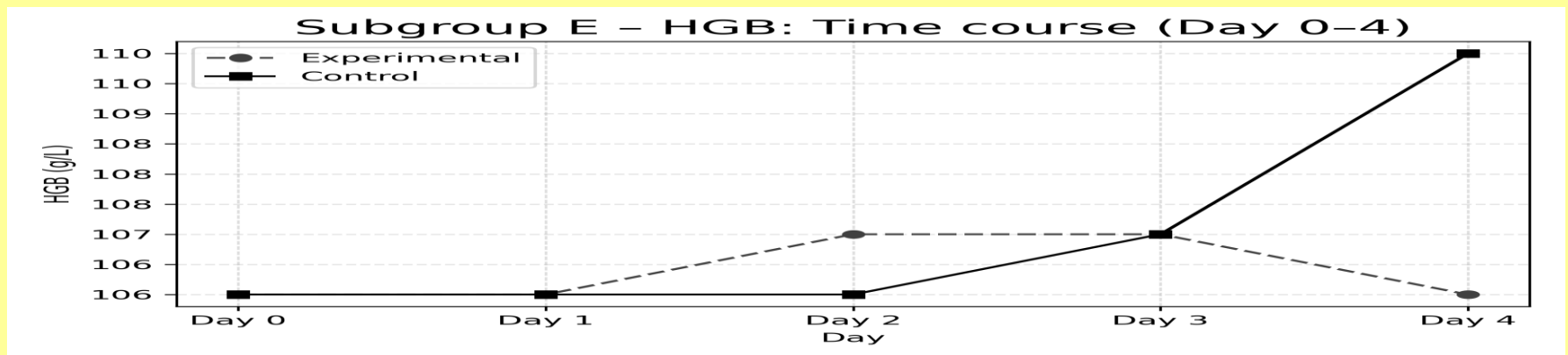
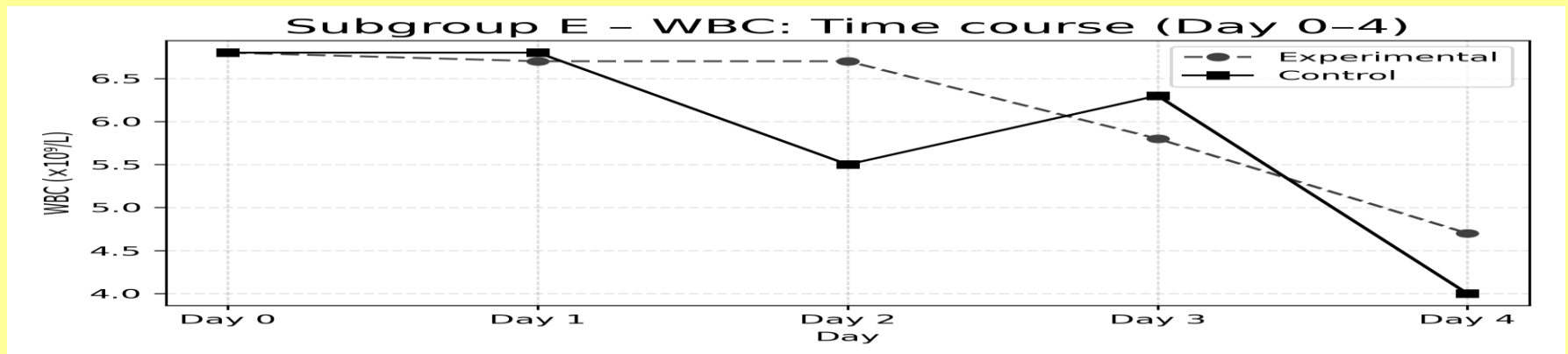
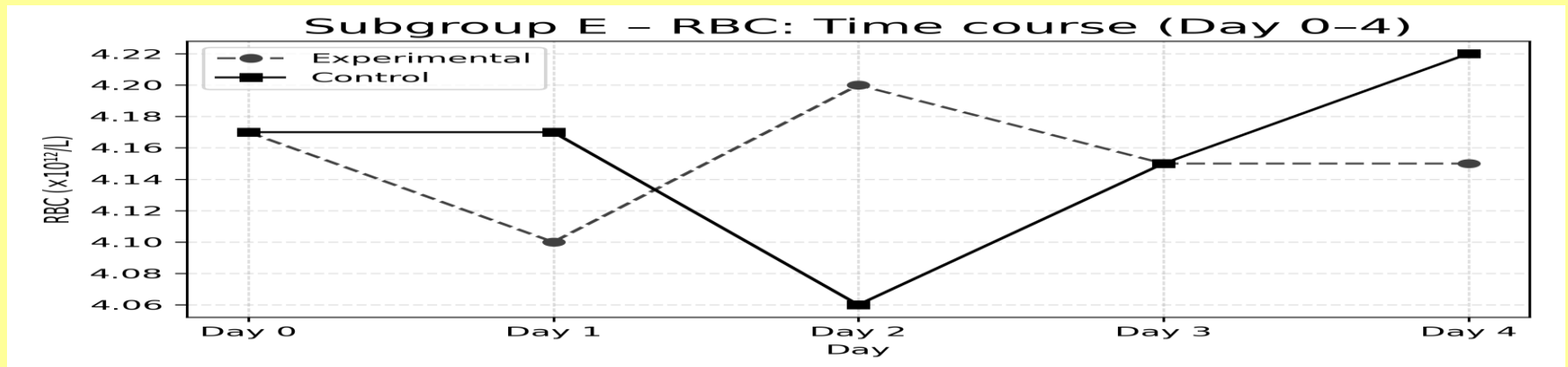
(b)



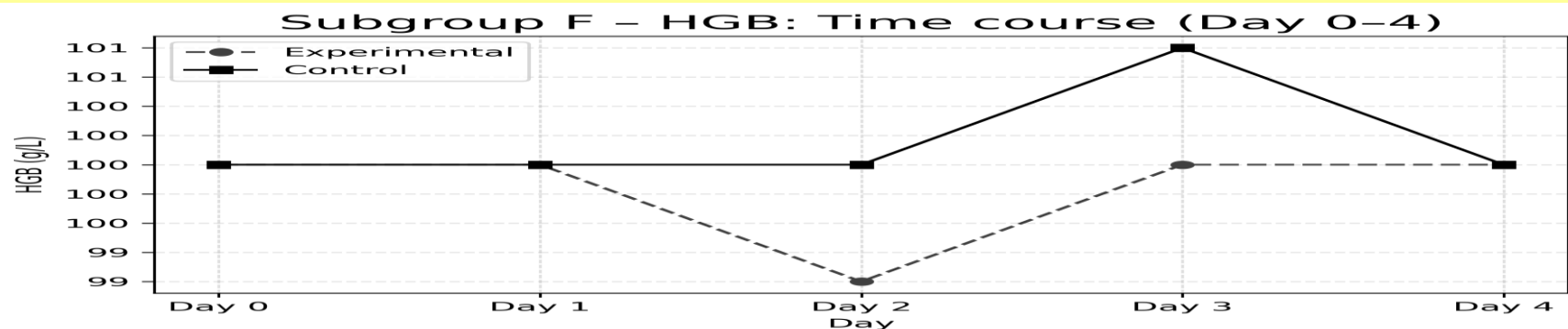
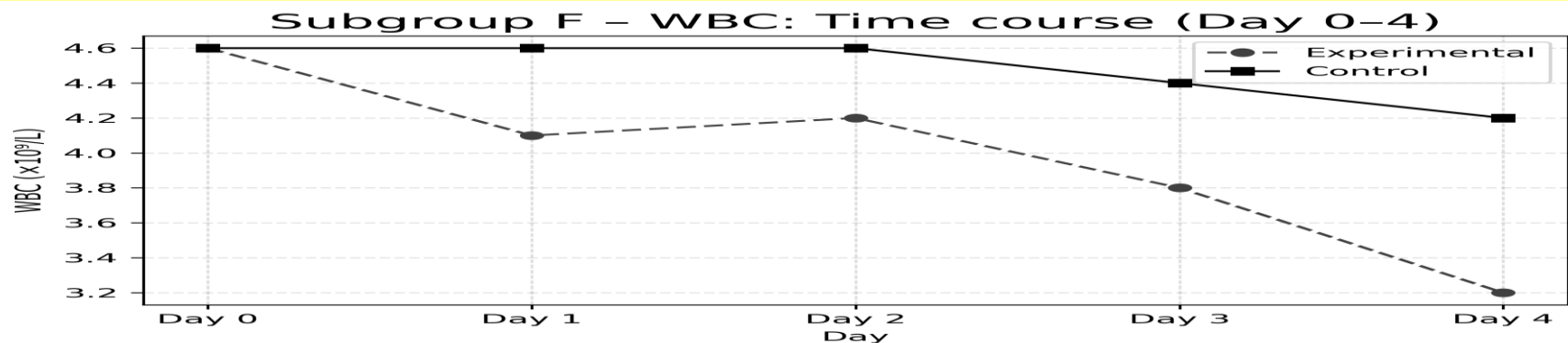
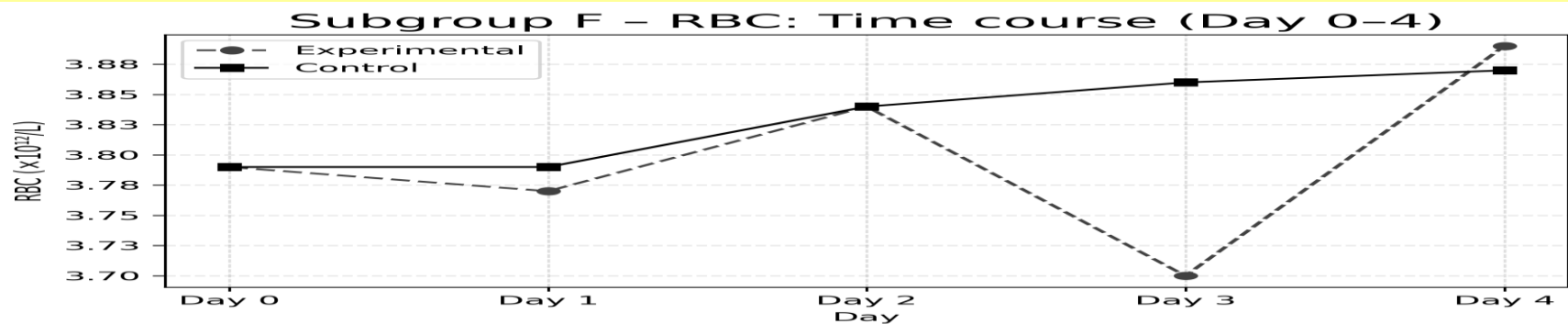
(c)



