

PSYCHOPHYSICAL NON-DUALITY IS A BASIC PRINCIPLE OF EPISTEMOLOGY OF CLINICAL MEDICINE

Atabek B. Kutlumuratov

Russian Federation (Kaliningrad city)/Uzbekistan (Tashkent city);

atabekb@yahoo.com; phone number in Uzbekistan - +998-94-6513710; +998-99-5573710

Summary

Psychophysical nature of the epistemology of the Clinical Medicine (ECM) actually used spontaneously in daily practice by each doctor is discussed in this treatise. ECM spontaneously functions nowadays as a basis of each doctor's clinical thinking (intellection). The modern official science distinguishes scientific and practical parts of Medicine considering Clinical Medicine as area of practical application of scientific Medicine or Biomedicine. Thus, modern official medicine ignores ECM, which works within physician's practice, and thereby official medicine replaces ECM with the natural-science epistemology used in Biology and Physics. However Medicine is an independent self-contained practical science. This definition Avicenna justified about 1000 years ago and asserted that we cannot be considering Medicine as practical branch of natural sciences. The tradition to distinguish practical and scientific parts of Medicine has arisen during the European Renaissance, and it became stronger during Modern history, in process of Biomedicine formation. Now this tradition meets many difficulties. As well as in Ancient time, the modern doctors' clinical thinking is based on a principle of the psychophysical non-duality of human nature. Basic scheme of application of this principle in clinical thinking within the course of the doctoring process of any patient is described briefly here.

Keywords: *psychophysical non-duality, clinical intellection (physician's thinking), epistemology, biomedicine, natural science, practical science, doctoring process.*

ПСИХОФИЗИЧЕСКАЯ НЕДУАЛЬНОСТЬ - ОСНОВНОЙ ПРИНЦИП ЭПИСТЕМОЛОГИИ КЛИНИЧЕСКОЙ МЕДИЦИНЫ

Атабек Бекчанович Кутлумуратов

Российская Федерация (г. Калининград)/Республика Узбекистан (г. Ташкент);

atabekb@yahoo.com;

тел. в Узбекистане - +998-94-6513710; +998-99-5573710

Резюме

В трактате обсуждается психофизическая природа эпистемологии клинической медицины (ЭКМ), издавна стихийно используемой каждым врачом в повседневной практике в качестве основания клинического мышления. Но современная официальная медицина различает научную и практическую части медицины; она игнорирует ЭКМ, реально действующую эпистемологию клинической медицины, когда рассматривает ее как область практического применения *научной медицины* или *биомедицины*. Официальная медицина подменяет реальную ЭКМ *эпистемологией естествознания*, которой пользуются биология и физика. Но медицина – самостоятельная *практическая наука*. Это положение обосновал Авиценна примерно 1000 лет назад, утверждая, что мы не вправе рассматривать медицину лишь как область практического приложения естественнонаучных знаний. Традиция различения практической и научной частей медицины возникла в ходе европейского Ренессанса и укрепилась в ходе формирования биомедицины в 20-ом столетии. Ныне эта традиция сталкивается с множеством трудностей. Как и в древнее времена, клиническое мышление современных врачей основано на принципе *психофизической недualности* человеческой натуры. Дано краткое описание основных особенностей применения этого принципа в клиническом мышлении в ходе врачевания каждого пациента.

Ключевые слова: *психофизическая недualность, клиническое (врачебное) мышление, эпистемология, биомедицина, естествознание, практическая наука, процесс врачевания.*

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Whether we can understand unity nature of the Universe? There is not answer to this question still. However, it is obvious that investigation of the observer's nature and a creating of the United Physical view of Universe constitute two main scientific priorities in 21th century. It is impossible to imagine any modern physical model the Universe without presence of "observer" at it: it turns out to be that we cannot understand the reality nature without taking into consideration of existence of consciousness *that is observing and comprehending* the Universe. At the formulation of any physical theory (anyway, in its initial substantiations) it is necessary to take into consideration features of *observation conditions* of the investigated object, and the *disturbances caused by the observation act in this object*.² Among all other things, it means we cannot speak about objective existence of a reality and at the same time deny the existence of subjective essences, hence, of "soul". However, we can be discussing different senses of the "soul" concept (i.e. we can be reflectively experiencing these). Probably, this explains why in 20th century the method of "mental experiment», which Einstein used regularly, became habitual in the theoretical physics. In the context of the Einstein's relativity theory, one analyses any physical fact (or event, which in Physics is described as some movement) from positions of the observers who are in different reference systems concerning that event.³ In other words, observation depends upon a position from which the cognizable object opens to the observer. Thus, representations about fundamental physical essences get relative meaning (for example, the concepts "simultaneous events", "spatial length" or "mass" are making absolute senses in Newton's mechanic). The sense of the word "observation" turns out similar to such intuitively clear terms as "sympathy", or "empathy", which are pertinent in psychology and psychiatry: by empathizing to each patient, physician aspires to comprehend sense of internal psychophysical experiences of the patient as though physician perceived them himself/herself.

Thus, observation depends on an initial position of the observer concerning cognizable object. In other words, any observation is possible from the certain position only. An ordinary consciousness does not see anything especial in this fact. People can be discussing a state of affairs in the world and converge in understanding it if they are capable be viewing the situation from positions of common values. And they will disagree each with other in something in that measure, in which everyone persists on own initial values. In many respects, the political art depends from talent of nation leaders to reach the consent in a society concerning those values which make this society stable in the course of its development within the world political process.

The science began to develop consistently at that time, when thinkers began to understand that initial ideas (initial positions - axioms, postulates, paradigms, etc, which ones had been proving

¹ Earlier treatises №1 and №2 have been published:

№1 - viXra submission 1604.0206 (*Kutlumuratov A.B. (Кутлумуратов А.Б.) About an intuition primacy in the clinical medicine*);

please, see also *the appendix* (EXPLANATION to the refer “Kutlumuratov A.B., 1916” and “Кутлумуратов А.Б., 1916”, or Some clarifications to authorship of the treatise “About the Primacy of Intuition in the Clinical Medicine”) in the end of this treatise (p.21-22).

№2 - viXra submission 2001.0576 (*Kutlumuratov A.B. Theses about main ontological and epistemological doctrine of clinical medicine in 21st century*).

² Bohr N., 1939, 1958; Dirac П.А.М., 1930; Heisenberg W., 1959; Голубев Ю.Ф., 2000.

³ Einstein A., 1905ab, Einstein A., Infeld L., 1938; Bohr N., 1939.

and/or accepting as source of proving true) are *scientific values*, which allow to learn the real world *adequately* to current position of researcher with regard to Universe. In these ideas are concluded certain attitudes to cognitive behavior (to conformity of knowledge to certain inquiries of human development which are expressed by the contents of those values). It means the knowledge always is true, if it is adequate to both the current nature of cognizable things, and the current nature of cogitating creature. Initial ideas provide this adequacy, and they create intentional unity of cogitating mind with cognizable object; within such unity the mind becomes capable to see and expect senses allowing to regulate the facts according to own nature of cognizable things and the current nature of the cogitating creature. Really, scientists often treat initial ideas as if those are values vitally important for them, on which they should insist, and ones name them "scientific beliefs". Dzhordano Bruno has ascended to the fire of Inquisition for the sake of such ideas. Galileo Galilei was compelled «to renounce» his scientific belief on pain of death. However, then, ones tell, he said the phrase which became popular expression: "Nevertheless it spins!" (Galilei was presuming Earth spin). This phrase has underlined that denying assertion, which corresponds to a real state of affairs in the world, is a senseless occupancy. The representation about axioms, postulates, and paradigms as about *the facts of our thinking* (of *judgments about a reality*) thanks to which the world opens to our consciousness from some viewing angle, favourable from the point of view of its adequate understanding, is most correct for a modern science. The knowledge becomes *adequate* so far as it corresponds to existence of both the cognizable world and the mind cogitating about the world, or, by other words, corresponds to their *coexistence*.⁴ Everything that exists in the world co-exists with each other, and all things together constitute the highest existential unity - these constitute World reality given in cogitation. Cogitating mind and the conceivable world constitute together, thus, special being-unity that they constitute in the current knowledge, and, thus, world assumes existence in this being-unity of cogitating mind. From the biological point of view live systems not simply exist, but directly co-exist with the world surrounding them, i.e. a special strategy is underlying their existence - strategy of coexistence, and this strategy is an essence of biological adaptation.⁵ We can name this quality of live systems *the ability to the integrated existence*.⁶ In other words, *existence of live beings is determined by existence of environment always, an environmental niche, and on the contrary, existence of any niche is determined by existence of live beings*.⁷ According to Lorenz⁸, from the point of scientist's view an evolution is cognitive process as any *adaptation* to certain conditions of an external world means, that organic system has received a quantity of *the information* on these conditions.

