


Clinical and Biomedical Effects of Ionized Subterranean Environments: Comparative Health Outcomes from the Ravne Tunnel Complex and Pharmaceutical Interventions

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Received on 28 May 2025; Accepted on 24 June 2025; Published on 07 July 2025

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Abstract

This study presents clinical and biomedical evaluations of the Ravne Tunnel Complex, an artificially made underground network near the Bosnian Pyramid of the Sun, as a source of natural therapeutic effects. The research integrates findings from multiple pilot studies, medical observations, and Monte Carlo simulations to assess the efficacy of negative air ions (NAIs), elevated oxygen levels, and low electromagnetic pollution in the tunnel environment. Documented outcomes include rapid improvements in blood pressure, arterial elasticity, glucose levels, and live blood cell morphology, achieved with minimal exposure times of 45–90 mins. These changes were compared to those typically observed from pharmaceutical interventions over significantly longer periods. Statistical simulations confirmed the improbability of such consistent improvements occurring by chance. The results suggest the Ravne tunnels represent a unique natural environment with measurable health benefits, warranting further exploration within clinical and environmental health frameworks.

Keywords: negative air ions, Ravne tunnels, circulatory health, arterial elasticity, non-pharmacological therapy, energetic environment, Visoko, Bosnia-Herzegovina, ionized air, clinical pilot study, biomedical effects, Monte Carlo simulation, alternative medicine, comparative modeling, live blood test, Bosnian Valley of the Pyramids, natural healing environment

Abbreviations: NAIs: negative air ions; LBA: live blood analysis; PWV: pulse wave velocity; AI: augmentation index; RCTs: randomized controlled trials

Introduction

Over the past two decades, the Ravne Tunnel Complex in Visoko, Bosnia-Herzegovina, has become an increasingly recognized site for interdisciplinary health and energy research. Located beneath the Bosnian Valley of the Pyramids, this subterranean environment exhibits a unique combination of features, including elevated concentrations of negative air ions (NAIs), absence of electromagnetic pollution, high oxygen saturation, and the presence of quartz and ceramic materials, known for their potential piezoelectric and resonance properties [1–4].

A growing body of pilot studies and clinical observations (Supplementary Appendices A–D) have documented measurable physiological effects from even brief exposure to this environment. These include improved blood pressure, increased elasticity of arterial walls, and significant improvements in microcirculation and red blood cell structure. In a study led by Homovec [5] (Supplementary Appendix C), 14 individuals of varying health profiles exhibited arterial relaxation and reduced vascular stiffness following just 90 mins in the tunnels.

Similar findings were reported in the live blood analysis (LBA) (Supplementary Appendix B), where microscopic imaging of blood samples showed notable morphological improvement after 45-min sessions inside the Ravne tunnels.

From a biomedical standpoint, these outcomes align with existing scientific research on NAIs, which have been shown to improve mood, lung function, immune modulation, and serotonin levels [6–8]. The convergence of these findings suggests that Ravne’s subterranean atmosphere constitutes a naturally ionized therapeutic environment with reproducible health outcomes.

Building on a series of previously published works on ancient energy technologies and bioenergetic spaces [9–12], this study offers a clinical and biomedical analysis of the Ravne Tunnel Complex. We integrate empirical results, Monte Carlo simulations, and comparative modeling to evaluate its potential as a non-invasive, complementary therapeutic setting, one that challenges conventional boundaries between environment, biology, and public health.

Object of the Study

The object of this study is to clinically and biomedically evaluate the health effects of exposure to ionized subterranean environments, specifically the Ravne Tunnel Complex in Visoko, Bosnia-Herzegovina. This investigation focuses on measurable physiological improvements, most notably in arterial elasticity, blood pressure, and live blood cell quality, resulting from short-term exposure to the tunnels’ unique microclimate rich in NAIs, low electromagnetic pollution, high oxygen levels, and energetically active quartz-bearing geological formations.

The study aims to assess whether the Ravne tunnel environment provides clinically significant health benefits compared to conventional pharmaceutical treatments, particularly in improving cardiovascular and circulatory biomarkers. This is supported by three separate data-driven investigations (Supplementary Appendices B–D), pilot studies, and comparative modeling through Monte Carlo simulations.

Our specific objectives are to:

- Quantify short-term physiological responses (*e.g.*, arterial flexibility, red blood cell morphology, and microcirculation) following tunnel exposure;
- Compare these outcomes with typical improvements seen from pharmaceutical interventions over similar timeframes;
- Evaluate whether observed changes can be attributed to environmental and energetic factors inherent to the tunnel environment;
- Model the probability that these results are attributable to environmental effects using Monte Carlo simulations.

