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Children and Youth Medicine

The End of Coughs, Colds and Co.!

Micro-Vaccinations for the Prevention of Respiratory Infections in Children

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Even if respiratory infections regularly occur in children and are mostly self-limiting, they can become a burden for the affected children as well as for their social sphere by their frequency and not uncommon complications. Remedial action promises preventive treatment with a micro-vaccination (mini-inoculation), which has proven itself in practice for many years. With correct administration this is virtually free of risk and side effects and can causally affect the prevention of infections or at least weaken them in number and degree of severity. Why this healing procedure from the range of application in Mesotherapy generally works, can be indicated with the help of the recently discovered universal antibodies of the adaptive immune defence.

The most frequent cause why parents visit a pediatrician with their children is respiratory infections. The reasons for this high incidence in children are obvious: Functional pulmonary alveoli form up to the end of the second year of life (alveolarization), the bronchi develop even up until school age and the learning immune system is regarded as mature only from an age of approximately ten years. Additionally, often a lack of hygiene consciousness and a clearly higher danger of infection through nasal secretion – for instance on the hands – and droplet infection through close contact with other children in day nursery, kindergarten, school and free time.

Thus, it is not surprising that according to the ***Robert Koch Institute*** infants fall ill with respiratory illnesses on average 6 to 8 times per year, nine-year-old children from about three to four times and twelve-year-old children about once or twice per year.

Frequent Antibiotic Prescriptions

Although these respiratory infections are caused by respiratory viruses up to 95 percent [*of the time*], far too often until now school-medical treatment with antibiotics occurred. A bacterial superinfection or secondary infection should be prevented and/or treated, often also on the wish of the parents who hope for a faster recovery of their children.

However, the side effects of antibiotic treatment can be problematic. Moreover, according to the *Deutsche Ärzteblatt** these include stomach aches, nausea, vomiting, diarrhea and allergic reactions on the skin. In very rare cases enterocolitis, acute liver failure or severe skin reactions can also occur. Besides, a frequent antibiotic dose promotes an antibiotic resistance.

Thus, a reserved antibiotic dose is recommended for children with respiratory infections, either by waiting and carefully observing, or by giving a prescription which is redeemed only if it does not improve.

Symptomatic Treatment

Otherwise, respiratory infections are treated purely symptomatically. Against fever and pains, analgesics like Paracetamol are prescribed, against cough also codeine or *Noscapine* as well as short-term decongestant nose drops. With the above-mentioned medications, especially for children pay attention to possible side effects, and also to exact age and weight dependent dosage as well as possible age restrictions.

* A weekly German-language medical magazine.

Natural Healing Treatment

Plant and homeopathic medications are popular and "cash box"* prescriptible for children. Besides, a whole series of "house medicines" has been proven for the treatment of respiratory infections.

Probiotics with lactic acid forming bacteria as a food supplement have a preventive effect on the disturbed intestinal flora and can shorten the disease course.

Some active plant ingredients, for example ivy extract, have a cough suppressant, expectorant and bronchodilator effect, while echinacea extract stimulates the immune system.

Finally, numerous homeopathics are also used for the treatment of respiratory infections. Their selection is dependent on the respective symptoms or the child's constitution. Exemplary here are Belladonna, Aconitum, Calcium carbonicum, Allium cepa, Pulsatilla, Kalium bichromium or Causticum. Respiratory infections can also be treated well with homeopathic complex remedies and Schussler Salts.

Micro-Vaccination as a Preventive Treatment

Even if frequent respiratory infections are considered as normal in children, nevertheless a preventative which helps prevent the outbreak or rather a severe symptomatology of the infection would be desirable.

Micro-Vaccination represents such a treatment. It is included in Mesotherapy, that minimally invasive, locally specific procedure that the French physician ***Michel Pistor*** already developed at the end of the 1950s. Quite early Pistor and his colleagues identified and proved the immunological efficacy of the intradermally given micro-dosages of bacterial ribosomes.

