



Immune Autonomy and Biomedical Narratives: A Critical Interpretation

An Epistemological Analysis of Biological Autonomy and Medical Discourse

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Abstract

This article presents a critical interpretation of publicly available material attributed to Ernesto Prieto Gratacós, reframed within a broader epistemological context. It examines the relationship between immune autonomy, medical intervention, and narrative construction in contemporary biomedicine. Rather than validating or refuting specific claims, the paper explores their conceptual implications and proposes an integrative perspective that balances biological self-regulation with institutional medical frameworks.

Keywords

immune system, biomedical narratives, epistemology, immunocompetence, medical intervention, autonomy

1. Introduction

Recent global health events have intensified debates around the nature of medical knowledge, institutional authority, and the role of individual biological systems in maintaining health. This article presents a critical interpretation of publicly available material attributed to Ernesto Prieto Gratacós, reframed within a broader epistemological context.

The objective is not to validate or refute the original claims in a definitive manner, but to examine their conceptual implications—particularly regarding the relationship between immune autonomy, medical intervention, and narrative construction in contemporary biomedicine.

2. The Body as an Autonomous System

A central thesis emerging from the analyzed material is the idea that the human organism possesses an intrinsic capacity for regulation and defense, particularly through the immune system.

This perspective emphasizes:

- the adaptive intelligence of biological systems
- the evolutionary depth of immune mechanisms
- the capacity of the organism to respond effectively when properly supported

Within this framework, health is not primarily achieved through external intervention, but through the optimization of internal conditions.

3. Immunocompetence as a Primary Variable

The notion of immunocompetence appears as a key organizing concept.

Rather than focusing exclusively on pathogens, this perspective shifts attention toward:

- the systemic capacity of the organism
- metabolic conditions
- availability of essential micronutrients
- regulatory balance between physiological systems

In this view, disease severity is less a function of the invading agent and more a reflection of the organism's functional state.

Within this framework, particular emphasis is placed on the role of basic nutritional support as a foundational element of immune competence. In accordance with the interpreted material, a practical baseline may include:

- Vitamin C (ascorbic acid): 2 to 4 grams daily
- Vitamin D: 2,000 to 4,000 international units daily

These values are presented here as part of the author's interpreted framework, highlighting a minimal metabolic support strategy aimed at sustaining immune function.

This emphasis reflects a broader conceptual position: that the organism, when provided with adequate resources, possesses a significant intrinsic capacity for regulation and defense.

4. Intervention and Disruption

A controversial dimension of the analyzed discourse concerns the potential negative impact of certain medical interventions.

Specifically, it raises questions about practices that:

- suppress natural physiological responses
- interfere with adaptive processes
- prioritize symptom control over systemic understanding

Examples discussed include the pharmacological suppression of fever and the modulation of inflammatory processes.

From a critical standpoint, this invites a broader reflection:

To what extent does intervention support the organism—and to what extent might it disrupt its regulatory dynamics?

5. Narrative Construction in Biomedicine

Beyond strictly biological considerations, the material also suggests that medical knowledge is not produced in a vacuum, but within institutional, economic, and communicational frameworks.

This introduces the idea that:

- certain narratives may become dominant
- alternative interpretations may be marginalized
- language itself plays a role in shaping perception and response

The emergence of specific terminologies, crisis framings, and standardized responses may thus reflect not only scientific consensus, but also structures of influence and coordination.

6. Tension Between Autonomy and Authority

At the core of this discourse lies a fundamental tension:

- biological autonomy (the organism as self-regulating system)
- institutional authority (medicine as organized intervention)

This tension is not new, but recent events have amplified its visibility.

The question is not whether one should replace the other, but how to articulate both without collapsing one into the other.

7. Epistemological Implications

The analyzed material challenges conventional assumptions about:

- the nature of evidence
- the hierarchy of knowledge sources
- the relationship between individual experience and institutional validation

It suggests that knowledge in medicine may involve not only empirical data, but also:

- interpretative frameworks

- underlying assumptions
- contextual pressures

This does not invalidate scientific practice, but calls for a more reflexive and critical approach.

8. Toward an Integrative Perspective

Rather than adopting a purely oppositional stance, this article proposes an integrative approach.

Such an approach would:

- recognize the autonomy and intelligence of biological systems
- preserve the value of scientific and clinical knowledge
- critically examine the conditions under which medical narratives are constructed

This perspective allows for a more nuanced understanding of health, avoiding both uncritical acceptance and total rejection of established frameworks.

9. Conclusion

The material analyzed in this article serves as a catalyst for deeper reflection on the relationship between body, knowledge, and power.

While some of its claims may be debated, its broader contribution lies in highlighting the need to reconsider:

- how we understand immune function
- how we evaluate intervention
- how medical narratives are formed and sustained

In this sense, the discussion transcends specific claims and opens a space for epistemological inquiry, situated at the intersection of biology, medicine, and philosophy.

This article reflects a personal interpretation and does not represent the original author's position in its entirety.

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