

Practical experience of using potentiated urine autonosode in treatment of patients with diseases of the musculoskeletal system  
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#### Introduction

Need effective treatment wide widespread diseases of the musculoskeletal system, with one hand and desire to test the effectiveness of therapy methods using a targeted urine autonosode on the other, led the authors to a directed experiment to test the effectiveness of this method as a separate method of therapy.

#### purpose of work

Study of the effectiveness of the method of therapy with "targeted" (at the end and nodal points of the main chiroglyphic lines of the palm) urine autonosode (Kudaev-Khodareva-Mkhitaryan method) [1] on the example of treatment of patients with diseases of the musculoskeletal system. It should be noted that earlier, part of the team of authors established the effectiveness of therapy with targeted urine autonosodes in the treatment of diseases of the genitourinary sphere [2], in particular, ureoprosstatitis.

#### Experimental technique

In the period from 2005 to 2006. on the basis of the private enterprise "Medicor-2" 110 patients with various diseases of the musculoskeletal system were treated, in the treatment of which a targeted urine autonosode was used. They included people of different age groups (from 25 to 85 years old) and various occupations with such diseases as:

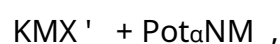
- ankylosing spondylitis - 1 person,
- widespread osteochondrosis of the spine and its complications - 60

Human,

- gouty poly- and monoarthritis - 32 people,
- rheumatoid arthritis - 12 people,
- reactive polyarthritis of mixed etiology - 5 people. The length of the course of treatment depended on the duration and severity of the underlying disease, as well as the patient's age, and ranged from 7 months to 1 year.

The method of using targeted urine autonosode was used both in acute cases (duration of the disease from 6 months to 1 year) and in cases of chronic course (duration of the disease from 1 year to 30 years).

Technically, the targeting procedure (physiologically meaningful as a procedure for modifying the therapy signal in order to ensure its optimality in one sense or another, in this case, the constitutional consistency of the signal) was carried out in the simplest way: by potentiating the autonosode of the patient's urine until the condition:



introduced and studied in [3].

Pot preparation  $\alpha\text{NM}$  ( $\text{NM}$  - patient's original autonosode) was considered a urine autonosode targeted by  $\text{CMX}'$ . At the same time, as a marker  $\text{KMX}'$

the sum of signals written off in the mode of drug testing from key (nodal and terminal) mantic BAPs on the lines of Head, Heart, life and Fate was used (ie, some narrowing of the KMX marker from [3] was used).

To select the correct dose of the drug, each patient underwent additional ecological chronosemantic tests [4] for individual endpoints and key points of the chiroglyphic lines of the hand (the same MBAT were used on the lines of the Head, Heart, Life and Fate, the signals written off from which entered the CMH ').

During the first month of treatment, most patients experienced exacerbations, some quite severe. In these cases, there was again a new potency for the targeted urine autosode and a new daily dose of its administration. In cases of especially severe exacerbations, additional methods of treatment were used, such as: reflexology, hirudotherapy, laser and magnetic therapy, multibioresonance therapy, pharmacopuncture and herbal medicine. In all cases, various kinds of exacerbations lasted no more than 2-3 weeks.

In the course of the entire course of therapy with urine autosode targeted by the CMH, the potency of the drug varied from 6 to 10 times, depending on the duration and severity of the underlying disease, and had a tendency to increase. At the end of the course of therapy with a targeted urine autosode, the patient underwent general control of all organs and systems according to R. Voll's method, ART control for the nosodes of interest and other ART indicators "IMEDIS-TEST", in particular, using the methods for assessing the patient's condition given in [5- 6], appropriate recommendations were given.

### Experiment Results

In all cases without exception, as a result of therapy with a targeted urine autosode, complete or partial sustained remission the underlying disease, accompanied by a pronounced general improvement in the patient's condition. Not a single patient could manage without a significant change in his condition for the better. At the same time, clinical studies have shown the development in the patient's body of the processes of reversal of organic changes that have arisen as a result of the underlying disease, which does not correspond to the ideas of modern medicine about the irreversibility of such changes. In particular, in 23 patients, when examined by MRI, the disappearance of Schmorl's hernias was noted, which is fundamentally unattainable with the help of orthodox methods of therapy.

### Control group problem

The carried out research was carried out without formation control group. Indeed, as such, you can take any equal in composition (and equally randomized) group of patients with diseases of the musculoskeletal system. It is known that any form of orthodox treatment does not lead to the reversal of organic changes resulting from the above diseases in the patient's body.

### Selected clinical cases

In order to give a more vivid description of the method and the results achieved with its help, we will give several examples.