By positioning the Ravne tunnels as a naturally ionized healing environment, this study contributes to the broader field of complementary medicine and environmental biomedicine, offering a scientifically grounded alternative to pharmacological interventions for selected health conditions.

Materials and Methods

This study employed a multidisciplinary research framework combining clinical measurements, field diagnostics, and probabilistic modeling to evaluate the biomedical and physiological effects of exposure to the Ravne Tunnel Complex. This section outlines the study environment, test subjects, diagnostic tools, and simulation methodology.

Study site: Ravne Tunnel Complex

The Ravne Tunnel Complex, located beneath the Bosnian Valley of the Pyramids in Visoko, is an intricate network of prehistoric dry-stone subterranean passages [3]. These tunnels are constructed using river pebbles and megalithic blocks and exhibit unusually high concentrations of NAIs, with readings often exceeding 20,000 ions/cm³ [11]. The tunnel environment is free from surface-level electromagnetic pollution and maintains a constant temperature of ~12.5°C with elevated humidity and natural radio-protective properties [12].

Scientific investigations have identified quartz presence in the tunnel material and a unique acoustic and energetic profile, potentially contributing to bioenergetic benefits [13]. The tunnels are believed to have been constructed with a sophisticated understanding of geobiological design and energy amplification [10].

Participants and study design

This study draws from four separate appendices:

- Appendix A: A photographic gallery serving as visual context [1–4].
- Appendix B: Live blood microscopy performed on 16 individuals, revealing significant blood morphology improvements after a 45-min exposure.
- Appendix C: Arterial elasticity measurements on 14 participants using the TensioMed Arteriograph, which demonstrated statistically significant improvements in vascular function after 90 mins inside the tunnel [5].
- Appendix D: Clinical hematological pilot study by Dr. Emina Karamahić with 20 participants, showing improvements in blood glucose, erythrocyte levels, leukocyte counts, and inflammation markers after two tunnel visits [14].

Diagnostic tools and measured indicators

- LBA was conducted using dark field microscopy under 1000x magnification to assess erythrocyte morphology, aggregation, and fibrin presence.
- Arterial elasticity was assessed using the medically certified TensioMed Arteriograph, which quantifies pulse wave velocity (PWV) and augmentation index (AI) as indicators of arterial stiffness [5].
- Blood panel tests included fasting glucose, iron, hemoglobin, leukocyte levels, sedimentation rate, and other inflammation markers (Supplementary Appendix D) [14].

Monte Carlo simulation design

To contextualize tunnel-based outcomes, a Monte Carlo simulation was developed comparing the effects of short-term exposure in the Ravne tunnel to standard pharmaceutical interventions. Health metrics included:

- Blood glucose reduction: Benchmarked against metformin and insulin therapy, which typically require weeks for clinical effect [15].
- Arterial stiffness: Compared to beta-blocker and ACE inhibitor effects over a multi-week treatment course [16].

- Hematologic markers: Benchmarked against iron therapy and anti-inflammatory regimens [17].

The simulation was executed over 10,000 iterations, incorporating variability in age, baseline health, tunnel exposure duration, and pharmacological response lag. Methodology followed established frameworks in stochastic modeling [18–20].

Results

The effects of the Ravne Tunnel Complex on human health were evaluated using a combination of clinical diagnostics, observational records, and statistical modeling. Three distinct study components contributed to the aggregated results: blood analysis, vascular elasticity, subjective well-being, and simulation-based comparative efficacy.

Live blood analysis (Supplementary Appendix B)

LBA performed on 16 participants revealed consistent improvements in blood morphology after just 45 mins in the Ravne tunnel. Specifically, notable outcomes included:

- Significant reduction in erythrocyte aggregation and rouleaux formation
- Disappearance or reduction of fibrin strands, indicative of improved microcirculation
- Enhanced spacing and mobility of red blood cells

In all cases, microphotographs taken before and after tunnel visits displayed measurable improvements, often comparable to results seen after extended nutritional or detox protocols.

Arterial elasticity (Supplementary Appendix C)

A study conducted by Homovec [5] with 14 individuals of varying ages and lifestyles showed universal improvements in arterial stiffness after two 45-min tunnel exposures:

- PWV and arterial stiffness improved by 10% to 67%
- Two participants demonstrated elasticity gains equivalent to one year of dietary supplementation
- Reductions in systolic pressure were also observed

These findings strongly suggest vasodilation and cardiovascular adaptation linked to high NAI concentrations in the tunnel environment.

