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**EPISTEMOLOGY OF CIVILISED MAN DISEASES**

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**Abstract.** In this exploration author aims to approach near the cognisance of ‘single cause’ etiogenesis of chronic noninfectious and nontraumatic diseases. To reach this end he necessarily attempts to ground modern biomedicine in higher order—‘cosmist’—philosophical (cosmological, ontological, epistemological) principles. Working on this basis, author pushes forward, with respect to the epistemology of civilised man diseases (CMD), his chief proposition that CMD arise from the excess amount of intrinsic creative—psychophysiological—energy, not having been utilised during current man’s vital activity. In outcome, author advances an epistemological classification of the etiogenesis of modern diseases and originates 5 stages of the universal etiopathogenesis of modern chronic noninfectious and nontraumatic diseases (civilised man diseases).

**Key words**

Russian cosmism, philosophical cosmology, wholistic ontology, cosmist epistemology, CosmoBiotypology, individual's health, etiogenesis of chronic diseases

*"Philosophy is a science and therefore, like every other science, it seeks to establish truths that have been strictly proved and are therefore binding for every thinking being and not only for a particular people or nation."*

Nicolei O. Lossky (Lossky, 1951, p.402)<sup>1</sup>

## Introduction

Is there an acute crisis in modern biomedicine in relation to philosophical issues? Do we actually need and what for we need the new philosophical foundations for biomedicine? Is it really worthy to comprehend scientifically the phenomenon of individual's health?

Responding to these debatable questions author, himself, says categorically 'Yes'! In this he reasons that, incontestably, modern biomedicine is impotent to treat etiogenically the chronic noninfectious and nontraumatic diseases (to the point, the major cause of the entire morbidity and mortality), which are also called as "diseases of civilisation".

Of course, there exists the generally accepted conceptual basis that admits the multifactorial aetiology of chronic noninfectious diseases ("diseases of civilisation"), therein placing the emphasis on the interaction of genetic, neurophysiological, biochemical, immune, and other intrinsic biological factors with a variety of social and environmental factors. Evidently, however, this 'etiological' line lacks the explanation of chronic diseases as the ones produced by single causes, and, hence, it entirely lacks, in principle, the complete restoration (and prevention) of a patient with the chronic noninfectious disease. The latter, in turn, directly sets up social barriers to the realisation of ideals of liberty, for, individual's wellbeing (health) is the absolutely necessary condition for a person's freedom.

That is precisely the general design of author's exploration—to approach near the cognisance of 'single cause' etiogenesis of chronic noninfectious and nontraumatic diseases. At this point, the main peculiarity of his endeavours is the reference to the notions of the 1960-80s (like "diseases of civilisation", "chronic non-infectious diseases", "psychosomatic disorders", "hierarchy of needs", etc.), which are chiefly out of use in current biomedicine. However, substantially, he attaches herein a novel—cosmist—meaning to them. Moreover, author generally calls for the restoration of philosophical reflections on the phenomenon of "diseases of civilisation", which likewise finished in the same 1960-80s, having provided biomedicine with no one fruitful concept.

At this point, endeavouring to realise his original approach to the consideration of the phenomenon of "diseases of civilisation",<sup>2</sup> author, first of all, divides the entire spectre of all diseases into four macro-classes: 1) of *genetic diseases* (of genetic origin; they are, however, excluded from consideration); 2) broadly understanding class of *infectious diseases*, caused by the entire range of pathogens; 3) broadly understanding class of *traumatic diseases*—of physical and chemical origin, of acute and chronic continuance, of natural and ecological (anthropogenic) occurrence; 4) of *civilised man diseases* (epistemological characterisation of this new notion forms the chief subject-matter of the entire work). Here, however, it would be relevant to indicate the main properties of the *civilised man diseases*: a) they are chronic noninfectious and nontraumatic diseases, which have not the *specific* etiologic causes of their occurrences and which are considered, thereby, in relation to etiogenesis, as *non-specific* and multifactorial, and which, thus, lack the specific mode of their treatment; b) civilised man diseases are precisely the diseases of *civilised man*. The latter is assessed as the man, who is free, in principal, from the harmful physical, ecological, or social influences or oppressions (as it clearly

follows from the comparison of the civilised man of today with the man, for instance, of the XIX-th century; or, to be more demonstrative, with the man of XV-th, or XI-th century, etc.).

Approximately, a state of prerequisites for health (listed in 1986 by WHO's Ottawa Charter for Health Promotion) could serve, simultaneously, as the characteristic features of (post)modern civilised man's existence: "peace, food, shelter, education, income, a stable ecosystem, sustainable resources, social justice and equity" (Hancock, 1999, p.419). (It is also noteworthy that this list of prerequisites does not include health care!).

Finally, emphasis is placed upon the following point: Author's subject-matter has nothing in common with the synthetic reviews or thorough analysis on the historical aspects of the "diseases of civilisation" concepts and the related topics. His main task is direct and clear—to meet the crisis of modern biomedicine (in relation to philosophical issues) and to advance new systemic philosophical and theoretical assumptions, aimed at its overcoming. Therefore, in so far as author presents a principally novel perspective of biomedicine's evolution, the references he exploits have not the quality of analytic and comparative exploration, and they are, conversely, not the 'fortuitous reminiscences', but the ones, called to make his innovative discourse more apprehensible.

## **1. Crisis of Modern Biomedicine in Relation to Philosophical Issues**

Now, as a starting point of author's reflections, an example of coronary artery disease is brought into light. The latter, as it is well known, is one of the most significant chronic noninfectious and nontraumatic diseases and causes of human mortality. At the same time, as shown by evidence, the basis of coronary disease is atherosclerosis, which is a major form of arteriosclerosis, and the latter is a "chronic disease characterised by abnormal thickening and hardening of the walls of arteries, with a resulting loss of elasticity." (Arteriosclerosis, 2001). Thereby, atherosclerosis is an autonomous chronic disease (just as coronary artery disease itself) of the whole human organism. Hence, we have then, that the cause of one chronic disease (coronary artery disease) is established in the existence of the other chronic disease (atherosclerosis).

That is a matter of fact, with regard to any civilisation disease, that modern biomedicine, although having tremendous achievements in understanding molecular mechanisms of diseases, lacks, in principle, '*single causes*' etiologic comprehension and scientific study of the causes of chronic diseases appearance but, instead, modern biomedicine conducts the extensive investigation of social, environmental, and biologic "risk factors" of the chronic diseases, as well as the investigation of the unified mechanisms of their pathogeneses and the modes of their treatment.

In other words, it is evident, within the limits of existing biomedical paradigm, that the very various factors could participate in the occurrence of the one certain case of a chronic noninfectious disease, for example, coronary artery disease; and, at the same time, one certain risk factor (for instance, long-term emotional stress) is associated with the appearance of very various chronic noninfectious diseases (coronary artery disease, hypertension, duodenal ulcer, dermatitis, alcoholism, etc.).

Thereby, modern biomedicine does not possess at present the true etiogenic (individual) approach to the treatment of any of existing chronic noninfectious diseases (civilised man diseases). More accurately, in relation to civilisation diseases, modern biomedicine individualises, but "depersonalises" the man (Glick, 1981, p.1037), in this continuing to break new frontiers daily and extending scientific benefits of medicine. The reason is that modern biomedicine treats man as an abstract statistical unit: Although it admits the uniqueness of man's individual bio-organismic or psycho-social characteristics, it sees them exclusively as variables within the common range of a given trait, i.e. as the biostatistical norm and its possible deviations. For example, allergist sees the specialised (individualised) approach to a patient in revealing the certain allergens (to which the patient is sensitive) and their consequent adequate treatment (specific desensitisation). But there never

a question arises: Why does this patient acquire the allergic sensitivity, while thousands of surrounding men (of the same population)—do not?

Returning to the example with atherosclerosis process, author places emphasis on the generally accepted fact that the accumulation of cholesterol in atherosclerotic lesions "is primarily determined by genetic factors but can also be influenced by environmental factors, such as a high-fat diet." (Atherosclerosis, 2001).

Relying on this example of pathogenic interrelation of coronary artery disease (ischaemic heart disease) with atherosclerosis, it is essential to state that the genetic—molecular—level, although a basic one, is merely one more level of man's whole universal organisation. Hence, general philosophy on the whole and its branch—philosophy of biomedicine, in particular, either:

a) Establishes an 'iron curtain'—separates Man from the existing surrounding World, when reduces the problem of a civilised man disease to the genetic level (or to any other part of an organism), thus acting exclusively within the limits of man's organism; or

b) Places Man and World 'on the different sides of a barricade'—on the counteracting positions, when considers the harmful factors of the environment as causative to civilised man diseases occurrence.

In both cases, however, current philosophy of biomedicine (and, hence, general philosophy) deals not with a reality, but precisely with unreality. In fact, at least since the year 1953 we know the absolute truth of natural sciences—Man and Earth's living World, the entire evolutionary process of Earth's life is the single whole. At this point, author naturally means the discovery of the structure of DNA by Watson and Crick, which proves the unity of all kinds of the life on the Earth and the genetic transmission of psychic character by DNA molecules.

Furthermore, in this discourse, modern biomedicine evidently comes to light as the one, which treats its chief object (man, a patient) in the *subject-object* type of relationship. Thereby, there is no place for the subject of individual's health, for, healthy man, as a natural universal unit of Earth's life, can exist exclusively in the *subject-subject* interrelations with the 'uterine' world. Indeed, the absence of the etiogenic approach to civilised man diseases—that is the lack of the true individual approach in biomedicine and of the biomedicine of health itself (of the '*health-centric*'—person-centred—biomedicine).

