

Some patterns in the etiology of benign diseases of the mammary glands,
revealed by the method of electropuncture diagnostics
(EPD)

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Diseases of the mammary glands are among the most common pathologies in women and include processes that are different in clinical, morphological and etiological characteristics. A distinctive feature of the mammary gland is the complexity of a clear differentiation of physiological and pathological changes, as well as various types of benign diffuse pathology.

According to WHO (1984), mastopathy is a fibrocystic disease (FCD) characterized by a violation of the ratio of epithelial and connective tissue components, a wide range of proliferative and regressive changes in breast tissue (in the domestic literature, sometimes another term is used: fibrocystic mastopathy (FKM)).

According to modern concepts, FCM is hormonally conditioned. However, numerous biochemical studies of the secretion and excretion of steroid and other hormones responsible for the formation and function of the mammary glands have not shown a single and clearly reproducible type or types of hormonal abnormalities in different laboratories in patients with mastopathy compared with healthy women of the corresponding age. Therefore the etiopathogenesis of FCM is not completely clear. One thing is certain today: FKM develops against the background of dyshormonal disorders in a woman's body.

The causes of dyshormonal disorders are huge amount. The main ones are:

1. Frustrating situations that are present in everyone's life women (dissatisfaction with marital status, as well as their position in society, everyday conflicts, conflict situations at work, mental stress, unfavorable sexual factors, etc.). Chronic emotional stress is of particular importance. Constant long-term emotional stress is accompanied by suppression of the immune system due to overproduction of corticoids and a decrease in the function of the thymic-lymphatic system, thus reducing the natural and immunological resistance of the body.

2. Factors of a reproductive nature (number of pregnancies, childbirth, abortion, age during pregnancy and childbirth, the birth of a large fetus, duration of lactation, the time of the onset of menarche and the onset of menopause, etc.).

3. Gynecological diseases, primarily inflammatory processes in the small pelvis.

4. Endocrine disorders (eg, thyroid dysfunction).

5. Pathological processes in the liver and biliary tract.

6. Hereditary (genetic) predisposition.

Analysis of the results of clinical examination of patients shows that FCM occurs most often on an unfavorable premorbital background. A woman's body is influenced by a number of damaging factors,

contributing to the occurrence of pathological processes in the mammary glands: a high frequency of infectious and concomitant diseases transferred in childhood and adolescence [5].

Our observations fully confirm these data. During the period of joint work with P.D. Klimenko, while receiving patients in the quantum medicine room of NPK Biotest, when diagnosing FCM, it was noticed that breast pathology was determined only in the presence of resonance for previously transferred viral infections: herpes progenitalis (herpes simplex virus Type II) and mumps. In the literature, there is evidence that the EPD method can reveal the tendency of herpes simplex viruses type II and mumps to cause gynecological pathology, and herpes simplex virus type II, in addition, and breast disease [2, 4]. A high frequency (83.3%) of persistent herpes infection of the genitals has also been proven (in particular, with uterine fibroids - herpes simplex virus type II), determined by PCR (polymerase chain reaction) [1]. The damaging effect of the mumps virus on the reproductive organs of the male body is also well known. We did not find data on the etiological role of the mumps virus in breast pathology in the available literature, which determined the relevance of the study.

The found patterns needed to be verified in a clinical setting. For this purpose, in February 2002, in the mammology office of the Oncology Department of the Grodno Regional Clinical Hospital, an examination of the mammary gland was carried out using the EPD method (electropuncture diagnostics). The theoretical basis for testing this assumption is the principle of resonance testing of the EPD method. The EPD method by means of diagnostic nosodes determines not just the presence of a pathogen in the human body, namely, the reaction of a macroorganism to the damaging effect of one or another pathological agent (virus, microbe, fungus, etc.). At the same time, the wave characteristics of living pathogens (when diagnosing the current disease) or their traces (past diseases) are determined, the "record" of which is fixed on the affected organs and tissues, changing the information fields of the latter. This, in our opinion, is the fundamental difference between the etiopathomorphological diagnosis of the EPD method from other examination methods.

