

Editorial Volume 3 Issue 1

Why Diabetic Patients are More Likely to Get Hospital Infection?

Huang WL*

Medical Acupuncture and Pain Management Clinic, Brazil

*Corresponding author: Huang WL, Infectious Diseases, General Practice, Nutrition, Acupuncture and Pain Management. Medical Acupuncture and Pain Management Clinic, Franca, Sao Paulo, Brazil, Tel: +55 16 3721-2437; E-mail: weilingmg@gmail.com

Received Date: July 29, 2021; Published Date: August 06, 2021

Editorial

This theme that the author will address in this article is very well established in the literature of Western medicine where diabetic patients are more likely to have nosocomial infection. In the article written by Abu-Ashour, et al. (2018) entitled *Diabetes and the occurrence of infection in primary care: a matched cohort study,* the author is saying that diabetic patients has an increased risk of having infection if compared to patients without diabetes [1].

In this editorial, the author will discoursed the topic from a different point of view, where it will explain the perspective of energy changes that all diabetic patients have and what are the energy imbalances found in the patients with hospital infection process. This theme was presented by the author in the 32nd World Nurse Practitioners & Healthcare Congress 2021 that was held in March 18-19, 2021 [2].

Western medicines' view to reduce nosocomial infection in diabetic patients aims solely to reduce blood glucose, for example in the preoperative period, using medication or insulin or diet, but what is behind these changes in blood glucose it is what the author will show to the reader, to understand in the deeper sense what we need to treat in diabetes patients to reduce hospital infection [3].

In an article written by Huang (2019) entitled *Why Are Diabetic Patients Still Having Hyperglycemia despite Diet Regulation, Antiglycemic Medication and Insulin?*. The author describes that diabetic patients have chakras' energy centers deficiency in energy that are leading to an energy imbalance (*Yin* deficiency and Heat retention), leading to hyperglycemia, according to traditional Chinese medicine [4].

In another article written by Huang (2018) entitled Why do

Patients Still Catch Hospital Infections Despite the Practice of Infection Prevention and Control Programs? the author describes that the signs and symptoms of nosocomial infection can only be manifestations of internal energy imbalances generating internal Heat formation and that the balance of these energies through Chinese dietary therapy acupuncture with apex ear bloodletting, and preventing the entry of external pathogenic factors in the body of the patient (such as Cold ,Wind, Humidity, Heat and Dryness) are important ways to restore the body's balance and using all these tools, we can treat the majority of hospital infections without needing to use antibiotics, as the author showed in the article written by Huang (2019) entitled Is it Possible to Treat Community-Acquired and Nosocomial Infections with the Same Method, Without the Use of Antibiotics? [3,5].

In this article, *Is it Possible to Treat Community-Acquired and Nosocomial Infections with the Same Method, Without the Use of Antibiotics?* The author is demonstrating that community and hospital infections are caused by the imbalance of internal energy and the invasion of external pathogenic factors. The balance of these energies (using Chinese dietary counseling, apex ear bloodletting) and the elimination of these external pathogenic factors can treat these infections without using antibiotics [5]. According to Hippocrates (c. 460 BC - c. 370 BC), father of Medicine, he said that the natural forces within us are true cures for disease [6].

In another article written by Huang (2021) entitled *What have behind in all kinds of infections that we need to know?* the author said that all infections (bacterial, fungus, virus) have in common energy deficiencies with internal Heat formation [7].

Therefore, to prevent diabetic patients to have hospital infection, for example, before any surgical or clinical procedure, they both (hospital infection and diabetes) are based on a lack of energy in the internal massive organs and internal Heat production. These energy imbalances that are inducing the formation of diabetes is the same energy imbalances that is producing hospital infection, in the energy point of view. This theme was presented by the author in the 32nd World Nurse Practitioners & Healthcare Congress that was held on April 19-20, 2021, in the study entitled *Why Do Patients Still Catch Hospital Infections Despite the Practice of Infection Prevention and Control Programs?* [3,8].

The use of highly concentrated medications to treat many conditions presented by the patients like fever, infection, inducing sleep, antidepressant, antihypertensive, hypoglycemic medications, anxiolytic, etc. may cause more drop in all these energies that is already low, according to Arndt Schultz Law [5]. This law, created in 1888 by two Germans researchers states that drugs in high concentrations could cause a reduction in the vital energy and the use of highly diluted drugs, increase these vital energies [9].

According to traditional Chinese medicine, when occur a reduction in any kind of energy (*Yin, Yang, Qi* or Blood or a combination of these four forces deficiency), there is the formation of internal Heat, responsible for beginning of the manifestations of infection symptoms such as hyperemia of the skin or surgical incision, yellowish secretion, etc. All these energy alterations can cause hospital infections symptoms and were well described in the article written by Huang (2018) entitled *Why Do Patients Still Catch Hospital Infections Despite the Practice of Infection Prevention and Control Programs?* and in the second article also written by the author (2020) entitled *Is it Possible to Treat Nosocomial Cellulitis Post Placement of Hemodialysis Catheter without the Use of Antibiotics?* [3,10].