Actually, modern biomedicine exists strictly in the *pathocentric* paradigm. In outcome, contemporary civilised man—living in a democratic society (!)—is in fact deprived of the right to have the information on his/her individual's health. In other words, s/he has to become *already* diseased, or found himself/herself in the surroundings of serious risk factors, to make the impressive power of modern biomedicine turn to help him/her. But it is nearly impossible, at present, to attract existing enormous biomedical (sociological, humanitarian) capacities to assist man in putting into operation his/her individual 'factors of wellbeing', that would guarantee his/her health—the individual "state of complete physical, mental, and social well-being and not merely the absence of diseases and infirmity." (following WHO's famous definition of health of the year 1946).

Next, the so-called '*paradox of creativity*' should be considered: The contemporary man, being a creature of 'the Nature', actively creates and materialises the social and ecological forms of his/her existence on the planet Earth and actually steers the whole planetary life process. But, at the same time, no less than about 90% of all existing risk factors of civilised man diseases have a human or social origin, thus, the one resulting from the man's 'creativity'. In other words, about 90% of all chronic diseases are anthropogenic.

'Paradox of creativity' and the other settled above arguments clearly explain the crucial point—the reason why modern biomedicine is deeply embedded in the pathocentric way of development. The essence is that the crisis under consideration—the impotence of contemporary biomedicine to comprehend the phenomenon of individual's health and to originate the etiologic investigation of the single (specific) causes of modern civilised man diseases (CMD)—directly stems from present

impotence of general (and of biomedicine) philosophy and resulting incompetence of (post)modern science and man.

## 2. Introduction to Philosophical Cosmology

One of the origins of the continuing crisis of contemporary philosophy, science and man (in relation to the problems of comprehension of individual's health and etiogenesis of civilised man diseases) may be seen in the fact, that modern biomedicine is strictly based on the pluralist foundations. The current pluralistic development is 'natural' in the historical-cultural settings of the evolution of (post)modern Western civilisation but, in the light of irrefutable evidence of the universality of Earth's life process, it is not natural (and just unnatural) from the point of view of the natural sciences.

Indeed, it is possible to treat variously the 'INGRESS' (to argue for the origin of the life on Earth from different backgrounds),<sup>3</sup> but on the EGRESS (in the present) we objectively and actually have the universal and integrated order of Earth's life organisation. In this case, the laws of logic inexorably lead to the following conclusion: If, on EGRESS, we have one whole universal PROCESS, then it is logically irrefutable that we have one whole universal PROGRAM (whatever origin it has) of existing PROCESS. Equally, if EGRESS is one whole universal phenomenon (what is verified by natural sciences), then rightfully follows that as much INGRESS in PROCESS (the origination of PROCESS), as PROCESS, itself, are equally the 'one whole universal' phenomena, in so far as they belong to the one indivisible integrated substance. Moreover, if INGRESS in PROCESS (PROCESS'S origin), and its single and indivisible past (evolution of PROCESS) and present (EGRESS, i.e. the present actuality of PROCESS) constitute universal whole, then there are no reasons to refuse in this (in universality and wholeness) to the future of PROCESS.

In consequence, PROCESS—that is an objective reality unknown (mysterious) for us in its origin, but actually existing and positively available for the current philosophical and scientific exploration and comprehension. Thereby, the objective factuality of PROCESS—that is the direct way for human mind to comprehend the universal ideal but logical essence of current evolutionary PROCESS, including the Future stages of its development.

At any rate, however, contemporary Western pluralism can be justified by the only reason that it has established the status of man as not merely of the thinking creature but, equally, as of the acting person holding a certain position.

In conclusion, thereby, contemporary philosophy and science (biomedicine as well), striving for the study of the problems of the life on the Earth, ought to have an urge to put forward new philosophical foundations for science, which should necessarily possess the properties of positivism, evolutionism, personalism and universalism.

Attempting to create the sought-for philosophical bases by himself, author primarily introduces the original principles of his philosophical cosmology (its complete substantial characterisation is given in author's previous work – “Introducing Philosophical Cosmology”, 2001). In this, he proposes the key term and notion of Process (CEPLE, Absolute)—of the one common universal cosmic evolutionary process of the life on the Earth. In philosophical and scientific relation, the significance of the conception of Process, to author's view, is equal to such of Newton's 'Gravity' or Maxwell's 'Electromagnetic Field'.

The most substantive properties of Process are a) its *cosmic* origin and b) the essence of being the *autonomous* (self-unfolding) *ascendant emergent evolutionary* process.

Further, to provide a required context for understanding the author's 'process philosophy' and 'cosmist thinking', the definition of the other key *cosmist* terms are advanced—of 'emergence', 'future', and 'subject'. The former ('emergence') substantially has the accepted (in evolutionary thinking) meaning—of the rise of a system that cannot be predicted or explained from antecedent conditions.

'Future', in turn, has the specific sense: of the new—emergent—successively coming integrated level of a subject's (man's) being and wellbeing (the university for a schoolboy; the vocational body for a graduate student, etc.).

Finally, 'subject' is one more specific and basic term in the author's cosmist system. 'Subject' defines the '*integrated functional subject*', which ever is integrating by itself/himself/herself (to be the functional whole) and simultaneously being ever functionally integrated by the higher organised subject. In other words, 'subject' means—from the cosmist point of view—every living organism on the Earth: molecule, cell, biological organism, biosphere, human being, family, community, social body, society, mankind, and, ultimately, Process itself—the cosmic evolutionary process of the life on the Earth.

### **3. Ontological System of Absolute Cosmist Wholism**

Next, on the bases of philosophical cosmology, the central element of the whole cosmist philosophical approach—the system of basic ontological assumptions (named as Absolute Cosmist Wholism—ACW-system) is being put forward. Likewise, the detailed characterisation of this system is given in author's previous work – "The Doctor of Tomorrow"; the latter was published in the E-Logos, 2001). ACW-system is constituted by ten chief principles. In this discourse it is possible to give only very brief characteristics to them:

1) **Principle of universal functional integration**—'*all living is a whole—functionally integrated subject*'.

2) **Principle of universal emergent evolutionism**—'*all living—any subject—is the process*'.

3) **Principle of creativity**—'*man is a creator*': here are introduced and discerned two categories of human creativity (they are characterised below):

a) *Adaptational creativity*; b) *Creative creativity*.

4) **Principle of unity of evolutionary levels**—'*of man's constant active creativity*'.

5) **Principle of cosmist hierarchy of evolutionary levels**—'*of the managing priority of the higher integrated level*'.

6) **Principle of cosmist functionalism**—'*every subject of the lower level is the function of the higher, 'uterine', whole organised subject (level)*'.

7) **Principle of evolutionary selection from Above**—'*evolutionary selection from the emergent future*'.

8) **Principle of the particular role of modern man in the being of common cosmic evolutionary process of the life on the Earth (Process)**—'*the future wellbeing of common Process—of Earth's life—entirely depends on the man's deliberate cosmist creative activity*'.

9) **Principle of personal functional elitism**—'*the meaning of man's life is embedded in the successful ascendant evolution of man through all macro-levels of his/her ontogenesis for the ultimate achievement, in the period of maturity, of specific (cosmist) personal macro-level of his/her wellbeing, to realise here the man's personal specific (functional, of elite selection) contribution to the wellbeing of one common whole Process.*'

10) **Principle of subject's individual wellbeing**—'*the subject's (man's) wellbeing directly depends on the extent of one's belongingness and integration into Process*'.

The far-reaching deduction from the cosmist philosophical bases is the definition of two chief categories of man's constant creativity—of Adaptational Creativity and Creative Creativity:

**Adaptational creativity** has the synonyms of '*micro-evolutionary, actual, constructive creativity*'. It largely conforms with Carl Popper's *evolutionary emergentism*—the constant production of novel tentative behavioural and cognitive patterns through actual problem solving in the present situation; here, man expediently uses the method of trial and error, as well as s/he effectively exploits the already existing (of Popper's 'world 3') scientific and cultural material; the means of positivism, rationalism, subjectivism, existentialism and phenomenology are equally relevant herein; man's

adaptational creative activity ends ultimately in the attainment of the highest level of stability of his/her existence in the given environment.

**Creative creativity** has the synonyms of '*macro-evolutionary, ascending, cosmist creativity*'. It is a creative activity personally gratifying man, which is aimed at the production of specific (functional) personal effects or results making possible, eventually, the person's future wellbeing integration into the successively higher emergent level (absent in the present reality) of his/her ontogenesis. In other words, cosmist creative activity is the realisation and manifestation of the basic functional ability of a person to carry out his specific inclusion into the wholeness of the new higher emergent macro-level of the man's well-being ontogenesis.

To account for these categories, author brings in the example with a medical student. Due to the cosmist paradigm, s/he would hold the personal wellbeing ontogenesis if, and only if, s/he succeed as much in meeting the requirements of the higher medical school's curriculum, as in the active search (in his/her free time and over the curriculum)—to discover (re-discover) and self-realise his/her basic inherent (personally gratifying) functional ability (for instance, working in a surgical unit). Naturally, when graduated, the given student would certainly be selected and employed in a manner deeply satisfactory to the needs of his/her basic intrinsic personal functionality realisation. Thereby, our student would certainly be free (on his/her next ontogenetic level of vocational activity) from the unfriendly surroundings, thus—from the harmful long-term conflicts and emotional stresses, forming hard strain on the psychosomatic (psychophysiological) systems of his/her organism and eventually throwing the man into a chronic disease. Therefore, our student, basing his/her activity on the cosmist principles, would certainly preserve his/her wellbeing (health) during the studentship and further on the vocational level, and also would get more favourable perspectives to realise successfully the further stages of his/her macro-evolutionary ascendance (for instance, to become further a manager—head of the surgical department).