By generally speaking we can tell same about *any single existence*; but this is especially apparent, if we mean *existence of live beings actively adapting to environment*, and we have ability to observe macroscopically such their behavior. And if we will define life as knowledge⁹ and assume that intentionality is the basic quality of consciousness¹⁰, then we come out to consciousness definition as bases of coexistence of things in the Being-continuum of Parmenides.¹¹

⁴ Our thoughts (about the external world and about our inner nature) are born *in* the world existing *well in advance* of the arising of our consciousness. The preexisting world plays a role of the receptacle where we can be existing as conscious beings; and things being perceived and worried consciously *co-exist* with us in this world. This fact forces inexorably to admit that *the space* and *time* are given to consciousness as though *a priori* though would be more true to say that any consciousness is *fixing the current* experience of coexistence of the conscious individual with the enviroing world. *The current act of consciousness* is directly worried, and current act can't be perceived by current state of consciousness; the last can be perceived in other state of consciousness only, when mind become capable to new act. We can't go further of comprehension that we understand something only, if this "something" we already experienced consciously. Only the experienced fact, which already has taken place, can be realized. And only realizing an experience we become capable to improve any our thought in new experience.

⁵ Кутлумуратов А.Б., 1989-1991, 1997.

⁶ Maturana U., 1970. Maturana defined live systems as "unities of interactions", which are existing "in ambience".

⁷ Лоренц К., (1941) 2001.

⁸ Лоренц К., (1973) 2016, Гносеологические пролегемены, п.2.

⁹ Лоренц К., (1941) 2001.

¹⁰ Гуссерль Э., 1900-1902, 1913.

¹¹ Diels H., 1906, 18. Parmenides. P.105-126; Парменид. В кн.: Фрагменты..., Ч.1, 1989, С.274-298.

In my opinion, such definition sheds light on the idea expressed in the brief formula: "being and to think are the same" (Parmenides). This definition will be detailed in process of disclosing of the main subject of the current treatise - of the psychophysical nature of epistemology of medicine (and also in the subsequent treatises).

In Relativity theory the reference system is considered *inertial* one, if some (isolated) material point (which is not interacting with other objects of the Universe) is moving concerning this system in regular intervals and rectilinearly.¹² At any natural systems there are forces of inertia, which are a sign "*inertiality*" of reference systems. We can speak about naturalness of any natural system only concerning limited view about its nature. Outside of any view of natural system we always leave its infinitely complex real nature. Also it is clearly that any natural reference system is approximately *inertial system*: the natural system cannot be completely isolated from external world, and consequently the natural system always moves with some acceleration or rotates concerning other systems, and any natural system is influenced some particular forces of inertia (not only mechanic ones). It is possible to consider two non-inertial systems concerning one inertial system, if we *suppose* that they are influenced the same forces of inertia; then we can describe their movements concerning this inertial system.

What is meaning "being physical"? Something similar occurs when you sympathize with other person psychophysically, «putting yourselves on his/her place», and, thus, you are trying to experience the same sensations, which excite that person. Such a perception of experiences of other person is some mental analogue of view of influence on a body of forces of inertia in the Physics. In other words, *first system "thinks" of other system by "feeling" this system in those relations in which the first system does not contrast with the other system: the first system as though adapts own nature for a configuration of relations of other system with objects of the Universe. The first system "isolates" itself from certain relations and enters to other ones to assimilate to current whole nature of other system. It allows the first system to experience the same circumstances which are experienced by other system, and, thus, "to understand" other system.* We can feel and understand things in that degree, in that they *resist* to our direct access to them and compel us *to co-exist* with them via our sensual and conscious perceptions of these. By perceiving things via feelings and consciousness we conduct internal acts that allow us to *integrate* our own existence with existence of perceived things: we get some "understanding" existential unity, distributed between us and them. The cognition of any separate natural thing (e.g., comprehending of inner state of other person) is equivalent to transition to some reference system of this thing (of other person's self-reference). People physically co-exist with each other in the world, and therefore during cognition of the world they are creating the shared reference systems, which are usually described as systems of the general human (social) values. At the same time each person keeps the tendency to establish own system of the reference to conspicuities, taking into consideration characteristics of the world, which is surrounding he/she, and singularities of his/her individual current psychophysical nature.

Concept of "naturalness" relatively is. It means that *naturalness* (or "corporality", "physicalness" of these, ability of real things to show spontaneous, "natural" properties) is relative concept. In a modern science it is accepted that natural properties of things are an absolute reality, and things can be cognizable as though our knowledge about them were describing an *actual nature of them*. But actually as physical properties we consider those ones we perceive as though they were persisting to our perception of them, as though ones were possessing inertia concerning our consciousness. Thanks to it we think of real things as the objects existing by parallel with *us*, along with us in this world. We think of existence of things so far as they *co-exist* with us in the same reality. Thus we distract our consciousness from other, potentially infinite amount of properties of things. We do not take them into consideration as *conceivable* essences; we distract our attention from them (as though we did not consider that they persist to be perceived) for the reasons usually named as subjective ones. In other words, such essences are entered by our consciousness into our own inertial system of reference. Subjectivity and objectivity, thus, are set by ourselves on the basis

¹² Einstein A., 1905ab.

of that current understanding, that we perceive as conspicuity: our consciousness makes acts of dichotomy of a reality during perception of conspicuities by taking into consideration our own current nature. Therefore any science develops from the most "obvious" abstraction to the less obvious one; and, hence, the last is requiring theoretical and empirical substantiations. The theory deduces previously unknown facts from conspicuities (and also explains the known facts in a new fashion), experience subjects falsifications these deductions, confirming or denying existence of the facts assumed by the theory. Representing the natural (physical) existence as existence, which can be perceived by sensuousness only, we perform a psychophysical dichotomy - we separate physical conspicuities from perceiving of mental conspicuities (from reflective, theoretical ones), which are valid essences too. But in process of development of science we move a dividing line between them "to the left" (to side of mental conspicuities), and, thus, we are gradually filling the contents of our representations about naturalness of investigated objects (including our naturalness). Examples: a) a space and time relativity is connected with conspicuity that the data of physical observation depends on reference system; and this conspicuity was Einstein's find; b) in frameworks of the modern ethology the behaviour of people is considered some biological object, but not a mental one as it was in tradition of classic sciences (this is Lorenz's find); c) mental experience became object of experimental psychology (this is find of Würzburg school of psychology); d) the modern neurophysiology tries to convert acts of consciousness into observable natural objects (idea of neurophenomenology was developed by F. Varela). By changing our views to naturalness of objects of research we change our position with regard to them, and, thus, we expand borders of cognoscibility of the world.

Whether is the understanding the natural phenomenon? *The empathy* (as the basic way of understanding of another person) constitutes the heart of the *method of introspection*. When I think of myself, I grasp myself as objective individual existence, as the object *directly* accessible to be grasped by my consciousness, and standing directly up ahead of my consciousness. Any segment of my own sensual and conscious experiences may become such an object. I *directly feel* my body as *the corporality* nearest to my direct internal discretion. We detect our feelings as if these *are results* of *direct* influences of subject on us: we are feeling a pain as a painful, and warmth - as a warm; we are perceiving a cold as a feeling of cold, and a redness - as feeling of red one, etc. However, possessing consciousness, I can delimit each single experience of these sensations - by taking into account degree of expression of pain, body temperature and reddening. Taking into account ambiguous character of perceptions I can distinguish these consciously - by considering ones as the experiences of *pain sensations* with different *degree* and *character* (in response to impact on my body), as degrees and characters of *thermal sensations* and *visual sensations* of *intensity* of colour. By consciously grasping such essences as degree and character of sensations, I am also liberating myself from spontaneity of these sensations (from naturalness of these), and now I can put these between myself, i.e. source of my consciousness, of my "I" on the one hand, and the subject, which is causing sensations perceptible for my consciousness, on the other hand.

