

Application of the ART + method for the diagnosis and treatment of diseases,
sexually transmitted

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In recent years, the number of patients seeking medical help for certain diseases of the genitourinary organs has increased. In our medical center, detailed diagnostics are carried out using IMEDIS equipment, which allows us to identify the causes of these disorders. Most often these are diseases

sexually transmitted diseases.

These include: chlamydia, ureaplasmosis, mycoplasmosis, candidiasis, trichomoniasis, gardnerellosis, herpes, papillomavirus, cytomegalovirus, HIV infection and etc.

Chlamydia - a disease caused by chlamydia (*Chlamydia trachomatis*). It is one of the most common sexually transmitted infections.

The causative agent of chlamydia is a bacterium of the genus chlamydia, there are 2 types of these bacteria, one of which mainly affects animals and birds and sometimes causes an infectious disease in humans - psittacosis. Another species is called *Chlamidia trachomatis*. There are 15 varieties of it, some of them cause trachoma, lymphogranulomatosis venereal disease. Two of the varieties can affect the human genitourinary system, causing urogenital chlamydia. The causative agents of the disease occupy an intermediate position between viruses and bacteria, therefore, diagnosis and treatment are usually much more difficult than with conventional bacterial infections.

Every year around 90 million people worldwide fall ill with chlamydia. In Russia, a third of women and about half of men of active sexual age (from 16 to 40 years old) suffer from the disease. In the United States, this infection is considered the most common sexually transmitted disease. The number of cases is about 4 million annually.

30-60% of women and up to 51% of men who suffer from non-gonococcal inflammatory diseases of the genitourinary organs are affected by this disease. Urogenital chlamydia is a venereal diseases, quite often there is a combination with other infections with trichomoniasis, gardnerellosis, ureaplasmosis.

As a rule, this disease often proceeds without any symptoms, it is difficult to diagnose it in the laboratory. All this complicates the treatment process, in the absence of which serious complications are possible.

Chlamydia relate To a separate group microorganisms eubacterial nature.

Pathogenic for human are the following views of these microorganisms: *C. pneumoniae*, *C. psittaci*, *C. trachomatis*. *C. trachomatis* and *C. pneumoniae*. *Chlamydia trachomatis* serotypes DK is the main causative agent of genitourinary chlamydia.

Chlamydiae are able to enter the host cell, multiply in it and

survive during the transition from the cell to the pericellular environment. Of particular importance are immune processes in the development of the disease caused by chlamydial infection. New inflammations enhance the host's immune response and pathological damage.

The complete development cycle is usually 48–72 hours. The duration depends on the host cell, strain and environmental conditions. Like other obligate intracellular parasites, it can alter the defense mechanisms of the host cell.

A persistent infection can be found in a person, in which the pathogen is in contact with the host cell for a long time, but does not grow, which indicates its existence in an altered state. Persistence does not always manifest itself clinically.

Persistence under the influence of external factors is a deviation from the developmental cycle characteristic of chlamydia. The deviation is expressed in a slowdown in the development cycle, which is caused by the difference in environmental conditions from the typical conditions that are observed during cell cultivation.

The constant presence of these microorganisms inside the host cell (persistence), when their growth is not detected, is considered the main factor in the pathogenesis of chlamydial infection.

Due to the nature of chlamydia, antibacterial drugs are often not as effective against them as against common bacteria, so the treatment of chlamydia is more difficult and time-consuming.

Mycoplasmosis - a sexually transmitted disease caused by mycoplasma.

Most often mycoplasmosis suffer women, leading hectic lifestyle who have suffered gynecological diseases and sexually transmitted infections.

There are about 14 types mycoplasma, which can exist in the human body.

Mycoplasma hominis, *Mycoplasma genitalium*, *Mycoplasma pneumoniae* - pathogenic for humans.

M. hominis, *M. genitalium* are pathogens infections the urogenital tract.

M. pneumoniae is the causative agent of a respiratory infection.

Being pathogenic for humans, mycoplasma infection can be the causative agent of the following diseases: pyelonephritis, urethritis, prostatitis, arthritis, sepsis, pathologies of pregnancy and fetus, postpartum endometritis.

Urogenital mycoplasmosis usually does not manifest itself in any way, and it can only be diagnosed in a laboratory.

Ureaplasmosis - a disease caused by ureaplasma (*Ureaplasma urealyticum*).

