Direct and indirect connections in the method of vegetative resonance test

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The use of the method of electropunctural vegetative resonance test (ART) presupposes an algorithmized approach and the development of clinical thinking of users of medical and diagnostic equipment manufactured by IMEDIS.

Application during testing of the 5 basic rules of the vegetative resonance test:

- 1) filtration;
- 2) from general to specific
- 3) generalization synergy;
- 4) weighing;
- 5) consistency.

allows you to build a logical pathogenetic chain, described in different versions, by different authors (H. Schimmel, Yu.V. Gotovsky, A.A. Ovsepyan). At the same time, taking into account the thousand-year experience of traditional oriental medicine, which has been repeatedly confirmed in practice and is still being applied at the level of Chen-Chiu therapy, it shows that even ancient doctors used the concept of Wu-Xing as an integral interconnection of organs and systems of a direct and indirect nature (father-son, etc.). The synthesis of the achievements of Eastern and Western medicine, the introduction of the concept of trigger systems and mechanisms that are triggers for ultra-weak physical and chemical interactions with the body, showed the urgent need to assess the mediated interaction mechanisms for both diagnosis and treatment.

Using the example of a pathology such as diabetes, we can demonstrate the role of mediated factors as follows:

1. Testing of diabetes by the ART method is carried out through test filters (filtering method). Pancreatic tail D32 (prediabetes type 1) and / or blood glucose lowering drug GAD 65 (prediabetes type 2). These 2 test filters can be tested for type 2 diabetes, but only GAD 65 can be tested, which is the actual indication of the need for antihyperglycemic drugs. In both cases, the use of a test filter insulin shows in a number of cases its ineffectiveness, and when tested through the test indicator "lack of hormones" - "lack of hormones" + insulin does not return the initial high measurement level - this is the absence of a lack or even excess of insulin, i.e. here we can talk about hyperinsulinemia against the background of dysfunction of the pancreas and laboratory-clinically high blood glucose levels. Using the next principle - weighing - we can compare the insulin value for a given patient with other hormones and neurotransmitters. It is determined that the main insulin inhibitor antagonist is adrenaline (insulin + adrenaline), i.e. the connection between dysfunction of the pancreas and the level of adrenaline in the blood is mediated through insulin. Accordingly, an algorithm is built to optimize the level of blood adrenaline, which allows re-inhibiting

activate insulin and normalize blood glucose levels. Unfortunately, it should be noted that against the background of the wide development and introduction of methods for controlling blood sugar among the population, methods for controlling blood insulin are rare even in highly equipped clinics. The recent increase in diabetes, according to our observations, is mainly caused by an increase in the level of adrenaline, as a product of modern stressful situations. Thus, the development of an algorithm for understanding the doctor in search of the main biochemical trigger as the main pathological element of the pathogenetic chain can serve both to increase the effectiveness of therapeutic measures and, apparently, in the future to change the entire international classification of diseases, which will be based on the principles of the main trigger substances or trigger signals diseases. This is confirmed by the latest achievements of leading medical centers, where, for example, causal trigger effects were established in the occurrence of various degenerative diseases of the nervous system using the example of biogenic iron, the occurrence of obesity - leptin, etc. [12].

Literature

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