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The Prevalence of the Causes of Diseases, under a Cause-Effect Approach

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ABSTRACT

We have focused on paying attention to disease, knowing how to diagnose it, how to treat it, how to “eliminate” or control it. But I assure you that very few people in this world have become aware and consistent, and instead of thinking about eliminating the disease, they think about preventing it from developing. After years of research, this author has concluded that, according to the International Code of Diseases (ICD-11), there are more than 44,000 reported diseases, and more are described each year; however, there are only ten causes for all diseases. This study seeks to determine the prevalence of the Causes of Diseases under the Cause - Effect perspective, for which we use the methodology of the System for the Application of Techniques for Metabolic Diagnosis (ATDM System), we have carried out a multicenter, multi-country clinical study, where we use our Big data platform for the analysis of data obtained from more than 6,000 people, and we have been able to identify through Bioimpedance and Capillaroscopy tests, various patterns that allow us to determine this prevalence of the Causes of Diseases, which opens a new and disruptive field of research.

INTRODUCTION

Modern medicine is currently undergoing an unprecedented revolution, unlike anything ever before in the history of medicine. We have access to as much information as we do today. Books are already obsolete within a few months, and medical and scientific articles are surpassed every day by new research. Medical students used to spend many hours in libraries. Today, they have access to the latest publications through scientific metasearch engines on the Internet (Alfonso, 2019).

We have focused on paying attention to disease, knowing how to diagnose it, how to treat it, how to “eliminate” or control it. But I assure you that very few people in this world have become aware and consistent, and instead of thinking about eliminating the disease, they think about preventing it from developing (Alfonso, 2019).

As described by the Argentine-Mexican researcher and philosopher Enrique Dussel, who says: “It is nothing to discover something new, you have to discover why you are discovering,” (Alfonso, 2019) and it is that for decades, the same preventive schemes have been applied in primary health care, without any impact or direct results to avoid the development of diseases, since there is a scientificide,(Dussel, E. 2019) in relation to the fact that it is about preventing from a focus on the effect, that is, preventing the diseases themselves; however, with scientificidal actions, the knowledge of those scientific developments, focused on addressing the causes that originate the diseases, is blocked (Dussel, 2024).

It’s difficult to study an organism as complex as the human being; and analyzing the living matter that acts and reacts at every moment in our body, from the simplest to the most complex that is, from an apparatus or system to the most complex level, which is atomic or quantum reactions

has been the main challenge of modern medicine.

In 2010, this author began to investigate to improve his own health by starting with problems of an uncontrolled Metabolic Syndrome that led me to be hospitalized in intensive care for two weeks due to a case of Baltazar 4 triglyceride pancreatitis, (Garza, 2025) and then, after more than two months in the hospital, and being one of the few survivors of this disease, being hospitalized, referred and under a new paradigm, when asking myself, why? Why me? This author Victor Alfonso Abuadili Garza from 2010 to 2019, studies metabolism through the use of Capillaroscopy, a diagnostic technique that stands as an element of great importance for different areas of modern medicine, since its operation is based on the interaction of light - matter, which is a basic mechanism that is used every day, to obtain information about the Causes of the Diseases (Castro & Castro, 2003) Capillaroscopy is a non-invasive, real-time, low-cost, high-impact diagnostic tool that is easy to perform, even in the doctor’s office or during health workshops or outreaches anywhere in the world, and requires no consumables. Its use is currently expanding to different branches of medicine, gaining momentum under a preventative-predictive model. (Franz Klein-Weigel *et al.*, 2016).

The integration, measurement, and consolidation of Metabolic Assessment Patterns (MAPs) is consolidated as the pioneering study of the Metabolic Diagnostic Techniques Application System (ATDM System). This system provides a big data statistical-analytical platform, using a multicenter, multi-country protocol, providing information on the health status of individuals, groups, regions, and countries. This raises the prospect of its global expansion as the only preventative-predictive health system (Rios-Acosta *et al.*, 2016).

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Study Objective

The objective of this study is to determine the incidence and prevalence of the Causes of Diseases in the population studied using the Metabolic Diagnostic Techniques Application System (ATDM System).

Hypothesis

We can measure the incidence and prevalence of the Causes of Diseases.

Null Hypothesis

We can't measure the incidence and prevalence of the Causes of Diseases.