Another far-reaching deduction from philosophical cosmology and ACW-ontology is the principle establishing the equality of the three main evolutionary units of one common whole Process—of Nature, Society, and Man. In this course the basic notion of *Homo Sapiens cosmicus* (HSC) is proposed. In other words, together with the notions of biological and social evolution, the notion of the Personal Cosmist Evolution of the Free Civilised Man is characterised as the present-day forefront of Process. The further wellbeing of one common Process depends nowadays neither so much from the biological evolution (it reached its high point in the emergence of *Homo Sapiens animalis* (HSA), nor from the social evolution (reaching its high point in the emergence of contemporary Western civilised society and *Homo Sapiens sapiens* (HSS)). Further continuation of the evolution is to-be-mission of a new evolutionary active subject—*Homo Sapiens cosmicus* (HSC): the man, who is free from physical, biological, ecological and social harmful and oppressing influences, and who is ready to realise his/her ultimate creative (specific) functional ability and contribute personally and directly to the preservation and continuation of Process.

In conclusion, the cosmist definition of individual's health is formulated:<sup>4</sup> '*The individual's health* is the successful cosmist unity of adaptational and creative processes of the human organism and personality.'

In other words, the individual's health is the 'process of processes' ('ontogenesis of ontogeneses') of man's wellbeing. It comprises:

a) man's successful specific (functional, cosmist, personal) ontogenetic macro-evolution, the process of transcendence of the whole man's being on the successively higher hierarchical levels (of ascending emergent complexity); and at the same time,

b) the regular and necessary man's micro-evolution, the process of man's successful adaptation and development from the stage of initial elementary (infantile) forms up to the stage of mature stable forms of the man's integrated wellbeing on the given macro-evolutionary level.

#### 4. Cosmist Epistemology: Treating Man as a Bio-Social-Cosmist Creature

One more basic deduced principle of theoretical essence (of special significance in relation to the epistemology of civilised man diseases) is the one called as *CosmoBiotypological principle*. The latter, likewise deduced from the aforementioned cosmological and ontological premises, founds the unity of man's subjective knowledge and the objective knowledge about the man's wellbeing. In other words, CosmoBiotypological principle states: in so far as any subject (organism) is the integrated inseparable part of one common ascending (self-evolving) Process, therefore equally the natural gratifying<sup>5</sup> subjective perceptions of man (that is, following WHO's definition, "mental" (psychological) wellbeing of man), his/her appropriate social and cultural settings (WHO's "social wellbeing"), and his/her whole biological functional normality,<sup>6</sup> naturally serving the fulfilment of the man's basic specific (functional, cosmist, personal) assignment in the given social and cultural settings (WHO's "physical wellbeing"), they all are uterine and universal, as they all are the functional parts and developments of one common whole Process.

Now, from the all above stated substance author arrives at epistemologically valid conclusion: Man is not merely a bio-social creature, but precisely the bio-social-cosmist<sup>7</sup> one. That is precisely the object of cosmist epistemology to treat human knowledge as originating equally from man's genetic (bio-) experience, cultural knowledge of the surrounding social world, and the future emergent (transcendental) knowledge—to realise the hierarchical needs of the man's intrinsic personal (functional) ontogenetic 'program' (which is ultimately the integrated unit of the absolute Process's Program). Basically, the latter precisely constitutes the origin of human knowledge on the whole.

Reasonably, then, the purpose of cosmist epistemology is to treat HSC (*Homo Sapiens cosmicus*) as a positive phenomenon of reality (alike to HSS and HSA). To accomplish this purpose naturally a novel methodology is needed. The cosmist dialectical method<sup>8</sup> is precisely of innovative character—it considers the whole life (ontogenesis) of man (any other subject) as the unity of evolutionary emergent macro-process (of the man's ascending on the successive levels of his/her ontogenesis)—with the evolutionary emergent micro-processes (in Popperian essence) of adaptation and growth (development) from slightly-stable ('infantile') up to highly-stable ('mature') gradation of adaptivity on the given macro-level of the man's being.

However, contemporary mainstream (Western) biomedicine treats man ever as a bio-social organism and personality, and, in this, emphasising that man's individual differences can be most fruitfully pursued by paying attention to both these aspects of the man's nature. On contrary, as it was strenuously argued for above, cosmist paradigm considers man as a bio-social-cosmist creature, who necessarily and absolutely expediently 'survives' and develops on the given macro-level of his/her existence, but who equally needs to rediscover—on the every macro-level of the man's ontogenesis—his/her basic functionality and to realise its actual mode for the successful functional integration into the higher level of the man's wellbeing ontogenesis. In other words, cosmist epistemology explores not only the biological, social, and environmental factors of the nature and origin of human knowledge but, equally, and at the decisive extent, the cosmist factors of the man's subjective and objective understanding of the world and his/her natural (cosmist) personal wellbeing in the world. *Cosmist epistemology*—that is the study of universal human knowledge, which integrates subjective values and experience with objective knowledge (about the man's wellbeing, first of all), thus leading directly to the rational substantiation of the man's wellbeing (healthy) social life, behaviour dynamics and personality development.

Thereby, *cosmist epistemology* advances the whole-triple nature of human knowledge: 1) of man's (being HSA) biological and biosocial patterns of behaviour; 2) of man's (being HSS) social learning to objective realities or predefined norms and, as well, of the lived experience of the person's meanings, relations, values, patterns, etc.; 3) of man's cosmist (being HSC)—*subject-subject*—perception of the world and the transcendental realisation of the person's unique successful route on the future emergent level of his/her wellbeing ontogenesis. At this point, the object of cosmist



epistemology includes in itself basically the subjective knowledge of man about his/her current and on-going (into the emergent future) personal (individual's) wellbeing. The latter directly means that all knowledge about man is derived as much from objective study of man or consideration of his/her subjective present and past experience (both of empiricist and rationalist origin), as from the future emergent experience, coming from the transcendental apprehension by a person of the (cosmist) values of his future (emergent) functional integrated wellbeing. In this comes the task to explore thoroughly the 'process of processes' of individual's wellbeing—of the unity of evolutionary levels: of the (constant) macro-evolutionary ascent of man on the successively higher—of the emergent future—levels of his/her wellbeing, but, simultaneously and primarily, of the micro-evolutionary adaptational development on the given macro-level—up to the highest gradation of equilibrium and stability with the environment.

In other words cosmist epistemology resolves the needs for both ('micro-evolutionary') stability (through man's adaptational creativity) and ('macro-evolutionary') ascent—going above stability (through cosmist creativity). In this, as it is very important to underline, both forms of man's creativity have the positivist character. The difference is that *adaptational creativity* refers to 'naturalist positivism', whereas *creative creativity*—to 'cosmist positivism'. The former (naturalist p.), in author's cosmist context, recognises as true exclusively observable phenomena and admits as knowledge only that about which man can be absolutely certain, i.e., what is immediately graspable or "empirical". Man, therein, essentially deals with the sensibly given (current, present) reality, which is basically thought to be causally dependent (from the past and present occasions and factors) and rationally comprehensible. Naturally, at this point, in the realm of adaptational creativity man ever holds teleological ends (based in the given reality) and conducts constructive teleological responses to influences (stimuli) and demands of the environment.

On contrary, *cosmist positivism*, although admitting the same positively given reality of the present (caused by the past occasions), establishes the chief significance of the emergent future for man's wellbeing ontogenesis on the whole, the knowledge of which springs from primarily virtual and transcendental—principally subjective and gratifying—values. Substantially, both naturalist (existing exclusively in the present) and cosmist (admitting the chief significance of the emergent future) positivism deny metaphysical statements as meaningless. The point is, however, that cosmist positivism has the dialectical essence on the natural phenomena comprehension. Essentially, to state it once again, that *cosmist creativity* originates from values and goals of principally *subjective* (personal) origin, which primarily emerge from 'within the self' of man, having basically the intrinsic origination; whereas *adaptational creativity* (of naturalistic essence) relies chiefly on the science-driven values, justifying that the reason is the chief guide to knowledge and action.

In this course, aiming at the 'real world' implications of his cosmist epistemological approach, author attempted to elaborate, in the preceding exploration (Khroutski, 2001), the pattern of the "Doctor of Tomorrow". In his deductions, doctor of the future<sup>9</sup> ought to be simultaneously physician, psychologist (and sociologist), and philosopher. In this, physician and psychologist (sociologist) treat a patient in the *subject-object* epistemological line of relationship, aiming at the physiologic preservation (or recovery) of human health, and also on the disease prevention, treating the harmful influences of the environment. On contrary, the third—philosophical—macro-level of the "doctor of tomorrow" activity realises precisely the *subject-subject* epistemological line between a doctor and the patient. That is exactly the level of the application of the cosmist dialectical philosophy and the deduced theoretical proposals and methodologies. This level of doctor-patient relationship leads precisely to psychological ("mental") wellbeing of the person and, consequently, to "social" and "physical wellbeing". It is likewise essential that here—on the philosophical level—a doctor and his/her patient are partners in principle, constituting '*philosopher-philosopher*' relationship; moreover, the subjective (autonomous) personal feelings, perceptions and cogitation of a patient (a person), relative to the realisation of his/her current (adaptational) and the whole route of personal wellbeing

have the decisive significance, while the activity of the 'doctor-philosopher' acquires mainly the quality of delicate assistance.

