Possibilities of ART in the diagnosis and effective treatment of viral encephalitis,

1. Patient Belchenko TA, 14 years old, student.

In March 1997, she suffered an acute respiratory viral infection with a temperature of 38.5–39.2 °C for 3 days. In subsequent years, she complained of recurrent headache, every night hyperthermia - 37.8–38.2 °C. School performance went down - "I'm tired, I can't concentrate." She was examined at the Regional Children's Clinical Hospital. Diagnosis: consequences of neuroinfection with impaired thermoregulation. EEG is the focus of EPI activity in the subcortical areas. A course treatment was carried out, it is recommended: daily intake of 1 tab. 0.2 g of carbamazepine at night (prevention of seizures), control in the CSTO and subsequent courses of treatment at the place of residence were carried out twice a year.

At the reception on 12.01.99. ART: viral burden - Interferon D30 , Interferon D30 +

Head , Interferon D30 + Hypothalamus (thermoregulation center), Interferon + virus Coxsackie D6 , Herpes simplex virus D6 was also tested. Choice of medication: Interferon D30 + Coxsackievirus D12 nosode , Hypothalamus + Coxsackievirus D12 nosode .

The patient underwent horizontal bioresonance therapy (BRT) according to the 4th strategy along all meridians for 20 minutes with the recording of the BR-preparation. Prescribed treatment: BR-drug 1 globule 2 times a day, nosode of the Coxsackie virus D12 1 globule 3 times a day, the drug "Immunostimulation" 1 globule 3 times a day, "Cerebrum comp" by "Heel". Recipe consistency pre-tested through ManganumD26.

January 19, 1999, no complaints. According to my mother on 17.01 and 18.01 for the first time in the evenings the temperature was 36.7–36.8 ° C. Coxsackie virus D200 and herpes simplex virus D60 were tested. Conducted horizontal BRT along all meridians according to the 1st strategy for 20 minutes with the recording of the BR-preparation, starting from the seventh minute. Prescribed: BR-drug 1 globule 3 times a day, nosode of the Coxsackie virus D100 1 time a day, "Anti-viral program IMEDIS" from the group of drugs from the company "IMEDIS" 1 globule in the morning and evening.

January 29, 1999, no complaints, the temperature in the evening rose once to 37.9 ° C. The patient stopped taking carbamazepine on her own ("tired"). According to ART: viral burden is not tested. It is recommended to continue the prescribed treatment for another 10 days. Control in a month.

February 26, 1999 No complaints. The temperature was normal for a month. There was a control examination at the CSTO - EEG norm, no epiativity! 08/17/99: The patient feels well. 02/23/2000 - no complaints, studies no triplets.

2. Patient Smirnova RF, 55 years old.

Diagnosis: arterial hypertension 3 Art. Dyscirculatory encephalopathy. Ill for 15 years. The last 2 years BP - 250-280 / 140-150 ml Hg.

Calls an ambulance almost daily. She went to an appointment after treatment in a specialized hospital of the City Hospital. During the month, 25 droppers were made. February 25, 1999, Determination of the affected organ by ART: kidneys - normal, cortical layer of the left and right adrenal glands . Adrenal medulla and kidney - no pathology was revealed. From the anamnesis: from 30 to 50 years old she worked in a chemical laboratory of a large industrial enterprise - "mercury was poured in flasks"! Was examined twice at the Research Institute of Hygiene. Erisman.

Detailing by ART: adrenal cortex + Mercury, adrenal cortex + Mercurius Solubilus D100. In open loop, for 5 sec. the preparation was recorded from the adrenal glands of the endocrine meridian and placed in the 3rd container of the apparatus for BRT. A circular BRT was carried out along all meridians according to the 4th strategy for 20 minutes. With the recording of the BR-drug from 17 minutes.

Prescribed: BR-drug 1 globule 3 times a day, mercurius sol. D12 1 time per day, Mesenchyme-1 1 globule 3 times, Organopreparation Adrenal cortex D12 1 hl. 3 times, "Sedative preparation" by Dr. Reckeweg 1g. 3 times.

03/05/99, with a diagnosis of acute diphtheria, the patient is hospitalized in Infectious diseases hospital. The temperature is 39.5 $^{\circ}$ C, on the enlarged tonsils there is a dark gray film, blood pressure is 170/100 ml. rt. Art. D / S. 03/07/99: t - 36.6 $^{\circ}$ C, the tonsils are not enlarged, the state of health is satisfactory, the blood pressure is 160/90 ml. rt. Art. 09.03.99, the patient was discharged from the hospital in good condition, the diagnosis of diphtheria was not confirmed.

10.03.99 at the reception. For ART: mercury burden is not tested, blood pressure - 150/90 ml. rt. Art. Follow-up for 1 year. The maximum rise in blood pressure to 170/90 once a month. Working blood pressure - 140-150 / 85-90 ml. rt. Art.

3. Patient Fedotov SS, 22 years old, student.

Diagnosis: arthrosis-arthritis of the right knee joint. Discharged from the trauma department on September 12, 1999, where he was treated for 3 weeks: non-narcotic analgesics, anti-inflammatory drugs, physiotherapy.

09/15/99, at the reception: can not sit with the right leg bent at the knee joint due to pain and swelling. The diameter of the knee joints: left - 43 cm, right - 50 cm. Segmental diagnostics: pronounced hyperfunction of the right knee joint and moderate hyperfunction of the left ankle joint (the patient's remark: "I don't pay attention to the ankle, because knee pain overshadows everything"). The anamnesis has been clarified: in June 1999, he had gonorrhea, was treated in the KVD, and two weeks later, when he "jumped from the window," the knee joint hurt.

By ART: determination of the affected organ - knee joint, knee joint cartilage - normal, joint capsule , joint capsule nosode + chlamydia nosode D6 . Medication: Joint bag + chlamydial nosode D12 .

Horizontal BRT was performed along all the meridians with the addition of the preparation from the articular meridian recorded within 5 seconds to the 3rd container. Repeated segmental diagnostics with the addition of chlamydia D12 nosode to MT showed a pronounced improvement in the left ankle joint, a pronounced improvement in the right knee joint.

Prescribed: BR-drug 1 hl. 3 times, chlamydia D12 1 hl. 2 times, "Joint preparation" by Dr. Reckeweg 1 ch. 3 times. Sent to KVD for clarification

chlamydia. Conclusion of a laboratory assistant - chlamydia.

09/18/99 I applied myself - "to thank for the effective treatment". The pain is much less, he slept all night "without waking up", did not take pills of analgesics. Chlamydia D32 and D60 are tested by ART. Segmental diagnostics with the addition to the 2nd container of 1 globule of the BR preparation recorded on September 15, 1999, shows a pronounced improvement in the right knee and left ankle joints. It is recommended to continue treatment. 09/28/99, by phone: "everything is fine, the joints do not bother." He refused a control examination.

Summary

On ultra-precise nosological and topical diagnostics carried out by one doctor at one workplace in a short period of time 30-40 minutes. And this method has no equal in the appointment of individual highly effective treatment!

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