IMEDIS TEST and clinical thinking A.N. Mathison (Firm "MATISONS" Ltd, Riga, Latvia)

It is not the first year, engaged in bioresonance therapy, and carrying out diagnostics by various electropunctural methods, as they develop, starting with diagnostics by the method of R. Voll, segmental load, ART, ART + and using chronobiological programs, one can often find that the research methods we use of the patient often do not coincide with the diagnoses established in other medical institutions using classical examination methods?

Why, sometimes, such terrible diseases as Cancer, which is established by oncologists, cannot be detected with our devices? Why is there so often a mismatch in diagnoses? What is the reason?

Using in recent years almost all of the above methods of electropunctural diagnostics, and especially with an in-depth examination with the help of ART +, I have been dissatisfied with my work for a long time. The abundance of those tests that the APK "IMEDIS-EXPET" has in itself can sometimes be confusing until you understand what needs to be done correctly with this and how to correctly interpret the results obtained.

The equipment at our disposal allows us to identify the core of pathology and treat, but not only the symptoms, which is what classical medicine is mainly engaged in, but to treat the patient at the level of the nucleus of pathology, including the chromosomal level, but there is one "but" and it must be correctly identified.

The great S. Hahnemann taught that before starting to treat a patient, one must understand what needs to be treated in a disease. Therefore, in fact, our reception of a patient consists of: 1) what he has from pathology, i.e. with the accuracy of the diagnosis, 2) where is the root cause of what causes his discomfort, 3) how to compensate for these previous two moments and achieve a real cure for the patient.

The most important thing is to find the weakest, or rather, the narrowest link, in which there is a violation of the circulation of energy, and in this we are helped by the pointer to the primary affected organ. But in the same index, there may be the beginning of our incorrect clinical thinking, tk. the standard set of tests presented in the ART "IMEDIS-TEST" has a potency of D4. We must not forget that in the body it manifests itself as an inflammation or a symptom, only a strong organ, which is determined by the potencies D12 – D3, which takes on a healing function also for the organ that is in a degenerative or inoperative state, and this can be caused as deep degeneration, manifested with the D3 potency, and more moderate, in the D5 potency. The potencies of organopreparations D6-D8 reflect the normal functioning of the organ, and the D10 potency indicates functional tension in the organ. When measuring, one can also meet with testing of potencies, both low and high in the same organ, and this indicates that in the same organ, some of the healthy cells are trying to compensate for those caused by degenerative ones. In this case, pathogenic factors such as viruses, bacteria or other unfavorable loads are tested only through low potencies.

The vegetative resonance test causes one or another resonance in organs or tissues, which is selective, and those changes that we fix with a probe and a passive electrode are purely specific. At the same time, one should not forget that ART is an exercise test and when the arrow deviates from the initial high value downward, it serves as an indicator of what kind of load the body cannot withstand. And for this reason, we often do not find a really affected organ, since its state of degeneration can resonate with the frequencies D3 and D5, and not work with the frequency of the D4 potency, presented in the standard set of organopreparations.

This seemingly insoluble problem can be correctly solved by using a magnetic inductor in the testing circuit connected either to the medication testing socket or, even better, through the system of devices "IMEDIS-BRT-PC" and "MINI-EXPERT-D" (ART + method). Then with the help of the device for magnetic therapy "loop" we look for the pathological area and by reducing the size of the inductor we find a really pathological place, and even then, by removing the pathological information from this place, we select the drug selector "IMEDIS" from the section "organic preparations", choose the appropriate amount different potencies of organopreparations, corresponding to the topographic anatomy and see what potencies of organopreparations will be

compensated for the results obtained using a magnetic inductor. In the future, these organoprocessors found by us in this way in the appropriate potency will serve as markers for us to determine the reason that caused these changes. Trust and verify that the data obtained in this way will more closely correspond to the clinical picture of the patient and will correspond to the data obtained by other clinical methods. With this clinical thinking and approach, the information you receive will provide more reliable information about the cause of this or that pathology in the body, which, in turn, will improve the quality of our patient care.

Everything is moving forward and everything is developing. Daily practice and communication with patients, observation of them a deeper and more detailed study and understanding of the method suggests that the ART method "IMEDIS-TEST" would be more reliable if changes were made in it, allowing immediately, without the help of a magnetic inductor to determine the most degenerative organs or systems, when it would be possible to immediately test organopreparations in potencies from D3 to D5 and from D12 to D30, corresponding to degenerative or inflammatory processes in the body.

You can also go to a slightly different algorithm and immediately collect for testing from the drug selector, available there organopreparations in various potencies according to the complaints submitted. Then look at which organ is tested in the lowest potency, whether it is primarily affected, or with which organs or systems it can be connected according to the U-XIN system, and through which systems to achieve the normalization of the patient's health.

It is important to really act on the most pathogenic link or organ, and it may be different from what we find with the help of a standard search through the potency of the organopreparation in the D4 potency. As the resonating frequency is purely selective and may not work with a different quality of the pathological process in the body, then indeed the pathological process itself may remain beyond our detection. Or if we follow the path of detecting a pathogenic agent, we may not find the place of its greatest destructive action.

All this allows you to start thinking differently and build the treatment process, as well as monitor the quality of our treatment. Without transferring the process to another system or to another level of the pathological process, taking into account the teachings of Reckeweg, to see whether we have a positive or negative vicarization, which is especially convenient with the help of the ART + method.

And the most important thing - remember that the device serves you, not you, the device, and it has enormous possibilities, and with its correct understanding and use, your possibilities in therapy will increase many times over.