

Nervous tics
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The problem of neuroses is important and relevant. Nervous tics are one of the manifestations of neurosis. Variants with a good result in complex pathology are not uncommon in my practice as a neuropathologist (practically at the same time - since 1970 - a specialist in chen-chiu, then - homeopathy, manual therapy ...). What has become possible with the use of bioresonance and multiresonance therapy allows us to look at many problems in a different way. The results obtained in seemingly hopeless cases (Parkinson's disease; parkinsonism; prostate adenoma against the background of an oncological process in a single kidney with concomitant complex cardiovascular pathology) make one think about a lot. New opportunities are opening up in terms of differential diagnosis, clarification of the etiology of the disease, completely different approaches to restoring health.

Nowadays, with an intense rhythm of life, computerization, environmental problems, conflict situations at home, at work, in society - the load on the body, on its nervous and immune systems is increasing. As a result of the action of psycho-traumatic factors, some people develop neurosis with its various manifestations: headaches, irritability, fatigue, poor sleep, weakness ..., various autonomic disorders - vascular, secretory, visceral, trophic. Neurosis often occurs in individuals with congenital weakness of the nervous system. However, acute mental trauma, long-term negative emotions (especially against the background of an infectious disease or after it), can lead to neurosis in an outwardly strong, strong person. Much is laid down in childhood (or rather, during pregnancy or is inherited). With neurosis, it is violated function nervous system and internal organs, but there are no anatomical changes in them. Sometimes, under the guise of neurosis, various diseases can pass. And a tic, initially taken for a nervous one, may turn out to be a manifestation of organic damage.

The pathophysiological essence of neurosis is a violation of higher nervous activity - overstrain (exhaustion) of one or both of the main nervous processes (inhibition - excitation), their strength and mobility. The relationship between the cortex and subcortical formations is changing - the subcortex seems to "get out of the control of the cortex", - some involuntary, violent movements - hyperkinesis appear ... Many scientific teams are engaged in the study of this problem. For our topic, it is important that hyperkinesis can be "slow" and "fast, lightning fast." The first (these include athetosis) are always a consequence of some kind of organic damage to the nervous system. External manifestation - pretentious, involuntary movements, performed, as it were, with freezing for a short time. (This is a separate topic). Teak

- lightning twitching, often repeated in the same muscle groups that resemble some kind of involuntary or reflex muscle act - a mimic movement or gesture.

The main thing to always keep in mind is the division of ticks into two large groups:

1. Tics, which are based on the so-called functional disorder nervous system. They arise in patients with an unstable nervous system, who in everyday life are considered "nervous", prone to hysterical reactions. Or in those who have suffered an acute infection, when the immune and nervous systems are in a state of some "weakening", "unstable balance". A long-term psycho-traumatic situation that a child or an adult experiences for a long time also leads to the appearance of tics in an outwardly "strong", "healthy" person.

2. Tics based on organic disease of the nervous system.

In both cases, the trigger can be: negative emotions, mechanical trauma, imitation of someone or something ... Most often, the tic appears at the age of 6-8 years. It intensifies during puberty. Hyperkinesia, as a manifestation of tics, lends itself, to a certain extent, to volitional influence. Tic twitching is irregular, lightning fast. Separated from each other by segments of different duration, intensified under the influence of emotions, fatigue, stress; stop completely during sleep.

Various reasons contribute to the appearance of tics, including: excessive prolonged overload, violation of the regime, psycho-conflict situations (at home, at school, at work), acute infections. Moreover, often tics "remain" where the disease "was" - blinking eyes after acute conjunctivitis (or exacerbation of chronic), sniffing after rhinitis. Initially, they arise as manifestations of the disease or accompany it, and then remain after recovery, - they are fixed.

When describing tics by localization, one should highlight:

one) face area: violent, involuntary blinking of both eyes (or one), simultaneous winking, frowning, furrowing of the forehead, various grimaces. It seems to others that they are being teased. This can be regarded as improper behavior - hooliganism. Externally, exactly the same manifestations can have a different "reason" for their appearance - functional or organic. Particularly noteworthy are tics similar to those described above in children with chorea of rheumatic etiology (not to be confused with Huntington's chorea in adults - hereditary - a family disease, transmitted by the dominant type). With the help of the vegetative resonance test (ART), the diagnosis of rheumatism can be quickly confirmed or removed. Bio- and multi-resonance therapy will be an effective method of treatment. When examining a child (except for tics), a neurologist will determine: a) the presence of microorganisms; b) Gordon's symptom ("freezing" of the lower leg when causing the knee reflex). This symptom is important, as well as the next one, for confirming the diagnosis of "Chorea of rheumatic etiology"; c) in the Romberg position - it is impossible to open your mouth wide and stick out your tongue. If you manage to complete this task, then with great difficulty, while the tongue trembles and makes jerky movements.

