

Application of BRT along the posterior median and anterior median meridians in clinical practice

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The theory of miraculous meridians is part of the general traditional theory of meridians. The essence of the theory of miraculous meridians is that, in addition to the constant fourteen meridians, ancient Eastern medicine defines eight more non-permanent meridians, which appear (are formed) only in the presence of a chronic pathological process in the body and in case of circulatory disorders in several permanent meridians at once. These impermanent meridians are called extraordinary (meridians, vessels, channels), vessels of May; the most common is their name "miraculous meridians" (FM).

The eight miraculous meridians include the posterior median meridian (du may) and the anterior median meridian (ren may), which are, as it were, intermediate between permanent and non-permanent meridians (they become "miraculous" when a key point is attached). Du Mai and Ren Mai, like the permanent meridians, have their own constant points of influence, and energy flows through them constantly (from bottom to top). The difference from the permanent meridians is that Du Mai and Ren Mai are not included in the sequential circulation of energy and do not have standard (antique) points characteristic of the 12 permanent meridians. Du Mai and Ren Mai, like the other six wonderful meridians, have the so-called command (main) points, or key points, when turned on, a functional biological circuit is formed.

The wonderful meridians are characterized by a particularly powerful "diverting" force (M. Rubin); they seem to regulate the pathology of chi and blood in the 12 main meridians. Like the meridians of the three heaters and the pericardium, the miraculous meridians are not associated with organs. Zhang and Ugh and are "functional circles", however, as mentioned above, their functions are manifested when pathology of a more severe degree occurs.

Wonderful meridian I du-may (controlling all Yang meridians, the "sea" of all Yang meridians). The meridian has 28 points of influence of its own. Its trajectory begins at the VG1 point of the chang-qiang near the anus, passes along the vertebrae along the back, neck and through the scalp, forehead, nasal back and ends at the gum of the upper jaw at the VG28 Yin-jiao point.

According to Ney King, du Mai takes the energy of individual Yang meridians as established at certain points: T 13 - "Tae Yang" energy; T 14 - the energy of all Yang meridians; T 15 - energy "Yang oe"; T 16 - "tae Yang" and "Yang oe"; T 17 - "Tae Young"; T 20 - all Yang meridians; T 24 - "Tae Young"; T 26 - "Young Min"; T 28 - Young Ming. In du Mai, not only hereditary energy flows, but also the nourishing energy and protective energy of the three Yang meridians.

The connection between du Mai and Zhen Mai does not lead to the circulation of Yin and Yang as it does through the Yin Yang connection between the Yin and Yang meridians in the arms and legs. Du Mai is in continuous connection with the 3 Yang of the body, so that the 3 Yangs form a single harmonious Yang, Yang of the body. Du Mai and Zhen Mai are, like other miraculous vessels, additional meridians, whose task is to strengthen the Yin and Yang system of the 12 main meridians.

The trajectory of the miraculous Ren-Mai meridian (the meridian of conception, the "sea" of all Inmeridians) is located along the median line from the Hui-Yin point VC1 (common lo-point) and ends on the chin at the point VC 24 cheng-jian; has its own constants 24 points

According to Nei King, Zhen May receives at the point VC 2 the energy of the liver, VC 2 and 3 the energy of 3 Yin meridians, VC 7 the energy of the kidneys and zhong May, VC 10 the energy of the spleen, VC 17 the energy of all secondary meridians VC 22 and 23 the energy of Yin Wei May.

So, in the wives of May, not only the hereditary energy of the kidneys flows, but also the nutritional and protective energy. It is the area of concentration of the energy of the three Yin legs. This area of concentration extends into 3 points (VC 12 - the spleen energy concentration point; VC 18 - the liver energy concentration point; VC 23 - the kidney energy concentration point), which are called Ney King "nodal points". They are the junction of the 3 Yin of the leg and the 3 Yin of the arm.

Zhen Mai is in constant connection with the 3 Yin of the body, and they form a single, harmonious Yin, Yin of the body.

In medical practice, we use miraculous channels in case of ineffectiveness or low efficiency of acupuncture of points of ordinary meridians. Since hereditary energy mainly circulates in the miraculous channels, their use for acupuncture is not always justified. The above information testifies to the important role of the anterior median and posterior median meridians in maintaining the body's energy homeostasis and makes it obvious the importance of finding alternative ways of regulating the energy of these meridians.