LITERATURE REVIEW

There are universal laws that no one can escape, one of them being the Law of Cause and Effect. This law makes us see that nothing in life is a matter of chance, and that there is always a relationship between what has happened and what follows (Díaz Camacho, 2010).

“Every cause has its effect, and every effect has its cause, everything happens according to law, luck is nothing more than the name given to an unknown knowledge.”

Victor Alfonso Abuadili Garza

The Law of Cause and Effect is a law of life that many people don't take into account, and it is truly important to achieve good results in all aspects of our lives. It is a law that works perfectly on all levels and brings to fruition everything we sow, whether in thought, word, or action. This means that everything we do sets a cause in motion, and this brings a positive or negative consequence, which will depend on the cause set in motion. There is no idiopathic, good luck or bad luck, only results. The law of cause and effect is omnipresent. It's everywhere, so you can't get rid of it (Abuadili Garza, 2025).

The cost of modern living has had profound and disruptive implications in the field of research, causing changes in the study of disease etiology, as well as in disease treatment and prevention. To the point, if we review medical literature using a metasearch engine like PubMed, the study of glycation, oxidative stress, mitochondrial dysfunction, and microbiota accounts for 80% of recent publications in the last 10 years (Abuadili Garza, 2025).

Medical textbooks talk about diseases whose specific cause is perfectly known: bacteria, viruses, fungi, genetics, etc. But they also talk about idiopathic diseases, where the exact cause of the disease is unknown. This generated a major hypothesis: “If all diseases are the effect of a cause, then there must always be a cause or combination of causes. Therefore, we must change the paradigm of medical care and now ask ourselves: What are the causes of diseases?” (Alfonso, 2023).

After years of research, this author has concluded that, according to the International Code of Diseases (ICD-11), there are more than 44,000 reported diseases, and more are described each year; however, there are only ten

causes for all diseases. Name the disease, but it will have one or more of these 10 causes:

Hidden Hunger

In 2004, Josué de Castro defined “total hunger, the true famine that English speakers call starvation, a phenomenon generally limited to areas of extreme poverty and exceptional contingencies, as the much more frequent and serious phenomenon; and the partial form, the so-called hidden hunger, in which, due to the permanent lack of certain nutritional elements in a normal diet, entire population groups are left to slowly die of hunger, despite eating daily” (Hood & Vikram, 2015).

According to the World Health Organization (WHO), hidden hunger is defined as the non-explicit need for one or more nutrients that are essential for the proper functioning of the body. This health problem is estimated to affect two billion people worldwide (Weffort & Lamounier, 2024; Lowe, 2021).

Systemic Intoxication

Systemic intoxication is caused by processes that our own body develop and that affect our health in different ways (Alfonso, 2023). These processes can be exogenous when they are due to an impact on the body, metabolism, or cellular function, derived from a physical, chemical, or biological agent acquired from the environment, such as toxicology or exposure to allergens; while endogenous intoxication is caused by physical, chemical, or biological processes that occur within our own body (de Arcos & Leiva, 2021). Of the latter, we can see cross-fermentation (aerobic with anaerobic) caused by bacteria in the intestine when eating certain combinations of foods, partial oxidation of methane, and Leaky Gut Syndrome (Burneo, 2024).

Formation of a Proinflammatory State

Silent system inflammation is characterized by elevated circulating levels of inflammatory cytokines, as well as increased infiltration of macrophages in peripheral tissues.

This inflammatory scenario does not induce injury or loss of functionality in the infiltrated tissue, a distinctive feature of a state of low-grade systemic inflammation. (José Israel León-Pedroza *et al.*, 2015). Low-grade systemic inflammation is closely related to the development of chronic degenerative diseases, which is why this state of immune alteration has also been called meta inflammation (Li *et al.*, 2023).

There are many causes for the formation of a proinflammatory state. However, the main one is the presence of glycation in the tissues. This biochemical process that makes up the Maillard Reaction, causes the formation of Glycation End Agents (AGEs) that generate an inflammatory immunological reaction. (Actis Dato & Rebolledo, 2000). Today we know that these AGEs are related to diet and especially to the complications of

Diabetes; but recently Dr. Victor Abuadili, thanks to his discovery by Capillaroscopy, published that the Maillard Reaction is a concatenation of biochemical reactions that occur over a period of 72 hours, generating insulin resistance and that after this period of time, a process of NON-enzymatic Condensation begins for the conversion of Carbohydrates into LDL Cholesterol that adheres to the tissues, initiating a De Novo Lipogenesis, which in the long run triggers obesity, thus closing the vicious circle of inflammation (Abuadili Garza, 2025).