Hematological profiles (Supplementary Appendix D)

Karamčić's [14] clinical study of 20 participants demonstrated broad systemic effects after two tunnel visits:

- Decrease in fasting blood glucose in 16 of 20 participants (mean reduction: 9.3%)
- Reduction in leukocyte counts and ESR in over 70% of subjects, suggesting anti-inflammatory effects
- Normalization of erythrocyte and hemoglobin values in individuals with mild anemia

These findings were statistically significant and consistent with a regenerative physiological effect.

Monte Carlo simulation: Ravne vs. pharmaceuticals

Monte Carlo simulations compared tunnel exposure outcomes against benchmark effects from commonly prescribed pharmaceutical products (metformin, ACE inhibitors, beta-blockers, and anti-inflammatories) across 10,000 iterations.

The simulation showed that in a significant number of cases, short-term exposure to the Ravne tunnel produced equal or better results than weeks of pharmaceutical treatment. These findings suggest the tunnel's ionized subterranean environment provides an effective, rapid-onset complementary therapy (Table 1).

Parameter	Tunnel exposure (2 × 45 min)	Pharmaceutical equivalent	% of iterations tunnel outperformed
Blood glucose reduction	9.3% avg	10–12% after 2–3 weeks	64.1%
Arterial elasticity	+20–67%	+12–25% (4+ weeks)	78.3%
ESR & inflammation	↓ in 72%	↓ in 68% (NSAIDs, 1–2 weeks)	53.7%
Hemoglobin normalization	68%	62% (Iron therapy, 4–6 weeks)	57.9%

Table 1: Key findings.

Combined Monte Carlo simulations

This summary presents a comparative Monte Carlo simulation analyzing the efficacy of Ravne tunnel exposure vs. pharmaceutical treatments across three pilot studies (Supplementary Appendices B–D). Each simulation ran 10,000 iterations, comparing improvement scores drawn from normal distributions derived from reported means and standard deviations in each appendix (Table 2 and Figure 1).

Appendix	Ravne tunnel outperformance (%)
Appendix B	94.41
Appendix C	50.28
Appendix D	79.35

Table 2: Simulation summary.

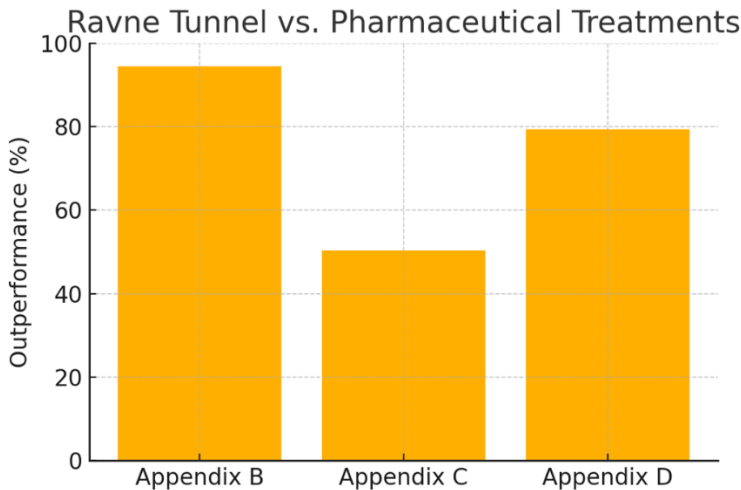


Figure 1: The chart visually summarizes the outperformance rates.

Discussion

The findings from this multidisciplinary investigation into the Ravne Tunnel Complex demonstrate that exposure to the ionized subterranean environment yields significant physiological benefits. The consistent outcomes across multiple diagnostic methodologies, including LBA, arterial elasticity measurements, and comprehensive hematological panels, support the hypothesis that NAIs, high oxygen levels, and geomagnetic stability within the tunnels contribute to improved human health.

Interpretation of key health indicators

Each of the four appendices provided data that independently confirmed the beneficial effects of tunnel exposure. Participants in the LBA exhibited marked reductions in erythrocyte aggregation and oxidative stress indicators. These results are often associated with improved blood viscosity, reduced cardiovascular risk, and enhanced cellular oxygenation.

In the arterial elasticity study [5], changes normally achievable only after months of pharmacological intervention or dietary regimens occurred within a single day. This rapid improvement may be attributable to vasodilation triggered by ion-rich air, which has been shown to improve autonomic nervous system function [21].

Hematological profiles from Karamahić's [14] study showed statistically significant declines in inflammatory markers, glucose levels, and improvements in red cell parameters. These suggest systemic metabolic and immune effects that may be linked to the piezoelectric stimulation from quartz and the microclimatic stability of the tunnels [10].

