

The need for an integrated approach in the treatment of osteoporosis

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In recent years, the number of visits by patients with an established diagnosis of osteoporosis has increased.

For 2 years, 12 patients, aged 56 to 68, applied for this. 8 of them are women, 4 are men. The duration of the disease before the visit to the MC was on average 14 months. All patients received non-steroidal anti-inflammatory drugs, calcium preparations, agents regulating calcium metabolism, dietary supplements. The main complaints presented by them: constant pain in the thoracic and lumbar spine, sacrum, hip joints, aggravated by any movement and persisting at night. Nine patients complained of joint pains of various localization. The high risk of pathological fractures led to further limitation of physical and physical activity, the development of depressive conditions. In all cases, the diagnosis was confirmed by X-ray and laboratory studies.

confirmed signs of compression; vertebral bodies. However, all 5 denied possibility of injury.

Anamnestic data during all cases testified to a significant decrease in physical activity and physical activity in previous years. All patients had a sedentary nature of work - a desk, a computer. Physical activity was limited to the volume: home - car - work. 7 patients worked in the garden during the summer. None of them went in for sports.

During diagnostics using the ART method, symptom complexes characteristic of this disease were identified: endocrine insufficiency with damage to the hypothalamic-pituitary system, thyroid and parathyroid glands, degenerative disorders in the gonads; electrolyte disorders in the form of a deficiency of calcium, magnesium, phosphorus, iodine; deficiency of vitamin E and calcium pantothenate; signs of secondary immunodeficiency. Pain syndromes were mainly due to the presence of polyneuropathy against the background of osteoarticular changes with viral or bacterial burdens. The therapy he carried out did not provide relief from the pain syndrome, which was the reason for contacting the MC. In 2 cases, the MC resulted in savings: the cost of drug therapy per month was more expensive than BRT.

Bioresonance therapy was carried out in the direction of: correction of immune disorders and treatment of infections; restoration of endocrine and electrolyte balance; treatment of pain syndrome. The therapy used the principles of pathogenetic therapy by A.A. Hovsepyan and targeted nosodes according to K.N. Mkhitarian. Allopathic therapy consisted of prescribing vitamins and, if necessary, pain relievers.

Throughout the observation period at the MC, the patients led a normal, moderately active lifestyle. Only 4 patients increased their physical activity: 2 began to engage in physiotherapy exercises, 2 - kinesiotherapy.

Improvement was achieved in all patients: pain

syndrome, increased physical endurance. According to laboratory data, the level of calcium and hormones in the blood returned to normal.

Observation of this group of patients made it possible to make generalizations about the pathogenesis and treatment of osteoporosis.

Among the causes of the disease, it is necessary to single out not only infectious damage to various systems, trauma (physical, chemical, etc.), but also the "non-use" of the function, in this case, hypodynamia. At the age of 20, when a person is physically active, goes in for sports, tourism, dancing, etc., the bones are dense and can withstand stress.

After 20 years of "sitting", when a person does not take anything heavier than a pencil, and his exercise is 8 meters to the car and 8 meters from the car, the density of bones becomes impractical. The musculature becomes hypotrophic.

At the same time, there are many examples in various sports, including bodybuilding, fitness, when people at the "age", starting to exercise, achieved sports results and enviable physical shape.

Four of our patients, who during the BRT were engaged in physiotherapy exercises and kinesiotherapy at first "through pain", then performed training without pain, achieved improvement on average 2 months faster than patients who did not receive loads.

Currently, patients involved in sports come to the check-up once every 3 months. The rest of the patients from this group visit the MC on average once every 3-4 weeks.

Comprehensive treatment of the disease, including, along with BRT, exercise and allopathy, significantly improves the course of the disease, prognosis and reduces the duration of treatment.

Thus, despite the great potential of the BRT method, it is necessary in the treatment of patients to combine their activities with the capabilities of specialists of other profiles.

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