When the first works of the staff of the IMEDIS Center on chakras appeared, we paid attention to their topography: Muladhara - 1st point of the back-middle meridian; Svadhisthana - 4 point of the anterior median meridian; Manipura - 10, 12 and 13 points of the anterior median meridian. Anahata - 17th point of the front middle meridian; Vishuddha - between VC points 22 and 23; Ajna is 0.5 cun above the center of the forehead (upper Dan-Tien); Sahasrara is the 20th point of the posterior median meridian. In addition, they are located, as it were, on the "shu channels", which unite the antero-middle and back-middle meridians. It is possible that chakras are actually zones of concentration of state energy, which can be controlled through BAP (biologically active points) of the hands or auricle. They are closely related to the Miraculous vessels du May and Zhen May. Most likely, the Miracle channels and chakras are a single system, which are called differently in different sources.

The aim of this study was to study the possibility of influencing the "chakras" using bioresonance therapy (BRT) along the anterior median and posterior median meridians.

The study involved 39 patients with various problems: with atopic dermatitis 3 - human, bronchial asthma - 3, hypertension - 4, coronary heart disease - 3, dysmenorrhea - 4, thrombophlebitis of the veins of the right lower extremity - 1, endometrial hyperplasia - 1, migraine - 2, vegetative-vascular dystonia - 2, retinal detachment - 1, common osteochondrosis - 3, pancreatitis - 1, gastroduodenitis - 2, menopause - 2, lymphoma - 1, alcoholism - 1, mastocytosis - 1, Meniere's syndrome - 1, Uterine myoma - 1, malignant disease of the uterus - 1, bronchitis - 1. All patients at each visit were measured by Voll of the chakra points of the palms on both sides.

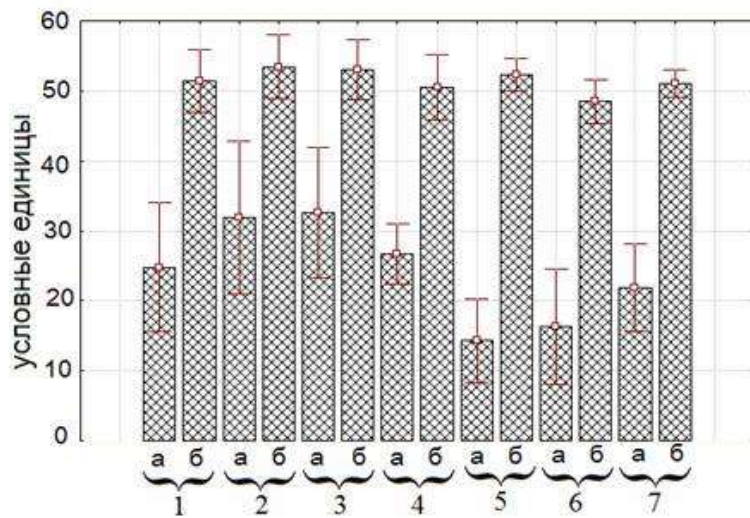
table

Dynamics of indicators measured at the chakra points of the palmar surface right hand before and after the first therapy session (M ± δ, p <0.001)

Chakras	before the therapy session	after therapy session
Muladhara	24.8 ± 12.9	51.4 ± 6.2
Svadhisthana	31.9 ± 15.4	53.4 ± 6.4
Manipura	32.6 ± 13.0	53.0 ± 6.0
Anahata	26.7 ± 6.0	50.5 ± 6.5
Vishuddha	14.3 ± 8.3	52.3 ± 3.5
Ajna	16.3 ± 11.6	48.5 ± 4.4
Sahasrara	21.9 ± 8.7	51.0 ± 2.7