One day after the proven preparation *Ribomunyl* disappeared off the market, it was replaced with the approved in Germany vaccine *StroVac*®. The application occurs in the Off-Label-Use, which addresses both the application manner as well as the indication spectrum.

Mesotherapy functions according to the principle "a little, seldom and at the right place". Thus, because of the high efficacy it is believed that the smallest doses of active substances must be administered usually only a few times, and namely intracutaneously directly at the place of the illness. Here they have an especially topical effect that excludes the usual side effects, and which makes Mesotherapy a very compatible procedure. Micro-Vaccination can already be used with children from an age of two years.

* Prescription paid partially or fully through health insurance, in Germany submitted on a pink or red form.

Although the main application of Micro-Vaccination lies in the prevention of acute respiratory infections, it also finds application with chronic infections like bronchitis, sinusitis or chronic jaw osteitis. The immune modulatory effect on the mucosal and lymphatic systems of the nasopharyngeal cavity also made possible a lasting assistance with hay fever, allergies, virus illnesses of the skin as well as recurring urinary tract and gynecological infections. Moreover, as a Retuning Therapy*, Micro-Vaccination comes into use for urticaria, asthma, COPD, mucoviscidosis or autoimmune illnesses.

Treatment with the diluted vaccine *StroVac*® in the Off-Label-Use is simply practicable and is accessible to every doctor. The injection suspension contains five different, inactive bacterial types, among others various E. Coli species as well as Klebsiella pneumoniae, and is allowed as a drug liable to prescription for the prevention of recurring urinary tract infections.

Studies About Efficacy

Micro-Vaccination turns out to be very effective in practice, as a retrospective study from 2017 indicated. In it the data from 92 patients who had received regular Micro-Vaccinations against recurring respiratory infections (sinusitis, rhinitis, pharyngitis, bronchitis) and/or hay fever was evaluated.

- With 46 patients with recurring infections a substantial improvement or complaint freedom was achieved in 84.8 percent of cases.
- With 23 hay fever patients the success rate lay at 95.7 percent (substantial improvement or complaint freedom)
- With the remaining 23 patients, who exhibited both a recurring infection as well as a hay fever illness, a substantial improvement or complaint freedom succeeded in 91.3 percent of the cases.

13 children between 2 and 14 years old were also included among the 92 patients. No side effects or complications occurred. Compliance was excellent often over many years, which shows the voluntary, regular demand for this self-payment service. Also, acceptance on the part of patients is very high, because it makes sense to everyone that it is meaningful to build up an endogenic protective barrier within the entry area of of viruses, bacteria and other pollutants.

* **Retuning Therapy**: Various treatment methods from the field of empirical and alternative medicine that try to stimulate the immune system or generally positively influence the body's reactions, in particular the reaction situation of the autonomic nervous system. Retuning therapy is intended to initiate and support the healing process, especially in the case of chronic diseases. Examples: autohemotherapy, acupuncture, balneotherapy, fasting, etc.

Application

For treatment, the strongly diluted vaccine (1/20th of the normal dose) produces wheals superficially on four to eight specific acupuncture and reaction points according to the indication, where it provides for the desired immune response in small epidermal ‘warehouses’ over a longer period of time.

For respiratory infections and hay fever the intracutaneous wheals, in each case with less than 0.1 ml of active ingredient mixture (= approx. 1 drop), are placed at the side of the nose above the maxillary sinus for the mucosal system and in both lower jaw angles for the lymphatic pharynx ring. For recurring bronchitis several more wheals are additionally placed paravertebral and parasternal.

Micro-Vaccination must take place about six to eight weeks before the season for prevention of hay fever or infection. After four weeks the treatment is repeated as a booster vaccination. A refresher takes place with a session every six months. The protective effect can be built up according to the individual disposition at very short notice, however also sometimes only over the course of the following months and years. The long-term effect and the versatile usability of the procedure are noteworthy.