Descartes has pointed to immediate character of the comprehension of own internal world by person: the consciousness is capable to contraposition, grasping and representation of the own thinking («I think about...»). He has not enough taken into consideration one moment only: consciousness varies character of direct perceptions of things via varying its semantic content, or (and this is the same) via constituting semantic positions regarding the perception. We can be directly convinced of adequacy of our direct sensations, but the consciousness can doubt perceiving things through giving *of* meanings to sensations. From this thesis of Decartes (about direct cognition by mind of internal world of consciousness) implicitly follows: to adequately know an inner state of another person is possible only by *empathizing* to her/him, i.e. by aspiring to reproduce in own internal world same mental experiences, which are experienced by this person. To represent internal experiences of other person means to accept same semantic position, in which this another person constitutes own mental experience. However, stronger assertion is pertinent also: any cognition in certain sense is *empathy to object of cognition*, or the some "likening" of the consciousness to this object, and by this way our consciousness as though accepts a certain semantic

position in relation to cognizable subject and constitutes with it a certain co-existential unity. Thus, the new knowledge conforming to conditions of investigation of some object, arises and has correctness within the frames of this new system of semantic coupling between the conscious being and cognizable object. It seems obvious that Würzburg school of experimental psychology actually used empathy in the course of the psychological tests: experimenter himself/herself was becoming a part of "experimental system» as he/she was empathizing to examinees at the analysis of their reports (examinees were informing about their feeling experienced during decision of test task and experimenter was taking this into consideration at interpreting of results of examining).

The idea of empathy as the base principle of cognition is implicitly present at epistemology of ethological disciplines of biology playing important role in comprehension of social behaviour of animals.

Developing methods of experimental psychology, representatives of Würzburg school modified a method of *introspection*¹³: they have actually transformed it in a method of *experimental professional introspection*. According to this method, examinees (they were usually colleagues of experimenters) should give the retrospective information on the experience after performance of conditions of experiment concerning of understanding something. They had to describe decision-making process extremely precisely. Actually any critically reflecting person acts by same way - he/she analyzes the received experience before will draw any definitive conclusions concerning the received experience. Each critically thinking person as if makes a certain act that is like the act of "ἐροχή"¹⁴ to distract of himself/herself from the concomitant circumstances of experiment and to behold just those nuances of the own internal experiences with which the course of a search of the decision of test task was connected. As a result of the analysis of data of such experiments the conclusion has been drawn that it is impossible to explain a thinking process as result of occurrence of associations between representations. According to O. Kulpe with co-authors¹⁵, there are the unrealised factors, which play a considerable role in the thinking process - they are directing this process, which, in particular, motivations directly influenced.

Optimum et verum. From ancient times people use representation about sympathy as about a principle of adequate understanding (of semantic integrating with perceived object irrespective of whether it is the real or theoretical object or this object is absolute fiction even). Socrates skilfully used this principle when he was putting leading questions in front of his opponents and forcing them to rise to new level of understanding of problem, which they discussed: the new knowledge not only was having been created in the face of the opponents, but opponents themselves were participating in creating it with helping of Socrates.¹⁶ Such knowledge always surpasses source knowledge, which usually his opponents tried to defend. This method has nothing that would be absent in the nature of the intellection. In the course of solution of any problem, we usually put in front of ourselves leading questions, which promote better understanding the essence of the matter, and this allows us to eliminate source errors. Socrates used this method intentionally, as a method of "μαευτική" (in manner of «obstetric art»)¹⁷. To understand why other being *leads itself* so, but not differently, the person long since was learning to consider circumstances of another being's behaviour from «point of view» of that another being. During hunting (and an in ordinary days) the Bushmen uses a thinking method, which Canetti¹⁸ characterised as *the transformation*. The Bushmen as though empathize to inward status of a victim pursued by them (or to inner experiences of their relatives and tribesmen who are out of line-of-sight distance) to foresee the future events

¹³ Hackert B., Weger U., 2018.

¹⁴ "Эпохе" (от греч. "ἐροχή"; ср. Гуссерль Э. Идеи...)

¹⁵ Cit. by Hackert B., Weger U., 2018.

¹⁶ Please, see for example, Платон. "Диалоги", 1986.

¹⁷ In «Theaetetus» (Платон. Соч. в 4-х тт., т.2, 2007. - С.229-327) Socrates asserts: «In my obstetric art almost all similarly as at them (at midwives - АВК), - difference, perhaps, only that I deliver at men instead of at women, and I deliver souls instead of fleshes».

¹⁸ Canetti E., 1962, P.337-341; Канетти Э., (1960) 1997, С.359-364.

and to make some decisions. Also there is method developed by Stanislavsky¹⁹ in theatrical art - method of getting used to inner life of the hero as a major principle of the actor's skill, thanks to which the spectator "is trusting" to events on scene and is empathizing to ones heroes.

Consciousness is experiencing reality by perception of the senses (in acts of consciousness), and, hence, the perception is fundamental modus of consciousness.²⁰ When we are considering pure consciousness (as transcendental object), we are evading a current existential unity of our perception and perceived thing. At immanent perception the perception act and perceived object shape an immediate unity, unity of individually specific *cogitatio*. The perception as *alive-corporal* actual sensual contemplation underlies of conscious experiences. The perception is a fundamental experience; it is the basis and the substantiation of any knowledge. Perception is «primordial» act, which is not modified: a recollection (about something), an imagination (of something), and a sign (of something), these all are perception modifications, these are based on the perception (of something), which always is *the perception of a something*.

Always the consciousness is directed to object of intellection through perception of its semantic definiteness: perception of this definiteness is the mode by which the consciousness is experiencing the relation of unity with this object. Having grounds in perception of things senses not only point to definiteness of perception of object, but are also modes of experience of this definiteness, modes of *empathy* that allow us to coexist with thing definitely. The empathy expresses itself in semantic definiteness that is main mode of *conscious perception* of a reality. Therefore, any judgement about a thing includes certain mental "likening" to it, and thanks to that a conscious being "sees", or acquires experience of mental perceiving of *essential* properties and relations of thing (from the point of view of the being). We can *feel* a rough surface not only physically, but also *to present mentally it*, and thereby accept consciously the *sensual impression* of roughness as experience with a certain (semantic) structure. The sense of things is object of *direct conscious experience*, which is not connecting to these things directly, but is belonging to existence field of the conscious being as immanency of this field - as the experience of semantically shaping of reality perceiving. But consciousness also can work with any sensual or former conscious experience (i.e. with trace in individual's memory), if directs attention to this experience. However, in itself each sense of things carries something from nature of these things. This "something" is included in a perceived definiteness of things. The semantic perceiving promotes differentiating of nuances of sensual perception of a thing, and makes these more adequate, than it is doing sensuality itself only. *The sensation* of rough corporality of things retains traces of sensual experiences in memory, and the consciousness perceives sense "roughness" with regard to them. Experience of the semantic perception of "rough reality" maintains adequate "playing back" of sensual impressions without direct sensation of "rough surface" of real things. However, semantic definiteness perceived by current conscious experience, limits this adequacy.

The sensual data, which are fixed in memory (for example, data of visual sensations, tactile sensations, sense of smell, gustatory and acoustical sensations), allow consciousness of the individual to examine a subject more adequately, i.e. to distinguish in it features and relations that conform to expectations and intentions of individual or not conform to them. Every such conformity allows constituting the certain integrated coexistence of individual with this subject. "Rough feelings" say to us that the fire brings burns of skin; however, the consciousness intentionally distinguishes the other fact - that the fire makes a cold air warm at the some distance, and, hence, we are capable to conscious perceiving of fire via sense: "fire protects from cold at some distance". Our needs for a heat start to find adequate coupling with the fact of presence of fire in the world surrounding us thanks to our ability *to have representation* about a *heat source* (or *to know* of it). Our vital expectations, needs and intentions are transparent and obvious to us; they are not subject

¹⁹ According to Stanislavsky (Станиславский, Соч. в 9тт., т.3, 1990, XV, С.366-382), the force of an actor's art method is caused by that fact that this method belongs to our organic nature, spiritual and physical. We were born with this creativeness, with this "system" in ourselves. We have natural need in creativeness.