At any rate, to author's firm conviction, epistemology of the future should appeal to general philosophy (as a branch of world knowledge and culture) to leave chiefly its academical sphere and be brought to bear upon the practical issues of life (primarily, of individual's health).

## **5. Restoring Russian Philosophical Cosmism (Universalism)**

The historical analysis of the notion "diseases of civilisation" does not constitute the subject of this exploration. However, it is essential that the original notion under consideration—*civilised man diseases* (CMD)—is a component part within one semantical family, which includes likewise the notions of "diseases of civilisation", "civilisation diseases", "civilisatory diseases", "civilised diseases", etc.

However, at the same time, it is substantial that there is no 'conceptual relationship' between the notion of *civilised man diseases* and the notion "diseases of civilisation" (and the analogous ones). The point is that the concept of "diseases of civilisation" had not been elaborated at the times of its active presentation—in the period of 1960-1980s. The latter is a natural outcome, in so far as it could not be elaborated, in principle, within the existed (and still existing) paradigm of naturalistic positivism (of *subject-object* rational relationship of man with the world), or alternative existential—irrational—consideration of man in the world (the latter accesses the *subject-subject* approach to comprehension of the interrelations of man with the world). Therefore, framing of a concept of "diseases of civilisation" in the 1960-80s (as well as today) is doomed to operate, as concerns the scientific productivity, within the search of the *objects* of external harmful risk factors and organismic markers (biological, physiological, metabolic, etc.) or behavioural deviancies, and unified pathogenic mechanisms of a chronic (civilisation) disease. Likewise, it naturally progresses, in the continued search for new findings, to the more profound and detailed examining of risk factors, biological and psychological markers, and pathogenic mechanisms exploiting in this the newest technologies, as in the example with computed radiography (Shemesh et al, 2001, pp.226-8).

Naturally, that is one of the absolutely necessary perspectives of biomedicine development. Author calls this perspective as *humane civilizational—normal*<sup>10</sup>--line of biomedicine development. That is, essentially, the rational course of biomedical philosophy, science, and practice—to explore all the causes and pathogenic factors of the all diseases, and to take possession of the all methods (technologies) of their radical treatment. This perspective is fully the proper one in relation to the diseases of traumatic or infectious causative origin. Principally, at this point, *humane civilizational (normal)* biomedicine development is embedded in the 'pathocentric' paradigm and realised in the *subject-object* relationship between physician and patient (scientist and man under exploration).

However, referring to civilised man diseases ("diseases of civilisation"), as it was argued for above, this line lacks the true humane perspective. Thereby, with respect to chronic noninfectious and nontraumatic diseases, author holds that precisely the '*health-centric*' approach is needed for their treatment. Today, objectively, '*Health is a central philosophical problem*' (Veber and Khroutski, 2000, 381).

It is noteworthy, herein, that there was no principal difference, in the 1960-80s, in treating conceptually the "diseases of civilisation" in the West and the so called 'countries of the socialist camp', united by the total devotion to the ideology of Marxism (dialectical and historical materialism). The point is that both scientific paradigms (Western and Soviet) totally denied the existence of the personal emergent future (man's free realisation of his/her wellbeing emergent future) and the necessity of *subject-subject* epistemological and scientific approach to the comprehension of individual's health and the etiogenesis of civilised man diseases. Moreover, in so far as socialist society (according to Marxism and, hence—to the chief ideological dogma of the total socialist system) was treated as the 'most perfect and ultimate in the entire history of the world', soviet biomedical

philosophers reduced the notion of "diseases of civilisation" to "certain negative consequences of scientific and technical revolution" (Cherkasov, 1983, p.65).

Therefore, nowadays (in democratic Russia), we, Russian scientists in biomedicine, could find ourselves in the remarkable historical condition—of the opportunity to revise the concept of "diseases of civilisation". (As it is a matter of fact, Soviet and Western science failed to comprehend the 'single causes' etiogenesis of "diseases of civilisation"—chronic noninfectious and nontraumatic diseases). In this, moreover, we could realise ourselves (in 'post-soviet' Russia of-today) in the unique—'naturally' phenomenological—conditions. The latter means that we had lost simultaneously and entirely (since the late 1980s) all our philosophical bases (for, the incompetence of Marxism—one-sole methodology-ideology in biomedical, social, and human sciences in Soviet Russia—was brought out). Hence, every Russian scientist could have become, at once, entirely free in consideration and synthesis of the entire range of existing concepts, theories and notions in world philosophy and science.

Taking this opportunity author, himself, primarily restores the potentials of the Russian cosmist philosophical tradition of pan-unity and active evolution. Philosophical cosmism (universalism) constituted the mainstream of Russian philosophy in the end of the 19-th and beginning of the 20-th century, having, at that time, favourable perspectives for its further evolution. However, since the 1917, the true Russian cosmism was not only badly repressed, even in a 'physical manner' ('gulags', executions, all kinds of ideological and physical terror), by the Bolsheviks (in favour of the totalitarian promotion of *marxism-leninism*), but it was also almost completely deleted from Russian cultural sphere and, accordingly, from the Western and world attention.

Author emphatically states, however, that the fundamentals of the philosophical tradition of *Russian cosmism* turn to be the most suitable for the purposes of philosophical synthesis under consideration. Relying on the work of the leading Russian explorers of philosophical cosmism (S. Semenova, 1993; V. Sagatovsky, 1994; A. Aleshin, 1995; O. Shubaro, 1998; I. Kaltchev<sup>11</sup>, 1999; E. Gutov, 1996; and others) here are listed ten most characteristic features of Russian cosmism:

- 1) Idea of *Pan-Unity (Total-Unity)*—the central idea of Russian cosmism;
- 2) Idea of *incompleteness of the evolution of world and man*;
- 3) Idea of *creative destination of man*;
- 4) Idea of *transformation of world as the meaning of human life*;
- 5) Idea of *responsibility of man for the fortune of universe*;
- 6) Idea of *active evolution*;
- 7) Recognition of the *ascending character of evolution*;
- 8) Idea of the *synthesis of sciences*;
- 9) Epistemological idea, that the *true knowledge is the result of empirical, rational and mystical (intuitive) cognition in their proper interconnection*;
- 10) Axiological idea, that all *human sufferings originate from an inappropriate cosmic position and activity of man*.

## **6. "Diseases of Civilisation" are the 'Civilised Man Diseases'—Diseases of the Civilised Man's Non-Utilised Creative Energy**

Now, restoring and developing philosophical cosmism, author unfolds his original systemic variant of cosmist world-view—of philosophical cosmology, ontological ACW-system and cosmist epistemology.

Working on this basis, author pushes forward (with respect to the epistemology of civilised man diseases (CMD)—to understanding of their etiogenesis) his chief proposition, asserting that CMD arise from the excess amount of internal creative—psychophysiological—energy, not having been utilised during current man's vital activity.

Really, in the cosmist course, the entire ontogenesis of man is basically the ontogenesis of *Homo Sapiens cosmicus* (HSC), for the meaning of man's life is his/her ultimate personal (specific, functional) contribution to the wellbeing of Process. Man is ultimately the function of Process—that is the basic tenet of the whole cosmist philosophy.

Hence, lawfully, the whole vital (psychophysiological) energy of man is (ultimately) the creative one. From this basic assumption follows that there are three macro-directions of the self-exploitation of man's creative (vital) energy: a) *physiological*—of the organismic growth and regeneration of tissues, and to the maintenance of the internal environment of organism in the state of equilibrium (within narrow limits—of homeostasis) with respect to various functions and to the chemical compositions of the fluids and tissues; b) *adaptational*—to the maintenance or restoration of equilibrium with external environment, in response to external stimuli or meeting new conditions and environmental demands, and due to inborn and acquired (instinctual, learnt, experienced, etc.) adaptive (or coping) mechanisms; c) *cosmist*—conversely, of the subjective self-going out (self-transcendence) of the 'equilibrium with environment' (of the adaptational stable wellbeing)—for the successful ascent on the next future emergent level of the man's wellbeing ontogenesis.

In other words, for instance, if man falls ill, his/her total capacity of vital energy would be chiefly exploited within organism for the sake to provide the processes of recovery; in turn, if man falls under the excessive environmental stress (as it happens, for example, during war periods)—his/her total vital energy would be used utmost to maintain physiological homeostasis and to meet the adaptational demands of behavioural survival in the given extreme surroundings.

But if healthy (in physiological relation) man has resolved his adaptational problems and<sup>12</sup> successfully satisfied his/her dominating needs in the given environment, then inevitably the excessive amount of internal vital energy, of directly cosmist creative essence would be certainly accumulated within the man.<sup>13</sup> Then, there is the sole (natural) way for man to discharge this excessive amount of internal vital (psychophysiological) energy—to rediscover subjectively his/her basic functional ability and realise the appropriate mode of its realisation and, next, start the process of satisfaction of the new arising need of the man's ontogenetic necessity to functionally integrate into the future higher emergent level of the man's wellbeing ontogenesis. In the case that man is unaware of this necessity for his/her wellbeing, or the environment suppresses his/her creative activity—then the excess amount of non-utilised internal (creative) energy would inevitable disorder the psychophysiological harmony of the man's organism.

