The Dove Clinic for Integrated Medicine

The Oberon Device

The Oberon device is a spin-off from the Russian space programme that was developed at the Department of Medicine, University of Omsk, Siberia. Most of the Russian scientific effort to support their space programme is based in Siberia.

The device is an unusual biomedical device outside of the current medical paradigm. It is based on 20 years of basic research done by a number of Russian teams who worked out, on normal individuals, patterns of frequency responses that correspond to particular organs. Also, they were able to work out what the normal frequency response would be for any particular age of either male or female subjects of each organ.

The device is used for assessing organ function and not structure. Therefore, it is not like an MRI, CT or an Ultrasound scan. It is specifically measuring the magnetic vector potential which, those readers skilled in physics will recognise, as the Ā field which runs in the direction of current. This is at right angle to the B field which cuts the lines of magnetic force at right angles and is what drives an electric motor. Living systems are very sensitive indeed to the Ā field (the magnetic vector potential).

The device involves sitting in front of a receiver with headphones on the head. The relevant frequency patterns are projected through the headphones (these are inaudible as they are well above the audible frequency range). The sensor channels the information which comes off the test subject as a result of having the resonant frequencies passed through the headphones to a computer based device and the readings are shown. Then, relevant medications, which have also had their frequency response determined using the same methods, is titrated against the reading found and as a result, the patient goes away with an optimal set of medications which are most likely to help their current condition. Therefore, from a practical point of view, this is a method of determining ideal medication and is not fundamentally a diagnostic device. For example, it cannot diagnose whether a cancer is present or not.

I have carried out a study of 200 patients with known pathologies and tried to correlate these with the Oberon readings. The correlation between the Oberon readings and the patient's site of disease, was just over 80%. In spite of that, this is not a diagnostic device.

The idea of frequency response being relevant in medicine has been given considerable scientific support by a range of recent research projects being carried out around the world. One team led by Alexandre Barbault from Switzerland, reported on his study using amplitude-modulated electromagnetic fields in the

treatment of cancer. He found tumour specific frequencies, these were large groups of frequencies, and then went on to assess a novel therapeutic approach based on his findings. This was published with several co-authors in the Journal of Experimental Clinical Cancer Research in 2009. He has been treating a number of late stage cancer cases who have failed all modalities of treatment, who were maintained with stable disease using Barbault's approaches; that is simply exposing the patient to a highly complex set of frequencies determined by painstaking measurements made on the subjects. Additional to this work there are projects being developed by a company called Novocure, a company based in Haifa, are using groups of resonant frequencies applied over brain tumours of patients with glioblastoma multiforme, which is the most malignant of all brain tumours. This company has been able to establish significantly increased survival of patients treated in this way, simply with a probe and electrode placed on the scalp over the tumour, compared to standard treatment approaches. What is more, this company has significant investment from several major pharmaceutical companies.

The readings shown by the Oberon equipment have more in common with a traditional Chinese medicine view of the way the body works, which is very much based on organ function, as opposed to a standard biomedical model, which is based more on structure. Integrating these conventional and non-conventional approaches, which is what we do in the consultation situation, we have found to be most helpful from a clinical point of view.

It is possible to conceive that with additional interest and research along the lines of the studies mentioned that these approaches may increasingly attract the interest of mainstream medicine.

Dr Julian Kenyon Medical Director The Dove Clinic for Integrated Medicine A Non-Controlled Open Observational Study of the Oberon Device as an Aid to Functional Status and Treatment in Randomly Presenting Patients with known Pathology.

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Summary

The Oberon Device is a Russian system which measures the magnetic vector potential as an aid to functional status and the treatment of patients. Functional status, relates much more to how traditional Chinese medicine looks at organ function than conventional medicine concepts.

We tested this equipment on 200 patients who randomly presented with known pathologies, set to scan results, to test the accuracy of the Oberon System. We found it gave correct findings relating to the area of dysfunction corresponding with known pathology in 170 of the 200 cases (an 85% positive response rate). It did not give any guidance as to what the nature of any underlying pathology might be.

Aims and Objectives of Study

The aim is to assess and compare the performance of the Oberon practical as an aid to functional changes best summarised by traditional Chinese medicine view of organ function, by correlation with patients' know pathology. We also aim to evaluate user and patient acceptance of the equipment and patient safety.

Methods

Randomly presenting patients with known pathology were measured on the Oberon practical equipment. Depending on the measurement scores, represented symbolically on the relevant organs, are shown on a range of 1-6. Scores of 1,2 and 3 are regarded as normal, 4, 5 and 6 are regarded as indicating dysfunction, 6 indicating the most dysfunctional. The result was judged according to correlation of scores 4,5 and 6 in the area of known pathology determined by conventional investigations to the results from the Oberon system on the patients in the study.

Each patient signed an informed consent before the procedure was carried out.

Results

170 cases of malignant disease of various sorts. 4 had multiple sclerosis, 3 had heart disease, 1 had Osteoarthritis, 1 each of epilepsy, fibroids, and Insect Sting with swelling of the finger joints, benign prostatic hypertrophy, an anal fistula, transverse myelitis, pneumonia, cystic fibrosis, hearing loss from blocked eustachian tube,

cervical spondylosis, labarynthitis, injury to the right conjunctiva, bronchiectasis, cystitis and peripheral neuropathy. This made a total of 200 cases.

170 of the 200 cases showed a correlated response to areas of known pathology and areas on dysfunction as shown on the Oberon system. 7 showed an equivocal response where it was not possible to be sure what the readings indicated and how they correlated with the patients' pathology. 23 showed negative results. Some of these negative results were associated with patients taking steroids or having chemotherapy. However, in the positive results there were some patients who were also taking steroids. There were no side effects of any sort involving the use of the equipment. It was found to have excellent user and patient acceptance.

Detailed results

It was noted that those patients who had no response with the Oberon device showed a similar negative response on subsequent testing. This effect appears to be independent of any drug regime and is presumably to do with something peculiar to the test subject, the nature of which is currently unknown. We have tested this equipment with 200 patients and found it gave correct findings corresponding to sites and known pathology in 170 of the 200 cases (an 85% positive response rate).

Discussion

The readings of the Oberon system indicated dysfunctional process, that is scores of 4,5 and 6 showed an encouraging result of 85% correspondence with known pathology. It is not possible for the Oberon system to define these high scores as being due to any particular cause, such as malignancy, inflammatory processes, traumatic processes etc. This requires a thorough medical history, clinical examination and appropriate further conventional investigations. Therefore, the Oberon system is not a conventional diagnostic device, but it is a useful means of locating dysfunction and as a guide to treatment and possible further investigation in any clinical situation.

Conclusion

The Oberon system is a useful means of assessing function in terms of how traditional Chinese medicine looks at function and is therefore not a diagnostic device. Further appropriate investigations in order to find the cause of pathological findings are needed as one would do in any medical situation.

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