Very often, ureaplasmosis is considered together with mycoplasmosis. Both of these pathogens (ureaplasma and mycoplasma), occupying an intermediate position between viruses and bacteria, belong to intracellular microbes and are sexually transmitted.

Most often, ureaplasma is infected with young people who often change sexual partners, women who use oral contraception. As a rule, this disease affects women of childbearing age and pregnant women, in whom the excessive reproduction of microorganisms is stimulated by estrogens.

Often, ureaplasma infection occurs in people suffering from trichomoniasis, gonorrhoea, various gynecological diseases (in women), in children (in the respiratory tract) born to an infected mother. However, in clinically healthy individuals, *U. Urealyticum* can be detected in laboratory analysis.

Infection with ureaplasmosis (mycoplasmosis) occurs through sexual contact. The incubation period can last 2-4 weeks. The onset of the disease may pass completely unnoticed, and symptoms of urethritis may appear. In men, ureaplastic urethritis is often accompanied by balanoposthitis. The patient may complain of discharge from the urethra in the morning, a burning sensation when urinating, his body temperature is elevated and his general condition worsens.

The main methods for diagnosing ureaplasma infection are PCR methods and a bacteriological method for culture growth on nutrient media.

Treatment includes not only the use of antibacterial drugs, physiotherapy, instillations, but also lifestyle correction: diet, alcohol refusal, refusal to have sex.

Trichomoniasis (trichomoniasis) - disease of the genitourinary tract, the causative agent of which is *Trichomonas* (*Trichomonas vaginalis*).

Recently, trichomoniasis has become widespread. Most often women of childbearing age from 16 to 35 years old develop it. About 3 million women are infected each year in the United States alone. Also, a large percentage of patients are persons suffering from other sexually transmitted diseases and often changing sexual partners.

Penetration *trichomonas* occurs through the intercellular spaces or lymph gaps. In the urethra, they are fixed in the cells of the mucous membrane, causing inflammation. The hyaluronidase secreted by *Trichomonas* promotes tissue loosening, and, as a result, the penetration of metabolic products of the bacteria of the accompanying flora becomes more free.

Infection with trichomoniasis occurs mainly through sexual contact. It is almost impossible to get infected by everyday means (swimming in a pool or river, in the shower). However, in semen, urine and water, the pathogen remains viable for 24 hours.

In patients or those who have had this infection, serum and secretory antibodies are produced, which indicate the pathogen, but immunity does not develop against *Trichomonas* infection

In the human body, 3 types of *Trichomonas* can parasitize:

- in the genitourinary tract: *Trichomonas vaginalis*;
- the gastrointestinal tract affects *Trichomonas hominis*;
- *Trichomonas tenax* parasitizes in the oral cavity.

Gardnerellosis (bacterial vaginosis) - a disease caused by *Gardnerella vaginalis*, which is characterized by high the concentration of obligate anaerobic microorganisms, as well as a reduced content of lactobacilli in the human body.

Gardnerellosis is characterized by excessive multiplication of anaerobic and facultative bacteria, which changes the vaginal microflora. The disease refers to sexually transmitted diseases (sexually transmitted diseases). The disease affects about 20% of women of childbearing age. Often in women who are infected *gardnerella*, are found mycoplasma, peptococcus, peptostreptococcus and bacteroid.

Infection occurs more often in sexually active women who do not use barrier methods of contraception. Often, the disease is detected in patients suffering from chlamydial or gonorrhoeal cervicitis. Infection of a pregnant woman can lead to intrauterine infection of the fetus.

The incubation period is 3 to 10 days, after which symptoms of the disease appear. Mixed infections are common. Gardnerellosis can affect both women and men. Although the disease is less common in men, they can be carriers of the infection.

Gardnerellosis is a disease that requires treatment. If left unattended, serious complications can arise. Not only the vaginal microflora will change dramatically, but diseases of the pelvic organs may also occur (both in women and in men):

- inflammatory diseases of the pelvic organs;
- infertility;
- urethral syndrome;
- cervical intraepithelial neoplasia;
- bartholinitis and abscesses of the bartholin gland;
- chronic prostatitis;
- non-gonococcal urethritis;
- balanitis, balanoposthitis.

Gardnerella (*Gardnerella vaginalis*) - the causative agent of a bacterial infection - gardnerellosis, an inflammatory disease of the genitourinary tract.