²⁰ Гуссерль Э. (1913) Идеи..., Кн.1., Разд.1, гл.1, §1; Разд.2, гл.2, §§36-38,42; Разд.3, гл.4, §§97,99,102].

to doubt, as they are a subject of our internal reflections (hence, of direct perceiving of senses), and any their perception differs from ambiguity of the sensations caused by external subjects. Our sensations related to our expectations become elucidated by certain way, when they are really corresponding to these only (i.e. when they get unequivocal sense adequate to these). Consciousness always addresses to some experience of sensual and semantic perceptions, and compares it with current sensual perceptions of a subject: consciousness is choosing most adequate ways of coexistence with the subject by constituting adequate senses of its current perceptions.

Language is base of the mutual understanding. Being living in a society the individual uses a certain language as socially generalised *psychophysical* basis of mutual understanding among members of society. Mutual understanding admits use of concepts which have already found the unambiguity, and, hence, are capable to cause similar inner intellectual experiences (representations) in consciousness of different persons, if people are speaking in one language. The similarity of intellectual experiences expresses the mutual understanding, and the commonality of language provides this similarity. In language are fixed (more or less) unequivocal senses used by members of society within their joint life. Human language has extreme complexity, and it allows describing the thinnest nuances of the physical, biological and psychological phenomena. Language plays a role of the tool facilitating the mutual understanding (between native speakers) on base of mutual empathy. Thanks to language, members of society support certain adequate coexistence with the world surrounding them; they use ready experience and knowledge each other; they are holding in memory the experience and knowledge of generations of the remote past, and use them for decision of current existence problems. Assimilating to a cognizable subject is direct on external borders only, on "interaction surface" of natures of thinking individuum and nature of cognosced thing; by consciousness acts the nature of conscious individual as though enters in direct contact with the definite properties and relations of nature of cognosced thing. It is very important to take into account this, because the internal nature of any real thing (including nature of thinking individuum) has potentially infinite number of features and relations.

A very old view. Kant asserted that we in general are incapable to learn *the absolute reality* (what is world in actuality?) or things as "transcendental objects" (what are things in actuality?). However our knowledge is *useful*. Nowadays we are capable to moon travel, and, hence, we would be more precisely to speak about degree of reliability or credibility of our knowledge about the world and about ourselves, rather than about true knowledge at all.²¹ Our ability to knowledge serves us well only within our nature created by the natural selection during previous evolution of our biological species. Moreover, even irrational representations, illusions and good delusions are capable to strengthen our collective viability quite really. The belief in infallibility of the leader was rallying a prehistoric tribe round him, and this was helping to people together to overcome hardships, which are invincible without mutual aid. It seems conspicuity that any real thing has actually infinite number of natural properties and relations, and in the same time our knowledge is always finite. Nevertheless, our theories and predictions are working well enough, and these allow us to travel to the Moon and come back to the Earth successfully.

Generally, knowledge is not literal counterpart of the real things, knowledge objects, nevertheless it is coupled adequately enough with real nature of these objects, and, hence, it bonds (by some adequate modes) our real existence with the valid nature of things, when things are becoming objects of cognizing. Let me notice that at the heart of any knowledge lay intuitions, and this means intuition creates this direct contact of our own nature with the nature of things, which we learn. Husserl was emphasizing the consciousness directly includes something from the subject. I assume, we also deal with this "something", when we follow our intuition and make faultless actions. Knowledge allows us to build adequate relations of coexistence (unity relations) of our own nature with the nature of things that we investigate. Therefore, we are capable to avoid real dangers and to extract out real benefits from objects of an external world. Our individual existence is always coexistence with the neighbouring world, and this coexistence is constituted by adequate relations

²¹ Medicus G., 2011-2017, 9.5 (Медикус, 2020).

of existential unity between us and world. It is relative unity and consequently it allows guessing also presence of *relative existential dissociation* between existence of individual nature and existence of the other world. Therefore, it is obviously that specificity of relative existential dissociation determines, for example, the specificity of coexistence relationships of our individual nature with the neighbouring world.

Existential unity of our nature with external world in this or that relation always is obvious, and co-existence is only marginal case of it. In addition, human knowledge expresses certain relations of existential unity of human nature with external world, relations thanks to which existence of the person always is *coexistence* with a certain (human) world around. We know the world and ourselves in that measure and in those relations, in which we are capable to coexist with the world and are capable *to perceive* (or being experiencing) the world existence and our own existence, *and to empathize* with natural existence of world and our own natural existence. The essence of adaptation interpreted as *existence strategy* (or as *survival strategy*, if it is more habitual for biologically thinking reader) consists in development of *relations of coexistence* with the neighbouring world - with the world with which the live being is in direct existential contact. Cognitive process attributively accompanies all our life - all process of our coexistence with the world. Therefore, we can reduce the knowledge to *classification* of real things concerning those existential couplings we can have with these. That is the knowledge about existence (about co-existence) of things, but is not knowledge about what are things "by nature". We can express any knowledge about nature of things by representations about concrete relations of existential unity of our own human nature with these things and/or its dissociation with these or reduce any knowledge to such representations. Within of these representations the knowledge is regulating relations of existential unities of human with cognizable objects of a reality by identifying (hence, by classifying) properties and relations of these objects.

There is one circumstance, which integrates physics with both biology and psychology; but in modern sciences ones usually are not taking into consideration this circumstance properly at analysis and comparison of epistemological approaches used in these three sciences. It is considered that these three sciences *are natural ones* investigating any object not as a unique existence single by its nature, but as example of existence of some class of natural objects. It occurs because subjects of cognition are properties and relations of real objects, but real objects themselves are not subjects of cognition: real objects worry the consciousness, but consciousness is *not copying these*. We can consider any scientific knowledge, generally speaking, as a specific kind of classification of objects of a reality: the classification is the fundamental knowledge method that underlies any knowledge. Really, according to Husserl²², the consciousness *represents* any thing, and scientific consciousness represents any single thing (which is unique by its nature) as an example of some class of subjects. However, each real thing *is singular* by its nature, and each real thing has potentially infinite set of properties and relations; hence, consciousness cannot experience such a set completely.

It is very old idea that any real thing has potentially infinite number of properties and relations, and, hence, the nature is full of the facts, which never were in experience.²³ Husserl has added extraordinary depth to this idea. In particular, everything that exists really and still is not experienced can become a reality; and this means that the thing, which worries consciousness, belongs to still undefined but definable horizon of my actual experience. And such a horizon is a correlate of all components of indefiniteness, that in themselves essentially depend on experience of things, and these components retain possibilities of their execution, realisation (every time as far as of the essence ones), and these possibilities are not random, but always in advance are foreordained and are motivated by type of their essences. Any actual experience indicates beyond the bounds of itself, to that probable experience, which in turn refers again to new probable experience and so ad

²² Гуссерль Э. (Husserl E., 1913).

