

Correction of the affective sphere as the basis of a therapeutic strategy

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Enuresis in children and adolescents is a complex polyetiological disease. According to domestic and foreign authors, in various countries of the world, 1 to 33% of children and 1–2% of adults suffer from enuresis.

Undoubtedly, enuresis is a small problem for humanity, but a huge one for the child (S. Wille) and the parents.

Most researchers believe that enuresis, as a pathological condition, can be talked about if it is observed in children over 5 years old.

Its occurrence is often clearly associated with the action of a psychogenic factor.

Currently, there are 6 main forms of enuresis,

1. Simple: relatively rare (2-3 times a week), but constant cases. There is no dependence of the frequency of the act of urination during sleep on the amount of liquid drunk and meteorological factors. The course of the disease is even, from an early age. Neurological and urological symptoms are absent. The indifferent attitude of the child to the defect is noted.

2. Neurotic: the only form in which it is especially characteristic an affective attitude towards one's defect - from active interest (in the hysteroid variant) to a painful experience, sometimes reaching suicidal intentions (in the asthenoneurotic variant). In this case, enuresis is one (or the main) of the symptoms among massive neurotic manifestations. The neurotic form most often occurs in one of the critical age periods: 3-5-7 years. The frequency of episodes of bedwetting depends on the emotionally significant situations for the child. Restless sleep, with night fears. During the day, these children have pronounced emotional instability.

3. Neuropathic: develops against the background of the so-called congenital children's nervousness, mild residual-organic changes in the central and peripheral nervous system. These are often sick children from an early age, who are characterized by various colds "chain" (one after the other). Sleep disorders of a polymorphic nature are noted, often with an inversion of the sleep-wakefulness system. Along with nocturnal enuresis, which has arisen after any somatic illness, there is frequent urination during the day with urgent urge and urinary incontinence. These children are infantile, shy.

4. Endocrinopathic: a combination of nocturnal enuresis with diencephalic pathology and endocrinopathies

5. Epileptic: with nocturnal epilepsy.

6. Dysplastic: against the background of organic damage to the nervous apparatus urinary function, in particular myelodysplasia (spina bifida), when, in addition to nocturnal enuresis, daytime urinary and fecal incontinence (encopresis) is present in the clinical picture. The act of urination is involuntary, as the bladder fills, without feeling the urge and the very fact of urine flow.

Enuresis is also possible as a consequence of the transferred neuroinfection caused, in particular, by the Epstein-Barr and Coxsackie viruses.

With neurotic enuresis, the presence of a neurogenic (or psychogenic) effect is always necessary.

Clinical case 1

Mom brought an 11-year-old girl for examination for nocturnal enuresis, a sharp decrease in appetite, memory impairment and frequent headaches. Repeated attempts at treatment were unsuccessful.

At the initial appointment: according to her mother, the girl is anxious, often lazy. The problems began five years ago, after suffering a traumatic brain injury (mild concussion). The girl became absent-minded, irritable over trifles. There were episodes of nocturnal enuresis. Mom thinks that "the child does a lot out of spite." A conversation with the girl showed that she is a clear leader by nature. Difficult to endure the situation in the family (single-parent family).

Last year they changed their place of residence, the girl was transferred to another school. In a new school for her, she adapted with difficulty. Difficulties began with mathematics and the Russian language, while I was especially afraid to answer at the blackboard. Mom recently found out from her daughter that the girl specially enrolled in the school choir so that she could leave these lessons for rehearsals. Cases of nocturnal enuresis have become more frequent.

At the initial examination: the general condition is satisfactory, the skin is clean, visible mucous membranes are pink. Tongue coated with white bloom. The liver is at the edge of the costal arch, the spleen is not palpable, the abdomen is painless on palpation. The tapping symptom is negative on both sides.

After diagnostics by the method of vegetative resonance test (ART) "IMEDIS-TEST", it was revealed: general geopathogenic load of 4 degrees on the thyroid and parathyroid glands, e / m load of 3 tbsp., RA load of 5 degrees (target organs: thyroid and parathyroid glands, liver, thymus, spine, kidneys). Such high degrees of environmental stress, as it turned out, were due to the fact that the child was born and lived in an ecologically unfavorable area.

Mental stress of the 8th degree, endogenous depressive disorder, pronounced tension of the immune system, dysbiosis of the large intestine, lack of vitamins and microelements were determined.

Helicobacter pylori was tested - stomach, duodenum; giardiasis of the biliary system; cholecystitis D15; diverticulosis of the duodenum; Epstein-Barr herpes virus - thyroid gland, lumbar plexus, left mammary gland; herpes simplex virus - palatine tonsils., liver, joints (vertebrae); general mycotic burden;

ascariasis; intestinal acne - pancreas; pinworms.