It is a very difficult task to find the direct evidence to the proposition having been pushed forward, for, there naturally does not exist such an issue to inquire into in the field of contemporary biomedicine. Russian Professor I.Gundarov, however, carried out a unique epidemiological investigation, in which he reached a tenable conclusion "of the spiritual non-wellbeing as the cause of the demographic disaster in Russia" (Gundarov, 1995). In accord with this statement another serious investigation put the stress on the evidence that, in a terminal health crisis,<sup>14</sup>

"changes in mortality in children were not systematic and mortality among the old did not increase much. The mortality increase was proportionally higher among people of working age, supposed to be the most active and wealthy." (Shkolnikov et al., 1998, p.2007).

Indirect proofs are more available in verifying the aforementioned proposition—of the decisive significance of the excess amount of creative energy in a person,<sup>15</sup> not having been utilised during man's life—to cause the civilised man diseases ("diseases of civilisation").

For instance, highly valid statistical finding is that during Great Patriotic war (1941-1945) a serious reduce in the morbidity of rheumatism and bronchial asthma was ascertained. (Molchanov and Gembitski, 1983, p.21).

The same authors had also examined the structure of morbidity during this war (p.17-26). On the other hand, an investigation into the structure of chronic diseases of the inhabitants of Sankt-

Petersburg of-today was conducted with the aim to compare the morbidity of Peterburgians from elite (prestigious) districts with those, living in slums (Gubachev, and Makienko, 1997, p.46).

Comparison of the results of these two extremely different investigations impresses strongly. Elite settlements (with their high index of wellness, health services, education, prestigious employment, personal security, etc.) stand out—by an order of magnitude greater—in the dominance of cardiovascular diseases, mainly of ischaemic heart disease (coronary artery disease). Conversely, zones of slums turned to be exceptional—by an order of magnitude lesser—in cardiovascular morbidity but, instead, with dominance of gastrointestinal diseases.

That is the extraordinary analogy, for, the similar change of the structure of morbidity had been fixed during the war time; at this point, the first place, in the general structure of therapeutic diseases, was occupied by the gastrointestinal diseases (25-30% of the whole morbidity), the second place—by pulmonary diseases (13-20%), and only the third place—by cardiovascular diseases (8-10%) (Molchanov and Gembitski, 1983, p.23). In peaceful times, however, the cardiovascular diseases evidently dominate in the general structure of chronic noninfectious diseases.

Thereby, cardiovascular diseases are relegated to the background during war periods and among unfortunate layers of population. (The author's discourse, naturally, does not lead to a 'conclusion' that the condition of 'eternal war' should be established to solve the problem of civilised man diseases). How did the researches (to the point, separately from each other) interpret their findings? Molchanov and Gembitski accounted for the main cause lying in "the change of organismic reactivity under the altered external conditions" (p.23). Gubachev and Makienko considered the decisive factor to be the "manifested and long-drawn-out sympathoadrenal activation", caused by the high degree of responsibility bearing for the results of activity, constant high psychosocial stress level, minimal standard of physical activity, combining with erudition, high index of wellness" (p.46).

Author continues to consider the object of emotional stress in the next section of the work. Herein, however, he emphasises that both man 'in peaceful times' and man 'from elite districts' (as against 'war time man' and 'man from slums') bear the properties, in the cosmist context, precisely of *civilised man*: of his/her being protected, at a great extent, from physical and ecological (social) environmental stresses, thus converting him/her into the HSC-subject—of the accumulation of free (unused) creative energy ready to be exploited precisely for the accomplishing specific (personal) cosmist tasks. On the contrary, the latter category of inhabitants (who is outside of the stable relations with the enclosing world) subjects to unfavourable and harmful influences of the environment and thus meets excessive adaptational requirements. In outcome, the socially unsuccessful people would be chiefly occupied with the problems of survival and, naturally, there should not be the case of the accumulation of free creative energy within their organisms.

Therefore, in substance, these facts could implicitly indicate that the emotional stress *civilised man* is often suffering from, has primarily the internal (intraorganismic) origination. Then, chronic diseases, associated with long-term emotional stress, largely come 'from within', but not 'from outside'.

## **7. Difficulty in Satisfaction of Man's Basic Urges—the Chief Psychological Reason for 'General-Illness of the Personality'**

Starting this part, author puts forward his next deduced thesis, likewise stemming from the cosmist philosophical bases: Wellbeing (health) of man (with respect to chronic noninfectious and nontraumatic diseases) chiefly is the function of his/her ability to discharge (throw off, eject, get rid of) from the power of constantly being produced and accumulated creative energy<sup>16</sup> within man's soma, obligatory including the brain—the centre of his/her sensation and of intellectual and neuroendocrine activity.

At this point author points to the substantive similarities of the principles of some generally accepted outstanding theories in psychology and psychophysiology. Ultimately, in this, he attempts to

disclose that world leading psychological and psychophysiological schools basically and directly bind the psychological non-wellbeing of man with the excess of his/her intrinsic vital non-utilised energy.

To start with, Academician P.V.Simonov—prominent Russian physiologist—found out by investigation and fixed conclusively that man's emotions are determined by some actual need and the evaluation of the probability of its satisfaction on the basis of the man's phylo- and ontogenetic experience (Simonov, 1986). That is the core tenet of P.Simonov's "need-informational theory of emotions" (Simonov, 1998, pp.143-144). From this follows that low probability of the goal's achievement leads to negative emotions (fear, anxiety, anger, grief, etc.),<sup>17</sup> conversely positive emotions (in substance, of attainability of the actual need satisfaction) lead to delight, pleasure, happiness (what accompanies the natural discharge of psychophysiological strain).

Further, the special emphasis is placed exactly on the fact that main world psychological theories bring account for man's mental non-wellbeing precisely through the non-utilisation of the man's excessive intrinsic (unconscious and conscious) vital energy. Referring to the substance of the fascinating synthetic work of W. Edgar Vinacke on psychological health (Vinacke, 1984), therein the assertion is underlined that "the instigative forces especially characterise human beings." (p.312). The terms most commonly used for this function are "instinct," "need," "drive," and "motive." (p.286). Thus, in psychoanalytic theory the instigation function is attributed to the instincts of the libido. In drive theory (neo-behaviourism), likewise, innate forces in the organism continue, relatively unchanged, throughout life, to energise behaviour (p.312). In humanistic views these forces are similarly treated as inherent in the organism, striving for wholeness or selfhood (Jung), and self-actualisation (Rogers, Maslow) (p.314). At any rate, however, being treated as inherent in the organism and as unchanging throughout life (psychoanalysis, neobehaviorism, and humanistic theory) or, in contrast, maintained that instigative systems may be acquired during socialisation (learned cognitive systems), replacing in explanatory power whatever original drives there may be (p.286)—evidently is accepted the basic principle: all the instigative forces primarily have the internal character.

As a result, for example (similarly with the author's original assumptions), in psychoanalysis unhealthy ("neurotic") person is the one, "who has a great weight of unconscious conflict, suffers from a burden of anxiety, and ties up a great amount of energy in defensive patterns of behaviour... has difficulty in satisfying instinctive impulses and engages in much futile, wasted, and unproductive activity." (p.292). On the other hand, humanist theories, although relying on the same inherent energising forces in the organism, have opposed the libido and other drive theories and moved away from a purely personal value system toward "a continuing organismic valuing process" (Rogers, 1951, p.522) and thus, likewise run through Maslow's views, established a healthy man to be a self-actualising person, who achieves a harmoniously functioning hierarchy of motives, without conflict, in which the higher motives are no longer blocked by demands at a lower level. (Vinacke, 1984, 303).

"That is, general-illness of the personality is seen as any falling short of growth, or of self-actualisation, or of full-humanness. And the main source of illness (although not the only one) is seen as frustrations (of the basic needs, of the B-values, of idiosyncratic potentials, of expression of the self, and of the tendency of the person to grow in his own style and at his own pace) especially in the early years of life." (Maslow, 1968, p.193).

Evidently, author's original cosmist position is close to the humanist one and, thus, to 'hierarchy of inherent personal needs' theory of man's wellbeing ontogenesis. Noteworthy, this position bears some substantial similarity to P.V.Simonov's consideration of personality "as an individual unique composition and internal hierarchy of his vital, social, and individual needs" (Simonov, 1992, p.3). In a clear-cut distinction, however, author basically considers man as a cosmo-bio-social creature (who is, ultimately, the function of Process), but not only as a biosocial one.

## **8. 'Forward to Hippocrates': True Humane—CosmoBiotypological—line of biomedical evolution.**

Remarkably, author's main thesis—that chronic noninfectious and nontraumatic disease have the inherent etiogenesis—is, in substance, the thesis of Hippocrates, father of medicine, himself, who stated in his time (citing B.Aschner, 1941, p.261) that "the majority of all diseases does not come from without (like injury or infection), but from within..."

"Cancer and diseases of the cardiovascular system affect a great percentage of the population in Western countries. This undeniable reality prompts us to rediscover the long-forgotten Hippocratic principles regarding healthful behaviour, the quality of life, and the healing power of nature... Depersonalisation of the patient and a lost sense of his or her individuality can be confronted by keeping the Hippocratic humanistic values in perfect balance with progress in technology." (Marketos and Skiadas, 1999, p.1163).

Therefore, the being argued future emergent—cosmist—line of biomedical evolution could be accurately called as the 'True Humane—Cosmist-Hippocratic' one.

It is, herein, important that Hippocrates was a genuine positivist and cosmist. He released the healing art from demons, superstition, and magic. Diseases were given a logical interpretation. "The name Hippocrates is associated with the transition from empiricism to rational medicine, and perhaps this represents his most important contribution to medicine." (p.1160). The great physician attributed diseases to natural causes, formed a diagnostic system based on clinical observation and logical reasoning. He treated patients as psychosomatic entities (a holistic medical approach). Therefore, due to Hippocrates, "as an art dealing with life, medicine was regarded as a part of philosophy in its broader sense." (p.1162).

