



(REVIEW ARTICLE)



## New fever and hyperthermia diagnosing methods

K. M. Yacob \*

*Marma Health Centre, P. O. Kaloor, Ernakulam (Dt), Kerala, India, Pin 682017, India.*

World Journal of Advanced Research and Reviews, 2022, 16(02), 524–530

Publication history: Received on 04 October 2022; revised on 11 November 2022; accepted on 14 November 2022

Article DOI: <https://doi.org/10.30574/wjarr.2022.16.2.1209>

### Abstract

Today, fever is diagnosed by looking at temperatures above 38° C (100.40 F). The same temperature is used to determine hyperthermia.

A fever is not a high body temperature. High body temperature is hyperthermia. Don't call them fever.

Patients with fever and low-temperature hypothermia are more likely to be assessed as hyperthermia when they lie unconscious in the sun and are re-warmed externally. The unconscious patient lying in the sun is brought to the nearest hospital. If only temperature is checked, hypothermia or fever cannot be identified.

Heat is not a fever-causing substance. Heat is a fever reducer by increasing blood flow. It is fundamentally wrong to determine fever by looking at the presence of fever-reducing substances in the body.

There is no similarity between what happens when there is a fever and what happens when there is hyperthermia, and they are contradictory

There is no need to look at body temperature to detect fever. Temperature rise is not only in fever.

Fever can be detected by measuring only the objects that occur only in the presence of fever and not in the absence of fever.

The following 5 things to identify fever with the help of a test or machine without the help of the patient.

1. Who made the fever?
2. Are prostaglandins found in excess?
3. Are TNF alpha found in excess?
4. Does the firing rate of w neurons decrease even at higher temperatures?
5. Does the firing rate of C neurons increase with increasing temperature?

**Keywords:** False definition; False diagnosis; Fever-causing substance; Blood flow; Hyperthermia; Heat energy

### 1. Introduction

Today, fever is diagnosed by looking at temperatures above 38 ° C (100.40 °F). The same temperature is used to determine hyperthermia.

\*Corresponding author: K. M. Yacob

Marma Health Centre, kalyani Towers, Deshabhimani, P.O.Kaloor, Ernakulam (Dt), Kerala, India.

Copyright © 2022 Author(s) retain the copyright of this article. This article is published under the terms of the Creative Commons Attribution License 4.0.

As you are aware today, fever is divided into 3 categories based on body temperature. *Mild/low-grade fever*, 100.5–102.2 °F; *Moderate grade fever*, 102.2–104 ; *High-grade fever*, 104.1–106. ; *Hyperpyrexia*, >106 ° F.

A fever is not a high body temperature. High body temperature is hyperthermia. Don't call them fever.

Hyperthermia is divided into 3 categories *Mild/low-grade hyperthermia*, 100.5–102.2°F ; *Moderate grade hyperthermia* ,102.2–104.0 ; *High-grade hyperthermia*>106 ° F.

Patients with fever and low-temperature hypothermia are more likely to be assessed as hyperthermia when they lie unconscious in the sun and are re-warmed externally. The unconscious patient lying in the sun is brought to the nearest hospital. If only temperature is checked, hypothermia or fever cannot be identified.

Heat is not a fever-causing substance. Heat is a fever reducer by increasing blood flow. It is fundamentally wrong to determine fever by looking at the presence of fever-reducing substances in the body.

As modern science has no basic knowledge about fever<sup>10</sup>, physicians say that fever is a symptom of many diseases, a cause of multi-disease, and a protective shield. If fever is a symptom, a cause of the disease, or a protective shield, parts of the definition and diagnosis of fever should be included. Without this, a unified diagnosis of fever cannot be developed. The result is a temperature-based diagnosis and temperature-reducing treatment that treats fever as hyperthermia without knowing what the fever is for, leading to increased morbidity and mortality in patients.

There is no need to look at body temperature to detect fever. Temperature rise is not only in fever. Temperature rises even in those without fever.

Fever should be determined by looking at things that increase and decrease only when there is a fever.

One of the Conservative definition of fever is an elevation of body temperature that exceeds the normal daily variation and occurs in conjunction with an increase in the hypothalamic set point. Another definition of fever is 'Fever' implies an elevated core body temperature of more than 38.0 °C.

Those who believe that fever is a temperature set above 38 °C in the hypothalamus of the brain and that thermoregulation is lost at temperatures above 41 °C, cannot make a immunity based diagnosis for fever.

If the temperature between 38 °C and 42 °C is elevated in the hypothalamus of the brain, then that temperature is elevated or increased, Why elevated or increased, is it to save or destroy the body, etc. are not checked. It is this ignorance that leads them to false definitions, diagnoses, and treatments of fever.