When examining in a polyclinic or hospital, in addition to a neurologist, an examination by a rheumatologist, a blood test to confirm a rheumatic process, an electrocardiogram and other tests are required ...

In such cases, the use of ART will be an effective, inexpensive and quick method. However, this does not reject the use of those studies, expert advice, which are currently accepted and carried out in medical

institutions. A correctly diagnosed and timely prescribed therapy (differentiation of outwardly identical, but based on different etiology, diseases) will be effective in terms of therapy and prognosis.

2) tics with localization in the mouth are quite common. This is convulsive pulling of the lips with the proboscis; puffing out the cheeks, moving the tongue - clicking, removing the supposedly "food lump" from the gums; tic spitting, convulsive jaw clenching or movement;

3) in the area of the respiratory muscles - sniffing, sniffing or some nose movements, snoring, forced coughing;

4) tic movements in the neck and shoulder girdle. Outwardly it is head turn, tilt towards one (or the other) shoulder. The head can be thrown back or tilted forward convulsively;

5) maybe complex of movements, reminiscent of the ones that do a person seeking to free himself from a tight collar squeezing his neck or others;

6) from the extremities: scratching, flexion-extension of the foot and knee, tapping the heel on the floor, wrist movement reminiscent of shaking off something (not really existing).

All these involuntary movements make the patient feel uncomfortable. He tries to hide, somehow smooth out the external manifestations of the tic with some other voluntary movements, but this is not always possible.

From a large group of diseases based on organic reason, special mention should be made of facial hemispasm. This is also a tic, with it the face "shrinks into a lump", it seems to "go to the side" (to the right or to the left), while there is a clear asymmetry with a significant increase in muscle tone on the affected side. Eye - the eyelids contract many times, immediately relaxing. A number of authors (S.N. Davidenkov) believe that the basis of this pathology - local torsion dystonia - suffers from the subcortex). Such "tics of hemispasm" are provoked by functional reasons: excitement, fear of performing, passing exams. The existing allopathic treatment regimens are ineffective. A stable positive effect (follow-up - 20 years) was obtained when using chen-chiu therapy in the treatment regimen. Perhaps the use of bio- and multiresonance therapy will have a positive effect in such cases.

Other manifestations of tics on the face - synkinesis - (friendly, unnecessary contractions) - with mimic movements, as a result of the transferred and already treated neuritis of the facial nerve: with a smile - unnecessary contractions in the eye area (on the same side), with wrinkling of the forehead or blinking of the eyes - the corner of the mouth stretches towards the side (normally - no movements in this area should not be). When analyzing the treatment regimens for such patients, an abundance and, most likely, an overdose of physiotherapy (UHF, galvanization, electrophoresis) was noted. A neurological sign was not noticed on time - a signal for urgent cancellation of electrotherapy - a symptom of Khvostek (when shaking a hammer along the process of the upper jaw - contraction of the facial muscles on the same side). Eventually - contracture (half of the face is pulled to one side, high muscle tone) - or synkinesis described above. Zhen-jiu therapy gives excellent results. At the same time, great difficulties arise in the treatment of allopathic methods. In my practice, all cases of Neuritis

of the facial nerve (of different etiology) were completely cured - without residual effects, although there were also complex patients with contractures, synkinesias. They tried a lot before contacting me. There were patients with contracture or synkinesis, but there was a combination of both. The duration of the disease is different. Each case has its own treatment regimen, its own individual approach. Perhaps this pathology will be promising for bioresonance and multiresonance therapy.

Frequent tics (in combination with other hyperkinesias) with epidemic encephalitis - "oculogyric crises" - rolling the eyes; atamyotrophic lateral sclerosis (BASS). Available in "Medicamentous

SELECTOR "and diagnostic cassettes (nosodes, organopreparations) will make it possible to clarify the diagnosis, and this is important for the correct drawing up of treatment regimens.

You can meet with a not so rare disease - Gilles de la Tourette's disease. Outwardly, these are also "flying" tics in the face (grimaces), in other muscle groups of the trunk or in the limbs. There is an opinion that there is a certain connection with chromosomes, hereditary-family transmission diseases of the dominant-recessive type, mainly in the male line. Specialists in bio- and multi-resonance therapy have the opportunity to work with the life line, with the point of conception.

Algorithm for treating nervous tics

It was used with good results, obtained in a short time in patients who were ill for a long time - only 15 people, adults and children. In addition to tics, fears and many other manifestations of neurosis passed.