In this line, Hippocrates considered man to be part of the nature world and subject to the same laws as the rest of the world. The first Western global and unitarian concept of biotypology—'Humoral theory' of Hippocrates—precisely is based on this conception of man as a microcosmos that contains in itself all the characteristics of the universe. (Marino, 1999, p.17). At this point, it is utmost essential that the cosmic and biotypological approach formed the basis of Hippocrates's rational whole humane approach to the patient. Biotypology is precisely the comprehensive study of human being and, therefore, "a typical example of 'holistic' thinking." (p.17). At the same time, the history of more than 25 centuries of modern biomedicine more than convincingly proved that there exists no other rational method (than biotypological) of rational wholistic biomedical examination of man.

However, in our cosmist context, Hippocrates was a naturalistic positivist, but not the cosmist one. He treated the surrounding world as *state*, and thus subscribed to a "whole humane (psychosociosomatic) approach to the patient." (Marketos and Skiadas, 1999, p.1163). But Hippocrates was not the *dialectical cosmist*, who treats the surrounding world and man (the patient) as *emergent evolutionary process*.

At any rate, Hippocrates was a true cosmist and wholist. Author believes that now the historical time has evidently finished its ascending evolutionary circle and crosses, in our days, the point of the beginning of a new epoch of spiral evolutionary ascent—now of CosmoBiotypology basing on the philosophical cosmology and ACW-ontology.

It is utmost important that biotypology (constitutionalism) is ever a Mean, but Hippocratism, conversely, is ever an End, but never a Mean. As Carsten Timmermann forcefully shows in his exploration, Hippocratic principles are still "ready to be appropriated and reinterpreted in correspondence with the medical ideals of an era." (Timmermann, 2001, p.324). They are, originally, precisely as Castiglioni—an author, in 1926, of the very expression of Neo-Hippocratism (in this, B.Aschner is cited, 1941, p.262)—laid the stress upon the essence of Hippocratism to be "synthetic, cosmic, constitutional, humoral, biological, dynamic, and artistic, helping the self-healing power of nature, (physis) to a large extent by appropriate medical treatment."

However, it is likewise utmost essential, that on the basis of the having been proposed cosmist dialectical paradigm, 'Hippocratic (constitutional) form of diagnosis' acquires a form of the *CosmoBiotypological* one, thus, of principally distinctive essence. *CosmoBiotype*—that is the

biological expression of the cosmic basic functionality of the man, which primarily should be revealed personally by a patient him/herself—through precisely the man's subjective original realization of his/her preferable and gratifying route of life, which, in turn, expediently ought to be supplemented and corroborated by the doctor's constitutionologic examination of the patient. In other words, the basic functionality of man has primarily and ultimately the cosmist personal perception (of the man's cosmic assignment), which thus ought to be substantially realised by the man him/herself. The latter likewise means that the successful subjective realisation of this basic functionality is a cornerstone for his/her wellbeing ontogenesis. Naturally, this basic functionality demands to be re-discovered, realised and executed on the every macro-level of the man's ontogenesis. Again, there is some similarity with the 'holist-dynamic' and 'hierarchy-of-needs' theory of A.Maslow, which states precisely that:

[B]asic needs or basic values therefore may be treated both as ends and as steps toward a single end-goal. It is true that there is a single, ultimate value or end of life and also it is just as true that we have a hierarchical and developmental system of values, complexly interrelated. (Maslow, 1968, p.154).

Additionally, there are some clear-cut distinctions of the CosmoBiotypological approach. Firstly, it is significant to remind, that Neo-Hippocratism followed the scientific formula, articulated by Nicola Pende—one of the leaders of Neo-Hippocratic medicine, that "Biotype is not only the expression of psychosomatic individuality but it is a base for the *self* characterisation with its ethical, philosophical and moral problems." (in this, Lisitsin is cited, 1982, p.298). On contrary, CosmoBiotypology admits the priority of subjective (gratifying) perceptions of a person (with respect to his/her personal route of wellbeing ontogenesis), but assigns the secondary purpose of the biotypological (physiological) examination, of the supplementing and corroborating character. However, if the matter concerns the already existing civilised man disease, then the physiological knowing of its etiogenic mechanisms acquires the decisive significance (to determine the specific—individual—mode of its treatment).

Finally, as it is sometimes argued against, CosmoBiotypology is not just a 'return' to the themes of vitalism and the imbalance of internal humours. Yet, J.S.Haldane, the founder of the doctrine of holism, stressed that:

"Vitalism in any form has the same fundamental defect as a mechanistic theory of life. It assumes that a living organism and its environment can be separated in observation and thought, when they cannot be separated." (Haldane, 1931, p.29). Moreover, from the holistic stand, "the normal of biology is an individual normal and not a statistical normal." (p.20).

Furthermore, in so far as the wholism under consideration has the cosmist essence, "the imbalance of internal humours" emerges from a principally new substance—from the excessive accumulation of internal creative energy, which, in turn, origins from the incompetence of modern and post-modern philosophy, science, and man. In other words, "the imbalance of internal humours"—the certain central (cerebral) disorders of self-regulation—has primarily the intrinsic (subjective) origin, but not the environmental one.

It is also essential, in conclusion, that the *true humane (Cosmist-Hippocratic)* line of biomedicine evolution has basically the *health-centric* essence, in contradistinction to *humane civilizational (normal)—pathocentric*—line of biomedical development.

Relying on this point author attempts, in the following section, to comprehend etiogenically the entire range of existing diseases.

## **9. 'Man's Artificial Chronic Diseases': Main Postulates of their Etiogenesis**

It is generally accepted that modelling is a regular initial stage in solving a complex scientific problem. Modelling, in turn, inevitably stands in need of the simplification of basic principles and notions with respect to the object under consideration.

Precisely following this way, author represents here, in the simplified form, the salient points of his framework:



A) He divides the whole number of diseases into four classes (in relation to the origin of etiogenic factor:

1) Firstly he separates *genetic* diseases—genetic in origin; which, however, fall outside the scope of this exploration;

2) Secondly, author founds two classes of the so-called '*natural causal*' diseases - *infectious*, and *traumatic* and *toxicological* diseases. All these diseases equally are caused by the direct *specific* extrinsic (environmental) altering etiogenic factors (of utmost broad forms—of infectious or of physical or chemical (toxicological) origin). The study and treatment of these—*natural causal*—diseases lawfully is realised in the *humane civilizational (normal)* line of biomedicine development, within *subject-object* relationship between a doctor and the patient, man and the world.

3) Finally, author originates and substantiates etiologically a new class of '*artificial civilizational*' diseases—of *CMD-civilised man diseases* (this term corresponds with the previous ones of "diseases of civilisation", "civilisatory diseases", etc.). Within the limits of the existing *pathocentric* (of naturalistic positivism) *humane civilizational* paradigm (of *subject-object* relationship essence), CMD are substantially *non-specific* and multifactorial, as concerns their pathogenesis.<sup>18</sup> Naturally, these diseases undergo nowadays systemic and very close examination on the unified mechanisms<sup>19</sup> of their pathogenesis. Likewise, the risk factors (biological, somatic, metabolic, behavioural, environmental, etc.) associated with the CMD-epidemiology, constitute the objective of paramount importance. Naturally, in this line, the 'individualisation' process, with reference to "diseases of civilisation", develops at identifying new risk factors (biological markers) eventually on the genetic (molecular) level, as well as the "privatisation of risk factor knowledge" takes place. In the latter attempt is implied to predict individuals' morbid futures on the basis of risk factor profile by mean of the conceptual and quantitative limits of "individual risk" estimation." (Rockhill, 2001, p.365). By no means, that is a very significant perspective of biomedicine development.

However, this way does not lead, in principle, to the comprehension of civilised man diseases (CMD) etiogenesis. Henceforth, to tackle the problem of CMD-etogenesis, author pushes forward a *health-centric* cosmist dialectical paradigm of *subject-subject* pattern of scientific comprehension of world and man. In this order he advances new *cosmist* systemic philosophical bases of cosmological, ontological and epistemological essence. On this basis, his main 'real world' deduction is that civilised man diseases are, in substance, *man's artificial chronic diseases*, which are basically caused by the incompetence (with respect to CMD-etogenesis) of contemporary philosophy, science and man. In this, the term 'man' refers traditionally to the human race in general, or 'mankind'; while the term 'artificial' precisely means man's (anthropocentric) counteraction to natural (cosmic) laws of Process (CEPLE, Absolute)—one common whole cosmic evolutionary process of the life on the Earth. Noteworthy, the term 'artificial' largely corresponds with the concept of "natural technologies of biological systems" by prominent Russian physiologist A.M.Ugolev, in which he maintains that "man ought to realise him/herself as a part of the hierarchy of technologies in biosphere, where natural and artificial technologies interrelate, and where man meets the task—to regulate the whole aggregate of technologies in biosphere." (Ugolev, 1987, p.276). Further, relying on his cosmist basis, and as refers to CMD-etogenesis, author hypothetically pushes forward several more crucial points of his framework (a 'system of axioms' with respect to CMD-etogenesis):

1) Civilised man diseases (CMD) are chiefly caused by the excessive amount of non-realised and non-utilised creative (of adaptational and cosmist character) energy within the organism of man—that is the chief factor, of intrinsic altering essence, causing the CMD;

2) The excess of this non-utilised creative energy is directly responsible for the genesis of long-term ('stagnant') emotional stresses, which strain tightly the cerebral centra and systems, and eventually end in break-down of the central self-regulation mechanisms—of organismic homeostasis maintenance.