²³ Certainly, it has been realized by philosophers long before Leonardo da Vinci.

infinitum.²⁴ As the real thing comprises indefinite, an infinite series of properties and relations, hence, contemplation (on *νόησις* and *νόημα*²⁵) of things also conceals infinity in itself, and, hence, the region "thing" serves as a guideline of phenomenological researches. By beholding an individual thing and watching modes by which it moves, comes nearer and goes away, turns and spins, its form and the quality are changing, watching how thing puts itself causally, we create smooth continuums (by that beholding), which become covered somehow, and all this merges into some unity in comprehensions of thing. The consciousness look goes, thus, to aspect of identity (on «X») of sense (accordingly, sense of positional or neutralized proposition), to the "same" of thing that changes and turns etc.²⁶

It is obvious we cannot *observe simultaneously all world*; we can detect natural regularities by means of observed facts in certain borders only. And it is easy to show that actually Popper's falsification principle bases on comprehension of this inability: we can prove existence of any essences, only if we will demonstrate these to scientific community; *but we cannot demonstrate any non-existence* as it is physically impossible to show non-existing thing, even if such a thing would be existing anywhere in interminable Universe. Hence, accepting the falsification principle, we actually agree to co-operate with hidden nature that is giving us for access only insignificant part of itself in the course of reality cognition. Because of this limitation of direct access to a reality, we are forced to applying an additional principle of extrapolation of empirically revealed laws of the nature to Universe as a whole. However, extrapolation (which allows falsifying any concrete-scientific point, which has proved its efficiency in some certain borders of the real world) is violence in relation to any positivistic cognition. And in this case idols of positivism - *empirical evidence* and *logic completeness* - fall back into the shadow. Empirical evidence is evident only in the limited context of, and logic completeness is complete only in those limits, which an extrapolation can fill. Any evidence and any logic completeness detect out its borders. Therefore in this case *the scientific beliefs* thanks to which we enter in relations of cooperation with the nature, accept responsibility for the validity of our knowledge. The beliefs gets into the science through the most latent layers of human mind, and just the philosophy accompanies these usually.²⁷

Transcendental object is the subject of metaphysical knowledge. The metaphysical modus of intellection is habitual one for philosophers. Long before Pythagoreans and Elian Parmenides used this approach to perceiving of reality, probably, it was comprehended Egyptian priests, who had been considering reality as *the universal unit*. Actually only now *natural sciences* grope approaches to studying of individual objects (but this is not understood enough still). I guess tendency of many researchers to work in interdisciplinary area testifies about that indirectly.

Besides philosophy there is, at least, one science, which has not reduced its basic method to classification. However, nowadays epistemological traditions that had arisen during its development predispose usually just to such a general representation about an essence of scientific intellection in this area of knowledge. I mean *medicine*: physicians understood that they deal with the unique individual nature of each patient already in days of Hippocrates (however, it is important to notice also that the Egyptian priests had serious medical knowledge, and it is quite probably they were having representations about the unique individual nature of each person too).

Classification became almost a synonym of scientific knowledge not for the historical reasons only, but for objective ones: to knowledge of a reality, there is no other way, except the judgment about of cognizable objects united into classes by their common properties and relations. Classification creates a basis for preliminary orientation of thinking living thing with respect to the world and to itself. Originally, all sciences focus on the ontology of subjects (*these* describe the objects that constitute a subject of its research), and originally they have quite explicit comparative character always, and, hence, character of classifying. *The classification* problem comes out on top, and gets the increasing weight in process of accumulation of data of observation, and therefore the

²⁴ Гуссерль Э. (Husserl E., 1913), Идеи..., Кн.1, Раздел 2, гл.3, §47.

²⁵ *Noesis* and *Noema* (Greek).

²⁶ Гуссерль Э. (Husserl E., 1913), Идеи..., Кн.1, Раздел 4, гл.3, §150.

²⁷ Кутлумуратов А.Б. (Бекчан А.), 1997, I.1.

necessity of streamlining and generalization of the facts extracted by observation arises. When knowledge apply in a real life come out on top a problem of a choice of natural-science knowledge *adequate to practical* purposes and to scientific tasks. Then a new aspect of problem of classification of investigated objects of a reality arises, and it forces the researcher to form the knowledge connected with possibility of its *concrete practical application*. We could be characterizing our epoch as one when the information content of knowledge is so enormous that without development of computer technologies the further assimilation of knowledge becomes almost impossible and the further accumulation of scientific information seems practically useless race behind the facts. Nowadays we still not use to the full the knowledge received even some decades ago. The larger part of our scientific knowledge becomes outdated morally without having the time for finding practical application.

Ethics: origin of practical sciences. In the daily professional work we deal with *individual objects*, which are subjects of *practical sciences*.²⁸ Among such sciences, for example, we can name the architectural designing or engineering sciences, which allow designing and creating unique objects, to prove possibility of their creation by taking into account the purposes and conditions of their application for satisfaction of needs of the person. In them each individual object ones consider as the representative of the class consisting of one designed object, whose properties and relations are set, for example, by the engineer-designer. However practical knowledge on designed object turns out constituted from natural-scientific knowledge of properties and relations of the real things used at creation of this unique construction or the device (i.e. such knowledge is designed by researcher additionally to knowledge as classification). The engineer uses knowledge, which is existing already, and, certainly, he/she can update it for the his/her purposes, if it is necessary, and thus to create nuances of knowledge about interested object. Then he/she conducts *engineering tests*. The engineering knowledge, obviously, is the additional knowledge, which *individualises nuances* of classification of things investigated by natural sciences.

Arts (for example, musical or graphic ones) is an example of especially refined detailed engineering and of embodiment of it in a masterpiece of the master. Ones masterpieces masterfully forge often, but the original remains unique one. Sad circumstance is that any original loses its qualities sometime. Restoration just allows a little «to prolong a life» of the original. Any master cannot create masterpieces that would be equivalent to natural originals; any master do not repeat their by own art, but one can approximate a masterpiece to natural original only or to create new one. But no one can be creating masterpieces which could be best than the natural original. Nevertheless the person is capable *to maintain the nature* of real objects *professionally* there where they still preserves possibilities to support or even to restore itself. In this case, in my opinion, the empathy, as a knowledge basis, is irreplaceable one; moreover empathy becomes leading principle in practical knowledge.

Professional support of existence of real object (which is unique always) assumes an extracting of knowledge relatively of directly current conditions of its existence, and this cannot be made without intuitive intellection. Ones consider the intuitive idea (according to Aristotle) is requiring additional research: intuitive idea should be verified logically and/or empirically. Really, this is seems true, when it is a question of theoretical and empirical sciences. But when this is a question of practical sciences the situation a little bit changes. Specifically, practical knowledge is necessary for direct management of existence of single object, and that is impossible without direct participation of intuition in such a management.

Intuition is a ground of practical knowledge. We express practical knowledge theoretically with help of statements that refer to the subject, which we investigate.²⁹ Practical sciences use the knowledge extracted not only by theoretical and empirical sciences earlier, but use also the intuition for directly perceiving current circumstances and to control individual unique objects adequately to

²⁸ Kutlumuratov A.B. (Кутлумуратов А.Б.), 2016.

²⁹ Bunge M.,1973, p.49.

current circumstances.³⁰ Thus, the logic component is present at practical knowledge too, but it is directed not only by perception of known theoretical and empirical facts, but mainly by intuitive perception of unique current state of individual object and current circumstances. The practical knowledge allows connecting knowledge as knowledge of classes of objects with a direct intuitive perception of current state of natural integrity of individual object in order to control by current state of this object in interests of the consumer of practical knowledge. Thanks to this, the knowledge of individual object does not come off from current circumstances of existence of individual object, does not leave into pure theorizing and remains directly attached to the current state of individual object and to current circumstances. Spontaneous presence of individual object as if operates a course of practical intellection and allows reaching its adequacy; thus, consciousness uses both outcomes of logical intellection regarding facts known earlier, and facts that were seen directly by intuitive perception of current state of individual object. It, in particular, also does medicine by absolutely practical science: the intuition is the leading form of intellection of any physician during *the doctoring* of each patient (or more precisely - during an individuation of doctoring). In particular, this means medicine is absolutely practical science (because intuition is the leading form of the doctor intellection during the doctoring individualization). Therefore we can describe meaning of the doctoring individualization by such a formula: efficiency of doctoring is closely determined by ability of physician *to access the unique nature of each patient* with help of intuition; or, in other words, this ability is determined by both the adequacy of application in each clinical case of available medical knowledge and the unique clinical experience of physician and his/her colleagues.

Really, specificity of practical intellection with a singular clearness detects itself in clinical medicine. An engineer always can duplicate any *unique* construction created once, having deprived of its uniqueness by this way: by creating the *artificial* unique constructions or devices actually he/she creates a new class of constructions and the devices, as though consisting of a unique single element. In clinical medicine as in a practical science the doctor deals every time with unique *natural object* - with the patient's nature, which any physician cannot «duplicate». The physician, certainly, uses classification of diseases, for example, International diseases classification 10 (ICD-10) or ICD-11: he/she considers similar clinical cases hoping that the effect of doctoring will be close to results of doctoring of similar cases. However, physician never should forget that dealing with each patient he/she deals with the unique individual nature.