Gardnerella was first described in the middle of the twentieth century. It has a structure typical of prokaryotes, but is slightly larger in size than a gonococcus. If you look at the materials for research taken from patients with gardnerellosis, you can see that the epithelial cells of the reproductive system are covered with cells of the pathogen. By causing inflammation of the urogenital tract, this infection can lead to serious consequences, such as infertility.

According to our observations, the cause of sluggish inflammatory processes of the urogenital organs is often the persistence of pathogens. Often it is not possible to identify pathogens in the laboratory, and in this case, invaluable help to the doctor is provided by the method of the vegetative resonance test "IMEDIS-TEST +" (ART +). It allows not only to identify pathogens, one or another degree of functional disorders in the affected organ, but also to select an adequate therapy given the level of damage (mesenchyme,

cytoplasm, external or internal DNA strand).

In our center, patients who have addressed this problem undergo electropunctural diagnostics using the Voll method and vegetative resonance test. The causes of the disease, the degree of damage, the degree of functional disorders are identified. The use of the ART + method allows you to identify hidden cases of the disease, individually select the tactics of therapy. During the diagnosis, causative agents of the disease are identified, morphological scales, adaptation reserves, the level of blockade of adaptive reserves, the level of bactericidal activity, and hormonal homeostasis disturbances at all four levels are assessed. Based on the results of the diagnostics, a plan of therapeutic measures is individually drawn up.

Our therapy program is aimed at a comprehensive approach to the treatment of chronic, complicated inflammatory processes of the genitourinary system. By curing individual foci of inflammation, we provide a cure for the whole organism, getting rid of the infection.

The first stage of treatment is aimed at eliminating infectious foci, restoring blood circulation and microcirculation in the affected organs and tissues, and improving the outflow of secretions from the affected organs. For this purpose, the following methods are successfully used:

- resonant frequency therapy with fixed frequencies to eliminate pathogens, improve blood circulation in the affected organs, restore their function;
- endogenous bioresonance therapy with the preparation of general and private bioresonance drugs;
- hirudotherapy;
- complex drainage preparations;
- massage.

We also take care of what will happen after the completion of all therapeutic and restorative procedures, we monitor the healing. Cure control is not just about making sure the infection is gone. This is a guarantee that the state of the genitourinary system has returned to normal, its function has restored to its original level.

Practical example

Patient M. applied to the CEM with complaints of aching periodic pains in the lower abdomen, in the perineum, cramps and discomfort during urination, mucous discharge from the urethra. These complaints bothered him for a year. I turned to urologists for help. Courses were held antibiotic therapy. The effect of the treatment was not permanent and incomplete. The patient was examined by the Voll method and vegetative resonance test. Revealed the presence of chronic cystitis, urethritis, chronic prostatitis associated with the presence of ureaplasma, chlamydia and Trichomonas. These nosodes were tested in high potencies, which was regarded as intracellular persistence of pathogens. In the process of diagnostics, it turned out that several years ago the patient was treated for urogenital chlamydia. In addition, the patient was diagnosed with intestinal dysbiosis, candidiasis. Bactericidal grade 3 (intestines, prostate, bladder) is associated with the presence of candida. Patient

underwent a course of therapy, including:

- resonant frequency therapy fixed frequencies
(antifungal, antibacterial, anti-inflammatory,
improving blood flow);
- endogenous BRT with BDS and OBR recording;
- hirudotherapy;
- drainage preparations of the ONOM firm, Bioscillators, which were
selected by testing;
- massage;
- eubiotics to restore the flora of the gastrointestinal tract.

The patient's state of health improved, these complaints disappeared. On the control diagnostics, carried out by the ART method, bactericidal activity is 6 tbsp., Which corresponds to the norm, high reserves of adaptation. High level of immunity.

After 4 months. the patient again turned to the center with complaints of recurrent discomfort during urination, sometimes small discharge from the urethra. These complaints arose after hypothermia.

During the examination by the ART method, no significant deviations were found. Bactericidal activity of the 6th degree, absence of inflammation. The nosodes of the causative agents of urogenital infections have not been tested. The patient was examined using the ART + method. As a result, at level 2 (cell cytoplasm), 3 tbsp was detected on the urethral mucosa. bactericidal activity associated with the presence of fungi of the genus *Candida parapsilosis*. Drainage preparations of deep action were selected, endogenous BRT was performed at the 2nd level with the recording of BPS. The frequency of drug intake was determined strictly by the testing method. After 2 weeks, these complaints disappeared. Bactericidal grade 6.

Currently, the patient is feeling well, no complaints.

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