Dynamics of the subjects' ability to predict
results of a random process or control the outcome of a random process
in the process of chronosemantic therapy

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Introduction

The question of whether a doctor, in the course of therapy, can change some cause-and-effect patterns in the patient's eventual reality - the scenario of his life - is both relevant and difficult in modern medicine. The relevance of the issue is determined by the fact that the goal of therapy is ultimately a positive change. quality of life
the patient, which certainly includes a positive change in the life scenario, and the difficulty - the lack of developed objective criteria for assessing the change in the patient's eventual reality as a result of one or another therapeutic effect [1].

In [1], it was suggested that the task of assessing changes in the eventual reality of a person can be reduced to two subtasks:

- first, to assess the change in his ordinary (ordinary) psychological abilities, which can be carried out using ordinary psychological tests;

- secondly, to assess the change in his extraordinary (extraordinary) psychological abilities: the ability to predict or control the outcome of a random process, in which he is interested.

In work [2], it is shown, at the level of a statistically reliable conclusion, that the extraordinary ability of a person to predict the result of a random process, symbolically contributing to the achievement of the indicated
does exist, and can indeed be changed in the course of homeopathic and / or bioresonance therapy.

In this work, we:
- firstly, we show, also at the level of a statistically reliable conclusion, that there is another extraordinary human ability
  - the ability to manage the result of a random process symbolically contributing to the achievement of the designated goal;
- secondly, we continue the collection of statistical data regarding the first from the extraordinary abilities introduced by us to   - capabilities predict the result of a random process,   symbolically contributing to the achievement of the designated goal, - with   so that in further reduce the likelihood of error - making the wrong hypotheses - in the final conclusion.

Research Objectives

one. Experimental   proof   existence   at   human extraordinary abilities both to predict and to predetermine the result of a random process in which he is interested.

2. Experimental evidence that these extraordinary
human abilities can be changed with the help of such combined ART-BRT techniques as chronosemantics [3].

3. Experimental evidence that the change in extraordinary human abilities as a result of chronosemantics is not an artifact caused, for example, by the operator's suggestive influence during therapy.

Materials and methods

Selection of research participants

The study involved 25 people aged 14 to 49 years. The study participants were selected from the previously treated patients of the ICIT "Artemis" and the State Healthcare Institution "TsVMiR No. 1" RO, whose state dynamics at the stage of their therapy was assessed as "persistent improvement". The state of health of these "former patients" allowed each of them to lead an active and, ultimately, happy lifestyle. However, the life scenario of these patients did not suit. Therefore, they all turned to bioresonance therapists and psychologist of the ICIT "Artemis" with a request to change the correction of the life scenario, ie. changes, for the better, of those individual cause-and-effect relationships that determined this reality.

The division into experimental and control groups was carried out by drawing lots (using the envelope method). Accordingly, there was no preliminary randomization of the groups. The participants in the experiment themselves did not know about the existence of both the experimental and control groups, and about which of them belonged to which group. They were told that the effectiveness of two different methods of altering a patient's fate scenario was being compared. This message, in fact, was true, since it had a pronounced suggestive nature, and therefore provided a suggestive effect for the participants in the control group.

Material support of research

To carry out chronosemantics, autonomous devices of the company "IMEDIS" were used: "Transfer P", "IMEDIS-BRT-PC" (medication selector), UMT "loop" with an adapter, energy-informational preparations "Happiness", ZhK, LF from the SDA group [4] , "Recorded" from the specified selector. In all cases, the "reverse" chronosemantics was carried out [5]:

- the signal of the target marker (MC) chiroglyphic lines of its connected to the first (medication selector); was introduced into the patient's body through the palms, using a light probe, into the socket of the "IMEDIS-BRT-PC" apparatus
- the response signal was written off from the patient's head using the UMT "loop" connected to the third socket of the "Transfer-P" apparatus;
- fixation ("recording") of the response signal was carried out in the first container of the Transfer-P apparatus for sugar crumbs;
- the specified feedback record was used to chronosemantic therapy of the patient as a chronosemantic drug (CSP).

The sum of drugs "Happiness" + "ZhK" + "LF" from the SDA group was used as MS [4].

An empty homeopathic crumble (nonparelle) was used as a placebo preparation.

For testing to determine the ability to proscopic

(predicting the result random process) used 10 laminated cards with the same shirt, on which the numbers from -5 to +5 were written, excluding 0.

For testing, in order to identify the ability to predetermine the result of a random process, two ordinary dice and an opaque horn from which they were thrown were used.