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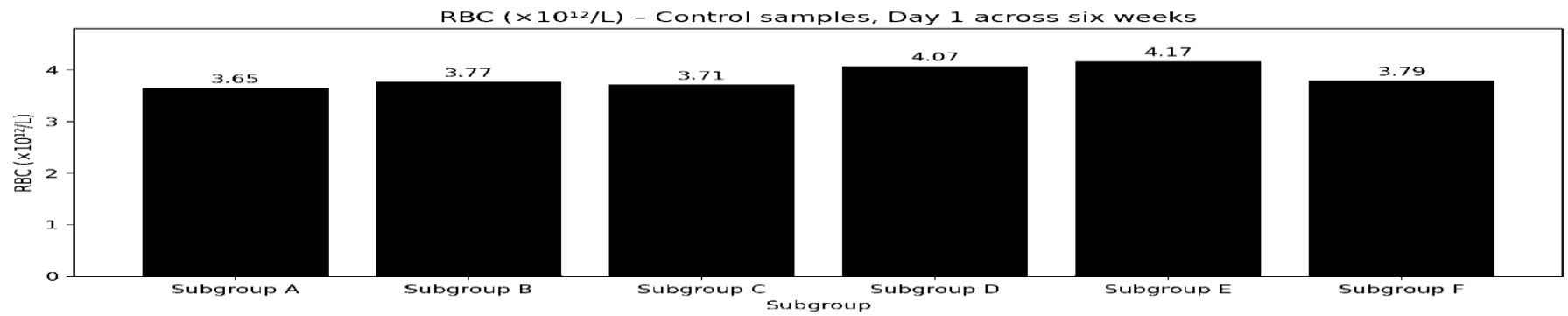


(e)

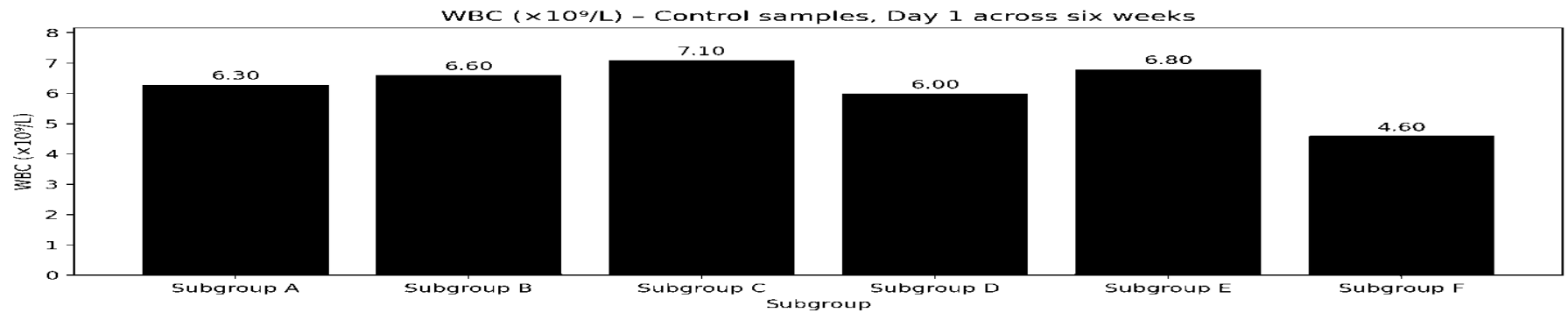


(f)

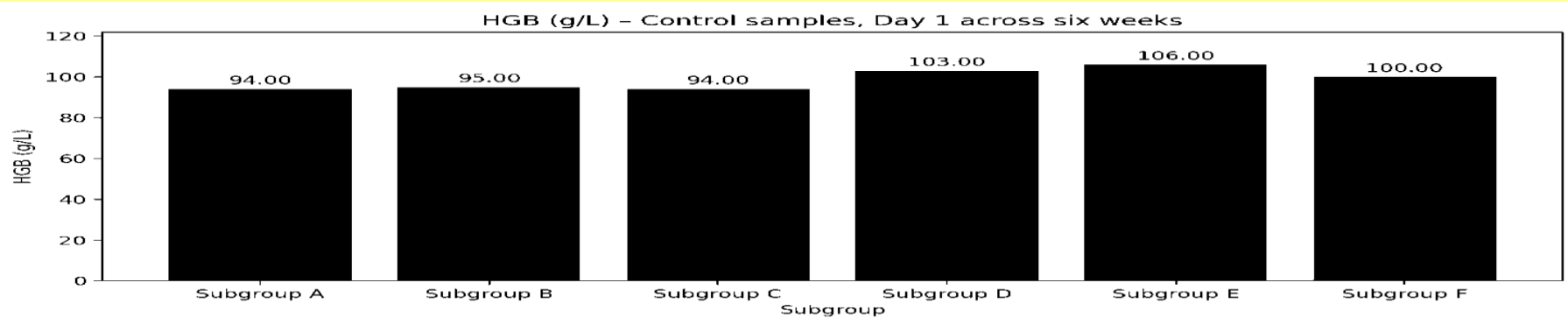
Figure 1 (a – f). Time course of the most changeable blood parameters (RBC, WBC, HGB) in Experimental and Control blood samples during Days 1 – 4, across all Subgroups A – F (Day 0 corresponds to initial measurement of the Control blood sample of the Day 1)



(a)



(b)



(c)

Figure 2 (a - c). Dynamic changes in most changeable blood parameters (RBC, WBC, HGB) of the Control blood sample on Day 1, across all Subgroups A – F

Finally, relative improvement / deterioration of the relevant blood parameters is presented in **Table 1** (which should be compared with **Figure 1 (a - f)** in the Paper), for more comparative details!

Table 1. Matrix of relative changes of relevant blood parameters across all Subgroups (A - F)

Parameter	A	B	C	D	E	F
RBC – Red Blood Cells	HEAL	IMP	WOR	OK	OK	HEAL
WBC – White Blood Cells	WOR	OK	WOR	OK	OK	WOR
HGB – Hemoglobin	IMP	WOR	IMP	WOR	WOR	WOR
HCT – Hematocrit	IMP	IMP	IMP	IMP	WOR	IMP
MCV – Mean Corpuscular Volume	IMP	IMP	HEAL	WOR	HEAL	HEAL
MCH – Mean Corpuscular Hemoglobin	WOR	WOR	HEAL	WOR	IMP	WOR
MCHC – Mean Corpuscular Hemoglobin Conc.	WOR	WOR	OK	WOR	OK	OK
PLT – Platelets	OK	OK	OK	OK	OK	OK
NEU % – Neutrophils %	WOR	WOR	WOR	OK	WOR	WOR
LYM % – Lymphocytes %	WOR	WOR	WOR	HEAL	OK	OK
MON % – Monocytes %	WOR	OK	OK	HEAL	OK	WOR
EOS % – Eosinophils %	WOR	OK	WOR	OK	OK	OK
BAS % – Basophils %	OK	WOR	OK	OK	WOR	OK
Iron (Fe)	IMP	WOR	WOR	IMP	WOR	OK

Legend: HEAL - parameter normalized (out of range → within reference range); IMP - parameter improved but remained outside the reference range; WOR - parameter worsened or became newly pathological; OK - parameter was and remained within the reference range. These qualitative labels (“HEAL”, “IMP”, “WOR”, “OK”) represent descriptive directional changes relative to reference ranges and Control samples, and should not be interpreted as statistically inferred effects.

