Systemic spiritual adapters and their role in modern energy-informational medicine Kudaev A.E., Mkhitaryan K.N., Khodareva N.K. (Center "IMEDIS", "Skif", Moscow, Russia)

Modern medicine is increasingly using the so-called energy-information technologies (EIT) [1] and, accordingly, energy-information drugs (EIP) [2] for treating a patient, which provide the very possibility of implementing these technologies.

EIT here means purposeful control of the body in order to increase its viability (in other words, increase the resource of its self-realization [3]) by introducing into it the additional information (package of commands, energy information package, program)

[4]. The energy component of the energy-information package introduced into the body, in the case of using EIT, is, as a rule, negligible in comparison with the energy released by the body, carrying out rearrangements under the influence of this information. Thus, there is an impression that theinformation contains a hidden biochemical energy which, apparently, was the reason for the name of the corresponding technologies and preparations by the term "energy-informational". The material component of the energy-information package - the EIP carrier, as a rule, is indifferent in relation to the treatment process, which allows us to speak, using a free speech, about the "immateriality" of this drug.

Examples of EIT in medicine are:

- acupuncture and acupressure;
- homeopathy;
- bioresonance therapy;
- therapy with sarcodes (organopreparations);
- therapy with nosodes (Hahnemann's potentiated secrets of the patient's painful discharge):
- chronosemantics (therapy of a patient with electronic recordings of signals taken from special points of his palm, subject to his preliminary load with an auxiliary EIP) [5].

EIP is understood as the material carrier of the energy-information package, when introduced into the patient's body, the latter begins to work out the program contained in this package. Examples of EIP in medicine are:

- homeopathic medicines, i.e. poisons potentiated according to Hahnemann;
- organopreparations (sarcodes), i.e. potentiated preparations of tissues and organs of a healthy organism;
- nosodes, i.e. the potentiated secrets of the patient's painful discharge;
- recording of electromagnetic signals received from the patient in response to his load by one or another energy-informational preparation.

Modern ideas about the nature of EIT are reduced to the fact that EIT is a certain (possibly - time-varying) spectrum of electromagnetic oscillations, stably reproduced by its carrier. The information that makes up the contents of the command packet delivered by the drug to the body represents one or another characteristic of this spectrum. The assimilation by the body of the regulation program contained in the EIP occurs due to the existence in this body of an additional (in relation to the nervous and humoral levels) level, namely the level of biophysical regulation. The level of biophysical regulation of an organism is an integral systemic level of storage, exchange and processing of information, the carriers of which are electromagnetic fields - both external and produced by this organism itself.systemic semantic

resonance (SSR), on the use of which all known methods are currently based testing this EIP, i.e. determining its suitability for therapy and the consequences of its assimilation by the body.

The essence of the SSR phenomenon lies in the fact that the introduction of EIT into the electromagnetic field of the body (in other words, into the measuring circuit), this organism responds with a holistic systemic response at the level of changes in most of its functional characteristics. It has been established that this change in functional characteristics is "semantically similar" to those changes that should occur in the body when it assimilates this EIP, i.e. it kind of "precedes" symbolizes these changes [6]. By measuring, with the help of certain (for example, electrophysiological) methods, the change in the functional characteristics of an organism under the influence of an EIP introduced into it, it is possible to obtain a characteristic of its effect on this organism, anticipating real changes that will occur in the body if it is treated with this EIP. It should be noted that already at the level of manifestation of the "anticipatory", in other words, symbolic, response of the organism to the introduction of EIP, the biochemical energy expended by this organism for its (response) formation significantly exceeds the energy contained in this EIP. Thus, when an EIP, which is not indifferent to it, is introduced into the body, the phenomenon arisessystemic resonance. This is not physical, but resonance, which is more complex in nature (although its constituent elements, undoubtedly, are, including physical resonances). Unlike physical resonance, systemic semantic resonance uses for the emergence and development of the biochemical energy of the organism itself (and not the energy of the EIP, i.e. the source, as in the case of physical resonance) and represents an inadequately strong response of the organism to a weak, but not indifferent to it, as a whole system, irritation.