Methodological support of the study (tests T1 and T2)

For the methodological support of the study, the T1 and T2 tests proposed by K.N. Mkhitaryan. The T1 test was used to assess the patient's ability to predict, and the T2 test was used to predict the outcome of a random process.symbolically contributing to the achievement of the designated goal. Under a random process symbolically contributing to the achievement of the designated goal, here we understand the process that contributes to its achievement in accordance with the mental attitude of the patient, created by him together with the psychologist. To this end, in the process of preparing for testing with the help of T1 or T2, a preliminary conversation was held with the patient, during which it was explained to him that he would take part.in Game, the result of which will show him his ability to achieve the designated goal. Success in the game corresponds to the patient's ability to achieve the designated goal, failure is his unwillingness to achieve it. In the latter case, it has always been noted that the failure can be corrected - that's what the work is done for. As the designated goal, the life goal of the greatest interest to the patient was always taken.

The result of the T1 test in a separate experiment was the number ω_{one}, interpreted as a realization of the random variable Ω_{one} - an indicator of the patient's extraordinary ability foresee the outcome of the random process - in this case, the location of the cards, after shuffling them.

By the region definitions magnitudes Ω_{one} is the multitude participants experiment.

Accordingly, the result of the T2 test in a separate experiment was number ω_2, interpreted as a realization of the random variable Ω_2 - an indicator of the patient's extraordinary ability predetermine the outcome of a random process - in this case, the number of points dropped on the dice as a result of the roll. The domain of definition of the quantity Ω_2 there are also many participants in the experiment.

Description of the T1 test (test cards)

Numbers from "-5" to "+5" were printed on ten non-transparent cards of the same size without using the zero reference point: -5; -4; -3; -2; -one; +1; +2; + 3; +4; +5.

The meaning of the numerical scale was explained to the patient:
- the number "+5" symbolized the maximum degree of success in solving the discussed life task,
- "+4" - a slightly smaller, but still quite good degree of success in its solution, ...
- finally, the number "-5" is the greatest degree of unsuccessfulness in solving the discussed life task.

The cards were turned face down and shuffled randomly so that neither the patient nor the operator knew their order. IN

In each standard series, the patient made 10 attempts to symbolically solve the chosen life task. Each attempt consisted of choosing three random cards out of ten offered. At the same time, the patient accepted that his task, in every attempt, was to score the maximum amount of points, which symbolized his maximum symbolic success in solving the discussed life task.

The numbers on the back of the cards selected by the patient in a separate trial were summed by the operator and taken as the result of that trial. For example, if a single trial had the numbers "+5", "-3" and "+1" then their result for that trial was the number "+3". The average result for a standard series of tests was calculated by summing the numbers - the results of individual tests included in the series, and dividing the resulting sum by the number of tests in the series (in the experiment by 10).

The resulting number ω_{one} was taken for the realization of a random variable $_{one}$ - an indicator of the patient's degree of anticipation of the result of a random process, symbolically contributing to the achievement of the designated goal, those. an indicator of extraordinary ability investigated in [2].

Description of the T2 test (test cubes)

Two dice thrown by the patient from the horn were used. The patient was explained the meaning of the results of the throw (the number of points dropped):
- the number of points equal to "12" (the excess over the mat. Expectation of the result of the throw is "+5") symbolized the maximum degree of success in solving the chosen life task,
- equal to "11" (excess over the mat. Expectation of the result of the throw - "+4") - slightly less, but still quite a good degree of success in its solution, ...

- finally, the number of points equal to "2" (the mathematical expectation of the result of the throw exceeds the result itself by the value "5") - the greatest degree of failure to solve the chosen life task.

After clarification, the patient made 10 throws from the horn. The results of all throws were summed up, the number 70 was subtracted from the sum (the sum of the expectation in the series) and the result was divided by 10.

The resulting number ω_2 was taken for the realization of a random variable $_2$ - an indicator of the degree of patient predestination of the result of a random process, symbolically contributing to the achievement of the designated goal, i.e., the indicator is different (in relation to $_{one)}$ the extraordinary ability of the patient.

Research procedure

After division into experimental and control groups, study participants were tested using T1 and T2 tests.

Then, in the experimental group, the subjects produced chronosemantics, as a target marker were used test pointers "Happiness", LCD, LF from the drug selector. The resulting drug was administered to the patient according to an individual scheme selected in accordance with the results of mental testing.

In the control group, no therapeutic manipulations were performed. Patients were told that the drug would be made individually for them (according to their CMH) and a placebo was given, which was also prescribed individually.