Redox Imbalance

Redox imbalance reactions are those caused by changes in the redox chemical reactions caused by free radicals that affect our bodies. REDOX is the name given to a chemical reaction that involves the transfer of electrons between different reactants, leading to a change in the state of oxidation. In these reactions, one element loses electrons, and another receives them.

A free radical is an atom, molecule, or compound that is highly unstable due to its atomic or molecular structure (i.e., the distribution of electrons within the molecule). As a result, free radicals are highly reactive, attempting to pair with other molecules, atoms, or even individual electrons to create a stable compound. Upon achieving a more stable state, free radicals can “steal” electrons from another molecule, bind to another molecule, or interact in various ways with other free radicals (Baynes & Thorpe, 1995).

Due to the inevitable formation of these free radicals, living beings have had to find a way to survive in this oxidizing environment created by their own functioning, and the appropriate evolutionary response to counteract the damage that these reactive species could cause has been the development of antioxidant systems. This implies that, to consider the situation occurring in an organism, it is necessary to assess the balance between the production of reactive species and their elimination capacity, known as redox balance (Giugliano *et al.*, 1995). From the moment a human being is conceived, oxidation and reduction begin. The increase in free radicals generates cellular aging that is associated with a chronic inflammatory process, as an overexpression of REDOX-sensitive transcription factors is observed, which activate the transcription of pro-oxidant enzymes in cellular aging. This causes the balance between pro-inflammatory and anti-inflammatory cytokines to be lost in favor of the former. However, due to the cost of modern living, there are various causes that accelerate this imbalance, such as air pollution, saturated fats, heavy metals, smoking, insecticides and pesticides, and stress (Baynes & Thorpe, 1995; Giugliano *et al.*, 1995).

Today, the role of redox imbalance in the pathogenesis of various diseases is well known, including cancer, diabetes mellitus, cardiovascular diseases, neurodegenerative diseases, and more than 300 chronic degenerative diseases, which remain the main health problems worldwide (Evans *et al.*, 2003).

Because of the importance of these REDOX reactions,

and for our readers’ better understanding, we divide cellular reactions into five groups of cellular stress: (Andersen *et al.*, 2006)

- a) Oxidative Stress.
- b) Nitrostatic Stress.
- c) Hydrostatic Stress.
- d) Alkoxylic Stress.
- e) Carbonylic Stress.

Cellular Acidity

The human body is in constant balance (homeostasis), and this balance encompasses several factors, such as fluids, electrolytes, temperature, hormones, etc. However, one of these factors is the tight pH balance. The primary function of this balance is to maintain a wide variety of bonds found in the organic components of living beings, such as proteins, lipids, and carbohydrates, as well as other substances essential to their functioning, such as enzymes. When altered by pH, these substances can be implicated in the mechanism of cellular injury (Zavala Cruz, 2008).

Cellular acidity is a process that occurs in the body’s cells when glucose metabolism, rather than through aerobic channels, shifts to anaerobic metabolism. Normally, when glucose is oxidized, it is metabolized into carbon dioxide, water, and energy. However, when this does not happen, either because the cell is lacking oxygen or because it is displaced by carbon monoxide, the cell is unable to produce energy.

Otto Heinrich Warburg, Nobel Prize winner in Physiology or Medicine in 1931, discovered that “Lack of oxygen and cellular acidity are two sides of the same coin: acidic substances repel oxygen; alkaline substances attract oxygen.” In other words, instead of dying, as cells normally do, in an acidic environment, these cells survive by becoming abnormal cells. These cells are known as malignant cells, which do not respond to messages sent by the brain or those produced by the genetic code, DNA. Consequently, malignant cells grow indefinitely and without any order. This is cancer” (Veronica Huber *et al.*, 2017).

In addition to the above, Herman Aihara, in his book *Acid and Alkaline*, tells us: if the condition of extracellular fluids, especially the blood, is acidic, the result will be fatigue, a tendency to catch colds, etc. When these fluids become even more acidic, our condition worsens with aches and suffering such as pain. Pain occurs in acidic environments. There is no pain in an alkaline environment.