An example that explains the nature of systemic semantic resonance (at the level of acoustic vibrations) is a person's sensitivity to lucid speech. It is known that the right word can kill or cure a person. Butphysical energy, contained in a lethal or, conversely, a therapeutic phrase is obviously not enough to cause all those physiological processes that lead to death or recovery. When damaged or healed with the word organismuses internal sources

biochemical energy, and not physical energy contained in acoustic vibrations, with the help of which it (this word) was transferred to the body. Thus, the physiological response of the body to a particular word is caused not by a physical, but by a more complex in nature systemic resonance, arising, generally speaking, at the level comprehending (in other words, mastering the semantics) of what was heard, those. processing the relevant information with at least the entire associative cortex. In order for such processing to become possible, it is necessary to have a whole cascade of internal amplifiers in the body, some of which actually include physical (acoustic) resonators - such an amplifier is, for example, the apparatus of the ear. However, the systemic resonance of a change in the physiological state of an organism in response to a word or phrase is in no way reduced to physical resonance, which is proved, in particular, by its (the organism's) relative indifference to most of what it heard. The concept of systemic semantic resonance at the level of electromagnetic oscillations is exactly the idea of what an organism "says" - both to itself and to the world around it - not only with the help of acoustic, but also with the help of electromagnetic waves. Accordingly, from the general principles of cybernetics follows the existence in the body of systemic semantic resonances due to the significance of this or that electromagnetic signal for it.

Methods for determining the properties of an EIP, based on the identification of systemic semantic resonances that it causes when introduced into the measuring circuit of the body, in modern medicine are called drug testing or a drug test (MT). The specific type of drug test depends on the change in which particular functional characteristic of the organism is monitored, and on the way in which the corresponding measurement is made (and interpreted). In accordance with this, MT according to R. Voll, according to Nakatani, autonomic resonance test (ART), oxyhemodiagnostics and many other MT are distinguished.

In this work, the method of autonomic resonance testing (ART) was used as the basic method for conducting the experiment. In this MT, the change in the tone of the body's ANS is monitored, resulting from the imposition of the tested spectrum of electromagnetic oscillations on this body. This change in the tone of the body's ANS can be:

- firstly, to measure since a shift in the balance of excitation towards the parasympathetic division of the ANS leads to an increase in the resistance of the patient's skin,
- secondly, to interpret, since this shift reflects the relaxation response, or vice versa, the tension of the organism.

To study the properties of the medicinal product, a system of ART-pointers (test-pointers, markers), developed and implemented in the hardware complex of the IMEDIS Center, was used. In accordance with the standard testing methodology, a medicinal preparation was considered compensating for one or another damaging factor if, when it was introduced into the patient's measuring circuit, the reproducibility of the measurement point was restored, which was previously disturbed by the introduction of a test pointer to this damaging factor into this measuring circuit.

In the future, we will use the ART technique and its inherent terminology, as it does not require any additional explanations, including an explanation of the conceptual apparatus used in it (if necessary, you can refer, for example, to [8]).

In a comparative examination of the classes of energy-informational drugs used for the patient's therapy, a certain asymmetry of these classes is striking. For example, the following EIT classes are dual:

nosodes - sarcodes (organopreparations);

homeopathic preparations of small and medium dilutions - energy-informational models of allopathic medicines,

constitutional homeopathic remedies - not identified.

This duality arises as a result of the interpretation of the action of information programs that make up the content of the considered EIP. Nosodes and homeopathic remedies in small and medium potencies are interpreted in modern energy-informational medicine as EIPs that cause a kind of "training alarm" in the body at the systemic level of its response, in other words, amplifying and generalizing the reactions already taking place in it to combat the disease, by increasing alarm in relation to it. Thus, these drugs introduce educational "negative programs" into the body at the level of the affected organs and tissues.

On the contrary, sarcodes and / or energy-informational models of allopathic drugs are interpreted in modern energy-informational medicine as EIPs, which introduce into the body educational "positive programs" (also at the level of organs and tissues), indicating to the body ways to restore certain functional processes, tissues, organs or systems.

However, for the class of constitutional homeopathic remedies (CHP) (homeopathic remedies in high potencies), a dual class has not yet been identified. Constitutional homeopathic remedies are currently interpreted as systemic educational "negative programs", i.e. programs acting at the level of the organism as an integral system striving for its self-realization, and not at the level of its individual tissues of organs or private functional systems. This feature is reflected in the way they are prescribed (according to the patient's mental symptoms, and according to his most integrated reactions). The dual class of drugs for QGP should be drugs that introduce into the body the programs of its systemic reparation and regeneration not at the level of its individual systems, organs or tissues,