To provide an integrated overview of the observed experimental outcomes across all parameters, subgroups, and time points, a qualitative categorical summary is shown in Figure 3. Each parameter comparison was classified according to its directional shift relative to corresponding Control sample & to reference range (“improved”, “normalized”, “unchanged”, or “worsened”), based on descriptive criteria rather than inferential statistics. The resulting pie chart illustrates the proportional distribution of these observed categories across the entire dataset & is intended solely as a visual synthesis of trends, without implying statistical inference or population-level generalization.

From a methodological perspective, the present pilot experiment can be situated within the broader DHI / DMILS research landscape as a “non-whole-human” model using clinically relevant hematological & biochemical markers. Systematic reviews & meta-analyses of DMILS experiments with human targets have consistently found small but significant nonlocal effects on physiological variables (Cohen’s $d \approx 0.10 - 0.13$), while analogous studies on cells, tissues, plants & animals report somewhat larger but still modest effects ($r \approx 0.20-0.25$), albeit with variable methodological quality.

Our findings of relatively subtle but directionally consistent modulations in red blood cells, white blood cells, and hemoglobin in the Experimental aliquots – especially pronounced in Subgroup A – are broadly compatible with this pattern, suggesting the presence of small nonlocal influences detectable in a carefully controlled hematological model. In this sense, our pilot experiment contributes an additional proof-of-principle data point to the accumulating evidence for weak but measurable nonlocal interactions associated with healing intention, while highlighting the need for larger, multi-donor studies with pre-registered protocols & rigorous blinding to clarify both the robustness & the boundary conditions of such effects.

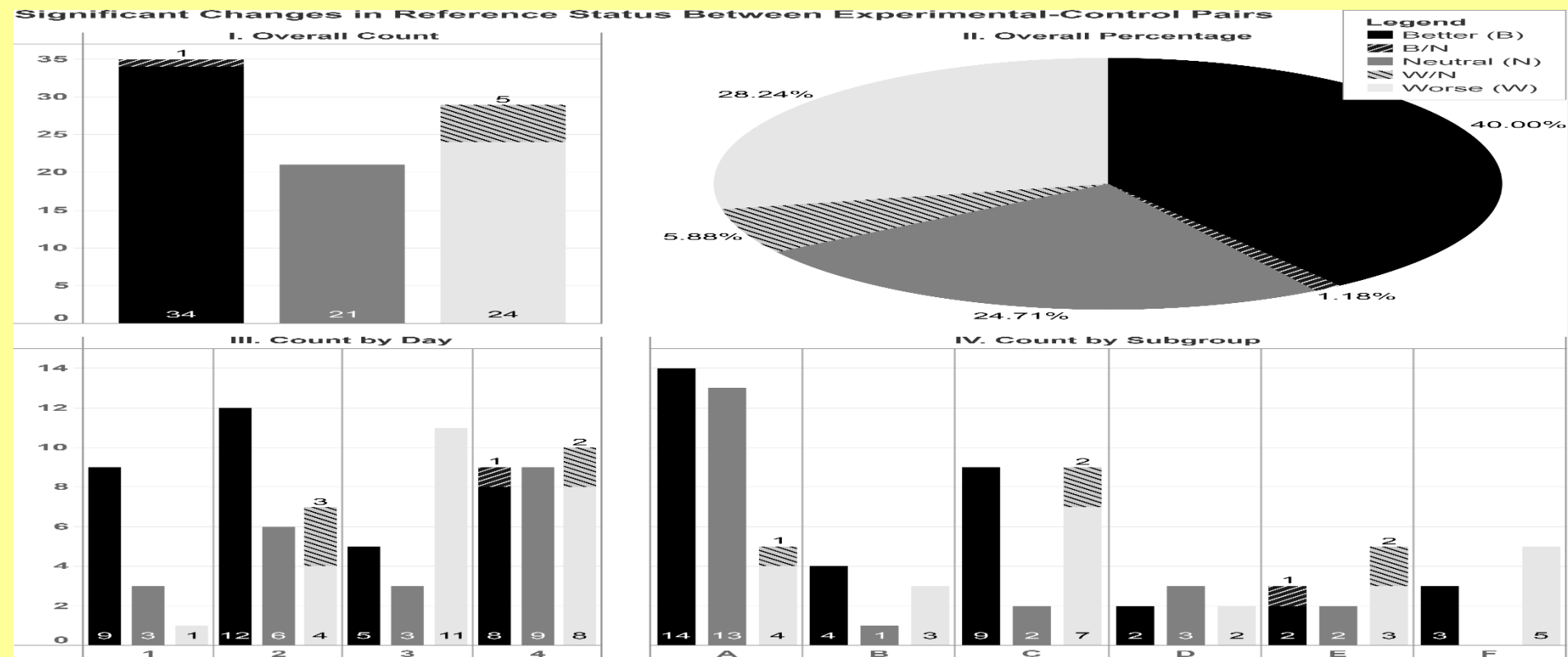


Figure 3. Qualitative analysis of significant changes between experimental and control pairs. Changes are shown in a distinct solid color by their classification as Better or Worse (experiment reference status was improved/diminished, respectively, compared to test reference status), or Neutral (the change is significant but the pair maintain the same reference status). Further, striped colors are used for cusp status changes B/N and W/N (Control straddles the reference range while experiment sits within it and vice versa, respectively). **I.** Significant reference status changes between experimental-control pairs are counted by their classification across the entire experiment. A total of 34 changes are classified as Better with one B/N compared to 24 Worse and 5 W/N. **II.** These counts are converted to percentages to demonstrate the proportion of each classification type. Here 40% of all changes are classified as Better while 28.24% are Worse. **III.** Splitting counts by day we can see a time-dependent relationship from the day of treatment where most changes are classified as Better compared to Day 4 where the classifications are evenly split. **IV.** Splitting counts by subgroup we can see Group A had the greatest success with many more Better classifications than Worse while other subgroups showed more even splits between the two classifications.

5. CONCLUDING REMARKS

In the past few decades, there has been increasing interest in quantum information in (open) macroscopic quantum environments in biology, medicine, and psychology, all the way down to the quantum information roots of the universe. The underlying macroscopic quantum-coherent non-locality addresses the still-open question of the universal validity of quantum-physical laws for macroscopic phenomena as well.

It should be added that transpersonal phenomena associated with consciousness & psychosomatic bioenergetic correction are in vivo phenomenologically well documented. On the other hand, the aim of our in vitro pilot experiment was to investigate the effects of the transpersonal influences of several healing practices on blood samples collected from the volunteer over 6 consecutive weeks.

The effects of this experiment were quite intriguing, confirming the transpersonal nature of bioenergy correction & even implying the long-suspected quintessence origin of the vital force involved in this interaction. So, it seems that our multidisciplinary research at crossroads of psychosomatic integrative medicine & quantum informatics may expand the frontiers of the existing scientific paradigm (as briefly reviewed in ref. [14]).

Acknowledgements

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APPENDIX 1.

**SEVERAL NOTES ON OUR
QUANTUM INFORMATIONAL APPROACH**

SYMPOSIUM OF QUANTUM-INFORMATIONAL MEDICINE QIM 2011: ACUPUNCTURE-BASED & CONSCIOUSNESS-BASED HOLISTIC APPROACHES & TECHNIQUES

Belgrade, 23-25 September 2011

Topics

HOLISTIC MEDICINE & NON-CIRCULAR (PSYCHO/ ENERGY) THERAPIES FOR BALANCING ACUPUNCTURE SYSTEM & INDIVIDUAL CONSCIOUSNESS

- Traditional Acu-Stimulations: Acupuncture/ Moxibustion/ Acupressure •
- Microwave Resonant Therapy • Bioresonant Diagnostics and Therapy •
- Laseropuncture • Magnetotherapy • Segmental Reflex Massage •
- Lithotherapy • Chiropractic • Homeopathy • Chromotherapy • Aromatherapy •
- Aeroionization • Yoga Breathing • Meditation • Autogenic Training • Psychotherapies •

SPIRITUALITY & CIRCULAR (PSYCHO/ ENERGY) THERAPIES FROM ALL RELEVANT META-POSITIONS FOR BALANCING INDIVIDUAL & COLLECTIVE CONSCIOUSNESS

- Prayers • Ho'oponopono • Transpersonal Psychotherapies • Family Constellations •
- Meridian Therapies • Qigong • Reiki • Reconnection • Theta • Shamanistic Traditions •

REVIEWS

In following, the *quantum-informational framework for macrophenomena in quantum biology, quantum medicine & quantum psychology* will be briefly discussed, including the long-open problems of the biophysical nature of psychosomatic acupuncture system, consciousness & vital energy, which will be organized through several Overviews from ref. [14]):

REVIEW 1. QUANTUM BIOLOGY – BIOMOLECULES AND CELLS

- (1) quantum-decoherent approach of biomolecular folding & biorecognition;
- (2) cellular Hopfield-like quantum-holographic associative neural network.