The preparations "Bach Flowers" have been tested: fear, loneliness; identified violations in 3, 4 chakras.

The therapy is organized in several directions.

The main treatment was aimed at eliminating all available types of stress (geopathogenic, electromagnetic, radioactive, mental). It should be noted that often relieving stress is enough for the body to turn on self-regulation processes. Although the elimination of stress is not a treatment per se, it creates a favorable background for

next step of therapy. In addition to the frequency of 6.2 Hz, preparations of the RAYEX group were used to neutralize the loads.

In addition, an anthelmintic treatment was prescribed according to the scheme: paragon, black walnut and drainage preparations from the company "OHOM".

A general bioresonance preparation (OBR or Gotovsky-1 preparation by filtration through Cuprum met. D400) and a private BR preparation were prepared.

The preparations "Bach Flowers" and systemic spiritual adapters were selected.

There were 2 sessions (with an interval of three days) of bioresonance therapy in the mode of time modulation along the meridians of the spleen / pancreas, large intestine, stomach, lungs, kidney / bladder, liver. After the 2nd session, the drug BR-2 was recorded.

Also, induction treatment programs for brain rhythms were selected and carried out: rest, children, cerebral.

A week after the start of treatment, the girl's sleep improved, according to the self-report and observation of her mother, she became less irritable, but her fears of school persisted. There was only one episode of bedwetting.

Then they additionally tested and prescribed drugs from the company "Medpharma" (psychosocial loads), to remove the attitudes: "they don't like me", "I am unimportant", "fear of the future."

Reception in a week.

The girl makes no complaints, her mood is even. According to my mother, she became calmer. When examining by the ART method, there was no geopathogenic load, a slight degree of depletion of the immune system, a 5 degree mental load. There are no cases of nocturnal enuresis.

To the preparations "Bach Flowers" added the preparation "life-saving remedy".

Reception in a month.

Feels good, no complaints. Improved appetite. When examining by the ART method: the absence of geopathogenic load, tension of the immune system, mental load decreased to 4-5 degrees. There are no episodes of enuresis.

Asks to give her "more peas so as not to be afraid to go to school"

Reception in a month.

At school I began to get good grades. There is no geopathogenic load. Mental stress 2 tbsp. Mom notes that "it became easier to find a common language with the child." Her health is good. There are no episodes of enuresis.

The patient continues to be monitored in the center.

Clinical case 2

Patient G. applied for a prolonged decrease in mood against the background of a severe traumatic situation. Before visiting the center, she unsuccessfully turned to a psychologist for an anonymous consultation.

Currently, among general medical problems, the difficult and long-term pathology of the affective sphere is acquiring special relevance.

Bioresonance therapy, given the possibility of its selective focus in the correction of acute reactions to stress, in combination with selected drug therapy, is the most adequate in the treatment of stress disorders.

At the initial appointment: inhibited, speaks, choosing words. Complains about loss of interest in everything. There is no certainty that we will ever cope with this situation. will be able

By the method of vegetative resonance test tested: general geopathogenic load 4 degrees (target organs - thyroid and parathyroid glands), e / m load 3 tbsp., RA load 4 degrees, mental load 8 degrees, endogenous depressive disorder, psychovegetative load 4 tbsp., depletion of the immune system, violation of 3 chakra.

Diagnosed with signs of immunodeficiency, decreased activity of all hormones, primarily the thyroid gland, the cortex of the adrenal glands and growth hormone.

Therapy same organized on several directions, with priority attention to the removal of all loads - frequency 6.2 Hz, therapy bioresonance (along all meridians), preparations "Bach Flowers", drainage preparations of the company "OHOM", systemic spiritual adapters, therapy with induction programs P4, P8.

Due to the severe emotional state, the drug Coaxil, 1 t, three times a day was also selected.

Already the first session of bioresonance therapy and induction programs led to some improvement in the mental state: calming down, relieving mental and physical stress.

It should be noted that positive the effect therapy stabilized from the second dose, while the therapeutic effect of the drug coasil usually occurs no earlier than after 5-7 days.

Subsequently, Coaxil was replaced by its energy-informational analogue, an energy-informational analogue of the drug Ignacy-Gommaccord was added to the therapeutic scheme.

Reception in a month.

The state of health is good. There is no depression of mood. There remains a mental load of 3 tbsp., A psycho-vegetative load of 2 tbsp.

Due to the fact that the traumatic situation persists, it is recommended to continue supportive therapy.

Thus, the methods and means of electropunctural diagnostics and bioresonance therapy allow achieving a stable treatment result in the optimal time when choosing the correction of the affective sphere as the basis of the therapeutic strategy.

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