## **2. It is unscientific to differentiate fever by looking at body temperature above 38 degrees Celsius**

Hyperthermia and hypothermia are only partially known when the temperature is measured with a thermometer.

According to the conservative definition of fever, there is no fever test today. Fever cannot be determined by looking at body temperatures above 38 °C. One cannot be understood directly the temperature is elevated in the hypothalamus. The thermal control line and temperature set point on this line cannot be verified and identified with existing equipment.

A mechanical device is necessary to measure elevated temperature in the hypothalamus.

In fever and hyperthermia, the temperature is not only above 38 ° C, but other factors also change. Some of the other factors are increasing and some are decreasing. Those factors must also be considered. A temperature rise of more than 38 ° C is only one component of fever.

There are practitioners and people here who do not know the components of fever and what the purpose of the temperature of the fever is and mistake the fever for a temperature above 38 °C.

The basic elements necessary for a scientific diagnosis are not provided in fever diagnosis.

### 3. Let's see what the 10 important differences between fever and hyperthermia

There is no similarity between what happens when there is a fever and what happens when there is hyperthermia, and they are contradictory.

**Table 1** A table that Compares things that happen when having a fever and hyperthermia

Sr. No.	Things that occur in fever	Things that occur in hyperthermia
1.	The fever-immune system develops spontaneously.	The immune system does not make hyperthermia. No one makes it voluntarily.
2.	There are controls and limits to the increase in fever temperature. Our immune system produces temperatures below 42 °C.	There are no controls and limits to the temperature rise of hyperthermia. Our immune system does not raise the temperature. As it is produced from outside the body, the temperature rises according to its origin.
3.	Prostaglandins(PGE2) are increased when fever is present.	Prostaglandins (PGE2) do not produce in excess.
4.	TNF alpha, is a substance that causes bitterness in the mouth when fever is present	TNF alpha, which causes bitterness in the mouth, is not increased.
5.	The firing rate of Warm sensitive neurons decreases.	The firing rate of Warm sensitive neurons increases.
6.	The firing rate of Cold sensitive neurons increases	The firing rate of Cold sensitive neurons decreases.
7.	The skin shrinks as the blood vessels under the skin contract	The skin expands as the blood vessels under the skin expand.
8.	feels chill	Feels hot.
9.	Increases blood flow to vital organs. Decreases blood flow to less important organs.	Increases blood flow to all organs.
10.	Prefers only heat.	Likes only the cold.
11.	Hate the cold.	Hates the heat.
12.	Create a comfortable temperature.	Create an uncomfortable temperature.
13.	Makes arrangements to increase the temperature	Makes arrangements to decrease the temperature.
14.	The patient does not feel the discomfort of rising temperature due to fever. He never complains about the discomfort of the rising temperature.	The patient has a variety of heat-related disorders caused by hyperthermia. He always complains about the discomfort of rising temperatures.
15.	The body raises its temperature only when it needs more heat.	Temperature does not increase when the body needs more heat because it cannot be controlled as it is caused by external substances.
16.	Temperature rises only under heat-loving conditions.	Temperature does not increase under heat-hating conditions as it is uncontrollable due to external factors.

#### 3.1. What is the difference between fever, the temperature of fever, and hyperthermia

- Fever is not just about rising in temperature above 38 °C. Fever includes signs and symptoms, signals, and actions of immune system activity that occur only in the presence of fever and not in the absence of fever. Fever includes shivering, loss of appetite, reduce motion, decrease vitality, increase sleep, and their signs, symptoms, signals, and activities that cause the immune system when fever is present in all diseases. This

means that there is a common scientific basis for all fevers associated with the disease. With this, you can find out the secret of getting a fever in all diseases.

- There is a difference between fever and the temperature of fever. The temperature of the fever is only a part of the fever. The temperature does not rise at the beginning of the fever and at the end of the fever.

### **3.2. Hyperthermia cannot be created by substances that cause fever**

Nor can fever be created by hot substances that cause hyperthermia.

### **3.3. Fever cannot be created by heat-inducing substances**

Fever can be created by heat-reducing materials. In Tamil Nadu, the practice of "Thalaikku oothal"<sup>9</sup> is the practice of killing a person by creating a fever with cold water.

### **3.4. Hyperthermia cannot be created by fever-creating substances**

The mode of action of both of these is mutually exclusive.

### **3.5. There is a sharp difference between the Symptoms, signs, and actions of fever and hyperthermia.**

There is no similarity between these

#### *3.5.1. Symptoms of hyperthermia*

Symptoms of hyperthermia include likeness towards cold items like drinking cold water, feeling discomfort while using a blanket, feeling hot, etc.