REVIEW 2. QUANTUM MEDICINE – THREE FRONT LINES

- (1) spirituality & circular (psycho / energy) therapies from all meta-positions;
- (2) (quantum) holistic medicine & non-circular (psycho / energy) therapies;
- (3) conventional symptomatic medicine.

REVIEW 3. QUANTUM PSYCHOLOGY – TWO COGNITIVE MODES

- (1) weakly-coupled quantum-entangled / quantum-coherent spiritual-creative direct;
- (2) strongly-coupled classical-reduced perceptive-rational indirect.

REVIEW 4. PSYCHOSOMATIC ENERGY-INFORMATIONAL SYSTEM – THREE ASPECTS

- (1) quasi-classical ionic aspect of acupuncture system;
- (2) quantum-informational electromagnetic aspect of acupuncture system / consciousness;
- (3) exotic transpersonal aspect of acupuncture system / consciousness / vital energy.

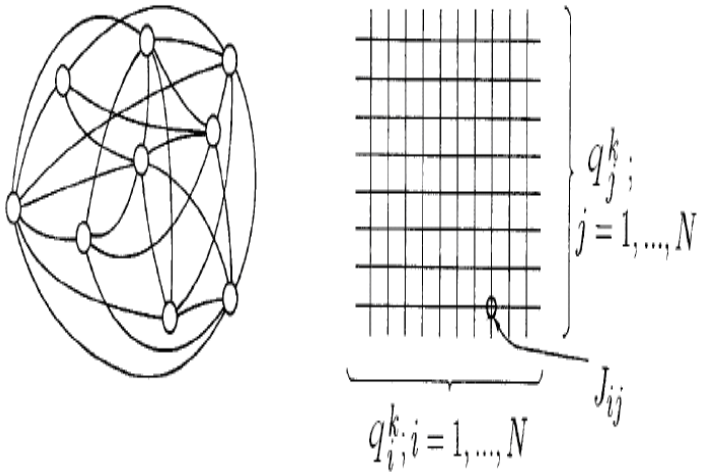


Figure A1(a). Diagram of Hopfield's neural network (top left) & corresponding memory matrix $\mathbf{J}$ (top right).

$$J_{ij} = \sum_{l=1}^P q_i^{k_l} q_j^{k_l}$$

$$q_i = \sum_{j=1}^N J_{ij} q_j$$

$$E_K = -\frac{1}{2} \sum_{i=1}^N \sum_{j=1}^N J_{ij} q_i q_j$$

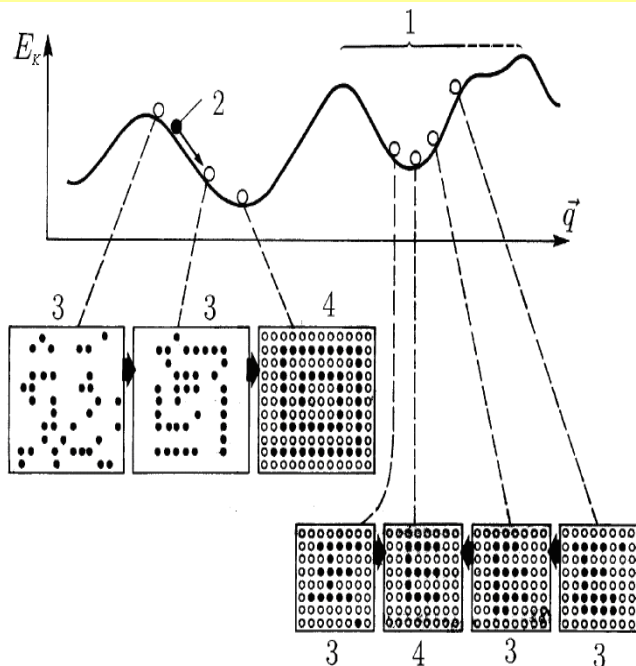


Figure A1(b). Energy-configuration hypersurface of Hopfield's neural network (below left):

- 1 - Basin of attraction;
- 2 - Momentary state of the network;
- 3 - Nonstable configuration;
- 4 - Attractor pattern, tj. stable configuration;

where

Peruš's Classical vs. Quantum analogies:

$$q \Leftrightarrow \phi, \quad q^{k_l} \Leftrightarrow \phi^{k_l}, \quad J \Leftrightarrow G$$

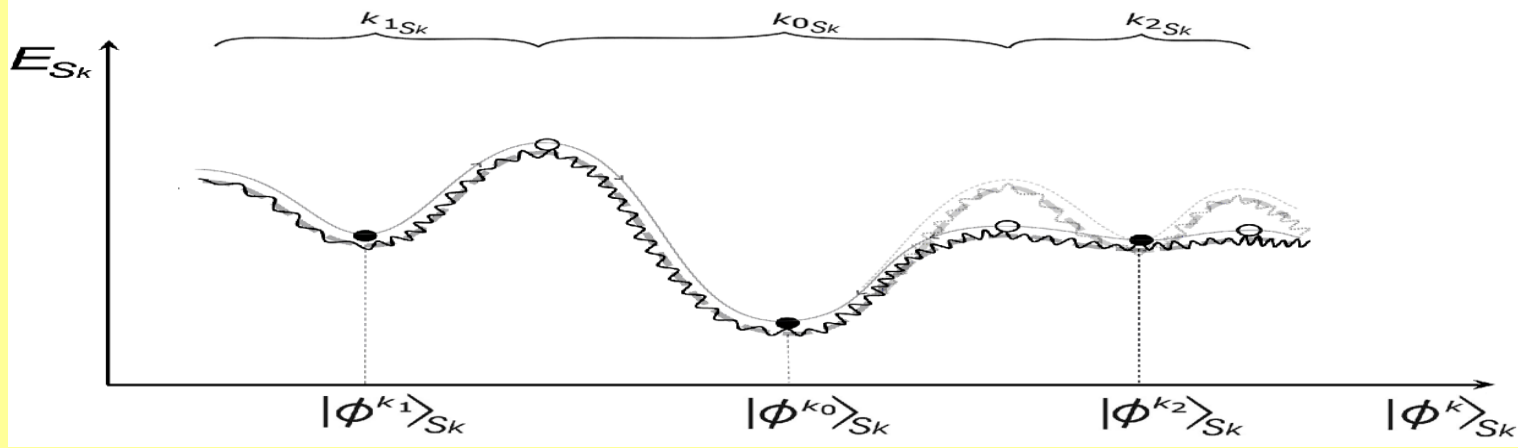


Figure A2. Schematic presentation of the adaptation of memory attractors (states) in the energy-state ($E_{S_k}(\phi^k)$) hypersurface of the **quantum-holographic memory** of various hierarchical levels of biological **macroscopic open quantum systems** S_k (*local cell's biomolecular protein-target, local body's energy-informational system-consciousness, or nonlocal out-of-body consciousness-collective consciousness*):

