Fixed frequency induction therapy for emergency states G.I. Zotova (Moscow Homeopathic Center, Moscow, Russia)

When an acute pathological process develops too rapidly, the doctor needs to quickly relieve the patient's life-threatening symptoms in order to help the body cope with the problem or gain time for transportation and preparation for specialized resuscitation measures.

In this situation, homeopathic remedies can be effective (if they are correctly selected and the patient's vitality reserve allows them to be used), as well as Su-Jok, reflexology and much more.

Fixed-frequency induction therapy has proven effective in the following emergencies. The frequencies were selected by analogy with the allopathic plan of resuscitation measures, taking into account the etiology and pathogenesis. It should be noted that induction therapy is very effective when it hits the core of the disease.

This paper will describe 4 cases from practice that required emergency treatment.

1. Prolonged attack of suffocation with the transition to stage 1 status asthmaticus.

2. Profuse climacteric bleeding.

3. Heavy post-traumatic bleeding in a dog.

4. Poisoning by an unknown chemical that is part of the composition of the car care product.

For the treatment of these conditions, the equipment of the Center for Intelligent Medical Systems "IMEDIS" was used:

1. Apparatus for electropunctural diagnostics and electro-, magnetic and light therapy "MINI-EXPERT-DT".

2. Medication selector "IMEDIS-BRT-PC"

3. Device for carrying out induction therapy - inductor "belt".

Homeopathic preparations were fed to the "belt" inductor from a drug selector connected to the "MINI-EXPERT-DT" through the MT socket (drug testing), simultaneously with the frequencies of induction therapy.

Before proceeding with the analysis of the 1st case, let us briefly describe the status asthmaticus (AS). AS occurs as a result of inadequate drug therapy of bronchial asthma against the background of aggravating factors: infections, nervous stress, abrupt withdrawal of hormones, overdose of bronchodilators (sympathomimetics and xanthines), etc. As a result, an attack of suffocation is delayed, respiratory

failure and acidosis. The patient in a panic increases the intake of bronchodilators, however, in an acidic environment, bronchodilators (sympathomimetics and xanthines) lose their effectiveness, and under-oxidized products of their decay cause edema of the bronchial mucosa, until their lumen is completely closed (syndrome "Ricochet"). As a result, areas of the "silent lung" appear. We see pronounced shortness of breath, and on auscultation, the areas of the "mute lung" alternate with areas of weakened breathing, hard breathing comes from large and medium bronchi, rales are scanty, single. The prevalence of certain symptoms depends on the stage and severity of AS. This condition from the very beginning requires serious resuscitation measures, including the transfusion of a large amount of fluids (since forced breathing dehydrates the lungs), removal of acidosis by administering 200 ml, 4% soda solution intravenously drip (subsequently only under the control of electrolytes), 1.0 ml of 1% nitroglycerin solution (venodilator) to reduce blood flow to the heart and unload the pulmonary circulation, heparin, large doses of prednisolone, and in severe cases, bronchodilator, artificial ventilation of the lungs. 4 hours after the last administration of a bronchodilator (not earlier, because it is possible to cause a "ricochet" syndrome), you can repeat the administration of aminophylline, subject to intensive detoxification therapy.

Case number 1

01/10/05, patient S., 35 years old. Suffers from the age of 7 mixed form of bronchial asthma. After the

There has been no homeopathic treatment for asthma attacks for several years. 01/09/05 she suffered a nervous stress, which in the evening provoked an attack of suffocation. The patient tried to relieve the attack with an inhaled bronchodilator, she did not succeed, but she continued to use bronchodilators until the morning. As mentioned above, frequent use of bronchodilators can worsen the condition, increase the edema of the bronchial mucosa and bronchospasm.

On examination: the condition is closer to severe, diffuse hyperemia of the face and neck (hypercapnia) with acrocyanosis of the tip of the nose, lips and nails. Noisy breathing, wheezing is heard at a distance, tremors of the hands.

Auscultatory: areas of weakened breathing alternate with areas of its absence, wheezing is single, i.e. there are all signs of a prolonged asthma attack with the transition to stage 1 of status asthmaticus.

In this case, the doctor finds himself in a very difficult situation, because there is an overdose of bronchodilators and a bronchodilator can be applied only 4 hours after the last injection of any sympathomimetic or xanthine. In this case, it is necessary to urgently begin resuscitation according to the plan described above.

Then, by analogy with this plan, without testing (due to the lack of time for this), a frequency of 21.5 Hz and an intensity of 30 was connected through the IMEDIS equipment in order to regulate acid-base balance (subsequent frequencies and homeopathic preparations were tested through pointers : an effective medication, optimal biological indices and optimal adaptation reserves).

Then, after 8-10 minutes, frequencies of 3.8 Hz, intensity 30 (antispasmodic and improving the rheological properties of blood) and 1.75 Hz, intensity 30 (adrenergic, antihistamine, sympathicotonic) were switched sequentially. In parallel, through the drug selector was selected by testing and included in the complex with the frequencies: Bach Flowers preparations, color from the color therapy series, OHOM detoxification agents. A minute after the start of therapy, the patient noted a decrease in shortness of breath. The asthma was relieved before the end of the induction therapy. Currently, the patient periodically undergoes preventive courses of homeopathic treatment. The condition is satisfactory. Bronchial asthma attacks are mild, once every 1.5 years. Docked on their own.