3) In turn, 'stagnant emotional stress' is precisely an *intrinsic* phenomenon; its origin goes back to man's inability to realise and put into operation, for a long-term period, his/her basic gratifying functional ability. In other words, in the case of the man's being in the state of physical and social wellbeing (what is natural for civilised man) and, simultaneously, in the state of unawareness of the goals (channels) of the excess of his/her accumulated creative energy throwing off (releasing)—this internal creative (vital) energy, being constantly produced and not having the suitable outlet for its satisfactory realisation and exploitation, would be blocked within the organism and, overfilling it, start to strain persistently central systems of the organismic self-regulation—up to their break-down and thus, eventually, cause the disturbance of the functioning of the entire organism.

4) Therefore, the main factor of man's artificial chronic diseases (CMD) occurrence is the man's incapability to 'throw off' the excess of internal (intrinsic) creative energy through the unawareness of the values and objectives of his/her personal (functional, gratifying) mental and motor activity. Other modes of activity would not serve this purpose satisfactorily.

5) *Intrinsic stagnant emotional stress* (ISES) is the sole and primary causative condition of specific psychophysiological disturbances, which directly lead to numerous CMD—civilised man diseases (man's artificial chronic diseases).

In turn, primary ISES causes the numerous secondary factors (generally accepted risk factors), which, in essence, are the natural components of the urgent functional systems responding to long-term ISES, or the remedies of the man for the self-compensation of the state of frustration, caused by the original ISES—intrinsic stagnant emotional stress. The former are manifested, for example, by hypertension, high blood cholesterol, high fasting blood glucose, hemostatic factors, or physical inactivity—natural components of the organism's response (mobilisation) under the unknown stress; the latter, in turn, such as obesity (frequent consuming of food reduces the stress to a certain extent), cigarette smoking, alcohol consumption—all these modes lead, in various ways, to the relaxation of the long-term state of frustration caused by the original chronic emotional stress, having been originated, in turn, by the man's inability to satisfy an actual need. (Actually, there is one-sole natural way to settle the stress—to discover, realise, and execute the gratifying specific (personal) functional activity by the man him/herself). All the aforementioned factors remarkably compose (except the biological ones of sex and age) the generally accepted set of risk factors of atherosclerosis (Tegos et al, 2001). Noteworthy, the factor of emotional stress is absent in this, although it is assumed to be a contributing one.

At this point, Professor Gundarov shares the same position. Referring to the data of domestic (conducted in Russia) population researches, he argues that spiritual (mental) non-wellbeing causes damaging influence on the human organism not only in direct way, but also through the "stimulation of the other risk mechanisms: addictions (smoking, alcoholism, drug addiction), an abnormal increase or decrease of weight of the body, etc." These "secondary risk mechanisms» evidently correlate with the man's conditions of hopelessness, loss of the meaning of life, aggression (Gundarov, 2001, p.86).

In substance, the analysis of the notion 'emotional stress' does not constitute the subject-matter of this paper. However, at this point, it should be noted that emotional stress, from the stand of traditional Western biomedicine, apparently has the *extrinsic* origin, being associated largely with acute stressors, life change events, stressful situations and crises, interpersonal relations, etc., and thereby dealing mainly with man's ability to counteract stress or to cope with a stressful relationship.

Contrasting with this generally accepted scientific position, author relies largely, in his original approach, on the "theory of functional systems" (by P.Anokhin and K.Sudakov), which treats stress, of any origin, as a systemic response of the organism to a conflict situation. "The theory of functional systems regards, along with the action of stressors, the conflict behavioural situation in which the subjects are deprived of a possibility to satisfy their main requirements" (Sudakov, 1992, p.86). Thereby, in a conflict situation, a summation of negative excitations in the structures of the brain and their transition into a "stagnant" state occurs, which acquires a capacity to exert constant tonic

influences on the self-regulation mechanisms of particular functional systems of the homeostatic level, with the eventual disturbance of the functions of the organism (p.86). Essentially, the "conflict situation" means herein that the strongly motivated man (by the biological or social need) is deprived of its satisfaction for a long-term period (p.87). It is also substantial that the theory of functional systems establishes "the system-organizing role of basic needs" as its guiding principle. (Sudakov, 1997, p.395). It is likewise of real value that the principal scheme of functional system is characterised by "universality, constructivity, and practical usefulness". (Sudakov, 1998, p.171).

6) The specific etiogenesis of a CMD—man's artificial chronic disease, itself, is effected in the specific breakdown of the 'weak locus' ("*Locus minoris resistentiae*")—CosmoBiotypologically predetermined—of the centrally organised and wholly organising (organism) neuroendocrinoimmune substance of human being.

7) The chief factor for man's wellbeing (in relation to CMD) is the constant 'throwing off' (exploitation) of the excess of vital (creative) energy, constantly being produced in the man's organism. Otherwise, logically, the only alternative way would be not to allow the accumulation, itself, of the 'excess of vital (creative) energy' (that is, to live constantly in the 'conditions of war time'—of extreme adaptational demands, or to be dependent on addictive substances (alcohol, drugs) causing psychological relaxation). Naturally, however, the latter forms have absolutely non-humane essence.

8) In relation to man's artificial chronic diseases, frustration emotions have no causative role but they serve as the important manifestation (symptom)—of subjective distinct feeling of the general non-wellbeing of man, which correlates with the stagnant excitement of the organism's centra of self-regulation (involving cerebral motive centra) caused by the excess amount of the non-realised and non-utilised vital energy within the man's organism.

9) Cosmist epistemology in relation to CMD—that is the *health-centric* epistemology of individual's health: of man's natural knowledge (ever primarily subjective) about his/her cosmist—healthy, functional—place in the world (CEPLE, Process), within the given circumstances. The inappropriate position of man ("microcosmos") in Process ("macrocosmos") inevitably leads to the summation of negative excitations and its harmful strain on neuroendocrinoimmune centra and systems, and their harmonious interrelationship, what, in turn, further adversely affects physiological (somatic) functioning of extra-cranial bodily organs and peripheral systems.

10) Simultaneously, the scientific comprehension of the etiogenesis of CMD, in this light, is the bringing out of the specific primary break-down (under the adverse strain of emotional stress) of the naturally 'weak locus' of the entire central individual CosmoBiotypological (functional, natural, harmonious) organisation of the man's organism. *CosmoBiotypology*—that is Functional Cosmist Biotypology, designed for the ultimate execution of the man's functional contribution to Process's wellbeing and, therefore, possessing the intrinsic specific integrated biological type of organisation. In this way, metaphorically, neurocyte naturally differs from a muscle cell. At this point, however, let it be emphasised once again, man's intrinsic basic (and ultimate) personal (functional) organisation primarily is realised subjectively by him/herself as a personal assignment. Thus, at this point, we need, epistemologically, the specific—*cosmist functional systemic*—approach at the consideration of CosmoBiotypological issues (searching primarily for the subjective revealing and the following expedient biological corroboration of the traits and markers of precisely individual's health, not of disease).

Henceforth, the reasonable task arises to complete the elaboration of the CosmoBiotypology theory itself (and, naturally, of underlying cosmist philosophical bases). Of course, that is a great work—to transcribe the universal laws of Process's evolution and translate them consistently to the man's (any subject's) evolution (ontogenesis). Apparently, therefore, that is not the matter of the nearest future, but, however, that is principally the conceivable cognisance, to author's firm conviction.

## **10. Universal Modelling of the Etiogenesis of Modern Diseases**

Finally, attempting to organise the substance of the exploration more intelligibly, it would be relevant to represent two schemes of hypothetical modelling: of the 1) Epistemological classification of the etiogenesis of modern diseases; 2) Of 5 stages of the universal etiopathogenesis of modern chronic noninfectious and nontraumatic diseases (civilised man diseases).

### Scheme1: Epistemological classification of the etiogeneses of modern diseases

#### A) *Genetic* diseases - of genetic origin

I) *Extrinsic Natural Causal* diseases of *pathocentric* study and treatment  
(relying on *subject-object* type of epistemological exploration)

B) *Infectious* diseases  
(caused by the direct invasion of  
*specific* pathogen)

Differentiation:

*Dependent on causative agent:*  
Viral, bacterial, fungal, protozoic,  
caused by worms, etc.

*Dependent on the duration of  
the infectious process:*  
Acute (cyclic), persistent, chronic,  
etc.

C) *Traumatic* and *Toxicological* diseases  
(caused by the direct injury of man's body by  
*specific* – physical or chemical – factor)

Differentiation:

*Dependent on the nature of injuring factor:*

*Natural*—of natural physical and chemical origin  
*Ecological*—of anthropogenetic physical and  
chemical origin

*Dependent on the exposition:*  
Acute and chronic

II) *Intrinsic Artificial Civilizational* diseases of *health-centric* study and treatment  
(involving the *subject-subject* type of epistemological exploration)

#### D) Civilised Man Diseases (*Man's Artificial Chronic diseases*)

*Man's artificial chronic diseases* (MACD) stem from contemporary incompetence of philosophy, science (biomedicine), and man, and originally are brought about by the excess amount of creative (vital) energy not having been realised and utilised by man—through deficiency of the activity (for a long-term period) satisfying the man's needs of specific (personal) creativity; this non-utilised energy forms a stagnant (emotional) stress primarily on the central—neuroendocrinoimmune—substance (centra) of self-regulation of the organism, with the following break-down of 'homeostatic' activity of the CosmoBiotypologically 'weak locuses' and eventual dysfunctional and structural damaging of the bodily organs. *Intrinsic stagnant emotional stress* (ISES) is the primary factor of *man's artificial chronic diseases* (MACD); secondarily, ISES gives rise, in time, to the appearance of 'risk factors' (of constituent or compensatory origin). In turn, ISES has its origin in the man's incapability to re-discover, realise, and execute his/her basic specific (functional) gratifying activity—on the every macro-level of the man's ontogenesis and for the ultimate personal contribution to Process's wellbeing. Therefore, to determine the specific cause of a person's MACD, doctor ought to rely, primarily, on the man's subjective findings (of his/her basic functionality), but, secondary, therein depending basically on the CosmoBiotypology theory (which is a challenge to the future of science), to reveal the corroborating (or refuting)—CosmoBiotypological—empirical data, and further undertake the rational substantiation of the individual etiogenesis of the MACD (of the atherosclerosis, for instance).