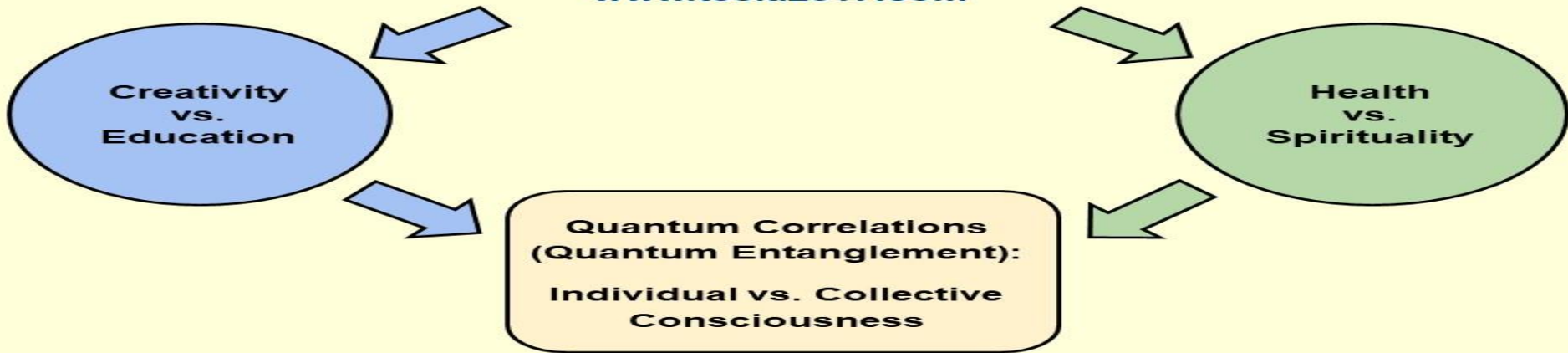
$$G(r_2, t_2; r_1, t_1) = \sum_{i=1}^P \phi^{k_i}(r_2, t_2) \phi^{k_i*}(r_1, t_1) = \sum_{i=1}^P A_{k_i}(r_2, t_2) A_{k_i}^*(r_1, t_1) e^{\frac{i}{\hbar}(\alpha_{k_i}(r_2, t_2) - \alpha_{k_i}(r_1, t_1))}$$

It should be pointed out that Nature presumably has chosen elegant **biological room-temperature solution for quantum-holographic information processing**, permanently fluctuating between quantum-coherent $|\phi^k(t)\rangle_{S_k} =$

$\sum_i c_{k_i}(t) |\phi^{k_i}\rangle_{S_k}$ and classically-reduced $\hat{\rho}_{S_k}^k(t) = \sum_i |c_{k_i}(t)|^2 |\phi^{k_i}\rangle_{S_k S_k} \langle \phi^{k_i}|$ states of the biological macroscopic open quantum system S_k , via non-stationary bioresonance interactions with out-of-body farther environment and through decoherence by bodily closer environment. Thus **quantum neural holography** combined with **quantum decoherence** might be very significant element of the **feedback bioinformatics**, from the level of cell – to the level of organism – and further to the level of collective consciousness, with **backward dynamic influence on the expression of genes**. This implies **necessity** of quantum-informational successive **bioresonant balancing** of all unwilling side memory attractors (like ϕ^{k_2} in the Figure), which would cause development of **psychosomatic diseases** on the individual level, and **interpersonal fights** in this and further generations on the collective level.

Tesla's Inspired Holistic Ideas

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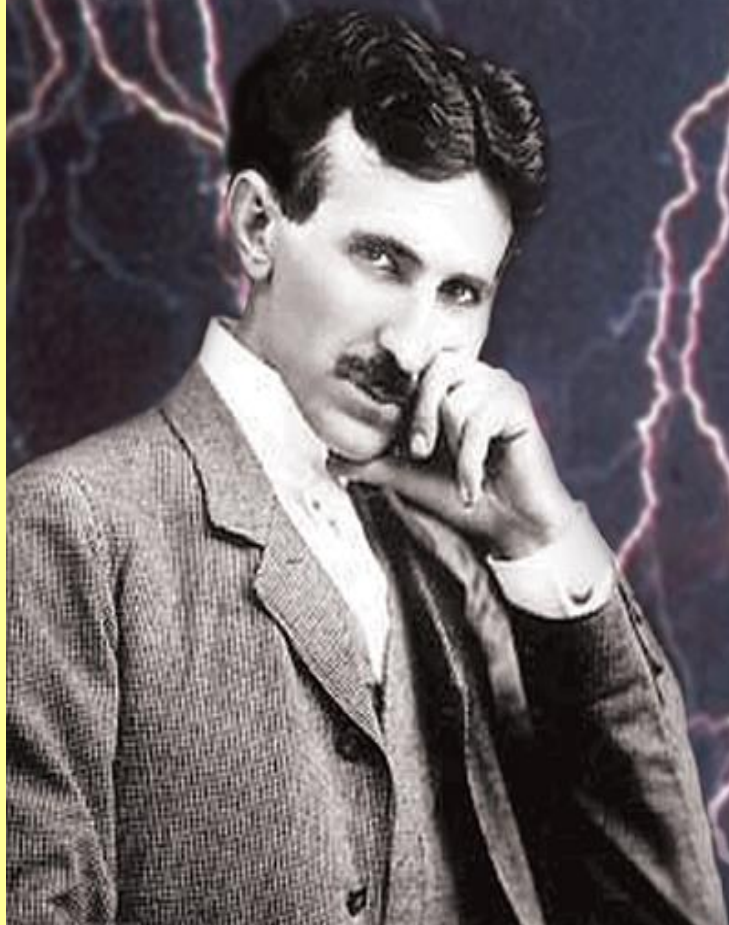
$$|\Phi\rangle_S |\Psi\rangle_E \rightarrow \sum_i c_i |\Phi_i\rangle_S |\Psi_i\rangle_E \xrightarrow{p_j = |c_j|^2 \approx 1} |\Phi_j\rangle_S |\Psi_j\rangle_E$$

Figure A.3(a) (left-hand side). Symbolic representation of **mentally controlled-directed increasing of macro-quantum correlations of interacting individual consciousness (S) & collective consciousness / environment (E) in transpersonally-entangling creative phases** (left-hand side of image & formula above, with previous mental increase of focused weight contribution c_j & subsequent (practically non-stochastic) classically-reduced selection of this dominant weight contribution c_j).

Figure A.3(b) (right-hand side) Symbolic representation of **mentally controlled-systemic decreasing of macro-quantum correlations of interacting individual consciousness (S) & collective consciousness / environment (E) in transpersonally-disentangling spiritual phases** (right-hand side of image & formula above), with previously systemic mental decreasing of almost all weight contributions c_i & subsequent (practically non-stochastic) classically-reduced selection of remaining weight contribution c_j (related to mentally-embedded address on founder of corresponding mystical tradition).

My Inventions

by:
Nikola Tesla



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Author is dealing with the research and educational work in the fields of integrative biophysics, quantum medicine and quantum-holographic informatics for many years, and as a connoisseur of classical and quantum physics explains biophysical phenomena and provide arguments for the application of integrative biophysical diagnostic and therapeutic methods and techniques in medicine.

Bearing in mind that contemporary research indicates the increasing presence of psychosomatic factors in the origin of many diseases, then the inclusion of psychological phenomena (consciousness, stress, etc.) oriented to the treatment of man as a whole and not of diseases as symptoms, represents a shift in the diagnosis and treatment of human health, in respect to the classical medicine. The book also makes a shift in the field of traditional medicine, as it provides a satisfactory explanation for the application of some traditional methods and techniques...

The monograph is of the multidisciplinary character and is primarily dedicated to open-minded physicians who practice classical and traditional medicine, to specialists and students of the postgraduate studies in biophysics and biomedical engineering, as well as to all those interested in the application of new scientific methods and techniques in medicine...

– Djuro Koruga

According to the structure and contents, the book can be equally classified into a higher educational textbook, but also into a very advanced and specific (by issue and research approach) multidisciplinary (physics, biology, medicine, philosophy) scientific monograph.

The book offers a broader and deeper information about hot development of the biophysics of consciousness at the end of the 20th century and the beginning of the 21st century, which is not only of fundamental importance, but allows a wide implementation, from the genetic to biomedical engineering. In order to understand physics of living nature the whole tool of modern theoretical physics is used, in all levels: from molecular, via cellular and over-cellular, to bodily level, including the biosphere as a whole. Therefore, to help readers the appendices on quantum mechanics, quantum chemistry, and quantum informatics are added.

Generally speaking, before the readers is a unique book-monograph...

– Jovan Šetrajčić



Dejan Raković

INTEGRATIVE BIOPHYSICS, QUANTUM MEDICINE AND QUANTUM-HOLOGRAPHIC INFORMATICS:
PSYCHOSOMATIC-COGNITIVE IMPLICATIONS

Dejan Raković

INTEGRATIVE BIOPHYSICS, QUANTUM MEDICINE AND QUANTUM-HOLOGRAPHIC INFORMATICS: PSYCHOSOMATIC-COGNITIVE IMPLICATIONS

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Belgrade 2009**

APPENDIX 2.