In search of such a class of EIP, the authors of this work turned to the phenomenon of the impact on a person of various, in particular Orthodox, shrines. A shrine here is understood as a sacred object - an icon, relics to which the folk and religious tradition is attributed the ability to heal and, moreover, improve the life of people who have touched it or are simply near it for some time. From a naively materialistic point of view, there is no explanation for the phenomenon of the action of relics. Therefore, orthodox science either rejects this phenomenon, or explains it, reducing it to a special case of the "placebo phenomenon", i.e. self-hypnosis of a believer who has resorted to the help of a shrine. At the same time, a different approach to the phenomenon of the impact of the shrine is also possible. A shrine can be (under certain conditions) a source (at least) of the electromagnetic spectrum, the impact of which on a person is perceived by him as a program that organizes the processes of systemic reparation, compensation and regeneration in his body - in other words, as a systemic adaptant that acts on him as a whole. The action of any shrine in the tradition is invariably associated with a change in the mentality of a person - his "spirit". Having touched the shrine or being next to it, a person experiences a state of peace, spiritual harmony, joy and enlightenment. It can be assumed, therefore, that in this case (as in the case of constitutional homeopathic remedies) we are talking about the impact on the most general systemic reactions of the body, namely, its mental reactions. In this sense, the "purpose" of the shrine, as well as the purpose of the KGP, proceeds from the mentality of the patient. However, unlike the KGP, the shrine should (by its very definition, and moreover, according to the nature of the action attributed to it by tradition) to carry within itself not a negative, but, on the contrary, a positive program of self-realization of a living organism. From this point of view, the energy-informational equivalent of a shrine should be called a systemic spiritual adaptant (SDA).

Based on this assumption, the authors investigated a number of energy-informational models of Orthodox shrines, from which they selected twelve SDA, which proved their therapeutic effectiveness.

The study was preceded by:

- 1) production of energy-information models of the shrine, which was carried out according to the methodology, component of the present know-how of the authors;
- 2) a pilot check of the received EIP, carried out in order to weed out drugs that do not show pronounced healing properties. At this stage of the study, it was found that:
 - a) not all objects of religious worship have pronounced energy-informational properties;
 - b) in the case of manifestation of energy-informational properties by a copy of a shrine, these properties can not always be qualified as healing.

Subsequent studies were carried out by the ART method using the most widely used criteria for the efficacy and usefulness of the tested drug in this method. The number of subjects for each individual ART criterion ranged from 12 to 27 people. Statistical processing of the experimental results was carried out using the statistical test of the Wilcoxon T-test [7].

For each of the ART criteria for the efficacy and safety of the tested drug that were used in the experiment, the following two alternative statistical hypotheses were tested:

- 1. When the tested SDA is introduced into the measuring circuit of the patient, the intensity of the shifts functional physiological parameters measured by this ART criterion in typical direction, characterizing the intensification of the processes of reparation, compensation and regeneration in the body of this patient, does not statistically significantly exceed the intensity of shifts in an atypical direction, which characterizes the absence of these processes.
- 2. When the tested SDA is introduced into the measuring circuit of the patient, the intensity of the shifts functional physiological parameters measured by this ART criterion in typical direction, characterizing the intensification of the processes of reparation, compensation and regeneration in this patient's body, statistically reliably exceeds the intensity of shifts in an atypical direction, which characterizes the absence of these processes.

In the event that, in accordance with the T-criterion algorithm and the data of the measurements performed, the first hypothesis should have been rejected and, accordingly, the second hypothesis accepted, we say that the obtained results of the drug's action are statistically reliable, in other words, it was revealed statistically significant trend action of this drug.

In order to exclude the influence on the measurement results of the unconscious operator's settings, these measurements were carried out by a double-blind method. In other words, each time two series of measurements were carried out, and neither the operator nor the patient knew in which of these series the effect of the real SDA was measured, and in which of the empty homeopathic crumbs (placebo).

Statistically significant results of the effect of twelve SDA (in other words, statistical trends in typical shifts in ART indicators) are shown in the following table 1.

