

Experience in the treatment of retention cysts

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In the structure of gynecological diseases, inflammation of the uterine appendages and, as a result, the formation of retention cysts is in the first place in frequency.

Currently, the clinical manifestations of the inflammatory process in the uterine appendages have changed.

Erased forms of the disease are much more common, and therefore treatment is started late. Untreated patients are often discharged from the hospital.

The presence of a focus of inflammation in a woman's body leads to a number of changes, since it is a source of irritation for the nervous and endocrine systems of the body.

In the focus of inflammation, due to sclerotic changes in the vessels, blood circulation is disturbed, and cicatricial adhesions that develop as a result of inflammation often lead to pronounced anatomical and functional changes (the formation of ovarian cysts, dysmenorrhea, etc.).

A chronic inflammatory focus is accompanied by changes in the nervous system, in particular, in the central (cortex-hypothalamus-pituitary gland), which, in turn, become sources of independent pathological impulses. Thus, a vicious circle of hormonal regulation of ovarian function arises, which significantly complicates the therapy of inflammatory diseases.

Due to the incorrect and unlawfully widespread use of antibacterial drugs, a selection of microorganisms and spread of inflammatory diseases, immunological reactivity of the body.

Inflammatory diseases of the internal genital organs are treated conservatively, but with tumor-like formations of inflammatory etiology that do not respond to conservative therapy for up to 3 months, early relapses have to resort to surgical treatment.

In our work, we want to consider a method of treating ovarian retention cysts using ART, EPT, exo- and endogenous

BRT, as well as in addition - the hirudotherapy method used in our medical rehabilitation center.

Diagnosis of tumor formation of ovaries, the alleged retention nature, was placed after diagnostics using the ART method, clinical, vaginal ultrasound examinations.

How method defining the main factors, influencing on the pathological process:

- inflammation and microbial flora,
- hormonal regulation,
- ART was used for immunological reactivity.

When diagnosed by ART, it was found in almost all patients:

- depletion of the endocrine system 1-2 tbsp;
- depletion of the immune system 1-2 tbsp;
- the presence of microbial flora (Trichomonas, chlamydia, mycoplasma and often opportunistic gram-negative: Proteus vulgaris, Klebsiella pneumoniae, etc.);
- biological and photon indices (with an average age of patients 20-35 years old)
  - 4-fourteen.

Let's consider one of the examples of treatment.

Patient M., born in 1970 She complained of frequent respiratory diseases, frequent bloating, nausea.

In the study on ART, it was determined:

- 1) the presence of chronic inflammation of the tonsils, gallbladder, ovaries;
- 2) BI - 4/15, FI - 5/14;
- 3) depletion of the immune system - 2 tbsp.;
- 4) depletion of the endocrine system - 1 tbsp.;
- 5) burden of infections: lamblia, mycoplasma mon., Klebsiella mon., proteus vulg. (which were liquidated in parallel);
- 6) the presence of cystic formations: Rus toxicodendron D60 + ovary + ovarian cyst D30 + klebsiella mon., proteus vulg.

When examined by a gynecologist with bimanual examination and ultrasound of the pelvic organs, the presence of a cystic formation of the right ovary, size 54 35 mm (ultrasound from 15.11.03)

Treatment

1. Correction of hormonal status:
  - a) induction program Stress III (endocrine regulation) 2 times in a week - only 4 times;
  - b) EPT regulation of ovarian function, taking into account sensitivity to electrotherapy, every day - 5 sessions;
  - c) endogenous BRT along the "interested" meridians with the recording of BR- the drug from the moment the meridians stopped being tested, and by further taking the drug - 4 globules 3 times a day (individually selected) until the beginning of phase 1 of the menstrual cycle.
2. Correction of the immune status:
  - a) taking immunorectors and antioxidants (cycloferon according to the scheme, spirulina, vitamins E, C);
  - b) resonant frequency programs for the elimination of mycoplasma, klebsiella pneumonia, protea vulg. (only five sessions with an initial intensity of 30 conventional units (two to three minutes) with a subsequent increase to 100 conventional units and until the resonance disappears).
3. Absorbent hirudotherapy.

The treatment was carried out for two weeks, from the third phase of the menstrual cycle to the first phase of the next.

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Ultrasound control (05.01.04): the right ovary of a homogeneous structure with small cystic inclusions 33 25 mm.

With this diagnosis, 25 women were examined and treated at the Center during the year.

The treatment regimens for the patients are identical to those described above.

Conclusions:

1. This treatment regimen, which was worked out on one patient and subsequently tested many times, it turned out to be successful and, as experience has shown, has the right to life.

2. The average duration of treatment is 18-22 days.

Literature

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