**TRENDS TOWARDS QUANTUM-
HOLOGRAPHIC PSYCHOSOMATIC
PARADIGM**

QUANTUM-INFORMATIONAL BIOMEDICINE & QUANTUM INFORMATICS: RELATIONSHIPS & PERSPECTIVES

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(NON-LOCAL NATURE OF BODY'S ENERGY-INFORMATIONAL SYSTEM & PSYCHOSOMATICS;
NON-LOCAL NATURE OF CONSCIOUSNESS & CREATIVITY AND SPIRITUALITY;
TRANSPERSONAL INTERACTIONS & SPATIO-TEMPORAL QUANTUM ENTANGLEMENT IN
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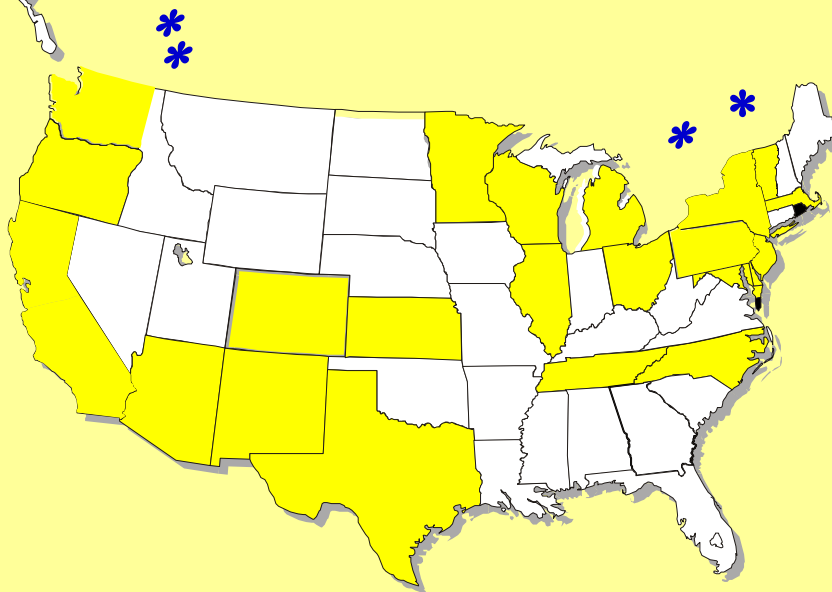