To observe a single thing means to perceive it by adequate empathizing to its current existence, to enter in particular *relations of coexistence* with the thing. Any knowledge of a reality, in its base, we can reduce to certain modus of semantic *perception of individual things*. Our consciousness' life consists of perceptions of individual things, and during perception we experience some certain *empathy* to current state of these. Within each medical practice any physician used in the past and is using nowadays the empathy as the basic method of adequately perceiving of current state of each patient. We can reduce the *essence of process of physician's intellection* to such empathy: just capacity to empathy allows physician to direct his/her intuition to providing of the adequate professional perception of current state of each patient, and also to the adequate supporting it (if this is health state) or to the adequate treatment (if this is state of disease). Actually there are no other ways to doctoring of illnesses. The Uzbek poet has noticed: «The healer is the one, who has gone through the illness, ask him about means of healing». Physician's empathy has certain features, distinct from thinking methods, which use in other sciences - in natural and practical ones: physicians empathize to sick person, and such empathy is passing differently, than at experts of other profiles. Adequate comprehending of illness of the concrete patient (patient always is the person) is possible only by empathy to his/her current health state; each patient experiences this state through *certain psychological and physical* symptoms of disease. Rational knowledge of current state of each patient is constituted through the objective researches and oriented by physician's empathy; we can comprehend it as knowledge of some class of the medical phenomena

³⁰ Kutlumuratov A.B. (Кутлумуратов А.Б.), 2016.

only after process of doctoring of the concrete patient will come to the end. However, initially we create any practical knowledge of unique object by detection of nuances of certain knowledge about earlier known class (of objects), to which we refer this object; practical knowledge is always created during the *knowledge* individuation of some class of objects; individuation is directed by singularities of current perception of each object.

Medicine is a practical science. The medicine always was a *practical science, a science of doctoring*. It was clearly demonstrated by Avicenna about 1000 years ago. It was obvious to this great physician that the clinical knowledge is based on idea of psychophysical non-duality. And above we saw medicine is not natural science by analogy to biology or physics. The tradition to distinguish practical and scientific parts of medicine arose later, in course of European Renaissance, especially after Descartes. Nowadays this tradition meets many difficulties, and it becomes obvious more and more that *actual epistemology* of clinical medicine is psychophysical *epistemology*, which was in force always before and is valid now among practical physicians. I believe that *psychophysical origin of epistemology of clinical medicine* is quite obviously. This epistemology is really used in daily practice by each physician. Nevertheless this fact is ignored by so-called scientific medicine, or biomedicine. I.e. a principal cause of such a situation is the biomedical bases of the *epistemology* of the official modern medicine, which is understood as natural science, by analogy to biology and physics. Most researchers consider that we can distinguish the scientific and the practical parts of medical science.

Position of Avicenna (who has underlined that medicine - a single integrated science and it is a practical science) was more correct. However progress of physiology and morphology to beginning of 20 century becomes ground to consider *medical science* as practical appendix of these biological disciplines. From second half 20th century the scientific medicine was identified as biomedicine, and now clinical medicine (science of doctoring according to Avicenna) usually is considered as the practical appendix of biomedicine. So, for example, according to the outstanding Soviet/Russian pathologist Dilman's statement³¹, «if we'll not take into consideration medical aspects only that are being determined by a combination of experience, intuition, and art of physicians, then medicine, first of all, depends on development of the fundamental sciences, because actually *medicine* is their practical branch. Views about the causes limiting limits of a life of each individual were formed in process of changing of ideas in fundamental sciences and of the increasing of technical possibilities in medicine in view of this». Dilman believed also that the principle of unity of preservation and deviation of homeostasis described by him allows explaining existence of a limit of duration of an individual life without involving of ideas from numerous theoretical models of disease of the person existing nowadays. On the basis of the analysis of this principle he has concluded that the main non-infectious diseases of person (including ageing as he guessed) develop with natural regularity. Therefore the medicine requires decoding of own fundamental nature laws. In particular, Dilman suggested considering the principle of unity of the preservation and deviation of homeostasis one of such laws.

It is easy to see that Dilman essentially considered medicine as biology appendix. In the view of Dilman the clinical medicine is the practical branch of biological science, which investigates biological nature of person's illnesses, *biomedicine*. But actually each physician follows the Avicenna's definition and, hence, each physician could be considering the clinical medicine as the independent science having the practical status. Actually from epoch of Alcmeon and Hippocrates each physician uses the theoretical model similar to principle described by Dilman as the fundamental law of unity of a deviation and preservation of homeostasis, but in widest context, not only biomedical one. Alcmeon and Hippocrates considered any disease as state, which appears as a result of defect and/or surplus of something in patient's integrated body nature. For healing any disease is necessary to detect and eliminate those defects and surpluses. Hippocrates considered that nature each patient is unique. Therefore physician must continuously observe each patient, during all time of doctoring in order to correct diagnosis and scheme of treatment of patient, as soon as

³¹ Дильман В.М. 1987, с.3. Italics is mine – АБК.

physician sees that it is indispensably. Actually nowadays each physician implicitly uses same approach for doctoring individuation of each patient, taking into account that the nature of any individual always is unique.

Meanwhile the biomedicine is a natural-scientific part of medical science only, which theoretically integrates individual clinical cases into classes of natural phenomena in biological terms. In particular, within the frameworks of biomedicine our knowledge about states of health of patients as about some classes of biological objects of doctoring is expanding. Almost all modern scientific literature on clinical medicine in this sense refers actually to biomedicine rather than to clinical medicine. However, each physician always is dealing with an indefiniteness of unique nature of *each* patient during all clinical process, and actually *co-operates* with this nature in interests of the patient. The physician uses on the one hand knowledge of certain "mechanisms" of illness and health to directly intervene into a current state of the patient for his/her benefit. But actually, from biological point of view, physician views any "mechanism" as the part (unit) of infinitely complex indefinite phenotype of the whole organism of the patient; this part can be used to restore the optimal viability (health) of patient. On the other hand the physician expects that its intervention *aids* the indefinite individual nature of the patient to restore his/her health state (healthy phenotype) by most optimal way. The physician investigates the nature of the patient so far as it is at all necessary for *the doctoring*, taking into account an essence of the last is individuation of existing knowledge for the purpose of rendering of effective medical aid to each patient, i.e. a directed help, which should be corresponding to undetermined individual nature of each concrete patient maximally.

Hippocrates' "Oath" has an epistemological function. We can objectively detect out the lowered viability of organism in disease states. Patient also detects these states, when he/she *psychophysically experiences these* - mentally and by sensations. The patient psychophysically painfully experiences the current state of non-duality of his/her single nature, its integrity; and actually the doctor aspires to elimination of painful aspects of the psychophysical nonduality of patient only. Viability of an organism of the individual expresses itself by its health state, which is viewed as manifestation of certain organisation of an organism structures, of certain configuration of functional relations between structural units (between "parts") of organism. Between any objectively registered *mental* and *physical* structures of the united nature of an organism always it is possible to present presence of others ones, which are objectively expressible certain relations of unity, and we can detect these by comparative researches of functional and pathological reactions of already known structures to certain external influences. We usually also regard natural definiteness of external influences as "reasons" of certain reaction to them of our own nature. Any configurations of relations within united psychophysical nature of the patient (including an individual configuration of mental qualities) we also can be regarding as some "phenotype". Possibly, patient not perceives many of these qualities, but these can be detected by a physician (i.e. these qualities can be objectivated by a physician). "Choosing" ways and characters of reactions to those or other perceived circumstances, the individual as though "applies" own specific current phenotype. It is impossible *completely* to detect objectively any organism's phenotype as some certain set of psychophysical structures. It is impossible to describe objectively any organism as some certain set of phenotypical structures because there is a structural indeterminacy in any organic system. However, always it is possible to point out the phenotypical structures *essential* for a survival of an individual in *current circumstances* (for example, so-called "mechanisms" of illnesses or normal states, or, if to use biological terms, *normal* or *pathological phenotypes*). The phenotype gets definiteness when the individual *applies itself* by *perceiving* itself as phenotypically certain structure *concerning* certain current circumstances. We expose our phenotype to objectivating by our consciousness so in order we could perceive the current circumstances *essential* for our current existence. Anterior of anthropoids are hands: they are appropriated not only in order these animals has been able to migrate through trees, but also for examining subjects in order to apply them in the best way in current circumstances. But even for simple movement on trees an animal needs the ability to use of its psycho-physically united nature. For example, ability

to *feel* distance up to some object is linked with ability to compare idea of distance with own physical ability to reach this object. Darwinian evolutionism can explain this easily: any decision of individual concerning application of the phenotype in current circumstances is linked with natural selection directed to the maximum expediency for individual survival.

