

Informational markers in the diagnosis of lower back pain syndrome (LPS). New strategy in therapy

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BNS SYNDROME is pain localized in the lower back, sacrum and sacroiliac region, which may radiate to the buttocks (s) or legs from one or both sides

Pain in the lumbar spine is usually designated as "lumbodynia", with irradiation in the leg - "lumboishalgia".

Taking into account the ICD-10 approved 43 The World The Assembly health care, the term "dorsalgia" is adopted in the official list of diseases of the musculoskeletal system and is coded with the code "M54".

Usually, back pain is considered as a secondary syndrome due to the pathology of the intervertebral disc. Most people with back pain do not have clear objective signs that would allow an accurate diagnosis. In 86% of cases, lumbosacral pain is caused by a discoradical conflict. The remaining 14% are injuries, tumors, infections (V.A.Mikhailova et al., 1990.)

That is, in general, it can be divided into vertebrogenic, associated with a disease of the spine and non-vertebral.

Currently, in the genesis of pain syndrome in BNS, great importance is attached to myofascial syndrome, which affects from 30 to 85% of patients, or Fibromyalgia syndrome, but the etiopathogenesis of this disease is also poorly understood.

It must be assumed that expanding the range of BNS diagnostics is very promising and even necessary, since this is the key to a therapy strategy. Traditionally, the use of physical methods for studying the mobility of the lumbar spine with LBS and anthropometric research methods, electromyography, radiography and ultrasound of the spine, abroad - magnetic resonance imaging, sometimes with computer tomography. Our clinics are increasingly using computer tomography. Diagnostic value of tomography has at differential diagnostics neoplasms spine, and instability in its structure.

The range of our studies includes diagnostics with informational markers, and during the study during 2005-2008, a large number of viral and bacterial burdens were revealed in patients with BNS.

A total of 97 patients with LPS were diagnosed on the hardware-software complex "IMEDIS-EXPERT" using the method of autonomic resonance test (ART).

In 70% of patients with BNS syndrome, the carriage of various types of herpes infection was noted, and more than half is herpes simplex type 2, then, according to the structure of diseases, Zoster herpes and, less often, Epstein-Barr herpes. The intensity of the pain syndrome is clinically more pronounced in the latter two types. In addition to viral burdens, the presence of chlamydial infections and ureaplasma was revealed (30% in the structure of the study of patients with BNS).

Electropuncture diagnostics using information markers

allowed to clarify the localization of viral and infectious burdens, more often - in the lumbosacral plexus, less often - in the hip joint and kidneys.

The therapeutic strategy was chosen taking into account the individual characteristics of the patient and was determined by a number of factors obtained on the basis of computer testing of information markers. The treatment included a number of mandatory components:

- 1) Elimination of exogenous load (geopathogenic, electromagnetic, toxic).
- 2) Basic bioresonance therapy (antiviral or antibacterial, nosodotherapy).
- 3) Exogenous bioresonance therapy with fixed frequencies from 300 up to 400 kHz according to the Hilda Clark method.
- 4) Drainage and detoxification therapy with ONOM drugs, "OTI" and "HEEL", frequencies of Hilda Clark and antioxidants KINOTAKAR (Treasures of Trees).
- 5) Immune-corrective therapy using natural immunomodulator PROTEFLAZID, which has an optimizing effect on both specific and non-specific immunity.

The use of combined techniques: BRT with immunocorrectors and drainage drugs gave a stable positive result.

In 86% of cases, there was a remission of BNS, with combined pathology of vertebrogenic, virus-specific and vascular nature.

Previously, the treatment of this category of patients with NSAIDs and analgesics did not give positive results. Expanding the range of complex application of bioresonance therapy in combination with naturopathic anti-viral drugs (Proteflazid), against the background of drains, antioxidants and immunocorrectors, gives a selective and sanogenetic effect in the treatment of patients with BNS.

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