#### *3.5.2. Symptoms of fever*

Symptoms of fever include body pain, bitter taste, fatigue to mind and body, reduced appetite, reduced motion and indigestion, an aversion towards cold substances, internal and external discomfort, etc.,

#### *3.5.3. Signs of hyperthermia*

The firing rate of Warm sensitive neurons increases, the firing rate of Cold sensitive neurons decreases, the blood vessels under the skin expand, increases blood flow to all organs, and makes arrangements to decrease the temperature.

#### *3.5.4. Signs of fever*

Prostaglandins(PGE2) are increased,

TNF alpha increases, the firing rate of Warm sensitive neurons decreases, the firing rate of Cold sensitive neurons increases, the blood vessels under the skin contract, increases blood flow to vital organs, decreases blood flow to less important organs, and our immune system raises the temperature.

#### *3.5.5. Signals of hyperthermia*

Increased Sweating, Decreased sleep, uncontrolled increased temperature.

#### *3.5.6. Signals of fever*

Shivering, increased sleep, increased inflammation, These are the signals of the protective shield that the immune system produces. The temperature of fever comes under the signal category.

### **3.6. The temperature of the fever only rises below 42 degrees Celsius**

In hyperthermia, it is not below 42 °C, but the temperature rises with the intensity of the heat.

### **3.7. When the body needs more heat, the immune system raises the temperature to below 42 °C only in heat-loving situations**

The same temperature cannot be used to measure uncontrolled and heat-hating hyperthermia.

### **3.8. Who created the temperature between 38 ° C and 42 ° C and for what purpose is very important**

The same test is wrong for fevers that are spontaneously generated by the immune system with a clear goal and for hyperthermia that is not caused by anyone without a specific goal.

### **3.9. The criteria for measuring temperature for fever and hyperthermia are unscientific**

Temperature rise is a signal of fever and hyperthermia, which are caused by contradictory substances and can be eliminated by contradictory substances.

There are many symptoms, signs, signals, and functions that distinguish between fever and hyperthermia. Regardless of these, it is unscientific to assume that temperatures above 38 ° C are the criteria for determining the difference between fever and hyperthermia.

In this situation according to which scientific law, the same test is performed for fever and hyperthermia?

Answer: This is not a scientific law of energy. Those who do so will be hearing this question for the first time.

A fever diagnosis that does not include the activity of the immune system, which occurs only when a fever is present, is ineffective.

---

## **4. Fever, hypothermia, and hyperthermia require a separate diagnosis**

The fever never shows symptoms, signs, and actions of hyperthermia. At the same time, all the symptoms and signs of hypothermia can be seen in fever too. That means there is a common basic science behind these phenomena.

### **4.1. If the existing fever diagnosis is wrong, which is the correct fever diagnosis?**

There are things that only happen with fever, hypothermia, and hyperthermia. All three can be distinguished only by examining it.

During fever and hyperthermia, there is not only an increase in temperature. Many factors are changing. Some increase and some decrease. Those factors should also be considered.

### **4.2. What is fever? (Yacob's Fever Definition)**

"If essential blood circulation decreases to organs, fever is a sensible and discreet action of the immune system to increase essential blood circulation as a self-defense mechanism of the body to sustain the life or organ".

The answer to any question about fever can be found in this definition of fever.

Fever is not just about rising in temperature above 38 ° C. Fever includes signs and symptoms, signals, and actions of immune system activity that occur only in the presence of fever and not in the absence of fever.

### **4.3. How do you know if the fever is good or bad for the body?**

The temperature should be checked according to the purpose of the fever. Although sponging with water to reduce the temperature in the body can cause relapsing-remitting heat-inducing activity, even though we like and prefer to use heat-inducing substances from outside the body, although we do not like the reduction of heat, the firing rate of Cold sensitive neurons increases, the firing rate of Warm sensitive neurons decreases, ... it proves that heat is made to protect the immune system.

The term "Fever test" is said to be without proper understanding of fever.

If it is understood that the cause of fever is inflammation, then it is called an inflammation measuring test.

### **4.4. What is needed for a proper diagnosis of fever and hyperthermia?**

The difference between these should be distinguished in order to diagnose fever and hyperthermia. Proper integrated testing can be made by including who they are, what they are made of, the substances that occur only when they exist, and their functions, symptoms, signs, and indications.

A temperature above 38 °C, elevated in the hypothalamus of the brain, does not provide a proper definition, diagnosis, or treatment of fever. Similarly, hyperthermia cannot be defined, tested, or treated if it is said that the thermoregulation is lost.

