

MORA-THERAPY AS SMOKING CESSATION TREATMENT

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INTRODUCTION

Mora Therapy, which first began to be used in the 1980s, is a treatment method that aims to produce therapeutic effects through very weak electromagnetic waves specific to a substance, deriving its principles from homeopathy. In the Mora-Therapy method, the electromagnetic vibrations taken from the matter are reversed (mirror image) with constant phase and delivered to the body with fixed phases between 1 Hz and 200 kHz. The same process can also be used to filter the electromagnetic information received from the body (from the diseased area) and return it to the body. A lot of experience has been gained with the method since the 80s. These experiences have shown that this method can be used in a wide range of indications, including allergies.

While it has been demonstrated that this treatment can be used in many different indications, its use has become widespread in recent years, especially in addictions. Since 2007, I have been using this therapy method, whose efficacy was demonstrated in a double-blind placebo-controlled study conducted by Pıhtılı and colleagues on 200 patients at the Çapa Medical Faculty Chest Diseases Department in 2008 for smoking cessation and in published studies by Prof. Dr. Mehmet Karadağ and colleagues on 1562 patients.

METHOD

In my own clinic, 1360 patients applied to "quit smoking" in 2011. These individuals underwent a 50-minute session on cigarettes with the help of the MORA Super + device. The information and evaluations during the follow-up of each patient were recorded on the SPSS statistical program.

Table: Number of cigarettes smoked per day:

<u>Number of cigarettes per day</u>	<u>N</u>	<u>%</u>
10 or less	30	2.2
11-20	473	34.8
21-30	513	37.7
31 and over	344	25.3
Total	1360	100

Table: Number of years smoked

<u>Number of years smoked</u>	<u>N</u>	<u>%</u>
10 years or less	167	12.3
10-19 years	596	43.8

20 years and more	597	43.9
Total	1360	100

FIRST SESSION

All consultations with the patients and their follow-up were carried out by nurses. The consultation was held in the first 10 minutes of the treatment, and no special training or motivational work was carried out during this time.

APPLICATION

Following these explanations, the individual was asked to smoke two half-cigarettes and provide them to us in a glass tube. These samples were placed into the appropriate input sections of the Mora device during treatment. In other words, the electromagnetic information that will be tried to be erased from the body with the help of the device was taken from these smoked cigarette samples.

During the session, the individual was asked to sit comfortably in a chair, hold the appropriate electrodes of the Mora device, place her feet on the plates, and wrap the appropriate electrode around her forehead. Meanwhile, two smoked cigarette samples were placed separately in the two input cups of the device. The person was left alone for the 50 minutes the device was operating.

At the end of the session, the person was detached from the device and given a standard form that reminded her of the main rules to follow at home. During the session, a coin-sized metal piece inside the device was attached 2 fingers below the patient's navel. The patient was advised to keep this metal piece on their body for about a month. In addition, a mixture of alcohol (8%) and physiological saline (92%), which was kept in the device during the session, was also given to the patient with instructions to drop this liquid under the tongue when the urge to smoke arose. The patient was informed that both the Chip and the Alcohol-SF mixture were created according to the rules of electronic homeopathy, used for homeopathic information transfer, and that the chip or liquid did not contain medicine or any active substance.

FOLLOW-UP

The patients were followed up for 3 months. The first call was conducted by phone on the 3rd day after treatment. During this call, one of the following 3 possibilities was evaluated.

1) If the person has not smoked at all + does not have a strong desire to smoke + the treatment is considered to be effective: There is no need for any additional sessions at this time.

2) If the person has never smoked but has a strong desire to smoke from time to time: We invite this person to our clinic for a **"support session"**. This session involves a different treatment protocol and lasted half the time of the initial session.

3) If the person has smoked even a few puffs, we invite the person to our clinic for a **"second full session"**, which is identical to the first session.

NUMBER OF SESSIONS TAKEN	N	%
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One full session	852	62.6
Support (part-time)	272	20
2 full sessions	217	16
3 full sessions	16	1.2
4 and more	3	0.2

Table: Number of sessions applied

Each individual was contacted on the third day after the first session to assess their situation as described above.

Afterwards, the person was contacted on the 7th day, the 14th day, at the end of the 1st month and at the end of the 3rd month. Based on these assessments, individuals were invited to the clinic for additional sessions if necessary.

RESULTS

Apart from mild dizziness, increased fatigue and sleepiness that lasted for up to two days post-treatment, no side effects were observed.

INDIVIDUAL'S COMMENT	N	%
Treatment is effective	1338	98.4
Treatment is not effective	22	1.6
Total	1360	100

Table: Individual's feedback regarding the treatment

CESSATION RATES	N	%
Tobacco was never used	1087	79.9
Tobacco was used (in any amount)	273	20.1
Total	1360	100

Table: Phone call results on day 7

Patient Feedback:

The patient's feedback on the treatment were evaluated during the 7th day call. If any of the following questions received a "yes" answer, the patient's feedback was considered "treatment effective".

- Is there a noticeable decrease in the person's desire to smoke after the treatment?
- Even if you haen't quit; is there an involuntary reduction in the amount of cigarettes smoked?
- Even if you haven't quit, o you believe you can quit smoking with this method whenever you decide to?

1 MONTH RESULTS	N	%
No tobacco use	927	68.2
Using any Tobacco product	433	31.8
Total	1360	100

Table: One Month Results

106 individuals were excluded from the evaluation as they had not yet completed one month or were unreachable.

3 MONTHS RESULTS	N	%
No tobacco use	676	64.7
Tobacco used (in any amount)	369	35.3
Total	1045	100

Table: Three Month Results

315 individuals were excluded from the evaluation as they had not yet completed three months or were unreachable.

DISCUSSION

Well-known and accepted effective treatments for smoking cessation are bupropion and varenicline treatments. The smoking cessation rates achieved with several sessions of MORA-Therapy at the end of a three-month period are ***significantly better*** than the **approximately 44%** cessation rates achieved ***“within 9-12 weeks” “during ongoing medication”*** use in many studies with these drugs. The results I have obtained prove that MORA-Therapy is a much more effective and safe treatment method for smoking cessation compared to other methods.

It should also be noted that no side effects have been reported in any scientific studies or case reports regarding Mora-Therapy so far.