Table 1

Names drugs	Symbols cheskaya element	Pointers RA	Pointers mental load	BI pointers	Pointers to damage (interested bath) individual organs	Pointers to chakra blockades
Life-giving cross (LCD)	Wood	Displays RA on optimal level.	Removes the indication knowledge of the psycho chesky burden schenia.	Reduces BI.	Statistically reliable tendencies not revealed.	Statistically reliable tendencies not revealed.
Life-giving Wat source (ZhI-1)	er	Raises RA but does not reach before optimal level.	Reduces the level vein psycho of the wearer schenia, but not removes it fully.	Reduces BI.	Reduces amount pointers to damage organs.	Statistically reliable tendencies not revealed.
Source in Trinity Sergieva Lavre (ZhI- 2)	Water	Increases, but does not bring to optimal level.	Reduces the level vein psycho of the wearer schenia, but not removes it fully.	Reduces BI.	Statistically reliable tendencies not revealed.	Statistically reliable tendencies not revealed.
Relics Alexia Baptist (POPPY)	Earth, metal	Increases, but does not bring to optimal level.	knowledge of psi chemical burdening.	Reduces BI.	Statistically reliable tendencies not revealed.	Statistically reliable tendencies not revealed.
The relics of Pau (MP)	l Earth, metal	Raises RA but does not bring to opt- small.	Reduces mental burdening, but not to optimum. fully.	Reduces BI, but does not bring to the	Reduces the amount number of indications for damage individual organs.	Statistically reliable tendencies not revealed.
Complex- ny teacher rat "5 Elements "	Earth, metal, Fire, wood, water	Displays RA on optimal level.	Takes away the indic away a lot of menta burdening. BI and p	femininity	Reduces amount indications for damage individual organs.	Takes off chakra blockade.
Cross 32 relics	Earth, metal	Displays RA on optimal level.	Reduces mental burden, but not fem removes fully.	Reduces BI, removes a lot	Reduces BI, removes a lot femininity indices, but not brings them to optimal deduces BI,	Statistically reliable tendencies not revealed.
Central Tree church Trinity-Ser- Gevoy Lavra		Statistically reliable tendencies not revealed.	Removes the indication knowledge of the psycho rationally burden	Statistically but does not brin up to the optimal leg. revealed.	g reliable	Statistically reliable tendencies not revealed.

These data show that during testing by the ART method of various SDA statistically significant negative trends in their impact on the patient's body were not revealed, while statistically significant positive trends, on the contrary, were traced. It is this circumstance that justifies the name "systemic spiritual adaptants" in relation to

energy-informational models of Orthodox shrines.

According to the authors, studies on SDA are just beginning. Within the framework of these studies, there are now more questions than answers, and these questions can be, including a fundamental, ideological character. We list just a few of them:

- 1. What is the biophysical nature of the effect of SDA on the human body? You can push a row alternative hypotheses to explain the mechanism of this effect. According to the authors, the phenomenon of SDA effect on the human body is explained by the fact that these EITs have "archetypically useful" for all living organisms (or only for highly organized organisms) reflection spectra electromagnetic vibrations. In this case, the question arises, why is this so is it an accident, or a pattern that has not fallen into the field of study of modern science?
- 2. Is there a difference in the nature of the impact of the SDA on people of different confessions, i.e. different religious affiliation? (Immediately, we note that according to the preliminary data of the pilot studies of the authors, such differences are not noted)

- 3. Is there a "shadow", i.e. the negative side of the impact of SDA on a person with deliberate overdoses of this drug, and, accordingly, is it possible to develop homeopathic (according to Hahnemann) analogs on the basis of SDA?
- 4. What is the psychological profile of the impact of SDA on a person, how exactly does the state of consciousness change? the patient as a result of exposure to these drugs, and how are the changes in his state of consciousness related to changes in his health?
- 5. To what extent is it justified and advisable to use SDA as markers for chronosemantic therapy of the patient (and here the pilot studies carried out by the authors show that the use of SDA as chronosemantic markers in a number of cases allows solving problems that cannot be solved with the help of other methods of energy-informational therapy of the patient).

However, already at the current level of study of the SDA, a number of conclusions can be drawn:

- 1. All SDA have a systemic adaptogenic effect on humans, and it is not observed (according to at least in the absence of known drug overdose) negative side effects of this effect.
- 2. The impact of all SDA includes a pronounced component of changes in the patient's state of consciousness. Subjectively, this component is experienced by him as inner peace, the acquisition of harmony and self-confidence, a change in the assessment of the scale of disturbing circumstances. Objectively, this component of the effect of SDA corresponds to the disappearance of indications of mental burdening of the organism, or a decrease in the degree of this burdening.
- 3. Combinations of SDA are possible and expedient. Combined SDA exhibit synergy: their properties mutually complement and, apparently, even reinforce each other.
- 4. Based on all of the above, the SDA class can be considered a new and at the same time valuable EIP class, deserving both practical application and further study.

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