

Acute Myeloid Leukemia (Case from Practice)

O.A. Melnikov
(Sochi, Russia)

Patient, born 1950 In the winter of 2002, at the age of 51, profuse bleeding from the genital tract (self-medication) began. Then there was a cough and a high fever. The patient was admitted to the hospital on February 6, 2002 with a diagnosis of pneumonia, was carried out antibiotic therapy. On February 15, 2002, she was transferred from the therapeutic department to the oncological dispensary in the city of Sochi in the hematology department. Based on the results of a puncture of the bone marrow of the sternum, the diagnosis was made: Acute myeloid leukemia. The condition is serious, there is a hemorrhagic rash on the body (bruises) on the body, pallor of the skin and mucous membranes, lethargy, fever, appetite is sharply reduced. general weakness and

Treatment: bed rest. From 15.02. 2002 of the year appointed intravenous polychemotherapy: cytosar, rubomycin, c preliminary elimination of side effects on the organs and systems of cytosar and rubomycin by taking a drug made in the course of bioresonance therapy according to 4 strategies on the BRT apparatus along all meridians except for the lymphatic. The patient took the drugs immediately before each intravenous injection of cytosar and rubomycin. Only 5 courses, after 3 courses of PCT, remission came. 18.03, 22.03, 26.03, 28.03. 2002 blood transfusion of donor blood. A single intravenous infusion of plasma.

Symptomatic allopathic therapy: glucose, vitamins, cardiovascular, antiemetic, antipyretic.

Juice therapy (freshly squeezed): apple, carrot, parsley, nettle, black radish.

Tea collection (only warm): chamomile, St. John's wort, Ivan tea, yarrow, rose hips. Herbs are collected by hand, dried, poured with boiling water in a thermos.

Biologically active food supplements of the Vision company: (self-medication) Detox. Antiox. Life Pak is an adult.

Auto trainings (first sessions under the guidance of a homeopathic doctor Melnikov O.A.)

Psychological support from doctors, mothers, children, brother, husband, friends.

Homeopathic remedies used: 02/21/2002 Nux vomica (nux vomica). 03/14/2002 Phosphor (phosphorus) and the last in the course of treatment was prescribed Sulfur (sulfur) - during the appearance of an abscess on the lower eyelid of the eye. Further homeopathic prescriptions were not required. The hair on the head has grown, the general health and blood counts in the general blood test, as well as in the analyzes of the second sternal puncture performed on 09.04.2002, began to improve.

2002 - 2003 - the second group of disability. Monthly control of a general blood test in an oncological dispensary.

2003 - 2004 - the second group of disability. Monthly control of a general blood test in an oncological dispensary.

2004 - 2005 - the third group of disability. Monthly control

a general blood test in an oncological dispensary.

Concomitant diagnoses: Spinal osteochondrosis. Retinal angiopathy. No hemorrhages on the skin from the end of February 2002 to the present time (March 2006). Medical supervision continues.

Rehabilitation measures were not carried out by the medical and social bureau.

In 2005, he independently finds and finishes courses of a cosmetologist and makeup artist, works, is independent around the house and on the street, helps in raising grandchildren (there are three of them), a wide circle of communication with people.

The frequency, dose, drugs, number of sessions, I do not indicate for those reasons that patients do not harm themselves by self-medication, since with a similar diagnosis, the names of drugs, dosage, frequency, the sequence of drugs and other therapeutic measures may differ from the given clinical case - all measures must be agreed by doctors and other specialists, who must come to an agreement among themselves and will help patients in recovery.

Conclusion: the patient's personal desire for life, an individual comprehensive approach to treatment restored and improved her life.

Statistical processing of the results of therapy for cancer patients was carried out and regularities were revealed that would allow identifying a risk group for oncology at the preclinical stage.

O.A. Melnikov Acute myeloblastic leukemia (Case from practice) // XII