Bioresonance therapy in hepatology O.V. Moskaleva, M. Yu. Gotovsky (Moscow, Russia)

Acute hepatitis are infectious, toxic, allergic and end with recovery or transition to a chronic form or cirrhosis.

Chronic hepatitis is a polyetiological inflammatory process without disturbing the lobular and vascular architectonics of the liver. It is manifested by asthenic-dyspeptic syndrome, hepatomegaly and liver dysfunction. These include chronic alcoholic hepatitis, drug, toxic, cholangitis, and chronic reactive hepatitis or companion hepatitis.

The share of acute hepatitis in Moscow per 100 thousand population is:

	2004 r.	2005 year
Hepatitis A	13.07%	15.92%
Hepatitis B	86%	35.59%
Hepatitis C	2.68%	1.86%
Chronic hepatitis B	3.76%	4.73%
Chronic hepatitis C	17.28%	14.34%
Virus carriers B	30.73%	32.26%
Virus carriers C	92.57%	79.87%

Analyzing the work done, it can be noted in the treated patients, the pathology of the "right heart" is determined in 90% of cases. It should be borne in mind that impaired liver function can be noted already in childhood due to the fact that the percentage of natural feeding of children falls catastrophically, and artificial feeding leads to hepatomegaly and subsequently to dysfunction of the pancreas, since cow milk is difficult to digest.

Nosology	Number of cases	Improvement	Number of cured
Hepatitis:			
A sharp	3	3	3
IN	23	23	21
WITH	3	3	one
Hepatitis:			
toxic	7	five	4
chronic	55	fifty	fifteen
alcoholic	nine	4	2
drug	12	10	five
Cirrhosis	6	five	0
Total:	118	103	51

Only thanks to treatment at the APK "IMEDIS-Expert" number of cured patients accounted for 43% of cases. The rest of the patients are continuing therapy or interrupted treatment.

From the point of view of traditional Chinese medicine, acute infectious hepatitis corresponds to:

- 1) syndrome of heat and moisture of the liver and gallbladder,
- 2) syndrome of moisture and heat of the spleen and stomach,
- 3) syndrome of imbalance in the relationship between the liver and stomach.

Therefore, in the treatment of acute hepatitis, the heat was cooled and the moisture in the liver, gallbladder, spleen and stomach was eliminated. As well as unblocking the qi of the liver, strengthening the spleen and stomach. This was achieved by selecting a diet, removing infectious

burdens, the use of Resoplex preparations from the selector and homeopathic preparations.

Chronic hepatitis is characterized by:

- 1) imbalance between the liver and stomach,
- 2) qi blockage and blood stasis syndrome,
- 3) syndrome of emptiness of qi and yin,
- 4) the syndrome of the emptiness of the energy of the liver and spleen.

Therefore, the tactics of treating chronic hepatitis include harmonizing the liver-stomach relationship, unblocking qi and revitalizing the blood, strengthening qi and nourishing yin, toning the energy of the liver and spleen.

For cirrhosis, from a traditional Chinese medicine perspective:

- in the first stage of the development of the disease, with an increase in the liver the syndrome of emptiness of the energy of the liver and kidneys, blood stagnation syndrome,
- in the second stage of the development of the disease, with a decrease in the size of the liver and an increase in its density the liver energy fullness syndrome.

Therefore, when treating cirrhosis, taking into account the stage of development of the disease, it is necessary to tone up the energy of the liver, kidneys, blood flow (in the first stage) or dissipate the fullness of the liver's energy and eliminate blood stasis), eliminate edema (in the second stage.

Example 1

Patient, 63 years old. He complained of weakness, pain in the right hypochondrium, dyspeptic disorders, itching of the skin, weight loss. In a biochemical blood test: bilirubin

- 62.20; cholesterol - 7.2; transaminases AST - 172.8; ALT - 366.75; alkaline phosphatase - 254; creatinine - 105. Ultrasound of the liver: liver of heterogeneous structure. The right lobe extends by 1.8 cm from under the mid-clavicular line, the length of the left lobe is increased by 1.1 cm. In the parenchyma of the liver, many hyperechoic areas of irregular shape are determined. Gallbladder, spleen, pancreas without pathology. Conclusion: diffuse liver changes of unclear etiology. CT of the liver: liver of normal shape and location. The structure is heterogeneous due to cysts, 0.5 cm in diameter in the 8th segment; 0.8 cm - at the border of the 8th and 1st segments; 0.4 - in the 7th segment; 0.3 - in the 3rd segment. The density of the rest of the parenchyma is not changed. Inside and extrahepatic ducts are not dilated. Conclusion CT: signs of liver cysts. The metastatic nature of the changes is unlikely.

When examining by the ART method: BI - 9/12/14/15/17/19, FI - 19, acute inflammation, catabolism of the 3 stage of activity, high cholesterol content. Discovered amoebiasis.

Liver cysts were regarded as abscesses, and further therapy was aimed at relieving inflammation and opening abscesses with Hepar Sulfur LM potency and Vipera mixture. A biochemical blood test was repeated 10 days later. The results of the repeated analysis: bilirubin - 18.14; cholesterol - 6.2; transaminases AST - 43.04; ALT - 26.68. An ultrasound scan was repeated 30 days after the start of treatment. The result of the second ultrasound: the patient is normal echogenicity, not increased, cysts were not found.

Example 2

Sick. 53 of the liver. Has addressed after carried over thrombosis spleen, diagnosed cirrhosis of the liver. The question was about removing the spleen. Ultrasound results: the liver is enlarged, the echogenicity is normal. The portal vein is not dilated; dilated port-portal anastomoses are determined along the periphery. The spleen is enlarged 230–70 mm. Conclusion: the state after thrombophlebitis of the portal, splenic and superior debris. Ven. CT: the liver is non-uniformly enlarged, the portal vein is enlarged to 14 mm, the spleen is significantly enlarged 124–96–230 mm. Conclusion: hepatomegaly. CT scan signs of cirrhotic changes in the liver and portal hypertension. Biochemical blood test is normal.

The patient received courses of bioresonance therapy once a month, homeopathic treatment, followed a strict diet. A year later, on ultrasound: the list is uneven, of normal size, echogenicity is reduced, cavernous transformation of the portal vein, spleen 175x58mm. Conclusion: the state after the postponed portal vein thrombosis, its cavernous transformation, diffuse liver changes, cirrhosis.

Example 3

Boy, 8 years old. Suffers from chronic nasal polyposis. On ultrasound: the liver protrudes 4.5 cm from under the edge of the costal arch. The angles are acute, the height of the right lobe is 12.0 cm, the height of the left lobe is 6.7

see architectonics is not broken, echogenicity is not changed. Conclusion: liver enlargement, echo signs of dysmetabolic changes.

After the course of bioresonance therapy, after 3 months, the polyps resolved, on ultrasound control - the liver was not enlarged, normal echogenicity.

It should be noted that homeopathic cure of the liver will result in pulmonary symptoms, indicating "the death of the liver disease." Thus, in order to preserve youth, memory, freshness, fertility, it is recommended to check and clean our "right heart" using the equipment of the IMEDIS Center.

In conclusion, I would like to say a huge thank you to the entire team of the IMEDIS Center on behalf of the many patients.

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