Human Microbiome Imbalance

The Human Microbiome Project is the scientific project that is most effectively transforming human health. A small revolution in microbiology has discovered that many modern diseases are indeed related to the human microbiome (“microbiota” is the term used to refer to the collective of microorganisms that exist in the human body; “microbiome” is the genes that code for these

microorganisms) (Moreno del Castillo *et al.*, 2018).

Recent advances in the study of microbiology and clinical medicine have demonstrated the importance of human microbiome in health. Many studies have demonstrated the cross-interaction of the microbiome with the intestinal nervous system and the consequent modulation of brain activity (Ofelia, 2016).

It has also been shown that the metabolites produced by the gut microbiota modulate energy metabolism in all mitochondria in the body, since the levels of hydrogen sulfide (H₂S), produced by enteric bacteria, inhibit or activate cytochrome oxidase in the mitochondrial respiratory chain. This is also true of the interaction between the microbiome and mitochondria in the epigenetic expression of the cell nucleus in different tissue cells (Garza-Velasco *et al.*, 2021).

The human microbiome is composed of all the microorganisms, actions, and interactions of these microorganisms, which we acquire at practically two crucial moments in our lives: at birth and during breastfeeding during the first 48 hours of life. Therefore, we now know that our mothers inherit our bacteria, parasites, or fungi (Hou *et al.*, 2022).

This microbiome is composed of several types of microorganisms that make up the human microbiome. However, our readers may come into contact with some terms, and therefore I think it is important for you to coin the following concepts:

Microbiota = bacteria.

Macrobiota = parasites.

Mycobiota = fungi.

Mitochondrial Dysfunction

Mitochondria are cellular organelles derived from an ancestral symbiosis between prokaryotic bacteria that were phagocytosed by eukaryotic bacteria. During evolution, they became cellular mitochondria.

These mitochondria lost many of the genes of prokaryotic bacteria and retained only a small genetic fraction that controls the synthesis of 67 proteins, including the genes that express 13 proteins in the respiratory chain. They are not only the source of energy for cells, but also actively participate in muscle function, cell proliferation, the secretion of hormones and antioxidant enzymes (SOD, GpX, and catalase), and in anabolic and apoptotic processes (Wilson, 2009).

The term mitochondrial disease encompasses a broad and heterogeneous set of diseases due to a primary mitochondrial defect, characterized in most cases by impaired oxidative phosphorylation and a consequent alteration in energy production.

Mitochondrial dysfunction arises in response to severe stress caused by tissue hypoxia, which activates an inflammatory cascade of cytokines, interleukins, and tumor necrosis factor (TNF2 α), inhibiting aconitase in the Krebs cycle, thereby disrupting energy production at the cellular level, causing mitochondrial dysfunction and even cell death (Hood & Vikram, 2015).

Lack of Gene Expression Modulation

Today, it is no longer considered valid to assume that if a person's grandfather or father has a certain disease, that person will inherently have it. The Human Genome Project was one of the most expensive and celebrated scientific initiatives in history. When this project concluded, the idea was that with the discovery of the genome, certain "letters" of the human genome individual genes could be changed and diseases easily corrected. (Jonides, 2004). Genetic expression is determined by many factors. Generally speaking, all somatic cells in the body have the same genetic makeup. However, different cell types express different proteins and have different phenotypes. In other words, the same DNA can be used differently in different cell types, which is known as genetic expression (Michelle *et al.*, 2007).

Lack of Biofrequency Modulation

Human beings are matter and energy, and as this universal law states, "Energy is neither created nor destroyed, it only transforms." Our body emits more than a trillion different frequencies that correspond to the working frequency of our organs and even parts of them. Any alteration in the function of an organ or bodily system leads to an alteration of its frequency (Pérez-Esteve *et al.*, 2022).

Many diseases are due to biofrequency disturbances; diseases are due to the confusion of bioenergy due to a disruptive connection. When diseases are caused by biofrequency disturbances, they affect the muscular system, the digestive system, and every other bodily system (Taboada Lugo, 2025).

Trauma

Trauma not only includes injuries from accidents, but also all conditions that cause trauma to the body's structure, including surgeries. They generally follow the Law of Causality. There will always be a cause that originates an incident that causes harm.