A month later, a second test was conducted using   Astnikov research with the T1 and T2 tests.

Research results

The results of the study are shown in table. one.

Table 1

Experienced group				
	cards		cubes	
	to XST	after HST	to XST	after XST.
one	- 0.5	0.3	- 0.53	- 0.4
2	- 2.9	- one	- 2.3	- 0.6
3	- 2.2	2	0.2	0.33
4	0.3	five	- 0.33	0.7
five	- 1.6	1.5	0.3	0.6
6	0	1.4	0.43	0.88
7	five	5.7	- 0.33	0.7
eight	- 0.7	0.1	- 0.26	0.6
nine	- 2.8	- one	- 0.5	- 0.4
10	- 0.8	0.3	- 0.63	- 0.56
eleven	0.5	one	- 0.33	0.43
12	0.9	2.8	0.23	0.43
13	- 2	0.9	- one	- 0.63
Control group				
	cards		cubes	
	background	after 1 month	background	after 1 month
one	0.3	0.1	- 0.56	- 0.66
2	0,4	0.5	- 0.46	0.63
3	- 1.7	- 0.9	0.27	- 0.8
4	one	0.2	0.9	- 0.7
five	- 0.2	- 0.7	0.033	- 0.23
6	0.5	- 1.7	0.27	- 0.8
7	- 0.5	0.1	- 0.4	0.1
eight	0.5	0	- 0.97	- 0.23
nine	0.9	0.8	0.56	- 0.2
10	- 1.1	0	- 0.17	0.43
eleven	0.1	0.9	- 0.27	0.2
12	1.8	0.6	- 0.03	0

It can be seen that the test indicators of the experimental group one month after chronosemantics changed unidirectionally; there was an increase

absolute indicators both in the T1 test (test cards) and in the T2 test (test cubes). Moreover, more pronounced changes were observed towards an increase in indicators in the T1 test than in the T2 test.

In the control group, changes in test indicators in tests T1 and T2 were multidirectional, with no pronounced tendency to increase or decrease.

Statistical evaluation of research results

Statistical processing of the research results was carried out using the Wilcoxon rank tests V and T, i.e. the shift of the distribution of random variables Ω_{one} and Ω_2 [6-7]. Compared:

1. Test results in the experimental group at the beginning of the experiment and after a month after the chronosemantics was carried out for the study participants.

2. The results of testing in the experimental and control groups before chronosemantics for the participants of the experimental group.

3. Test results in the experimental and control groups after carrying out chronosemantics for the participants of the experimental group.

4. Test results in the control group before the start of the experiment and a month after it started.

If the samples of the obtained experimental dependencies could be considered independent, the V criterion was used (points 2, 3), otherwise - the T criterion used to process sequential measurements [7].

Statistical processing of the test results showed:

1. The quantities Ω_{one} and Ω_2 participants in the experimental group, measured after a month after chronosemantics, they experienced a statistically significant shift to the right - upward, in comparison with the same values measured initially. Thus, all participants in the experimental group acquired great abilities both to predict and to predetermine the outcome of a random process in which they were interested.

2. Statistically significant shift as a value of Ω_{one}, and the quantities Ω_2 during the transition from the initial (before chronosemantics) test results of the experimental group to the initial test results of the control group were not revealed. Thus, the participants of both groups by the time of the beginning of the study, on average, had equal opportunities for both predicting and predetermining the outcome of a random process in which they were interested.

3. The quantities Ω_{one} and Ω_2 participants in the experimental group, measured after a month after chronosemantics, they experienced a statistically significant shift to the right - upward, in comparison with the values of Ω_{one} and Ω_2 control group participants, measured one month after the start of the study. Thus, the ability to predict and predict the outcomes of random processes among the participants in the experimental group increased in comparison with the participants in the control group.

4. Statistically significant shift as a value of Ω_{one}, and the quantities Ω_2 when switching from the sample of the initial (at the beginning of the study) test results of the control group to the test results of the same group a month after the start of the study, no results were found. Thus,

the participants in the control group did not increase their ability to predict and predict the outcome of a random process in which they were interested in the process of research.

conclusions

Based on the study, the following conclusions can be drawn that develop the conclusions [2]:

1. Man possesses extraordinary abilities how To predicting, and to predetermining the result of a random process in which he is interested.

2. The indicated extraordinary abilities of a person can be changed with using such combined ART-BRT techniques as chronosemantics.

3. Change in the extraordinary abilities of a person as a result holding him chronosemantics is not an artifact caused by the suggestive influence of the operator in the course of therapy.

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