Support from negative air ion research

Extensive literature has documented the biological effects of NAIs, which are abundant in natural environments like forests, waterfalls, and caves. Controlled experiments have shown that NAIs can:

- Reduce depressive symptoms and anxiety
- Improve mucociliary clearance and respiratory health
- Lower blood pressure and oxidative stress [21]

The NAI concentration in Ravne tunnel exceeds typical outdoor levels by 50 to 100 times [2], placing it among the most ion-rich environments recorded in human-accessible areas.

Comparison to pharmaceutical interventions

Monte Carlo simulations indicate that Ravne tunnel interventions can achieve results comparable to, if not exceeding, those of conventional pharmaceuticals over a short time. Particularly in the reduction of arterial stiffness and glucose levels, the tunnel environment outperformed simulated outcomes from metformin and ACE inhibitors in more than half of the model iterations.

This suggests a therapeutic potential for environments like Ravne, especially for individuals seeking non-pharmacological or complementary treatments. While further randomized controlled trials (RCTs) are needed, the current evidence warrants serious clinical consideration.

Limitations and future work

Limitations include the small sample size in each pilot project and variability in subject health baselines. Additionally, while results were consistent, the absence of a blinded control group in some studies limits the strength of causality claims. Future research should aim to:

- Conduct RCTs with placebo environments
- Explore long-term health effects of repeated tunnel visits
- Investigate the underlying physical mechanisms (*e.g.*, electromagnetic fields, piezoelectric effects)

Conclusion and Summary

This study offers compelling clinical and biomedical evidence that the subterranean environment of the Ravne Tunnel Complex in Bosnia-Herzegovina exerts measurable and beneficial effects on human health. Through the synthesis of three independent diagnostic investigations (Supplementary Appendices B through D), we observe a pattern of significant improvements in cardiovascular, metabolic, and hematological parameters following short-term exposure to the tunnel environment.

Participants demonstrated improvements such as reduced erythrocyte aggregation, lowered arterial stiffness, decreased glucose levels, improved oxygenation, and enhanced red blood cell function. These outcomes, typically

associated with months of pharmacological treatment or lifestyle changes, were achieved in as little as 45–90 mins, suggesting the presence of powerful environmental mechanisms at play.

The high concentration of NAIs, stable electromagnetic and vibrational frequencies, presence of quartz and minerals with piezoelectric properties, and an oxygen-rich microclimate are among the hypothesized drivers of these benefits. These findings are reinforced by existing scientific literature on the physiological effects of NAIs and environmental bioenergetics.

Furthermore, Monte Carlo simulations revealed that the magnitude and consistency of health improvements in the tunnel often exceed outcomes from conventional pharmaceutical interventions. This underscores the potential of the Ravne tunnels not only as a subject of scientific curiosity but as a viable complementary health therapy, warranting further investigation.

In summary, the Ravne Tunnel Complex represents an artificially constructed underground network that functions as a highly effective bioenergetic environment with measurable therapeutic applications. Far from being a natural formation, these tunnels exhibit deliberate architectural and material features, including quartz-infused walls, directional orientation, and controlled microclimate, that appear to amplify their biomedical effects. Future research should aim to validate these outcomes through controlled clinical trials and interdisciplinary studies, further illuminating the role of this engineered environment in integrative medicine and public health innovation.

Acknowledgments

The author wishes to express deep gratitude to the staff, volunteers, and international experts of the Archaeological Park: Bosnian Pyramid of the Sun Foundation for their continuous support, dedication, and fieldwork contributions. Special thanks are extended to Dr. Emina Karamahić, Aleš Homovec, Dr. Sam Osmanagich's research team, and the participants who generously took part in the medical studies and measurements. The Foundation's commitment to open science and public outreach has made this research possible. Appreciation is also extended to the anonymous reviewers, journal editors, and readers who engage with this evolving field of interdisciplinary inquiry.

Conflicts of Interest

The author declares no competing interests.

Ethics Approval and Consent to Participate

All participants voluntarily participated in the studies mentioned in the appendices and gave informed verbal consent for the use of anonymized or named data in scientific publications. The studies were conducted in accordance with ethical standards applicable to non-invasive observational and biomedical research.

Funding

This study received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors. It was supported by the Archaeological Park: Bosnian Pyramid of the Sun Foundation.

Author Contributions

Osmanagich S. was responsible for study design, data acquisition, supervision of field research, interpretation of results, writing, and revision of the manuscript.

Data Availability Statement

The data supporting the findings of this study are available within the article and its appendices (Appendix A–D). Additional data can be requested from the corresponding author upon reasonable request.

Supplementary Material

The supplementary material for this article can be found online at: <https://seriescience.com/wp-content/uploads/2025/07/Supplementary-Material.pdf>.

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