MATERIALS AND METHODS

This article has a qualitative, documentary and propositional study approach, carrying out an exploratory, descriptive, explanatory, propositional and predictive study, for which, first this author proceeded to carry out a bibliographic review in Pubmed, Google Scholar, Latinindex and other metasearch engines, to determine the physical, biochemical, homeostatic factors, with the aim of updating knowledge about the processes involved in the Causes of Diseases.

Applying the methodology called "Metabolic Assessment" established in the ATDM System referenced in number 1 to 7 of the references, to corroborate our hypotheses, a clinical research was carried out where Bioimpedance and Capillaroscopy tests were performed on more than 6,000 people (n=6031) of both sexes, regardless of age or health status, in Mexico, the United States, the Dominican

Republic, Guatemala, Puerto Rico and Colombia, taking a general medical history of the patients and raising a database that will report the corresponding statistics in the results section. All were requested and signed their written consent to participate in the present study, and in the case of minors, parental authorization.

To obtain these parameters, we performed a bioimpedance test on the sampled individuals using an Omron HBF-516B device, which obtained the bioimpedance parameters. We used BMI value to determine the individual's nutritional status and analyzed body composition. If muscle mass is decreased and fat mass is increased, we can infer the presence of insulin resistance related to the proinflammatory state. Using metabolic age data, we can determine a redox imbalance if it is increased, and hidden hunger if it is decreased. Using visceral fat data, we determine lipid adhesion to vital organs.

Then we relate them to the Capillaroscopy images that were obtained in real time, using Bioresonance Capillaroscopes brands CMOS XW880, X crysta and Digilenz, with different magnifications, which are photographed directly from the screen of the devices, to make an interrelation of the Capillaroscopy with the Bioimpedance test.

We correlate the Bioimpedance test with the Capillaroscopy test, and we directly identify specific imaging patterns, which allow us to determine the causes of diseases. Thus, the Nutritional Status pattern determines the processes of Hidden Hunger, whether due to alterations in intake, absorption, or assimilation. Toxicology patterns determine exogenous systemic intoxication, while microbiome alterations related to the presence of fungi and parasites (whether helminth eggs or protozoan trophozoites) indicate the presence of Leaky Gut Syndrome, in addition to determining Microbiome Alteration. With the Proinflammatory Status pattern, we directly identify silent inflammation, in addition to lymphatic congestion and the presence of fibrosis. With the Glycation pattern, we visualize the different phases of the Maillard reaction and Non-Enzymatic

Condensation. Likewise, with the redox imbalance pattern, we can see this same theme, identifying oxidative and nitrostatic stress and their effects on tissues, and even on the biochemical reactions themselves, which are directly related to Mitochondrial Dysfunction. Likewise, the patterns of altered capillary morphology and altered microcirculatory flow determine the lack of genetic modulation and the lack of biofrequency modulation, while certain components of various patterns are associated with trauma.

The results of these metabolic assessments are integrated into a clinical record, and the information and images are entered into our big data platform, the "System for the Application of Techniques for Metabolic Diagnosis (ATDM System)," with the goal of identifying, through capillaroscopy, the presence of the different components of the Maillard reaction as part of tissue glycation. In a subsequent installment, we will provide a case-by-case and statistical account of these assessments, since the objective of this study is limited to the identification of histopathological processes that trigger the Causes of Diseases.

RESULTS AND DISCUSSION

We performed, using the methodology of the System for the Application of Techniques for Metabolic Diagnosis (ATDM System), the Bioimpedance and Capillaroscopy tests on patients (n=6031), where we observed that there is a direct proportional relationship among the various components that make up the Metabolic Assessment Patterns (MAP's), with the causes of the diseases.

When performing the metabolic assessment on individuals, each metabolic assessment reported the different causes of the diseases, according to the programming established in the ATDM System's big data digital platform. This allowed us to extract the corresponding case-by-case and statistical results by health day, by state, and by country, as well as the general data from the study protocol.