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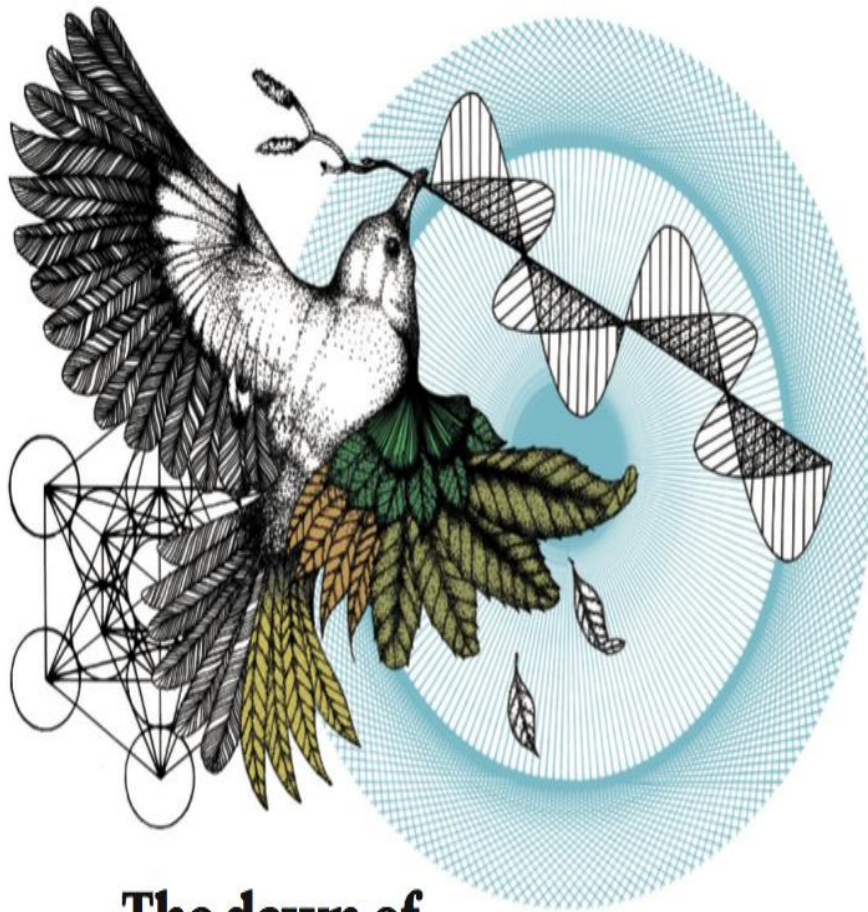
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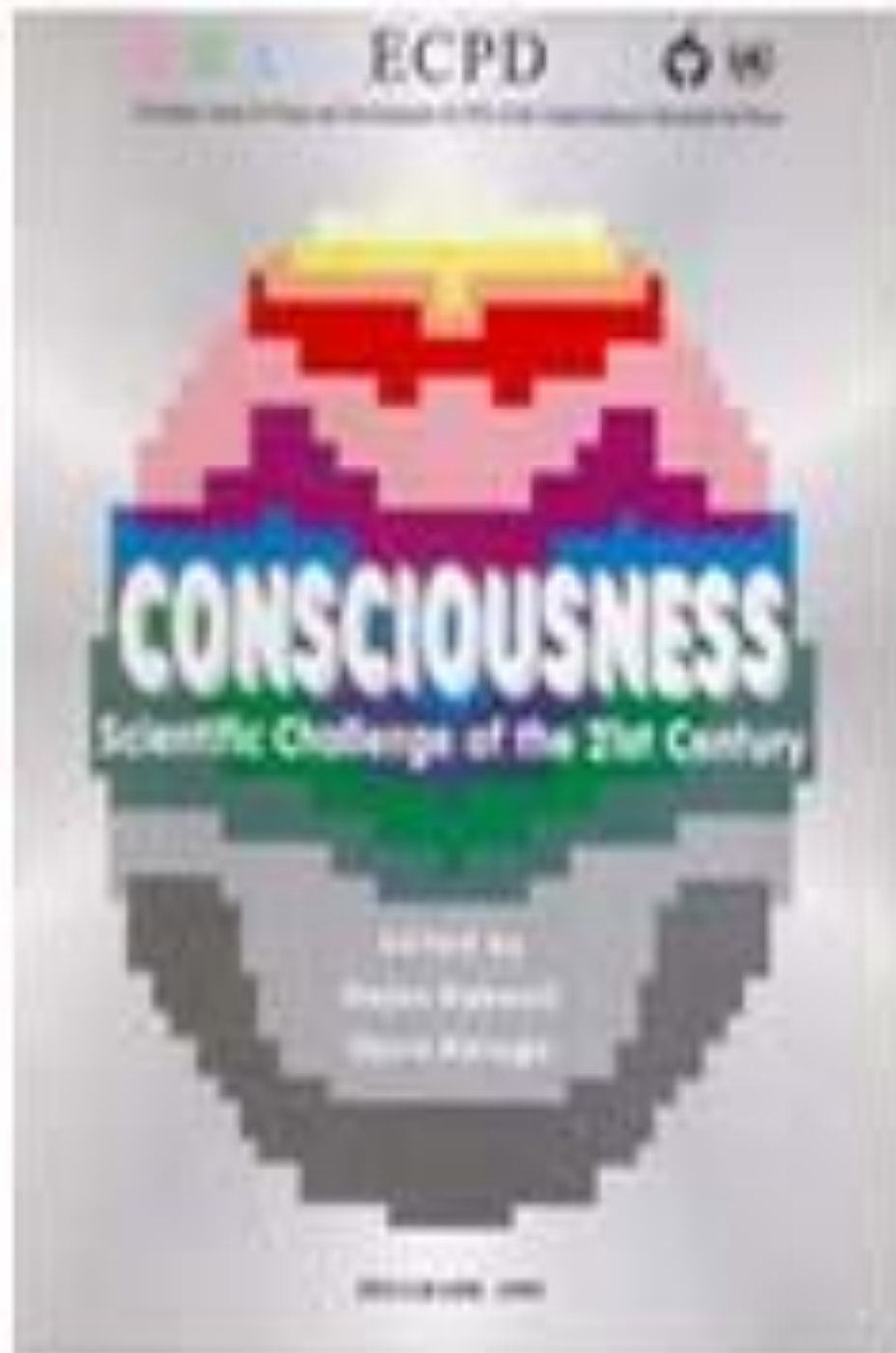
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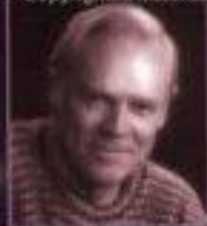
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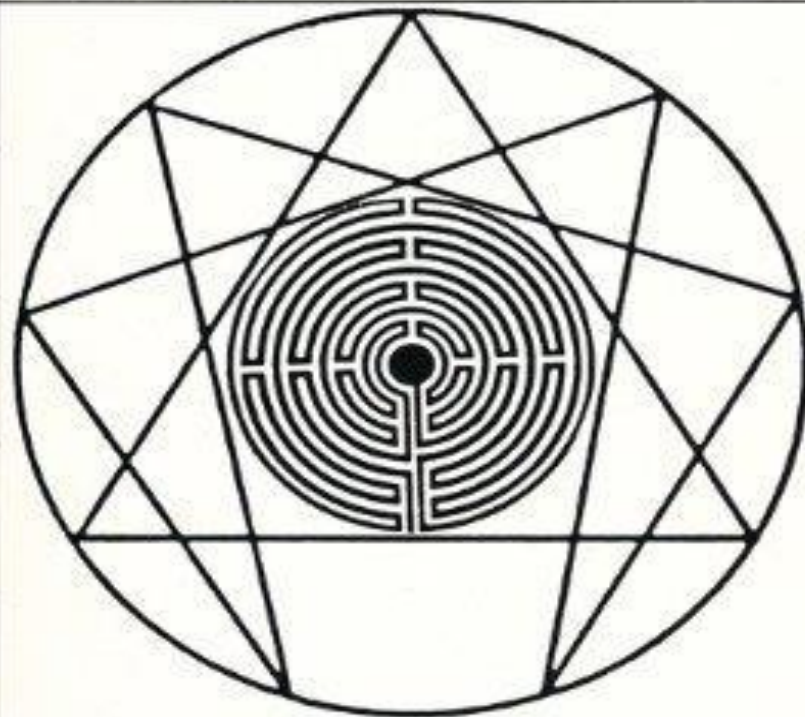
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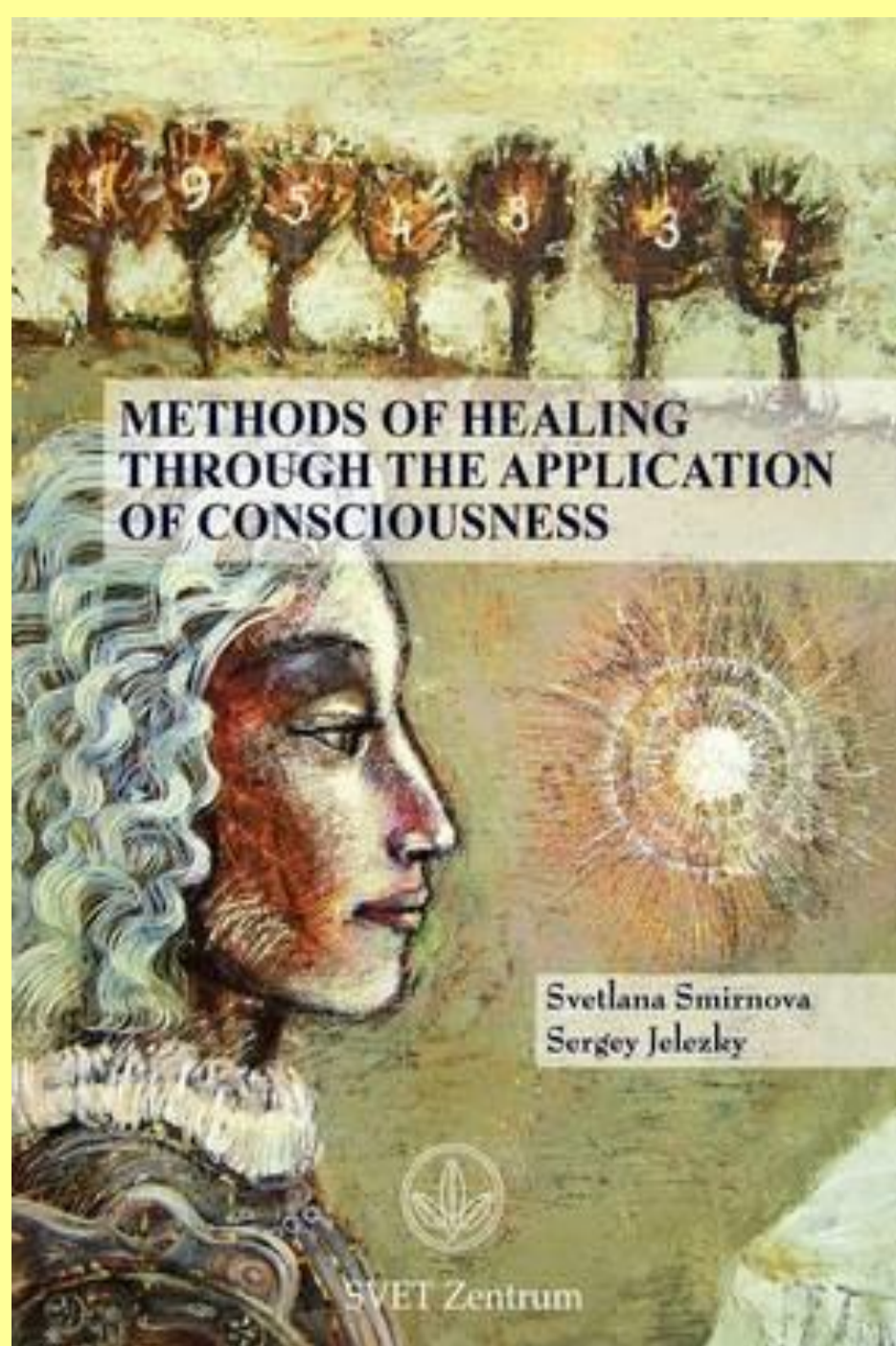