Therefore, due to the change in the energy pattern (reducing the internal energy in all five massive organs) of our population in the whole world, induced by the influences of the electromagnetic waves in our lives, and knowing that diabetic patients have this lack of energy, the use of highly diluted medications is very recommended nowadays, even in critically ill patients, as the author reported in the article written by Huang (2021) entitled *Is the Population in the World the Same as in the Past?* [11].

In the article written by Rossi et al. (2018) entitled Integration of Homeopathy and Complementary Medicine in the Tuscan Public Health System and the Experience of the Homeopathic Clinic of the Lucca Hospital, the authors are saying that their experiences in integrating complementary medicine including homeopathy began in 1996 and they

study at that time, 5877 patients that were admitted in the hospital for variety of treatments (general clinic, women health clinic and oncology) and what they found was that occurs an improvement of their condition in 88,8% of all these populations using homeopathy associating to Western medicines' treatment [12].

Therefore, to reduce the chance of diabetic patient to have hospital infection, there is a necessity of regulation the energy imbalances in the root level, because when the physician only treat reducing blood glucose, using insulin or hypoglycemic medication, there will be the formation of energy imbalances reducing even more the vital energy that is already low, in all these patients, and increasing the chance of producing the internal Heat, that is producing hospital infections symptoms. The use of antibiotics to treat these infections manifestations will cause drop even more of this energy, that is low, showed in many studies by the author, such as in the study Huang presented in the 17th World Congress on Infection Prevention and Control, that was held on June 07-08, 2021 entitled *What kind of patient are we hospitalizing in the hospital: immunocompetent or immunosuppressed?* [13].

The control of all factors that are causing hospital infections symptoms such as the exposition to the external pathogenic factors, diet, emotion, and the treatment of the lack of energy in all these patients, it is important to control the other two thirds of hospital infections that is not controlled nowadays, by the infection and prevention control programs, as the author demonstrated in the article Huang (2021) wrote entitled *What Do We Need to Know to Reduce Complications for Our Surgical Patients?* [14].

As said by Hippocrates, father of medicine, natural forces within us are the true healers of the diseases. So, the author wants to say that, there is energy that is imbalanced in both diabetes and infectious patients and the rebalancing of all these energies is sufficient to restore the body's health again [6].

References

- 1. Abu AW, Laurie KT, James EV, John MG (2018) Diabetes and the occurrence of infection in primary care: a matched cohort study. BMC Infect Dis 18(1): 67.
- (2021) 32nd World Nurse Practitioners & Healthcare Congress.
- 3. Huang WL (2018) Why Do Patients Still Catch Hospital Infections Despite the Practice of Infection Prevention and Control Programs? Acta Scientific Microbiol 1(4): 34-43.
- 4. Huang WL (2019) Why Are Diabetic Patients Still Having

- Hyperglycemia Despite Diet Regulation, Antiglycemic Medication and Insulin? Int J Diabetes Metab Disord 4(2): 1-14.
- 5. Huang WL (2019) Is It Possible to Treat Community-acquired and Nosocomial Infectious with the Same Method, Without the Use of Antibiotics? J Appl Microb Res 2(2): 1-13.
- 6. Craik E (2014) The Hippocratic Corpus: Content and Context". Routledge 344.
- 7. Ling HW (2021) What have behind in all kinds of infections that we need to know? Journal of Investigative Oncology 1(1): 18-21.
- 8. (2021) 32nd World Nurse Practitioners & Healthcare Congress.
- Leeser O (1953) Support of homeopathy by the Arndt-Schulz law. National Center for Biotechnology Information.

- 10. Huang Wei Ling, Is it Possible to Treat Nosocomial Cellulitis Post Placement of Hemodialysis Catheter without the Use of Antibiotics? Dialysis Trans OA 3(2): 180020.
- 11. Huang WL (2021) Is the Population in the World the Same as in the Past?. Acta Scientific Clinical Case Reports 2(6).
- 12. Rossi E, Stefano MD, Picchi M, Panozzo MA, Noberasco C, et al. (2018) Integration of Homeopathy and Complementary Medicine in the Tuscan Public Health System and the Experience of the Homeopathic Clinic of the Lucca Hospital. Homeopathy 107(2): 90-98.
- 13. (2021) 17th World Congress on Infection Prevention and Control.
- 14. Huang WL (2021) What Do We Need to Know to Reduce Complications for Our Surgical Patients?. Journal of Medicine and Surgical Sciences 3(2).