Study of the effect of targeted autologous and SDA drugs on dynamics development of a purulent process in the experiment

A.E. Kudaev, K.N. Mkhitaryan, N.K. Khodareva
(JSC "Artemida", Rostov-on-Don, Center "IMEDIS", Moscow, Russia)

The basic methodological position of this work is the idea of a person (and his body) as holistic functional system (holistic FS - according to P.K. Anokhin), whose need is herself-fulfillment. A person's illness is understood as a loss of his ability to full-fledged self-fulfillment, and its treatment is understood as the restoration of this ability, or, in some cases, its compensation by solving some other, new tasks of self-fulfillment, replacing those that cannot be solved.

Accordingly, the treatment of the body is reduced to the following activities:

- firstly, to restoration, as far as it is the body's perhaps the ability to fit his functioning own FS, self-fulfillment;
- secondly, to the suppression of parasitic PS, which are inappropriate for the self-realization of this organism.

The solution of these problems by methods of autonomic resonance testing (ART) and bioresonance therapy (BRT) has been developed in detail, and a significant number of publications have been devoted to it. in particular, materials of eleven International conferences "Theoretical and clinical aspects of the use of bioresonance and multiresonance therapy" held by the Center "IMEDIS" in the period from 1996 to 2005.

The idea of "targeting" ("targeting") drugs used to treat a patient was born in the study of the potency of the patient's blood autonosode. It was found that when a certain potency was selected (non-whole, individual for each patient, made using electronic potentiation methods, lying between the 5th and 10th potencies according to Korsakov), the patient's blood autonosode appears to compensate for the markers from which the diagnosis of this patient was made , no matter how detailed and extensive this diagnosis is [6]. Targeted blood autonosode (NANCr) can be considered as the organizer of targeted quiet activation reactions (Garkavi L.Kh., Kvakina E.B., Ukolova M.A., 1990). The phenomenon of its effectiveness can be considered as evidence of the possibility of organizing a reaction of targeted calm activation, combiningin itself a nonspecific component of quiet activation and specific components,

directed (aimed) at solving a particular group of particular tasks of the organism's self-realization.

To objectify the effect of NANCr on biological objects, experimental studies were carried out, during which the effect of autologous drugs (NANCr-s) made from the blood of mice in the treatment of purulent infection was studied. In parallel, we conducted studies of the possibility of organizing a targeted calm activation reaction using a different group of drugs - namely, Systemic Spiritual Adaptants (SDA) [5].

Experimental technique and procedure

The study included 105 sexually mature white mice. To reproduce a purulent infection, a model of secondary immunodeficiency in mice was used using cyclophosphamide (CP) followed by the introduction of a culture of Staphylococcus aureus, proposed by N.G. Artsimovich et al. (1983). The model was used by the authors to correct disorders using newly synthesized drugs. When choosing the doses of CP and infectious agents, methods of their recalculation were used, taking into account the peculiarities of biotransformation of substances in various animals (V.G. Vladimirov, 1976). All animals were injected with 1 mg of CF intramuscularly, in a day the infectious agent was injected - $1x10_6$ microbial bodies of daily culture of Staphylococcus aureus intramuscularly. 3 hours after the introduction of the infective, blood was taken from the animals for research, as well as for the preparation of an autologous homeopathic preparation for the subsequent treatment of the animals.

The mice were divided into 4 groups:

1. Group A mice treated with NANCr manufactured

mechanically-electronically (20 mice). At the same time, in two mice from group A, NANCs made for them were mutually rearranged: one of these mice (say, A1 mice) was injected with NANCs made from blood taken from another mouse from the same group (say A2 mice), and the latter (mice A2) was injected with HANCr made from the blood of the first (mice A1). By virtue of the technology used by the authors, the potencies of these NANCs coincided.

2. Group B mice treated with NANCr manufactured electronically (20 mice). At the same time, in two mice from group B, the NANCs made for them were mutually rearranged: one of these mice (say, mice B1) was injected with NANCs made from the blood taken from another mouse from the same group (say, mice B1), and the last (B2 mice) was injected with NANCr made from the blood of the first (B1 mice). By virtue of the technology used by the authors, the potencies of these NANCs coincided.