Case number 2

Patient L. 51, after menopause within 8 months from 11.09.05, profuse bleeding of scarlet blood with clots began. By the morning of 09/12/05, the bleeding became threatening. An urgent hospitalization was offered upon consultation by phone. She categorically refused hospitalization. On examination: restless, pale face, cold limbs, profuse bleeding, scarlet blood with clots. Through the "MINI-EXPERT-DT" and the "belt" inductor, the frequency is 2.5 Hz, the intensity is 30, in combination with the homeopathic preparation Millefolium 3, connected through a medication selector. After 11 minutes from the start of therapy, the organopreparation Uterus 3 from WALA was connected to this complex for 1 minute. The bleeding has decreased significantly. This therapy was repeated 4 times with an interval of 30 minutes and 1 time with an interval of 1 hour. The condition has stabilized and the patient fell asleep. In the morning, the patient reported that after a short-term increase in bleeding with clots and the appearance of minor cramping pain in the lower abdomen, the bloody discharge almost stopped. When examined by a gynecologist, there was no data for hospitalization, ultrasound of the small pelvis without pathology. Regularly observed by a gynecologist, periodically undergoes a specialized examination - the results are within the age norm.

Case number 3

A female dog, a miniature poodle, was injured while walking by a large dog. Three days later, she scratched dry abrasions, which caused profuse bleeding, which did not stop for several hours. Through "MINI-EXPERT-DT" and the inductor "belt" for 12 minutes, at a distance of 40 cm from the dog, a frequency of 2.5 Hz, an intensity of 30, in combination with the homeopathic preparation Millefolium 3. The bleeding stopped before the end of the induction therapy session.

Case No. 4

Patient K., 20 years old, 07/15/2007, in the evening went into the garage of friends and by mistake sipped some kind of transparent technical liquid, which stood next to a bottle of water. Due to the fact that a very small amount got inside, and he spat out the rest and rinsed out his mouth well, the patient did not attach any importance to this event and did not tell anyone about it. On the morning of July 16, 2007, I woke up as usual, had breakfast without appetite with other family members, who soon left. Patient

felt tired and decided to sleep some more.

It seemed strange to his relatives that he did not answer the phone for several hours, they decided to check what was the matter, found him unconscious and called an ambulance. Before the arrival of the ambulance, on examination: comatose state, abnormal breathing, pupils dilated, do not react to light, pulse is threadlike, periodically not detected.

Without testing, due to the lack of time for this, the frequency program E33 is switched on through the IMEDIS equipment, the intensity is 30 (detoxification) in combination with homeopathic remedies connected to the MT socket from the medication selector: "Vital Force" of the "GUNA" company; Des. Chemicals and DRE. Liver, gallbladder and pancreas, from ONOM. In parallel, the resuscitation techniques Su-Jok and reflexology were used. The drugs from the drug selector were connected constantly, and the frequencies changed sequentially at intervals of 8 minutes: E33, E36 (detoxification), 21.5 Hz (regulation of acid-base

balance), program E74 (heart, additional regulation) and, again - E33.

By the time the ambulance arrived, normal breathing, cardiac activity and pupil response to light were restored. The patient began to open his eyes periodically. However, consciousness remained confused and blood pressure increased to 140/80 mm Hg. Art., in this regard, the frequency program E147, intensity 30 (for the regulation of blood pressure) was connected. After 5 minutes, the blood pressure dropped to 120/80 mm Hg. Art. The patient was safely delivered to the intensive care unit, where he underwent complex detoxification and symptomatic therapy. Discharged in satisfactory condition.

CONCLUSIONS: given the rapidity of the body's response to induction therapy, such therapy can be useful in cases when it is necessary to gain time for transporting the patient and preparing for specialized medical care. In addition, the possibility of operation of the IMEDIS equipment in the field without a power supply, powerful medical and diagnostic modules, quick assembly and switching on - expand the possibilities, save time, and these won minutes can be decisive for saving the patient's life.

The described clinical cases of emergency conditions indicate the effectiveness of induction therapy. For example, without a dropper and the introduction of soda, it was possible to very quickly adjust the acid-base balance and bronchospasm began to disappear without the use of bronchodilators and hormones, in addition, other frequencies worked positively, bypassing the "rebound" syndrome and other pharmacological and pathogenetic blocks. The human body, even in a coma, is able to correctly respond to frequencies that carry positive information and indicate new paths to recovery. Hence, we can conclude that from the frequencies collected in the IMEDIS equipment, it is possible to form complexes of treatment options for nosologies, taking into account the clinic, etiology and pathogenesis, as well as frequency complexes that are effective in urgent states, on analogies withallopathic resuscitation activities.

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G.I. Zotova Induction therapy with fixed frequencies in emergency conditions //

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