Methodological approaches to the creation of coded control signals organism

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Long enough work in the field of medicine, which studies the effect of a wide range of electromagnetic signals on the human body, has determined the understanding that communication with the body in the language of electromagnetic signals in the range from 10 to five Hz up to 100 GHz is essentially a special kind of transmission of coded information. Difficulties arising in the course of diagnostics and treatment when using the mnemonic rules of reflexodiagnostics and reflexotherapy showed that in the conditions of rapidly developing information and other high technologies, as well as changing environmental factors, a new approach is needed and needed.

The complexity of this approach in communication with the body is coded signals due to? firstly, by the existing electromagnetic interference and other external factors of a physicochemical nature, affecting the electromagnetic field of the object, and secondly, by many levels of the scientific and practical approach to the organism, from the genome and the cell to the human organism itself.

Methodically, the use of a code signal for diagnostics and / or treatment presupposes knowledge of a set of factors that determine its adequacy to one or another level of the organism. That is, the code signal is a function of the frequency response (or wavelength comparable to the size of the object), signal shape, signal amplitude, electric and magnetic components of the electromagnetic field (which is determined
dielectric properties, conductivity of the medium and its magnetic properties) and the complex internal environment of the body with all congenital and acquired signs in conditions of multifactorial impact of a constantly changing environment.

Obviously, obtaining the necessary diagnostic and therapeutic effects will depend both on the characteristics of the external electromagnetic effect and on the internal factors of the body, including innate and acquired properties in biophysical and biochemical parameters, at a time when this relationship between the investigating or therapeutic
the electromagnetic signal and the above parameters of the organism will obviously be of an extremely complex nature.

For example, the use of so-called induction programs or Brain Rhythms programs in most cases is extremely effective. However, the accompaniment of the brain rhythm induction program selected according to the vegetative resonance test during the feedback therapy shows that in a number of cases the imposed program loses its relevance literally after 5 minutes from the beginning of exposure. What does this mean?

In our opinion, this means that the body has already received the necessary coded information during these 5 minutes and has made a restructuring, which is confirmed by a feedback signal. In some cases, signal registration

feedback shows that the time of the therapeutic procedure can be both extremely short and infinitely long. All this will depend on the conditions for the formation of the therapeutic signal and the initial data of the patient. That is, any subsequent impact always changes any previous state - and this, in fact, is the problem of selecting adequate control codes or registering the state of the organism, which is essentially an old task of pathophysiology.

Based on the foregoing, we proposed back in 1999 to use a multi-stage selection scheme and adequate therapy in feedback mode using at least two IMEDISEXPERT APCs, which was due to the need for two frequency signal generators [1]. This approach allows you to create

highly effective, individual coded treatment programs, for example, individual brain rhythm induction programs.

In the mode of using two APCs or APC and apparatus "MINIEKSPERT-DT", it is possible to evaluate the efficiency of the presented frequency, waveform and amplitude from the second apparatus on the basis of the feedback principle during the already existing load with an electromagnetic field from the first apparatus. Alternating testing and switching on of the devices allows you to stepwise select an adequate therapy regime for the patient during the diagnosis, while a table of amplitude-frequency characteristics of the individual program of brain rhythms is built, which is different from the standard ones given in the APC. The resulting frequency-amplitude-time dependences for the patient can certainly be compared with the characteristics of the programs given in the APK "IMEDIS-EXPERT". And in some cases, they can take an intermediate state between such, for example, conventionally named programs such as "cerebral", "Endocrine", etc. In the mode of selecting an individual coding program, two or more inductors are used, which are coupled with the projections of the main structures of the brain on the surface of the head and, in the case of somatic problems, with the projection of the diseased organ. Often, this individual program is very short-term, effective and does not destabilize the condition. Thus, biologically significant code signals for the body are not monofrequency signals, but the so-called certain frequency encoded phrases, which are of greater importance than a monofrequency signal. In other words, a monofrequency signal can be compared with the property of an acupuncture needle, which creates a spectrum of "white noise" containing destabilizing and stabilizing characteristics, while when the realization at the cellular level of these “therapeutic” signals will depend on which of these signals the cell will be more sensitive to, which is determined by the initial biochemical and biophysical state of this cell at the time of acupuncture. In a corresponding way, often a carefully selected induction or any other bioresonance program at some stage has a stabilizing effect with a transition at a certain stage to a destabilizing effect, which can play a certain positive training role, but by and large does not solve the narrowly targeted tasks. Clinically, this can be expressed in well-known since the times which is determined by the initial biochemical and biophysical state of this cell at the time of acupuncture. In a corresponding way, often a carefully selected induction or any other bioresonance program at some stage has a stabilizing effect with a transition at a certain stage to a destabilizing effect, which can play a certain positive training role, but by and large does not solve the narrowly targeted tasks. Clinically, this can be expressed in well-known since the times which is determined by the initial biochemical and biophysical state of this cell at the time of acupuncture. In a corresponding way, often a carefully selected induction or any other bioresonance program at some stage has a stabilizing effect with a transition at a certain stage to a destabilizing effect, which can play a certain positive training role, but by and large does not solve the narrowly targeted tasks. Clinically, this can be expressed in well-known since the times which can play a certain positive training role, but by and large does not solve the narrowly focused tasks set and stated in its description. Clinically, this can be expressed in well-known since the times which can play a certain positive training role, but by and large does not solve the narrowly focused tasks set and stated in its description. Clinically, this can be expressed in well-known since the times

classical acupuncture has unexpected positive effects on completely different organs and systems than expected during therapy and does not even fall under the mediated intermeridian connections. At the same time, the use of the biofeedback principle makes it possible to separate
destabilizing and stabilizing effects from the bioresonance effect of the electromagnetic factor, and even taking into account the additional influence of the probing investigating electromagnetic signal according to the criteria of necessity at a given time, while these criteria will be a variable value from the initial value within the framework of both the signal power and its amplitude, and its frequency and waveform. That is, the code signal for the organism is three-dimensional and time-variable.

Biologically significant optimal dose rate (BZMOD) of coded information, which depends on the frequency, amplitude, shape of the signal, the initial state of the organism, organs, systems and many other external and internal factors and is necessary for solving the stabilizing tasks of the organism, is most often unstable in time necessary for solving these problems from its maximum (Max . MOD) to its minimum (Min. MOD) and vice versa and obeys five basic rules of change over time:

1. If Min. MOD <MOD <Max. MOD, then the patient has a tendency to the need to increase the dose rate close to a linear law.
2. If Min. MOD <MOD = Max. MOD, then the patient has a tendency to a decrease in the dose rate of the coded information, and this pattern will be non-linear, for example, a power law, etc.
3. If Min. MOD = MOD <Max. MOD, then the patient has a tendency to a nonlinear increase in the dose rate of encoded information according to some law, for example, Fibonacci, golden ratio, etc. etc.
4. If Min. MOD> MOD> Max. MOD, then the patient has a tendency to a decrease in the dose rate, at a rate close to a linear law.
5. If Min. MOD = MOD = Max. MOD, then the patient has a dose rate remains unchanged at least at a given point in time of the study until the termination of the indication of its effectiveness abruptly.

The practical value of these rules [2] is essential in the mode of selection of individual therapeutic coded signals, when in the deviation mode with continuous testing based on biofeedback, the tendency for the optimal dose rate to change over time in frequency and amplitude becomes obvious, which partly plays a diagnostic role.

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: "IMEDIS", 2005, v.2 - P.120-
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