In this context, from the information obtained from the patient sample (n=6031), we observed the following results, according to the following graph and table:

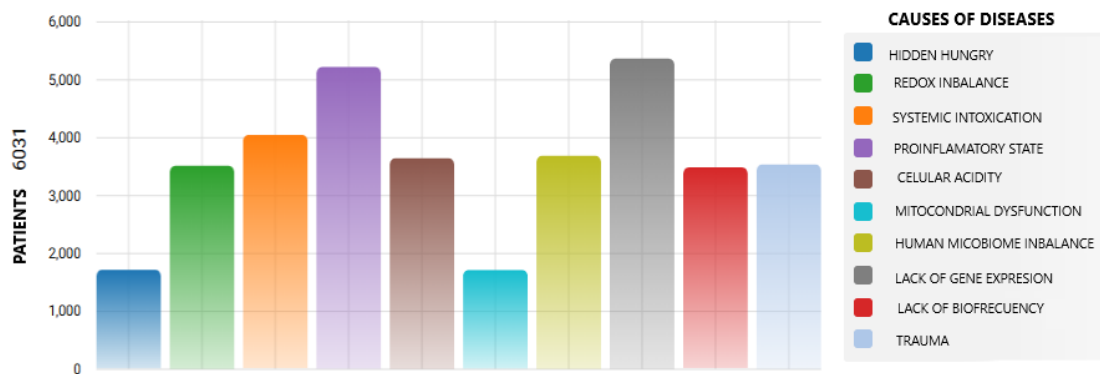


Figure 1: Prevalence of the Causes of Diseases

Table 1: Prevalence of the Causes of Diseases

Causes of Diseases			
Cause of Disease	Patients	Cases	Average
Hidden Hungry	6031	1718	28
Redox Imbalance	6031	3514	58
Systemic Intoxication	6031	4048	67
Proinflammatory State	6031	5221	86
Cellular Acidity	6031	3647	60
Mitochondrial Dysfunction	6031	1714	28
Human Microbiome Imbalance	6031	3689	61
Lack Of Gene Expression Modulation	6031	5368	89
Lack Of Biofrequency Modulation	6031	3488	57
Trauma	6031	3539	58

Analyzing the graph and table above, we can determine that there is a concatenation of causes in many patients, and not just isolated causes. Therefore, reviewing the prevalence of each cause of the disease, we can see the following:

Regarding Hidden Hunger

We observed that of the 6,031 metabolic assessments, Hidden Hunger was present in 1,718 cases, equivalent to 28% of the study population; that is, technically speaking, 3 out of 10 people present with Hidden Hunger. Without mentioning the specific type of Hidden Hungry is generated, this author undertakes to present this study in a future publication.

Regarding Redox Imbalance

We can see that this Cause of Disease is present in 3,514 cases out of the 6,031 people studied in the sample. This means that the general population presents Redox Imbalance in 58%. Technically speaking, this indicates that 6 out of 10 people have a Redox Imbalance, and therefore premature cellular aging. Without mentioning the specific type of cellular stress generated, this author undertakes to present this study in a future publication.

Regarding Systemic Intoxication

As can be seen, the data obtained shows that 4,048 cases of Systemic Intoxication occurred among the 6,031 people who underwent Metabolic Assessment, which is equivalent to 67% of the population studied. Therefore, we infer that 7 out of 10 people are at risk of Systemic Intoxication, whether endogenous or exogenous. However, this data is not yet reported. For this reason, this author undertakes to conduct this analysis in subsequent publication.

Regarding the Formation of a Proinflammatory State

After analyzing the data provided by the ATDM System platform, we can see that this cause of the disease is one of the most prevalent of all. Of the 6,031 Metabolic Assessments performed on the sample population, 5,221 cases of silent inflammation were reported, equivalent to 86% of the population. This allows us to infer that 9 out

of 10 people have Chronic Silent Inflammation. Since a causal analysis has not been performed, these figures require a more in-depth study of the formation of a proinflammatory state. Therefore, this author undertakes to provide this information in subsequent publication.

However, it is necessary to emphasize that the main condition that causes this silent inflammation is insulin resistance, which results from the Maillard and Pyrolysis Reactions in the tissues. This mainly explains the diabetes pandemic, but at the same time, the data obtained refers us to a preventive-predictive aspect of having to urgently implement measures to reverse these processes from the cause.

Regarding Cellular Acidity

This cause of the disease provides data showing 3,647 cases out of 6,031 patients, equivalent to 60% of the population. This means that 6 out of 10 people are developing cellular acidity processes, whether they are experiencing pain or more severe cases with cellular transformation. Therefore, this author undertakes to provide this information in subsequent publication.