But the clinical medicine does not put a problem of studying of all variety of phenotypical manifestations of illness (the absolutely complete diagnosis of a patient's state) before the physician. The physician should aspire to help patient's nature only to restore any possible "normal" psychophysical (phenotypical) characteristics of state by eliminating painful phenotype and to return patient's health, i.e. *ability* to the steady *coexistence* of patient with the surrounding world. The requirement to support steady coexistence of patient with world around is urging the physician to think of health in terms of *well-being* of the patient. The medicine is a science interested to acquire of knowledge, which give to the physician the possibility for helping (as far as possible) to restore healthy characteristics of current (psychophysical) phenotype of each patient. And this purpose is not put in direct dependence on completeness of physician's knowledge of the individual nature of the patient. Disappearance of complaints and also sensations of mental and/or physical discomfort and objective symptoms of disease at the patient proves the restoration of its health.

Physician should *explain* the nature of an each clinical case, an etiological and pathogenetic "mechanisms" of disease of *each patient* in order to justify certain doctoring actions. For achievement of this purpose the physician uses all accessible experience of clinical medicine, and own professional knowledge and skills; but only his/her *professional intuition* developed by practice years direct his/her thoughts and actions. However intuitions are arising within the basic (psychophysical) epistemology of medical knowledge and these allow to constitute the common psychophysical model (representation) of the current individual nature of each concrete patient in physician's consciousness ; this model play the role of the initial (current) psychophysical model of the patient's individual nature having the non-duality: the common model expresses the psychophysical nature of the patient to whom the physician empathizes during doctoring, and, by empathizing, learns this nature. Current intuitions allow physician to control adequacy of clinical opinions and *prove* these correctness a little differently, than this occurs in experimental (empirical) and theoretical sciences. The doctor uses *clinical intellection*, which operates the especial variant of the *falsification principle*: any idea is justified, if it has allowed the physician to achieve of maximal facilitating or eliminating of psychophysical sufferings of *the each concrete patient* (but not "averaged patient"), i.e. has allowed operating to maximal benefit of health of *each concrete patient*. It means, that "Oath" of Hippocrates³² has, first of all, *epistemological* value in clinical medicine: positions of this treatise define *scientific* principles of this area of knowledge, but not simply describe *the ethical rules* regulating professional behavior of physicians. From physician's point of view all that allows receiving advantages to each patient's health is evidential one.

The evidential *doctoring* is meaning, first of all, the consecutive compliance with the ethical principles defining physician's professional aspiration to reaching the maximal possible benefit, which physician can give to each patient through medical aid. "Oath" is one of the most ancient treatises setting fundamental conditions of the validity of the medical conclusions and, hence, of evidences in medicine as in doctoring science. From this point of view so-called «evidence medicine» does not bring something essentially new into epistemology of clinical medicine. Its claims express modern understanding of how we should be proving in medicine: these express modern attempt of epistemological regulation of clinical medicine in manner of natural sciences. Epistemology is a science about persuasiveness of scientific knowledge generally, and the knowledge obtained within the limits of separate branches of a science, in particular. The knowledge can be evidential one within only our understanding what is knowledge, and how we can cognize. However, in basis of requirements to knowledge, generally speaking, lie *the ethical principles*, which obligate of science workers to aspire to convincing knowledge, and also to follow those criteria of persuasiveness which develop a science and develop together with a science.

³² Гиппократ. Трактат «Клятва», 1936

Therefore every time, considering questions of medical evidences, it is necessary to understand clearly the specificity of ethical requirements to physician's behaviour and to mutual relations between physician and patient determines epistemological grounds of doctoring process in each clinical case. Really, medicine-in-evidence is defined as the practice based on a method which unites the individual clinical approach with best accessible external clinical proofs received by regular research.³³ Thus, ones emphasize that making medical decisions we should use best of available proofs *diligently, reasonably* and conscientiously: by keeping in mind individual care of each patient. Differently, actually the evident medicine uses ethical medical norm as basic condition of evidence, and we meet such a situation already in "Oath" of Hippocrates. Patients appeal to physician's support, the physician selects "the best proof» and bears moral responsibility for this choice in each clinical case; the selection of best proof is determined by professional medical ethics. From the rationalistic point of view the medical proof is reduced to the meaning of concept of "best benefit" which physician aspires to provide each separate patient.

The psychophysical ("mind-body") problem in medicine. The medical (clinical) intellection begins that moment, when the physician actually takes the position of the positive decision of a psychophysical problem in each clinical case. To comprehend each clinical case, and thereby to explain and justify the doctoring actions, physician is compelled to take into consideration not only physical sensations, data of objective physical status and of clinical-laboratory investigations of patient, but also the vital psychophysical experience and current state of the patient. For the doctor this situation has not been changed throughout thousand years of existence of the physician's profession. Historically at all times, at least, in times of Alcmeon, Hipocrates, Halen and Avicenna, the medical intellection actually was based on psychophysical epistemology. In particular, Avicenna has deeply developed the psychophysical (psychosomatic) approach to doctoring, and this approach to the doctoring individuation retains practical and scientific significance until now.

The physician intellection based on psychophysical epistemology actually generates medicine as a science, generates its development. Therefore fundamental psychophysical essence of this epistemology was remaining in force till now, and will remain in force as much as a medical practice will exists. The occurrence and development of various *neurosciences* is characterizing the modern level of development of a science; among these the special place is occupied with sections of neurophysiology based nowadays on ideas neurophenomenology. Now it looks natural that any terms containing prefixes "neuro-", "cortico-", "psycho-", etc. we can interpret by concepts of the neurophenomenological approach. This approach opens a way for effective discussion and application of psychosomatic ideas in official clinical medicine. Medical intellection always was and remains opened to perception of similar ideas if only these can be falsified within clinical epistemology. The known theory of stress of Hans Selye³⁴, in my opinion, is one of the most successful conceptions of medicine in the Contemporary history because it has obvious psychosomatic character. This theory is implicitly based on a postulate of the psychophysically united nature of the live individual. Therefore it has been met by doctors with the big enthusiasm, and it quickly took roots in clinical practice became the doctrine, which in many respects has facilitated clinical intellection of the modern doctor. It has justified itself not only in relation to physical traumas and acute proceeding diseases, but also in relation to such grave chronic diseases as a cancer, a stomach ulcer, an immunodeficient disease, a presenilation etc. and given to doctors a key to understanding of reasons generating appropriate stressful states. Thanks to the stress theory the ancient Alkmeon-Hippocrates' conception has become more obvious. According to this conception illnesses are caused by shortages or surpluses of the natural beginnings, which constitute the individual nature of each person. From this follows, in particular, that medical aid can be reduced to diagnosis of corresponding shortages and/or surpluses and their indemnification in each clinical case. According to Selye's theory the adaptation syndrome is a basis of any disease, and it naturally develops or as a result of a sharp deviation from current internal (physiological) balance in

³³ Sackett D.L.e.a., 1996.

³⁴ Selye H., 1944, 1951, 1952.

an organism, or as a result of durable obstinately current chronic evasion of an organism from internal balance.

Doctoring is process of individuation of knowledge in interests of each patient. The specificity of medicine, if we consider it as practical science, is characterised by doctoring process, during which each physician subjects to the analysis medical knowledge and aspires to achieve *individuation of doctoring results*³⁵; he/she aspires to pertinently apply this knowledge in each concrete clinical case - in accordance with individual nature of each patient. I assert we would be speaking with very good reason that we really have specific clinical sciences, only when scientific work in the field of clinical medicine will be oriented to the decision of individuation problem of doctoring. It at all does not mean that in reality the physician studies directly the individual nature of each patient. Probably, Hippocrates and Avicenna easily would confute such assertion too. The task of the physician looks more modest: physician studies ways for realization of adequate help just in a context of the unique individual nature of an each patient.