We examined both women who first applied for a referral or independently, and those who were registered and undergoing outpatient therapy for various forms of mastopathy or had undergone surgery on the mammary gland. The examination of the patients was carried out in a "blind manner", i.e. without taking anamnesis, studying medical records and data from other examination methods (ultrasound, X-ray mammography (RMG), puncture biopsy, etc.). For the EPD, the SVN-1 apparatus, manufactured by the Kommunist plant, Kiev, 1990 was used. To determine the resonance to etiological factors, microresonant circuits (MRC), proposed by V.N. Sarchuk, were used. [3] and diagnostic cassettes produced by "IMEDIS", Moscow.

In the process of diagnostics, the following indicators were determined:

1. Tumor processes.

2. Cystic processes.
3. Resonance to etiological nosodes: herpes progenitalis (simple virus herpes type II) and mumps.
4. Fibroadenoma of the breast.
5. Cystic mastopathy.

The examination determined: topical diagnosis (which mammary gland is affected) and the nature of the pathology (cyst, lipoma, fibroadenoma, malignant tumor). All patients were examined for their gynecological status, in most cases other organs and systems.

results

A total of 88 women were examined (without breast cancer). The diagnosis of FCM by the EPD method was established in 78 patients (97.5% - from 80 patients with FCM, with the diagnosis established by general clinical examination methods). Discrepancy - 2 cases (2.5%). Healthy - 8 (9.09% - from 88 patients). Discrepancies - 0 (0%). Among women diagnosed with FCM, resonance to the etiological nosode: herpes progenitalis (herpes simplex virus type II) was detected in 71 women (87.5%). Resonance to the etiological nosode of mumps was observed in 49 women (61.25%). Both etiological nosodes were identified in 33 patients (41.25%). In five cases out of eight, and in healthy women, a resonance was determined for the etiological nosodes of herpes progenitalis (herpes simplex virus type II) and (or) mumps.

The mumps virus has been studied well enough, ways of prevention and treatment of this disease have been found. Today it is not known whether the vaccination against mumps has the same damaging effect on the reproductive system of the female body, or only a living pathogen has such a property. It is also unclear how important the severity of the disease is. The issue with the herpes simplex virus type II is more complicated. Attention is drawn to the lack of its damaging effect in a number of sick women, primarily by age qualification, as well as those suffering from certain diseases. Considering that the body of women has been constantly exposed to a viral infection of mumps for many years, and the epidemic situation of this disease has remained unchanged in recent decades, it can be assumed that the increase in the incidence of FCM is primarily due to an increase in the number of pathological effects on the mammary gland herpes progenitalis (herpes simplex virus type II). This issue requires further careful study. Apparently, the risk of developing FCM depends on the aggressiveness and duration of exposure to pathological factors developing against an unfavorable dyshormonal background for the body of women.

Thus, the occurrence of FCM is considered by us, first of all, as a consequence of the damaging effect of the transferred viral infections - herpes progenitalis (herpes simplex virus type II) and mumps on the organs of the reproductive system of women, in this case - on the mammary glands. This conclusion is confirmed by the fact that we have not seen a single case of FCM in women who have not had herpes progenitalis (herpes simplex virus type II) and (or) mumps, despite the presence of numerous other factors leading to dyshormonal disorders.

Conclusions:

1. The EPD method has a high diagnostic sensitivity (97.5%) with benign breast diseases (FCM).
2. Considering the advantages, primarily cost-effectiveness and diagnostic efficiency, the method can be widely used in the work of general practitioners.
3. Determination of transferred viral infections - herpes progenitalis (herpes simplex virus type II) and mumps by the EPD method allows us to judge the likelihood of developing FCM.
4. Apparently, there is a tropism of the mumps virus to all organs of the reproductive system of women, and not only to the organs of the gynecological sphere.

Literature

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