3. Group C mice treated with inverse NANCr (INANCr) (20 mice); At the same time, in two mice from group C, the NANCs made for them were mutually rearranged: one of these mice (say, C1 mice) was injected with NANCs made from blood taken from another mouse from the same group (say C1 mice), and the last (C2 mice) were injected with HANCr made from the blood of the first (C1 mice). By virtue of the technology used by the authors, the potencies of these NANCs coincided.

4. Group D mice treated with Systemic Spiritual Adapters (SDA) (20 mice).

5. Control group E consisted of 25 mice.

The control was the evaluation of the survival rate of animals without treatment.

ART of mice was carried out on the equipment of the company "IMEDIS". The preparation of drugs for treatment was carried out according to the author's method.

In order to objectify the experiment, a group of its participants, who directly treated mice, injected mice with medicinal preparations, did not know anything about how they were made (in particular, they knew nothing about the "rearranged" NANKr-s). Taking into account the unconsciousness of the mice, the experiment was thus carried out in a double-blind manner.

The total number of leukocytes, relative and absolute numbers of lymphocytes were also studied in dynamics.

Results and discussion

Before the experiment, the number of leukocytes in mice averaged 8.2 ± 0.3 x 10^{9}/l, lymphocytes 61 ± 2%, absolute lymphocyte count - 5.2 ± 0.2 x 10^{9}/l.

3 hours after infection against the background of CF, these indicators were 3.7 ± 0.2 x 10^{9}/l; 42 ± 3% and 1.8 ± 0.2 x 10^{9}/l, respectively.

Comparative indicators of ART results before and after infection are presented in Table 1.

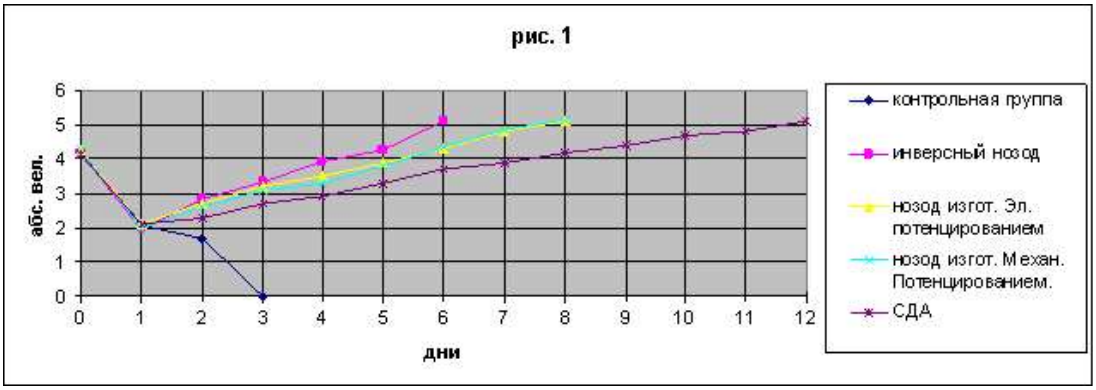
Table 1

No.	Biological indices	Adaptation reserves	Bactericidal	Golden test staphylococcus
one	6, 9	Medium 4th degree, good 3rd degree	6 degree bactericidal	0
2	4, 7, 9, 13, 16, 18, 20	Drying out 2nd degree, middle 4th degree	3 degree bactericidal ness	D5

1 - initial values of some parameters of ART in mice before infection; 2 - the same parameters of ART in mice after infection.

All medicinal preparations 1–4 groups of mice were injected at a dose of 0.2 ml / m on the first, third and sixth days of the experiment. The control group of mice was injected intramuscularly with a similar dose of water for injection. Hematological parameters taken at the same time changed as follows. The number of leukocytes in the control group by the 3rd day was 4.2 ± 0.2 x 10^{9}/l, lymphocytes 46 ± 3%, their absolute number 2.1 ± 0.1 x 10^{9}/l. On days 3-4, all mice of the control group died.