## Scheme 2: 5 stages of the universal etiopathogenesis of modern chronic noninfectious and nontraumatic diseases (civilised man diseases).

<p><b>I stage:</b> Of an altering intrinsic causative factor occurrence: That is the accumulation of the excess amount of non-utilised creative (vital) energy during long-term period of man's life (due to the man's inability to realise satisfactorily the actual need of adaptational or cosmist creativity)—formation of intrinsic stagnant emotional stress—the state of the summation and overfilling of frustration excitations in the brain structures</p>
<p><b>II stage:</b> This factor directly and successively causes strain, disturbance, and eventually—break-down of central (cerebral, of natural harmony) interaction and self-regulation mechanisms; thereafter it specifically injures primarily the 'weak locus' of the individual form of type—<i>CosmoBiotype</i>—harmony of the intrinsic order of centrally organised and wholly organising (organism and person) neuroendocrinoimmune substance of the man.</p>
<p><b>III stage:</b> the so-called '<i>III-stage</i>'<sup>20</sup> of man's health: herein, there are no organ-specific somatic disturbances, but it manifests itself in the secondary behavioural, psychophysiological, bodily (as obesity), vegetative, immune, metabolic, etc., deviations, caused by the primary central-organising disturbances; the 'III-stage' manifestations chiefly correspond with the generally accepted risk factors of modern noninfectious and nontraumatic diseases.</p>
<p><b>IV stage:</b> Formation of the functional disturbances, due to the reversible degenerative impairments of the structures of the constitutionally (CosmoBiotypologically) 'weak' organs and systems of the man's organism (due to continuous disharmonious vegetative tension caused by the primary central-organising disturbances).</p>
<p><b>V stage:</b> Non-reversible structural (organic) and functional damage of the constitutionally 'weak' organs and systems (as a result of complete exhaustion of organic compensatory and defence resources).</p>

Making a comment on the second scheme it might be relevant to note that modern biomedicine treats only the third, fourth and fifth stages of CMD-pathogenesis. Thus, causative (etiogenic) elements (the first and second stages) turn out to be beyond the interest of modern biomedicine. Henceforth, at this point, author appeals to the entire biomedicine and attempts by himself, herein, to outline a new perspective for biomedicine of application its capacities to the comprehension of the etiogenesis of chronic noninfectious and nontraumatic diseases—man's artificial chronic diseases (civilised man diseases).

### Conclusion

Vladimir Solovyov, a bright representative of Russian philosophical cosmism (universalism), as far as in the year 1888 asserted that "a moral creature never is able to release himself from the power of divine idea, which is the meaning of his being, but it is the function of himself to carry it in his heart and destiny as blessing, or as curse." (Solovyov, 1992, p.187).

It is essential that author builds his cosmist approach on the Russian philosophical tradition of pan-unity and active evolution. The latter, however, is situated far away from current mainstream contributions. Nevertheless, it is essential to emphasise in conclusion, author does not intend in his paper merely to propagate a new 'cosmist wholistic philosophy', but he precisely undertakes the task to substantiate novel philosophical (cosmological, ontological, epistemological) bases, appropriate for the deduction of guiding theoretical principles, sufficient, in turn, for the tackling of the problem of

philosophical and scientific comprehension of the 'single causes' etiogenesis of contemporary chronic noninfectious and nontraumatic diseases—civilised man diseases (“diseases of civilisation”). Henceforth, CosmoBiotypological trend (forming, in this, a central point) is a genuine and direct challenge to world's science and philosophy.

Western traditional medicine, entirely originated on Hippocratic principles of wholly (synthetic) individual (constitutional, psychobiological) rational (cosmic) approach to a patient, evolved in history through the stages of Hippocratism, Neo-Hippocratism, Post-Neohippocratism (taking into account modern holistic alternative medicine), and now, apparently, is ready to totally transcend Hippocratism and to enter the stage of 'Non-Hippocratism'—of totally bio-statistical approach to the patient, denying, in principle, the personal traits of a patient; and thus threatening to totally separate natural man's wellbeing from the being established 'real world' (of the man's existence) based on the anthropocentric 'artificial' laws driven from the science of *subject-object* epistemological essence.

Author resolutely challenges the danger of creating the future medical system totally not oriented (in rational sense) to the patient as a personality. Vehemently opposing this tendency, he precisely attempts, in the exploration having been presented, to ground a novel wholistic concept of biomedicine in higher order philosophical principles. In this, author pins his hopes on the validity and coherence of his argumentation.

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## Notes

<sup>1</sup> This passage opens the chapter "Characteristic Features of Russian Philosophy" in N.Lossky's book "History of Russian Philosophy".

<sup>2</sup> Civilisation diseases and disorders, in the author's interpretation, are the *civilised man diseases*—they strike precisely the *civilised* man; in this original approach (which is characterised below), for short, author lists ten main types of civilisation diseases: 1) Cardiovascular diseases of atherosclerosis genesis (coronary artery disease, strokes, peripheral vascular disease, etc.); 2) Malignant tumours; 3) Diseases and disorders of the endocrine system (hyperinsulinism and insulin-independent diabetes, diffuse toxic goiter, obesity; 4) Diseases of respiration system (bronchial asthma, chronic bronchitis); 5) Diseases of digestive system (ulcerative disease of the stomach and duodenal ulcer); 6) Neuroses and psychoses; 7) Alcoholism, drug addictions; 8) Allergic diseases; 9) Skin diseases (neurodermatitis, eczema); 10) Disorders of reproduction (acquired sterility, impotence).

<sup>3</sup> Be it a Creator, or the spontaneous origin of Life, or the Panspermia, or the accidental biochemical origin, or the Big Bang entailments, etc.

<sup>4</sup> Originally, the cosmist definition of individual's health was given in Jozef Glasa's *Medical Ethics and Bioethics (Bratislava)*, Vol. 7, No. 1-2, Spring-Summer, 2000.

<sup>5</sup> Due to the 'cosmic' inborn mechanisms of satisfaction (gratification) of the man's functionally needed activity.

<sup>6</sup> Including, naturally, his/her integrated biological traits—biotypological organisation—biotype (constitution), of all—precisely predisposed for the execution of the basic functional ability of man.

<sup>7</sup> Author draws attention on the distinctions between the terms 'cosmist' and 'cosmic' when applying them in relation to a person: in this, the term 'cosmist' stresses on two points: a) on the *intrinsic*



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*subjective* origination of the primary perceptions of a person's creative creativity; b) the *deliberate* character of a person's creative activity, aimed at the ascent on the successively higher level of his/her integrated wellbeing. In other words, man performs cosmist creative activity basically by himself/herself. In turn, the term 'cosmic' puts a particular emphasis that a subject is ultimately the function of Process.

<sup>8</sup> Which has nothing in common with the schemes, delivered by Marxism, for, it realises precisely the new philosophical trend, based on a novel cosmological and ontological background.

<sup>9</sup> Naturally, that is chiefly a family specialist, practising in general medicine.

<sup>10</sup> In Kuhn's term.

<sup>11</sup> Ivan Kaltchev is a Bulgarian philosopher.

<sup>12</sup> At this point, author strongly holds Abraham Maslow's holist-dynamic theory of personality and his conception of the successive realisation by man of the hierarchy of needs.

<sup>13</sup> Analogously, hungry man is overfilled with psychophysiological energy directed at the search of food and, thus—satisfaction of the dominant need—to provide the man's organism with energy and plastic materials. Creative needs, however, are often non-realisable and vague for man.

<sup>14</sup> Male life expectance in Russia plummeted from 64 to 57 years from 1989 to 1994, and the country's population is steady declining close to a million each year.

<sup>15</sup> Intrinsic, of psyche—of the soul, spirit, or mind; of non-realised (a case of the invisibility of the goals-channels of the satisfactory throwing off the excess amount of creative energy within the man), axiological, and teleological essence.

<sup>16</sup> From the cosmist stand, man's creative energy is identical to man's vital energy.

<sup>17</sup> Which, from the cosmist stand, corroborate and express the development of a stagnant emotional stress—the low possibility of excessive vital energy throwing off for gratifying activity in the environment, of constructive (adaptational) or creative (cosmist) essence.

<sup>18</sup> At this point, metaphorically, it is impossible, in principle, to work out a 'specific vaccine' or realise a specific mode of operation.

<sup>19</sup> Mainly on the level of organ and, therein, at present—on the molecular (genetic) level.

<sup>20</sup> 'Between health and illness', a basic notion of valeology—new-born science in Russia, which emerged since the late 1980s, the latter has the interdisciplinary character and deals with the object of human health. In this, it chiefly matches up the Western trend of "health promotion".