1. Patient N., 43 years old. Diagnosis: Ankylosing spondylitis. Has been sick for about 20 years. Constant off-season exacerbations several times a year. During the period of exacerbation, free movements are severely limited, poor general condition of the patient, severe pain syndrome. Conventional methods of treatment do not bring relief, and if they do, then for a short period. Long years of serious illness resulted in depression of the general state of mind of the patient. On visual contact, the patient gave the impression of a hunched over, sedentary old man with a dejected expression on his face. After the initiation of therapy with a targeted urine autonosode, the patient noted an exacerbation during the first 3 weeks, which he stopped on his own. Periodically monitoring the patient's condition, we noted a gradual improvement in his physical and mental state. Follow-up: after a one-year course of treatment with a potentized urine autonosode, the patient has not noticed exacerbations for 6 months. On the contrary, it notes an increase in vitality, an improvement in internal mood and a desire for life. Interestingly, this patient had an elongation of the Life line on both hands by 1.5 cm, although no methods of chronosemantic therapy were applied to him.

2. Patient Y., 25 years old. Diagnosis: Reactive monoarthritis of the right ankle joint of rheumatic etiology. Resonant response to nosode B of hemolytic streptococcus. Has been ill for about 2 years. Aggravation every spring and autumn, which lasted a month or more. Traditional methods of treatment in the form of steroid and non-steroidal anti-inflammatory drugs, with which the patient was treated, had a meager effect on the underlying disease, but could not but adversely affect the general condition of the patient and her appearance. The patient was treated by targeting the urine autonosode at the KMH 'for 7 months. She noted an exacerbation for several weeks, which were stopped with the help of multibioresonance therapy, reflex and hirudotherapy (5 sessions of BRT together with reflexology daily and 3 sessions of hirudotherapy 1 time in 3 days), herbal medicine. Already after the first month of treatment, the patient noted an improvement in her physical condition. After 3 months of therapy with a potentiated urine autonosode, the patient was able to put on again narrow, model shoes, which she had not worn for 2 years. At the end of the course of treatment, the patient does not notice exacerbations, the internal and external condition of the patient returned to normal.

3. Patient I., 39 years old. Diagnosis: Chronic polyarthritis mixed etiology of the right foot and right knee joint. Vegetative resonance test positive for nosodes of hemolytic streptococcus and gouty arthritis. Chronic cholecystopancreatitis. Has been ill for about 5 years. Annual seasonal exacerbations, limited mobility, severe pain syndrome. Treatment with traditional methods has led to persistent chronicity of the process and dependence on potent anti-inflammatory and analgesic drugs. All of the above factors led the patient to

the desire to be treated by targeting the urine autonosode to the CMH '. During the first month of therapy, the patient noted exacerbations of varying severity, which were stopped by changing the potency of the drug and retesting the daily dose, as well as by methods such as multibioresonance therapy together with reflexotherapy (10 sessions per course, 5 sessions every day and 5 sessions every other day). vacuum magnetic therapy, hirudotherapy, herbal medicine, pharmacopuncture. In the second month of treatment, the patient noted a noticeable weakening of the pain syndrome, an increase in joint mobility, and an improvement in his general condition. After a one-year course of treatment, the patient does not notice exacerbations for 6 months, the mobility in the joints is complete, general good condition, the patient leads an active lifestyle, resumed classes sports.

4. Patient E., 68 years old. Diagnosis: Common by osteochondrosis spine with multiple Schmorl's hernias. Chronic radiculoneuritis ... Deforming polyarthrosis and polyarthrits of the upper and lower limbs

mixed etiology. With ART, a positive test for nosodes of hemolytic streptococcus and gouty arthritis.

Has been ill for about 30 years. Free movements are limited, he can move independently, but with tears in his eyes, the general physical and mental state leaves much to be desired. Treatment with conventional methods for many years led the patient to persistent chronicity of the process, deformation of the joints of the hands and feet, oppression of the physical and spiritual state. The patient asked for help and underwent a course of treatment by targeting the urine autonosode to KMH 'for 14 months. In this case, potentiation and selection of the daily dose were carried out with particular care. But, despite this, it was not possible to avoid an exacerbation. The exacerbation was stopped using the following methods: reflexology (15 sessions per course together with pharmacopuncture), multiresonance therapy, vacuum magnetic therapy, hirudotherapy, phytotherapy.

In the second month of treatment, the patient began to feel relief. After 6 months of therapy, the patient noted an increase in joint mobility, a significant reduction in pain, and an improvement in her general condition. By the end of the course of therapy, the patient became noticeably more active, noted a significant improvement in her general condition, and a smile appeared on her face.

Dozens of such cases can be cited and described in more detail, but this will not change the overall picture.

#### conclusions

The method of therapy with the help of urine autonosode targeted by the CMH is quite effective in the treatment of patients with problems of the musculoskeletal system, both as an independent method of treatment and in combination with other methods of exposure. The best arbiter of this method is the patients themselves, who have completely or partially got rid of their health problems that have remained intractable for many years.

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V.A. Brichuk, O. V. Koritskiy, Yu.V. Koritskiy, K.N. Mkhitarian Practical experience of using potentized urine autonosode in the treatment of patients with diseases of the musculoskeletal system // XIII