In groups 1–4 of mice (groups A, B, C, D), changes in the studied parameters were unidirectional and tended to increase. On average, in a day, the number of leukocytes was 5.7 ± 0.2 x 10nine/l, lymphocytes - 58 ± 2% and their absolute number - 3.4 ± 0.1 x 10nine/l; after three days - 7.4 ± 0.4 x 10nine/l; 57 ± 3% and 4.2 ± 0.2 x 10nine/l; after six days - 7.8 ± 0.2 x 10nine/l; 61 ± 2% and 5.1 ± 0.2 x 10nine/l, respectively. Thus, the introduction of an autologous drug and SDA in selected doses already on the third day from the beginning of the experiment contributed to a significant increase in the total number of leukocytes, the relative and absolute number of lymphocytes. The degree of their increase depended on the preparation method (Fig. 1).



Rice. one

The analysis of ART indicators showed a significant aggravation of the studied indicators in the control group of mice, while the estimated parameters in dynamics had a clear tendency towards normalization in all groups of mice A, B, C, D, in which were used autologous and SDA preparations.

table 2

No.	Biological indices	Adaptation reserves	Bactericidal	Golden test staphylococcus
one	1, 2, 5, 6, 8, 13, 16, 17, 20, 21	Drying 5 tbsp., Drying out 3 tbsp.	2nd degree	D5
2	6, 7, 10, 14	Drying out 1 tbsp., Average 4 tbsp.	4 degree	D30
3	8, 10, 12	Middle 4 tbsp., Good 2 tbsp.	6 degree	D100

1 - ART indicators in the control group of mice on the third day; 2 - ART indicators in experimental groups of mice on the third day; 3 - indicators of ART in experimental groups of mice on the sixth day.

The final survival rates by groups (on the 6-12th day of the experiment):

1. Group A: survived and fully recovered, based on the results of biochemical blood tests and results of external observation, 18 mice. Two mice A1 and A2 died, in which their NANCs were mutually rearranged. The recovery time of mice from group A was 8–12 days, depending on the variations in the dosage of the therapeutic agent used. drug.

2. Group B: survived and fully recovered, based on the results of biochemical blood tests and results of external observation, 18 mice. Two mice, B1 and B2, died, in which their NANCs were mutually rearranged. The recovery time of mice from group B was 8-12 days, depending on the variations in the dosage of the medicinal preparation used.

3. Group C: survived and fully recovered, based on the results of biochemical blood tests and results of external observation, 18 mice. Two mice C1 and C2 died, in which their NANCs were mutually rearranged. The recovery time of mice from group B was also 8–12 days, depending on the variations in the dosage of the therapeutic agent used.

preparation, however, as can be seen from Fig. 1, in mice of this group, the restoration of blood biochemical parameters occurred faster than in mice from groups A and B.

4. Group D: 16 mice survived and fully recovered.

5. Group E: all control mice died.

Conclusions:

1. Targeted blood autonosodes (NANCR), as well as Systemic Spiritual Adaptants (SDA) have a pronounced immunostimulating and adaptogenic effect.

2. It has no effect on the dynamics of recovery when using these drugs. the type of potentiation used in their manufacture is electronic, mechanical or electronic-mechanical.

2. Targeted blood autonosode (NANCr) is a personal drug: being made from the blood of one individual, it does not have a pronounced therapeutic effect on others.

3. Based on the results of control tests of blood biochemistry, it can be concluded that NANCr, as well as SDA are not drugs that have a bactericidal and bacteriostatic effect on the culture of Staphylococcus aureus. NANCr and SDA allow you to transfer the body into a state of directed quiet activation, which once again confirms: on the one hand, the theory of "stress-distress activation", and on the other, the direction of the adaptive reactions of the body put forward in [8]. Being in a state of directed calm activation, the body itself can cope with the factors that cause problems.

4. Correct dosage of NANCr and SDA is one of the important factors the success of their treatment. Changing the dose of the drug upward (in comparison with its optimal dose obtained using the author's technique) does not accelerate or enhance the healing process, and a decrease in the dose of the drug in comparison with the optimal one slows down or, if it is reduced more, stops the healing process.

5. The healing process is strongly influenced by the use of inverted NANKr-a (INANKr-a); the use of INANKr-a shortens the recovery time (at least, according to the biochemical blood test), which means that the transition to the state of directed calm activation occurs more efficiently.

6. Targeting, despite the subjectivity factor present in it - operator's intervention in the objective measurement process is an effective way of both diagnostics and therapy (see also [9–10]).

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