Like those in Mesotherapy, in Micro-Vaccination the cannulas used are very short and thin and through a special grinding have a relatively painless puncture. Thus, with correct injection technique placing the wheals is nearly pain free and is also easily practicable with children particularly as the treatment itself only lasts a few minutes.

Possible side effects can be small temporary swellings, indurations or reddening on the puncture sites which are valid as proof of the efficacy of the site of the diluted vaccine (vaccination reaction). A comparison with mosquito bites is obvious which is accepted with pleasure.

Scientific Explanatory Models

Long time practice experience and a few studies speak on behalf of the high effectiveness of Micro-Vaccination. It remains to be clarified, like with destroyed bacteria that are typical of a urinary tract infection, if predominantly viral respiratory infections can be prevented.

This question is more important than the annual flu vaccination financed by the health insurance companies that have turned out to be ineffective or only partly effective, and still no vaccines exist against the current menace of the new viruses like COVID-19. Epistemologically many attempts arise out of the expressed current basic research, which the effectiveness of Micro-Vaccinations can clarify.

Universal Antibodies

Until now it remained valid that our adaptive immune defense works over specific antibodies, which form for the first time if an appropriate pathogen – from an illness or a vaccine – reaches into the organism. Then with renewed contact the antibodies recognize that antigens are seated on the surface of the pathogens, link up to these according to the "key-to-the-castle" principle, neutralize the pathogen or trigger a concerted immune response.

Now however, this model must be extended around the newly discovered pluripotent antibodies. These then detect an antigen that is found in the external membrane of various pathogens: Lipopolysaccharide (LPS) 0-Antigen, a connection from fat-like and sugar components. Thus, the newly discovered antibodies can fight not only specific pathogens, but also all pathogens that these LPS 0-Antigens carry on their surface. Hence, they are also designated as universal antibodies.

A bacterium that carries these antigens for urinary tract infections, pneumoniae and nosocomial infections is responsible for Klebsiella pneumoniae. It is one of five destroyed bacteria types that are contained in the vaccine StroVac®. With this it can be explained how a vaccination works to treat urinary tract infections through the induction of universal antibodies for the prevention of respiratory infections. Additionally, the proof comes through the immunological activities of the dendritic cells in the skin as well as the cytotoxic T-Cells of the hereditary immune system. This means the resistance capacity is identified not only by the antigen induction, but also through movable cellular components of the blood which can accumulate by migration locally into the destination tissue.

Hereditary Immune Defence

Micro-Vaccination works doubly. On the one hand it activates the adaptive immune defence as explained before, but also allows the cellular and humoral components of the hereditary immune defence to react. Then these are especially active where the Micro-Vaccination takes place: in the skin, particularly also in the epidermis as well as in the mucosal system.

Here you quickly reach an immunological modulation of the mucosa (injection points: on the maxillary sinus projection) and the lymph organs of Waldeyer's tonsillar ring (injection points: on both sides submandibular). Modulation means that a weak immune response with infection susceptibility is up-regulated and an excessive immune response with allergic disposition is down-regulated. However, the preventive effect of the Micro-Vaccination over the adaptive immune defence only takes effect after some weeks.

Conclusions

Micro-Vaccination represents a highly interesting option in the prevention of recurring respiratory infections and hay fever even with children from an age of two years. They have a long lasting and causal effect, by modulating the hereditary immune defence and activating the adaptive immune defence. According to current knowledge, not only illness morbidity or severity is decreased, but the danger of super-infection and the antibiotic treatment connected with it also. The treatment is low in side effects, hardly causes pain and last only a few minutes. Thus, it is also directly indicated for young patients.

In consideration of the present threat situation from new pathogenic agents, this already clinically proven method could be urgently evaluated and then could also be quickly made accessible for broad levels of the population. As a healing procedure, Mesotherapy is reserved for physicians and naturopaths and can be learned in courses from the German Society for Mesotherapy e.V. (DGM).

Keywords: Mesotherapy, immunology, infections, Micro-Vaccination, prevention, vaccination, allergy, research.

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