A large role in recovery is given to the patient's attitude to life events, his ability to overcome the difficulties encountered. There must be a desire to get well, get rid of troubling problems, be healthy. Against your will, you do not need to forcefully treat.

1. At the first appointment, it is necessary to establish contact with the patient, try to figure out whether the tick is functional or organic. The knowledge and experience of a physician is certainly necessary, but diagnostics using the ART method occupies an important place. The selector has markers, when testing which we get answers, including about psycho-vegetative loads through the Epiphysis D4 or Thalamus D60. In addition, we will carry out differential diagnostics through Mandragora D60, that is, we exclude the presence of endogenous psychoses. You can determine the degree of mental stress (I do not do this). And further, at treatment of tics on a functional basis, we use everything that is aimed at strengthening, restoring the nervous system. We are preparing a preparation for the correction of nervous activity for this particular person along the interested meridians. The preparations "Bach Flowers" and "Guna" have proven themselves well. Determine the dose - 1 or 2 doses per day. The course of treatment is about a month, but we get a positive result in 1-2 days. You can use homeopathic constitutional drugs (it is important to correctly determine the Constitutional type, and the dilution should be high. With the help of ART (according to tests), we determine whether a given patient can take high dilutions, whether they will be effective, etc. You need to know well homeopathy, have a "pure" Constitutional type).

2. Determine the load, target organs. We prepare preparations for their elimination. In almost all cases, there are geopathogenic, electromagnetic loads (we remove with a frequency drug 6.2 Hz, 1 globule 4 times 7 days, then 1 globule 3 times. The course is about one month). If there is a radioactive load, we also remove it. You can additionally use the drug - "Antiradiation" ("IMEDIS") - 1 globule 3-4 times, or "Rayex". We select when testing.

According to the minimum program: we carry out BRT, while organopreparations can be added in 2 containers. Preparing a generic BR-drug through Cu met. D400 (preparation by Yu.V. Gotovsky). Determine the dose, usually 1 globule per day. This is already enough to get a significant positive result.

If necessary, preparing BSD, using various filters: organopreparation, nosode, frequency, disharmonic vibrations from the organ.

At the next appointment, we determine and remove other loads, if necessary - fungi, protozoa, worms, bacteria, viruses ... (We draw up a diagram). We check for a deficiency of minerals, trace elements, vitamins. If there is, we eliminate

3. Induction programs give a good effect in the treatment of tics. IN at the beginning we test the necessity of their application. Then, individually for each specific patient, we select one or another program, for example, Children's No. 7 - more often with tics that have a functional basis, and Cerebral No. 15 - with organic pathology. Other programs may also be suitable - it is possible that during the course of treatment there will be a sequential change from one to the other. Using the inductor, we write the program on crumbs, the reception according to the scheme - 1 globule 1-2-3 times a week.

4. Effective use of exogenous bioresonance therapy fixed frequencies (we select those that are suitable for testing):
affect muscle tone - their relaxation - E3, E86, E 165, E 205; on the locomotor system - his dysfunction - E1, E3, E4, E10, E15, E17, E19, E20, E24, E32, E41;
for spasms - E16, E71, E126; atneuritis of the facial nerve E95, E76, E97, E149; with lability of the nervous system, hypersensitivity - E49, E77, E198;
anticonvulsants frequency programs - E75, E205, E165, E200;
cerebral dystonia - E91; cerebroasthenic syndrome - E22.

5. The use of organopreparations, nosodes (action which aimed at the cause) during BRT is effective in the treatment of tics that have both a functional and an organic basis. In particular, in the treatment of facial hemispasm (as a variant of local torsion dystonia), organopreparations of subcortical formations available in the "Medication SELECTOR", cassettes - "striatum", "substantia nigra"; in the treatment of tics after epidemic encephalitis - "okolirnye crises" - nosode "encephalitis".

6. In all cases, without exception, the preparation of a general BR-preparation

via Cu met. D400 (preparation by Yu.V. Gotovsky). The tactics are determined by the place, time, goal. Treatment is carried out taking into account the specific result achieved. The creative approach of a thinking specialist to a specific disease in a specific patient has an undeniable effect.

Conclusions:

1. Diagnostics using the ART method allows you to clarify the diagnosis in a short time without additional material costs, is at the same time a differential diagnostic method in determining the functional or organic nature of hyperkinesis.

2. Bioresonance and multiresonance therapy are effective in treatment of nervous tics and other accompanying manifestations of neurosis.

3. ART and BRT allow a new look at the etiology and pathogenesis tics as one of the manifestations of hyperkinesis.

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