A new fever test has been prepared by completely removing the defects of the existing fever diagnosis. The new fever diagnosis is prepared in such a way that no matter what question is asked, it will be answered satisfactorily.

#### **4.5. How is fever diagnosed?**

Fever can be detected by measuring only the objects that occur only in the presence of fever and not in the absence of fever. And symptoms, signals, and actions of the immune system activity of the body.

#### **4.6. Accurate fever diagnosis**

A fever diagnosis should be done to include the activity of the immune system that occurs only when there is a fever. A normal person can identify himself when he has a fever. Fever is not self-diagnosed in unconscious patients and newborns. Those who cannot speak, write or hear cannot tell others even if they recognize the fever themselves.

It is enough to check the following 5 things to identify fever with the help of a test or machine without the help of the patient.

- Who made the fever? (fever created by the immune system)
- Are prostaglandins found in excess?
- Are TNF alpha found in excess?
- Does the firing rate of w neurons decrease even at higher temperatures?
- Does the firing rate of C neurons increase with increasing temperature?

#### **4.7. What is Hyperthermia? (Yacob's Hyperthermia Definition)**

"Hyperthermia is a condition in which there are signs, symptoms, signals, and actions of overheating of the body by objects or their activities inside or outside the body"

Materials like fire can cause not only hyperthermia but also death within minutes. But fever or hyperpyrexia cannot be created in minutes.

#### **4.8. How is hyperthermia diagnosed?**

Hyperthermia can be detected by measuring only the objects that occur in the hyperthermia and the symptoms, signs, signals, and activity of the body heat increase.

Hyperthermia can only be diagnosed by examining at least 4 things in the unconscious patient and the newborn.

- Who created the heat? (Hyperthermia created by external factors)
- Is prostaglandin a normal level?
- Does the firing rate of w neurons increases with increasing temperature?
- Does the firing rate of c neurons decrease with increasing temperature?

After analyzing and evaluating the above Tables and co-relate them, it becomes clear that what is the right way of diagnosing fever and hyperthermia.

---

### **5. Importance of the findings of the new Diagnosis of fever and hyperthermia**

New fever and hyperthermia diagnoses are to scientifically evaluate, distinguish, summarize, and easily understand fever and hyperthermia.

---

### **6. Conclusion**

- Fever and hyperthermia diagnoses should be revised according to what is happening in fever and hyperthermia (new fever diagnosis).
- It provides a definition, diagnosis, and treatment of fever without any room for doubts and complaints.

- Conservative fever and hyperthermia diagnosis has no relation with what is happened in fever and hyperthermia. The basic elements necessary for a scientific diagnosis are not provided in a fever diagnosis.
  - Modern fever diagnosis moves back 10,000 years.
  - It is wonderful that a physician having years of experience in fever diagnosis cannot understand the said diagnosis had no relation to fever definition and the actual purpose of fever.
- 

## Compliance with ethical standards

### Acknowledgments

I acknowledged to patients, authors of reference, etc.

---

## References

- [1] <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4944485/>
- [2] [www.ncbi.nlm.nih.gov/pmc/articles/PMC6504736](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC6504736).
- [3] <https://en.wikiprdia.org/wiki/Thalaikoothal>
- [4] <https://pubmed.ncbi.nlm.nih.gov/27670857/>
- [5] <https://pubmed.ncbi.nlm.nih.gov/22227089/>
- [6] <https://pubmed.ncbi.nlm.nih.gov/33554570/>
- [7] <https://pubmed.ncbi.nlm.nih.gov/27351982/>
- [8] [www.ncbi.nlm.nih.gov/pmc/articles/PMC6504736](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC6504736).
- [9] Nelson Text book of Pediatrics 20th edition
- [10] Pharmacology and pharmacotherapeutics –R.S.Satoshkar, S.D.Bhandarkar, Nirmala N.Rege- Revised XIV edition, p.159, 160, 163, 170).
- [11] National Medical Series For Independent Study-nms Medicine 4th edition, Edited by Allen R. Myers, MD. page430,
- [12] Journal of Applied Medicine , Dr. M .McD Fisher and Dr. Raper, page188, 1988 March
- [13] Davidsons Principles and practice of medicine\_22Ed.
- [14] Text book of Medical Physiology-Guyton and Hall,11th edition.
- [15] Berman's Pediatric Decision Making (5th edition) 2011.
- [16] Dr. John T. McBride, PEDIATRICS Volume 128, Number 6, December 2011 (ISSN Numbers: Print, 0031-4005; Online, 1098-4275.