Success in the decision of this problem can be reached only within the limits of the adequate approach of a physician to understanding of complexity of the each patient's individual nature hidden in infinite indefiniteness of this nature. Professionalism of the doctor is reduced in many respects to two abilities: 1) to ability to adequately take into consideration essentially incomprehensible complexity of the individual nature of each patient; 2) to comprehend and apply all accessible knowledge of human nature (and always finite knowledge) in a context of interests of health of each patient. In this series of treatises I will aspire to develop, first of all, this understanding of an essence of doctoring and to describe on its basis the basic scheme of doctoring of each patient within spontaneously current clinical practice. The physicians carrying out their work by this scheme solve the doctoring problem in conformity with ancient *clinical thinking* traditions deeply differing from biomedical traditions used by nowadays scientific medical workers. It was above marked, the last investigate special problems of clinical medicine *by extracting the knowledge* how it is accepted in *natural sciences*: they investigate a state of health of the patient not as an individual natural object, but as an object representing the class of some natural objects, and description of this class constitutes the contents of biomedical knowledge. If we'll follow Husserl, then we will represent a state of health of each patient as an example of some classes of objects, which are described in ICD. And, thus, the fact that each sick person is real object, unique in its nature and possessing vaguely infinite set of properties and relations, which cannot be perceived in restricted clinical experience, no one takes into consideration within ICD.

Thus, till now physicians are *using* the medical knowledge extracted only *inside of the spontaneously current clinical process* by solving thus *a problem of doctoring individuation - of adaptation of this knowledge to the real individual nature of each patient*. Really, the problem of doctoring individuation is the basic problem of clinical medicine interpreted as practical science. However, this fact is difficult for comprehension because of biomedical orientation of modern researcher's intellection. A problem of doctoring individuation and a so-called problem of *an individual approach*, which researchers try to develop with help of biomedical paradigms, are formulated on bases of two different fathoming of nature of medical knowledge. One of the main tasks of the this series of treatises is to indicate important points in working out the problem of the doctoring individuation - those points, which medicine cannot bypass as a practical science involved de facto into current process of the formation of human nature in ontogeny and phylogeny.

Conclusion

The *psychophysical origin of epistemology of clinical medicine* is quite obvious. This epistemology is really used in daily practice by each physician but is ignored by so-called scientific medicine, or biomedicine. I guess that a principal cause of such a situation is the biomedical bases of the official *epistemology* of the modern medicine understood as branch of natural science by analogy to biology and physics. Most researchers consider that we can distinguish the scientific and

³⁵ Kutlumuratov A.B., 2020.

the practical parts of medical science. However, actually the medicine is the one science, and it is a practical science. Avicenna postulated it about 1000 years ago. It is incorrect to consider the Medicine a natural science by analogous to biology or physics. The tradition distinguishing practical and scientific parts of medicine arose in course of European Renaissance, especially after Descartes. Nevertheless resources of this tradition is near to depleting nowadays, and it becomes obvious more and more *that actual epistemology* of clinical medicine, which was in force always before and is valid now, is psychophysical *epistemology*. It means that the biomedical epistemology of clinical medicine is fundamentally incomplete. Actually attending physician just can eliminate this incompleteness within the limits of daily clinical practice by adding the psychophysical epistemology to the biomedical knowledge. Psychophysical epistemology can be developed scientifically only on a basis of cognitive science methods. Searching of the more adequate algorithms of physician's (clinical) intellection, than algorithms, which ones create nowadays on the basis of biomedical epistemology, should be purpose of application of psychophysical epistemology in clinical medicine. It means that the dual principle, which unites an idea of the indeterminacy of the individual nature of each patient with idea of determinacy of state of his/her health or disease (of norm or diagnosis), is laid at basis of the physician's thinking. Each physician applies this dual principle intentionally (rarely) or implicitly (more often) since an antique epoch at least. It explains why in medicine so-called "*psychophysical problem*" is not interpreted as synonym of "hard problem of consciousness".

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The appendix

EXPLANATION

to the refer “Kutlumuratov A.B., 1916” and “Кутлумуратов А.Б., 1916”,

or

Some clarifications to authorship of the treatise “About the Primacy of Intuition in the Clinical Medicine”

I have to inform readers about the following.

1st

The treatise “*About the Primacy of Intuition in the Clinical Medicine*” was assumed as the first part of the united work (in two parts), which we have agreed to publish together with Kutlumuratov, Sardor Bekchanovich. We have agreed to consider this common work as the work of two authors. We agreed that personal professional diary of Kutlumuratov Sardor processed with help of special algorithm will become the second part of this our prospective total work. As co-author he should use the algorithm, which was developed by me, for analysis of his physician experience. Taking into account all this, earlier I have mentioned about Kutlumuratov Sardor as about the second author of treatise “*About the Primacy of Intuition in the Clinical Medicine*” (of the first part of the assumed common work).

2nd

Kutlumuratov Sardor no prepared the second part of the common work. Hence, our arrangement has not come into force. Therefore treatise “*About the Primacy of Intuition in the Clinical Medicine*” cannot be considered as a part of unexisting common work of two authors.

3rd

Taking into account 1st and 2nd points (that were described above) I have decided to refuse publication of the common work of two authors. I also state that Kutlumuratov Sardor has not pretensions regarding authorship of the treatise “*About the Primacy of Intuition in the Clinical Medicine*”.

4th

Taking into account 1st, 2nd and 3rd points I have *not mentioned about Kutlumuratov Sardor as about co-author of treatise “About the Primacy of Intuition in the Clinical Medicine”*. I ask also to consider erroneous a mention about Kutlumuratov Sardor as about the co-author of previous versions of this treatise that were published in vixra.org.

5th

I have decided to publish a cycle of treatises under the general name “About ontological and epistemological grounds of modern medicine and physiology”. I do not assume co-authors. The treatise “About the Primacy of Intuition in the Clinical Medicine” I consider as the first treatise of this cycle.

Kutlumuratov Atabek Bekchanovich
10th March, 2021

Приложение

ПОЯСНЕНИЯ к ссылкам «Кутлумуратов А.Б., 1916» или «Kutlumuratov A.B., 1916»,
или
Об уточнении авторства трактата “О примате интуиции в науке врачевания”

Считаю необходимым сообщить читателям следующее.

1-^e

Трактат “**О примате интуиции в науке врачевания**” был задуман как первая часть единой *работы в двух частях*, которые мы согласились издать вместе с Кутлумуратовым Сардором Бечановичем. Мы согласились рассматривать эту единую работу как работу двух авторов. При этом мы согласились, что личный дневник Кутлумуратова Сардора, анализированный по специальному алгоритму, станет второй частью предполагаемой полной работы. Как соавтор он должен был использовать алгоритм, разработанный мной, для анализа своего врачебного опыта. Принимая во внимание вышесказанное, я упомянул Кутлумуратова Сардора как второго автора трактата “**О примате интуиции в науке врачевания**” (первой части предполагаемой общей работы).

2-^{oe}

Вторая часть общей работы не была подготовлена Кутлумуратовым Сардором. Следовательно, наша договоренность не вступила в силу. Поэтому трактат “**О примате интуиции в науке врачевания**” нельзя рассмотреть как часть несуществующей общей работы двух авторов.

3-^{be}

Принимая во внимание 2-ой пункт выше, я решил отказаться от публикации общей работы двух авторов. Я также подтверждаю: у Кутлумуратова Сардора нет претензий относительно авторства трактата “**О примате интуиции в науке врачевания**”.

4-^{oe}

Принимая во внимание пункты, 1-й, 2-й и 3-й, я *не упомянул* Кутлумуратова Сардора как соавтора трактата “**О примате интуиции в науке врачевания**”. Прошу также считать ошибочным упоминание его имени в предыдущих версиях этого трактата (“**О примате интуиции в науке врачевания**”), опубликованных в vixra.org.

5-^{oe}

Я решил издать цикл трактатов под общим названием «Онтологические и эпистемологические основания современной медицины и физиологии». В этом цикле я не предполагаю соавторов. Трактат “**О примате интуиции в науке врачевания**” прошу считать первым трактатом этого цикла.

Кутлумуратов Атабек Бекчанович
10 марта, 2021 года