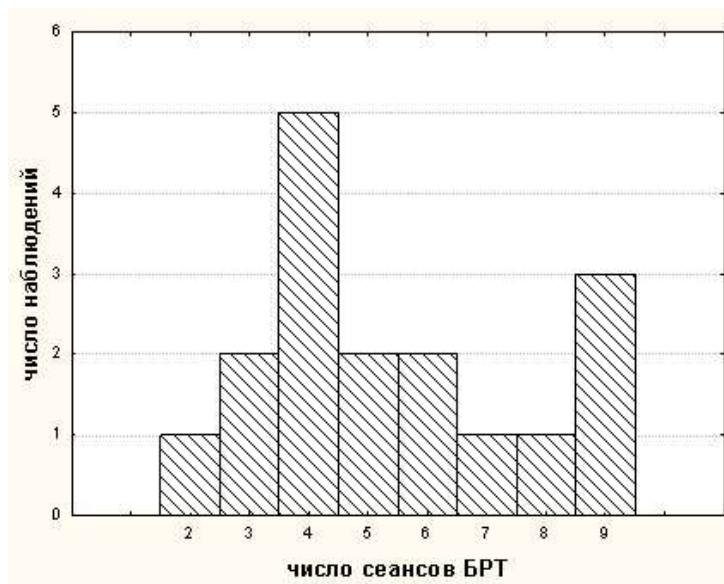
The table shows the results of measurements of the palmar surface of the right hand. The direction of changes obtained when measuring points on the dorsal surface of the hand and auricle, as well as the palm of the hand, were similar, so we limited ourselves to demonstrating the indicators obtained when measuring points on the palmar surface of the right hand. In almost all of the subjects (the exception was only 1 person who had previously been treated for ishalgia and was practically healthy at the time of the study), before BRT, values below 50 cu were determined for certain measured BAP. e. On average, the lowest value was determined at the point reflecting the state of Vishuddhi, which was 14.3 ± 8.3, the highest - at the point responsible for Manipura - 32.6 ± 13.0 (table).

If the value of the measured values at any of these 7 points is below 50 cu. carried out treatment sessions until reaching an indicator of 50 and above. The treatment was carried out using a BRT device along the posterior and anterior median meridians. At the beginning of treatment, the point with the lowest score was determined. If these measurements referred to the first (mooladhara) or last (sahasrara) chakra, the treatment was carried out using an inductor located in the perineum (on the first point of the posterior median meridian) or on the crown of the head (20 point in the posterior median meridian). If the low measured values were related to other chakras, treatment was carried out using frontal electrodes located on the corresponding areas of the back and front of the body. The treatment was carried out in alternation mode, alternation intervals - 1 second, the ratio of therapy and pause corresponded to the golden ratio. If during 20 minutes of therapy the values of the measured parameters (PI) remained low, in parallel, mandalotherapy of the corresponding chakras was performed. As a rule, the recovery of the worst indicators was accompanied by the normalization of all the others. This tendency was especially manifested in the treatment with the inducer. Almost after each session, it was possible to achieve the values of the measured indicators of 50 and more conventional units. In fig. 1 shows the indicators before and after the first treatment session. As can be seen from the figure, after the first session all indicators reached almost 50 USD. (fig. 1), the recovery of the worst indicators was accompanied by the normalization of all the others. This tendency was especially manifested in the treatment with the inducer. Almost after each session, it was possible to achieve the values of the measured indicators of 50 and more conventional units. In fig. 1 shows the indicators before and after the first treatment session. As can be seen from the figure, after the first session all indicators reached almost 50 USD. (fig. 1), the recovery of the worst indicators was accompanied by the normalization of all the others. This tendency was especially manifested in the treatment with the inducer. Almost after each session, it was possible to achieve the values of the measured indicators of 50 and more conventional units. In fig. 1 shows the indicators before and after the first treatment session. As can be seen from the figure, after the first session all indicators reached almost 50 USD. (fig. 1).



Rice. one. Dynamics of BAP indices on the palmar surface of the right hand before and after the first BRT session: a - before the session, b - after, 1 - muladhara, 2 - svadhisthana, 3 - manipura, 4 - anahata, 5 - vishudha, 6 - ajna, 7 - sahasrara.

Since the measurements were carried out according to Voll on the hardware-software complex "IMEDISEXPERT", the value of 50 conventional units was considered normal. On repeat visits, measurements were repeated and BRT was repeated as necessary. In fig. 2 shows the number of treatment sessions required to achieve stable values (50–70 conventional units) on all measured BAP of the palmar surface of the hand in 17 patients. As can be seen from the figure, in one case a stable result was achieved after the second session of therapy, and the maximum number of sessions was 9. It is noteworthy that if at all measured points it was possible to achieve PI greater than or equal to 50 cu, for a long observation period they remained close to 50 (the maximum observation period is 4 months).



Rice. 2. Distribution of the number of BRT sessions required to normalize indicators

Thus, the studies carried out show that the new development of the company "IMEDIS" allows you to normalize the measuring parameters of the chakra points of the palmar surface of the hands. For this, the above technique can be successfully used. The clinical significance of the indicators of chakra points at this stage cannot be fully assessed, however, the results of early studies by Yu.V. Gotovsky and his colleagues allow us to hope that the restoration of the energy of the chakras, and, according to our assumption, the energy of the miraculous meridians can improve the clinical results of the work of doctors using this device.

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