Regarding Mitochondrial Dysfunction

After analyzing the data on Mitochondrial Dysfunction, we can observe that of the 6,031 people studied, 1,714 cases were positive for Mitochondrial Dysfunction, equivalent to 28% of the population. This means that 1 in 10 people will experience Organ Failure at some point, if they are not currently experiencing it. Therefore, this author undertakes to provide this information in subsequent publication.

Regarding Microbiome Alteration

The data on Microbiome Alteration shows that of the 6,031 metabolic assessments, 3,689 people have this cause of the disease, which is equivalent to 61%. That is, 6 out of 10 people are experiencing dysbiosis due to some microbiological agent, without specifying whether it is bacteria, virus, fungus, or parasite. Therefore, this author undertakes to present the relevant information in a subsequent article.

Regarding the Lack of Modulation of Gene Expression

It is difficult to determine the date of an alteration in the modulation of gene expression, as multiple pathologies are involved. However, with the components of the Metabolic Assessment, it has been determined that 5,368 people out of the 6,031 metabolic assessments performed present this cause of the disease, representing 89% of the cases. This means that nine out of 10 people have a lack of modulation of gene expression due to some epigenetic mechanism, which this author undertakes to investigate and publish in a future publication.

Regarding the Lack of Biofrequency Modulation

The data provided by this Cause of Disease is significant, given its association with various pathologies. We found that 3,488 people out of 6,031 metabolic assessments, corresponding to 57%, had altered Biofrequencies, which implies that 6 out of 10 people are affected by these disruptive connection processes.

Regarding Trauma

This cause of the disease depends not only on accidents and associated tissue injuries, but also on surgical procedures, and this is where it is triggered that 3,539 cases of the 6,031 metabolic assessments, corresponding to 58% of the population, have had some type of trauma. Therefore, it is necessary to state here that the hypothesis proposed is conclusive. Through Metabolic Assessment using Bioimpedance and Capillaroscopy tests under the Metabolic Diagnostic Techniques Application System (ATDM System), we can determine, both individually and collectively, the causes of diseases affecting a specific population.

Now, looking at the cause and correlating the data provided by this study with statistics viewed from an effect-based paradigm, we can see that diseases are underestimated, as ordinary statistics determine values below the possible reality of what is being experienced every day.

If we analyze the data from a preventive-predictive perspective, the data obtained are alarming, as they not only have value in terms of prevalence (the cases present in a population group), but this study also allows us to see incidence statistics (the new cases that are occurring), and therefore, a future trend is observed, which, according to this author, is alarming.

Analyzing that the prevalence of certain causes of disease is as high as 6 to 9 out of 10 people already have them, then the alarming thing about these data is that the incidence maintains the same trend and, therefore, will increase to the total number of cases in the coming years; that is, in addition to the current cases, new cases will be added and multiplying.

Therefore, the trend over the next 5 to 10 years will be completely exponential, which will mean that no health system will have the capacity to address the effects generated by not addressing the causes now.

CONCLUSION

With this study, we have been able to realize that the use of Metabolic Assessment through the Metabolic Diagnostic Techniques Application System (ATDM System) allows us to identify accurate data regarding the prevalence and incidence of the Causes of Diseases.

It is alarming to see that the data indicates that this impact on health is derived from the toll modern life is taking. Poor eating habits, environmental pollution, exposure to chemicals of all kinds, ionizing radiation, and the stress of modern life are causing us to collapse. If we do nothing to reverse this trend, the incidence and prevalence of chronic degenerative diseases will overwhelm any health system, and no medical innovation will be able to address this catastrophic condition for humanity.

It is clear that these data determine the urgency of taking action to reverse the root causes of diseases, and not just focusing on combating the signs and symptoms once they have already begun.

Looking to the future of healthcare systems, which are currently overwhelmed, it is necessary to change paradigms and establish predictive preventive diagnostic systems such as the Metabolic Diagnostic Techniques Application System (ATDM System).

Right now, with this study, we can better understand the causes of diseases by measuring the caseload and statistics for each cause, and thus understand the processes that cause them, from a preventive-predictive perspective, so the best conclusion that I'm arrived is:

“IF WE REMOVE THE CAUSES OF DISEASES,
WE ELIMINATE THE EFFECTS,
THAT IS, THE DISEASES” ...

Dr. Victor Alfonso Abuadili Garza.

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