

Assessment of intestinal biocenosis in patients with various nosologies
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Relevance. In recent years, doctors of different specialties have faced the urgent topic of violations of the biocenosis of the mucous membranes of various systems in the body. The reasons for this are the deterioration of the environmental setting, broad application of chemical substances in food industry and everyday life, as well as active iatrogenic interventions pharmacological preparations.

The concept of mucosal dysbiosis has been introduced, which includes a violation of the biocenosis of the mucous membranes of the gastrointestinal tract, urogenital sphere, bronchopulmonary system and other systems. The mucous membranes are the second after the skin in the most active contact with the environment and are exposed to food, chemical and microbiological antigens. So in the intestine, the lymphatic system in the form of Peyer's patches, mesenteric lymph nodes performs the function of humoral and cellular immune defense and directly depends on the normal balance of microflora. With normal microflora of the small intestine, the main composition of bacteria is represented by: lactobacilli, bifidobacteria, bacteroides, enterococci, yeast-like fungi, as well as in 5-10% of aerobes (*E. coli*, lactose-negative enterobacteria (*Proteus*, *Enterobacter*, *Citrobacter*, *Serratia*), enterococci (fecal streptococci), staphylococci, yeast-like mushrooms). In the large intestine of a healthy person, anaerobic species of bacteria predominate (90–95% of the total composition): bifidobacteria, bacteroids, lactobacilli, *Veillonella*, peptostreptococci, clostridia. A balanced flora allows better assimilation and synthesis of nutrients, minerals, trace elements, vitamins and amino acids.

Violation of the quantitative ratio of colonies of microorganisms changes the biochemical, metabolic and immunological equilibrium and can serve as a triggering and aggravating factor in the start of various diseases.

The purpose of this work - assessment of the microbiotic state of the thick and small intestine in patients with various types of diseases, comparison of the degree of coincidence of the data of clinical examination of analyzes for dysbiosis.

To achieve this goal, using the hardware and software complex "IMEDIS-EXPERT" studied the general state of the body in 98 patients: with diseases of the musculoskeletal system - 18 patients, the endocrine system - 10 patients, with diseases of the gastrointestinal tract - 35 patients, urological patients - 10 people, 5 patients with asthma and 20 patients with skin diseases.

The control group consisted of 20 people (practically healthy people). Of the total number of patients examined by the ART method, in 95% of cases dysbiosis in the large and small intestine, fungal and parasitic burden was tested. In addition, colitis with a predominance of anaerobic intestinal infection was tested. The patients were examined at the diagnostic complex "IMEDIS-EXPERT", in parallel, after 3-5 days, clinical

analyses for dysbiosis. There was a high degree (80%) of correlation between ART diagnostics and clinical analyses, which confirms the diagnostic effectiveness of the devices, as well as, undoubtedly, the experience of the operator.

After the end of the diagnostic procedures, an individual therapy plan was drawn up:

1. Antifungal resonance frequency therapy

The need for antifungal treatment was due to the widespread use of antibiotic therapy in patients of the study group.

2. Bioresonance therapy

Bioresonance therapy is carried out using various strategies, depending on the individual sensitivity to this type of treatment. In the course of treatment with the BRT method, various pathological discharge in inversion, drainage preparations and organopreparations were used.

3. Appointment of complex homeopathic preparations

The treatment was carried out with the original complex homeopathic preparations of the firms: "OHOM", Dr. Reckeveg, "Heel" (Solidago-composite, Echinacea-composite, Gastrikumel, Hepel, Mukoza kompozitkm, etc.), as well as electronic copies of the drugs of these companies in the form of nosodes, drainages, organopreparations. During the examination by the ART method, practically all the subjects showed varying degrees of depletion of the immune system. Observation of patients in the course of treatment showed that the state of immunity gradually returned to normal.

4. Diet therapy and the use of probiotics

Nutrition was an important part of the treatment regimen. The patients were recommended a diet according to individual resonance compatibility, harmonizing the natural drainage properties of the gastrointestinal tract and other systems and not creating an immunological conflict. Of course, the emphasis in the diet was on foods with a high fiber content (grains, legumes, fruits and vegetables), since, according to modern nutritionists, dietary fiber plays an important role in the formation of the matrix, and conditions for the growth of beneficial endogenous cultures of microorganisms.

To restore the normal composition of microflora, eliminate the resulting dysbiosis and associated lesions, it was recommended to regularly take probiotics, enzymes and ballast substances.

Clinical example of the treatment of severe dysbiosis, formed against the background of a serious illness and long-term (4 months) antibiotic therapy.

Patient M., 10 years old. Diagnosis: Chronic post-traumatic pancreatic necrosis of the pancreas. Multiple post-traumatic pancreatic cysts. The patient was in the intensive care unit of pediatric surgery for 4 months, receiving parenteral constant antibiotic therapy. Up to 20 surgical interventions were noted (replacement of drains, sanitation of the abdominal cavity). The patient's condition was assessed as serious. The average daily discharge of secretions from the abdominal drains was from 500 to 700 ml. The patient was offered diagnostics using the ART method and bioresonance therapy (BRT): the state of the immune system was assessed as a high degree of depletion, the presence of active

bacterial gram-positive and gram-negative flora, candidiasis, dysbiosis of the large and small intestines.

The patient gradually underwent selection of electronic copies of the preparations, targeted the abdominal secretions to the CMH, performed basic BRT, and prescribed probiotics. A week later, the patient showed a decrease in daily secretion to 50–70 ml. After 1 month of treatment, the patient had all drains removed from the abdominal cavity, the cysts in the head of the abdominal cavity completely subsided and were not detected by ultrasound. The patient was discharged with marked positive dynamics. This clinical case was analyzed at a general conference of pediatric surgeons in the Moscow region, as an example of a successful combination of surgical methods of treatment and BRT.

In conclusion, we want to emphasize that the normalization of the biocenosis in the intestine is the necessary measure that allows you to interrupt the pathological circle of many diseases. Treatment can be considered complete if there is a disappearance of complaints and clinical symptoms in the patient, confirmed by the main clinical research methods, as well as normalization of ART indicators (absence of positive tests for indole, skatole and pathogenic microflora, restoration of immunological status indicators).

The given general principles of energy-informational treatment methods do not exhaust all the possibilities of BRT and MRI. An integrated approach to the treatment of pathologies of various origins, taking into account the normalization of the biocenosis, especially in chronic, complicated diseases, allows the entire body and its adaptive mechanisms to be included in the treatment process and thereby accelerate recovery or achieve stable remission.

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