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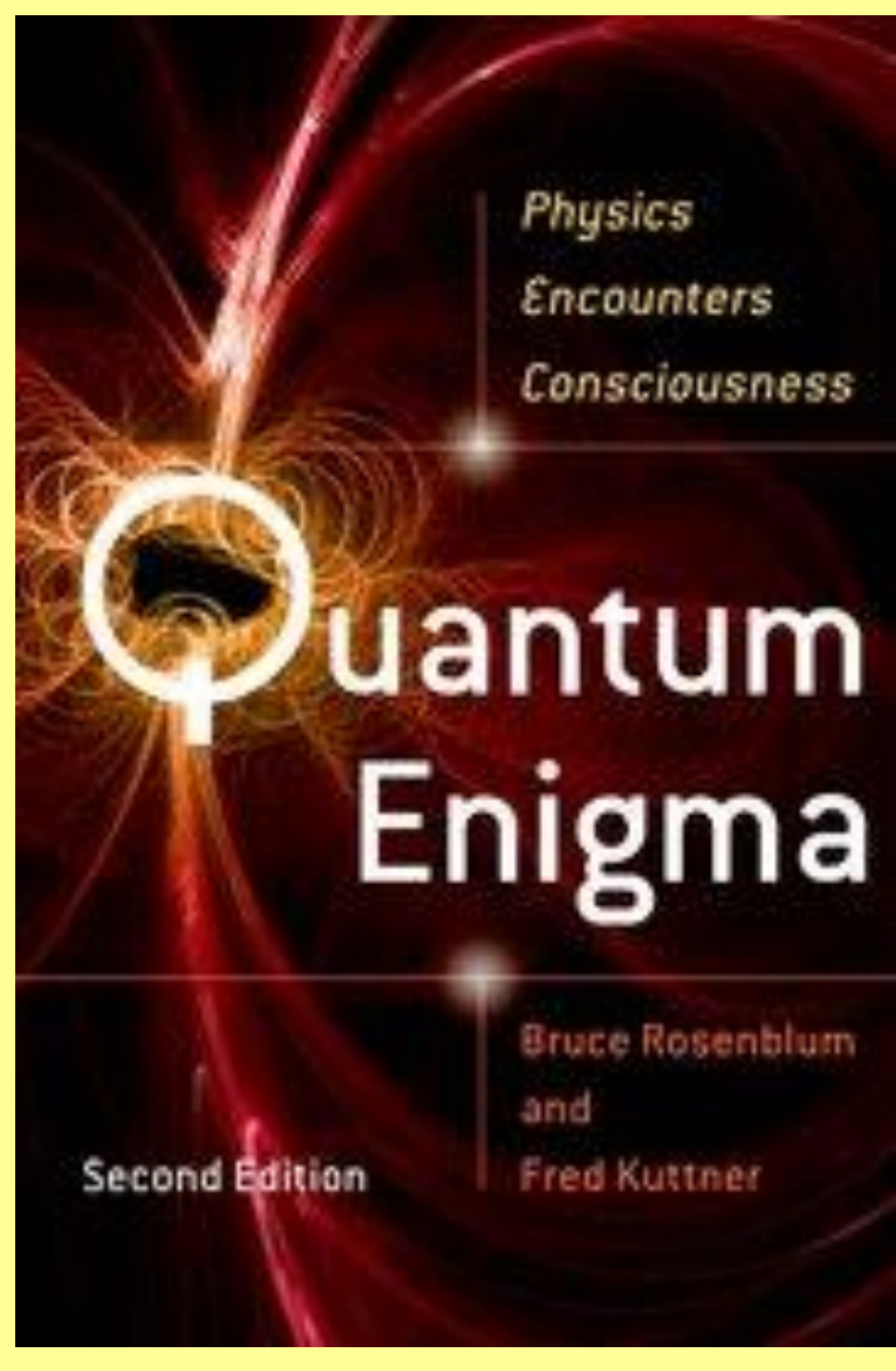
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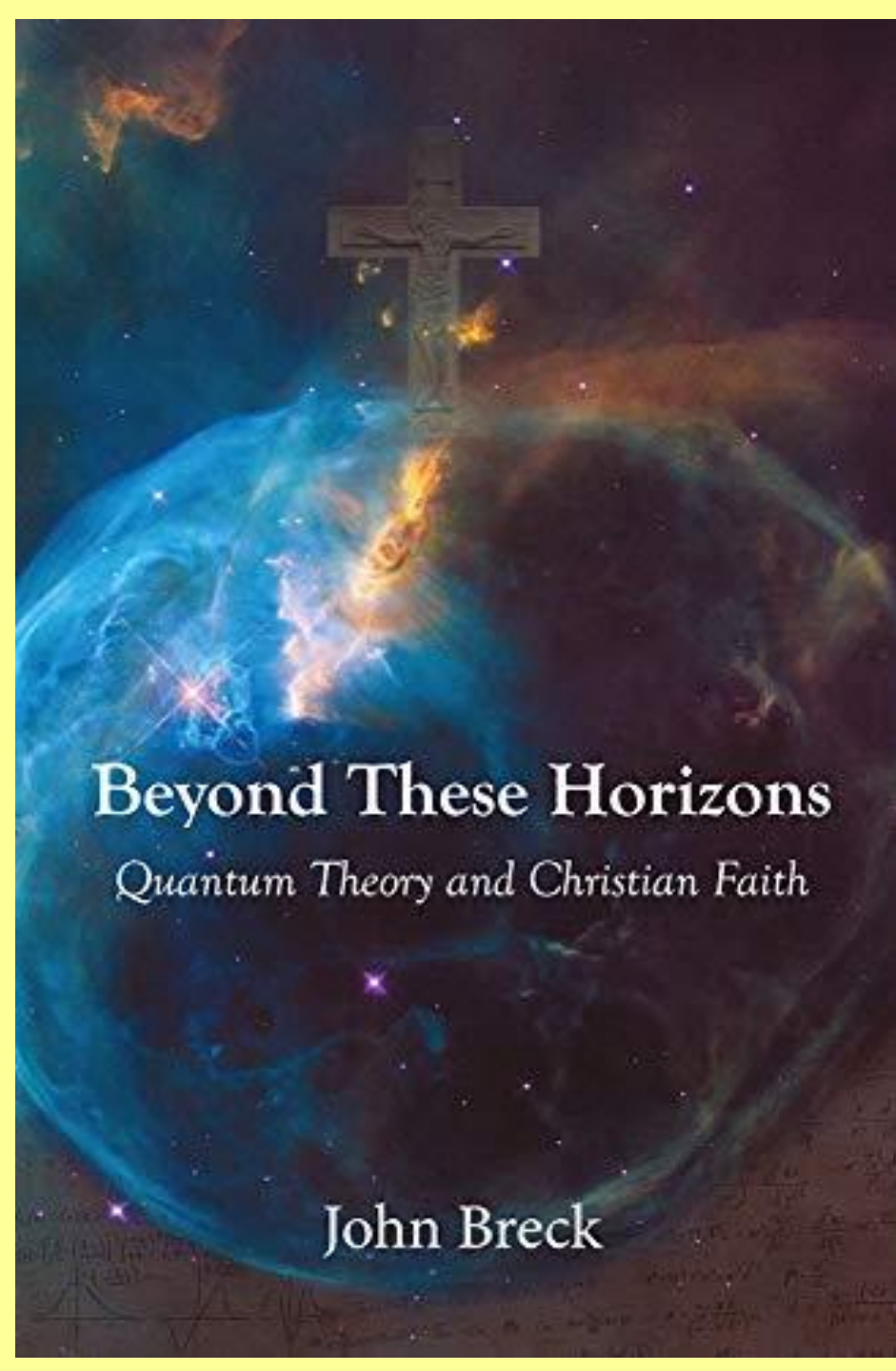
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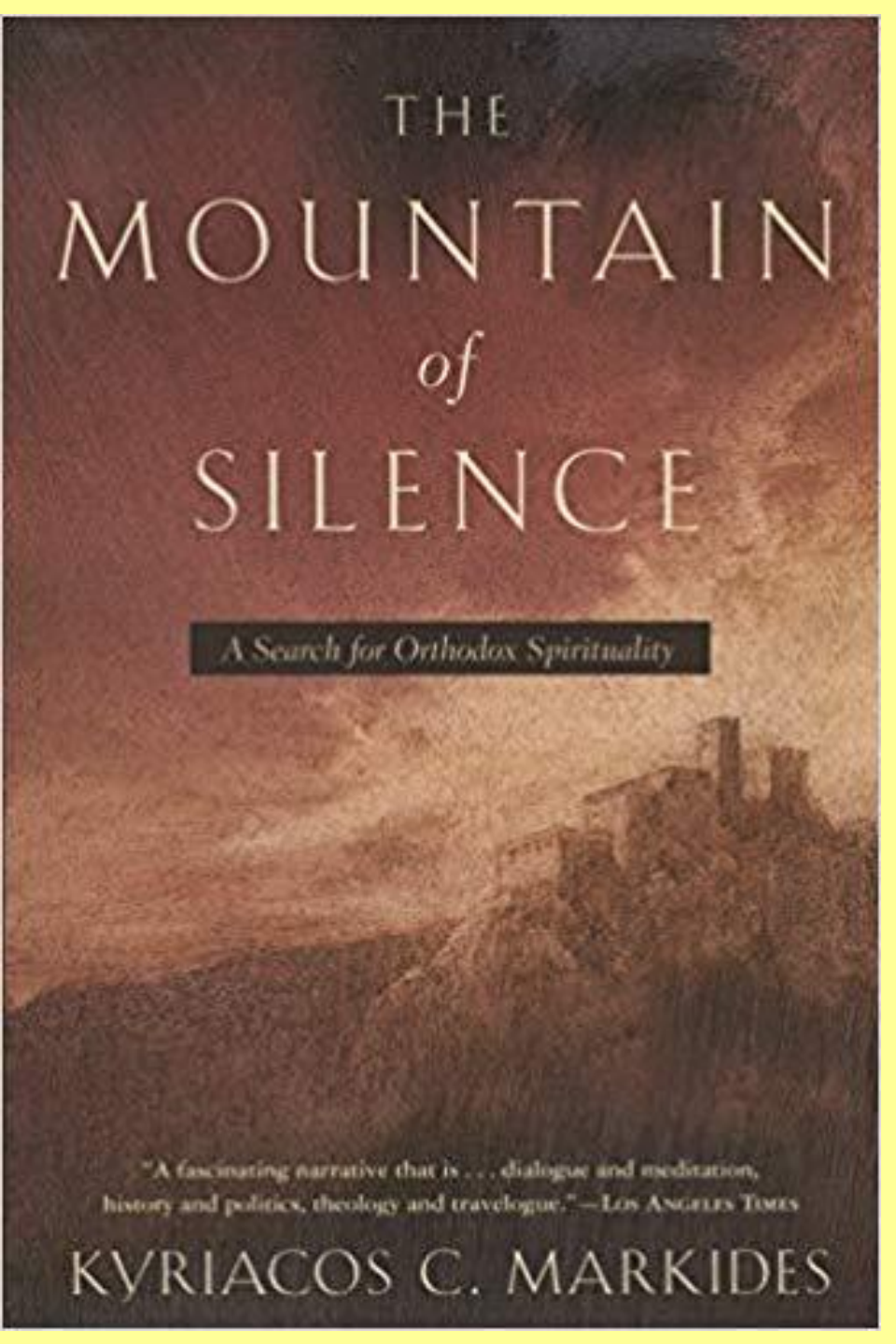
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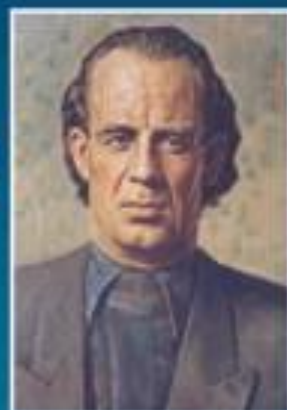
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