

Experience in the treatment of uterine fibroids using CRT and BRT

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Hormonal diseases of the female genital area occupy a large share in gynecological practice. A benign tumor of the uterus, myoma, is especially common. Moreover, this nosology does not respond well to conservative treatment. Nowadays, women have a higher level of estrogen in the body than women in past historical eras. The modern lifestyle disrupts the process of removing estrogens from the body, which leads to their increased effect on target organs (uterus, ovaries, mammary glands).

According to most scientists, it is the estrogen imbalance that is the leading factor in the development of uterine fibroids.

Moreover, simultaneously with an increase in the level of estrogen, there is a lack of another hormone - progesterone.

This phenomenon is usually observed with dysfunction of the ovaries. An increase in the amount of the hormone estradiol stimulates the growth of certain muscle groups of the uterus. The fact that myoma is a hormone-dependent tumor is also evidenced by the fact that cases of its development in girls before the onset of the first menstruation and in women in the postmenopausal period are extremely rare.

An increase in estrogen levels is facilitated by the consumption of foods with a high content of refined carbohydrates, saturated fatty acids and an insufficient amount of fiber. Saturated animal fats promote the growth of intestinal bacteria, which produce the enzyme betaglucuronidase. This enzyme converts estrogen into a form that can be reabsorbed in the intestines. Recent studies have shown that fibroids can occur as a reaction of the uterus to damage, as well as as a result of inflammation in the genitals. Traumatic childbirth, diagnostic

scraping, introduction intrauterine spirals, unprofessional performed hysteroscopy can often form a become the trigger for and the tumor. A large number of resulting abortion hormonal disruption and damage to the endometrium are also fertile ground for the development of fibroids.

Fibroids can also be caused by various sexually transmitted infections. During operations in the myomatous nodes, pathogens of various infections were found - chlamydia, ureaplasma, viruses.

The hereditary nature of the disease is also important. Fibroids are often found in close relatives of a woman - daughters, sisters.

An increased risk of developing fibroids is observed in women suffering from hypertension, especially with its early appearance - up to 35 years of age. Overweight - obesity is a significant risk factor. In the subcutaneous fat, androgens are converted into estrogens, which increases the risk of fibroids. For every 10 kg gain in body weight, the risk of fibroids increases by 20%.

During the diagnosis by the ART method, the reasons that led to the occurrence of fibroids in each woman are clearly determined.

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We examined 12 women aged 35 to 42 years.

In 10, the factor for the development of fibroids was an infection, more often chlamydia, trichomonas, candida were tested.

All of them involved the thyroid gland in the process, and tested its hormonal dysfunction.

The hereditary factor was observed in 3 women. 2 women were overweight. All patients had intestinal problems - constipation, dysbiosis. There was a connection with impaired liver function of the pancreas.

Treatment was selected depending on the identified causes:

1. The optimal products, desirable for consumption, were selected. Intolerable foods were excluded.

2. Often violations of hormonal homeostasis are associated with insufficient content of vitamins. During the diagnosis, this deficiency was revealed and the corresponding vitamins were prescribed in the form of pharmaceutical preparations with their simultaneous recording on crumbs.

3. All women underwent antibacterial CRT from 10 to 30 sessions for pathogenic flora of the intestine and urogenital area.

4. Customized homeopathic drains were taken.

5. ChRD preparations were prepared in two directions: antibacterial and through the fibroid nosode in the tested potency

6. Compositions from herbs were tested: upland uterus, thyme, saber, red brush. The composition that approached in terms of effectiveness was taken by a woman from 3 to 6 months.

7. 8 patients underwent 2-4 courses of hirudotherapy, 10 sessions each.

All women were observed together with gynecologists, and control ultrasound was performed regularly. Three women received hormone therapy prescribed by a gynecologist. The treatment took 1-2 years. A positive result was obtained from the treatment in all patients. In the first six months of treatment, tumor growth slowed down and generally stopped. In 8 cases, there was a decrease in the size of myoma. All women have gone all the complaints associated with the growth of fibroids: frequent uterine bleeding, irregularities in the cycle, painful menstruation, frequent urination.

Considering that only 3 women out of 12 received hormonal therapy, we can talk about the obvious effectiveness of ART diagnostics and treatment with HRT and BRT methods.