

About the concept of "norm" in the drug test by R. Voll
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The method of electropuncture diagnostics by R. Voll (EAV), developed half a century ago, has become widespread in practical medicine in many countries. The method gave impetus to the creation of new progressive electropuncture technologies. The principles on which the EAV is based are used in biometric functional diagnostics, autonomic resonance test, etc. The popularity of the method especially increased after the discovery in 1954 of the phenomenon of remote exposure of drugs, which was the basis of the electropuncture drug test, and thanks to which doctors received on armament is a highly effective way of individual selection of therapeutic agents. The essence of the drug test R. Voll

consists of registration of changes in electropuncture parameters after entering into measuring circuit through a passive electrode the investigated material. various possibilities drug testing.

The first is the selection of a therapeutic impacts to correct impaired functional state. information channels (respectively, organs and systems) through the normalization of the altered electropuncture parameters of the measurement points. Therapies are being tested - homeopathic, informational, and (less convincingly) - allopathic, phytotherapeutic. This is testing for positive impact.

The second is to determine the aggravating effect on the body of environmental factors: food products, pharmaceuticals, cosmetics, dental materials, etc. This is testing for negative effects.

Third - application of the principle of drug testing in etiological diagnostics - determination of the affected organ, the nature of the process, the type of pathogen.

With all the consistency and seeming simplicity of drug testing and R. Voll's method as a whole, its effective use in practical medicine is possible only in the case of a clear implementation of techniques and correct clinical interpretation of the results obtained, especially when it comes to reproduction

drug testing. To do this, you must first of all decide on the diagnostic criteria. A large number of experimental research (R. Voll calls the figure 100,000), statistical processing of the material allowed the author of the method and his followers not only to establish information and functional the relationship between measurement points and internal organs and systems, but also to find a correspondence between the characteristics of electrical parameters and the degree of morphological and functional changes in organs. To assess the nature of violations of the function of organs and tissue systems, a comprehensive analysis of changes in acupuncture points is proposed according to the following criteria:

1. The digital value of the maximum deviation of the arrow of the device.
2. Stability of the indicator (presence or absence of "falling arrow").

3. The speed (agility) of the arrow's rise to the maximum value.
4. Speed (swiftness) and duration of the indicator fall.
5. Symmetry (asymmetry) of indicators.
6. Soreness of the measurement procedure (subjective indicator).
7. Duration of preservation on the skin at the site of the acupuncture projection

points of the trace from pressing the electrode.

The most important of them are the digital value of the indicator of the maximum deviation of the arrow of the device (I) and the value of the "fall of the arrow" (ID). There are no special misunderstandings regarding the interpretation of the indicator drop of the arrow. If the arrow of the device is unstable during measurement, then this is regarded as a sign of pathology, if the arrow is stable, then other parameters are taken into account (first of all, the value of the digital value of the conductivity index of the measuring point. (50 divisions of the instrument scale) corresponds to the norm, values from 50 to 100 scale units indicate that the measuring point and the corresponding organ are in a state of excitation (physiological or pathological). then this indicates the suppression of function and degenerative changes in the corresponding organ [1]. When testing a drug, the doctor is guided by a conductivity index of 50 as "normal". The drug can be used for therapy if, during testing, indicators above 50 decrease, and indicators below 50 increase. The ideal is a drug, when testing which the arrow of the device would point to 50, provided there is no indicator drop. But R. Voll himself, taking the conductivity value of 50 units as the norm. scale of the device, argued that this is an ideal option, which "... can hardly be found in modern people, except perhaps only in an infant in the first days of life" [1]. Our practical experience shows that such indicators are not typical for an infant too, not to mention an adult person (even if the total conductance without prior therapy corresponds to 82–86 scale units). Therefore, the first thing a beginner follicle encounters in his work is the discrepancy between the classical interpretation of indicators and clinical diagnostics [3, 9] and the dependence of the measured values on a number of factors [2]. It is not excluded that the impact of a polluted environment - electromagnetic smog, the consequences of chemicalization, etc. To solve the problem of such a discrepancy, various modification options for the interpretation of the conductivity indicators of the measurement points are proposed. 9] and the dependence of the measured values on a number of factors [2]. It is not excluded that the impact of a polluted environment - electromagnetic smog, the consequences of chemicalization, etc. To solve the problem of such a discrepancy, various modification options for the interpretation of the conductivity indicators of the measurement points are proposed. 9] and the dependence of the measured values on a number of factors [2]. It is not excluded that the impact of a polluted environment - electromagnetic smog, the consequences of chemicalization, etc. To solve the problem of such a discrepancy, various modification options for the interpretation of the conductivity indicators of the measurement points are proposed.

1. The results obtained from the measurement are evaluated by determination of the individual average conductivity value of 40 corner points of the nail beds for a specific patient at a specific session. Deviations of measurement indicators from the obtained average value are determined and additional indicators are mathematically calculated [5].

2. The individual average value of the conductivity of the points is calculated measurements for each arm and leg and the corridor of the norm is determined (as a rule, within 10% or 5%) [7].

3. Instead of the value of the "norm" of 50 units. the concept of "norm corridor" is introduced. Values of 50–65 units are considered such a corridor. scales [9], 50-60 [7] or even 50-80 units. [eight].

4. Correction of boundaries of functional classes is carried out by nonlinear scale conversion by arithmetic calculations separately for measuring points on the hands and feet. In practical work, a ready-made table is used [2].

But if the digital value of the "norm" changes or a corridor of "normal" values is established, then the question naturally arises, how to conduct testing, what value of conductivity should be guided by when reproducing a drug test? The authors of the above interpretation options leave the "ideal norm" according to R. Voll at 50 units as a testing benchmark. scales (Kramer F., 1995; Rossmann H., Rossmann A, 2000; Katin A.Ya., 2001) indicate a corridor of 50–65 units. (Yankovsky O.G. and others) or do not specify it at all (Pinchuk V.V., 2000; Irodov M.A., 1999).

For many years, using electropuncture diagnostics according to R. Voll, we noticed that when correcting disturbed conductivity indices of TI (even if general and zonal conductivity therapy is not used), one should, first of all, try to equalize the reduced indices and eliminate the "drop of the arrow". If this can be done, then most of the increased indicators are normalized. The approximate value of the norm can be determined by the average values of the conduction indices of the TI of the organ degeneration channel for the hand and the connective tissue degeneration channel for the foot. Only readings without "falling arrow" are taken into account, and the minimum and maximum values are cut off. For accurate calculations of the "normal" values of the TI conductivity and the boundaries of functional classes according to R. Voll, it is necessary to apply a nonlinear transformation of the instrument scale. With this approach, the "norm" will not be considered a certain value of 50 units. scale of the device, and the value is individual for each patient, and it will correspond to the middle of the physiological stress corridor.

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