## ART and BRT in the practice of diagnosis and treatment of chronic prostatitis E.V. Tikhonov ("Eliseeva Medical Center", Moscow, Russia)

Prostatitis is an urgent problem. The term "prostatitis" encompasses various diseases that are often not associated with a disease of the prostate gland and, accordingly, requires different approaches to treatment. Therefore, along with urological, ultrasound, manual and neurological examination, additional diagnostic methods for this nosology are required.

According to the WHO, more than 19% of the male population have a confirmed diagnosis of chronic prostatitis. A particularly worrying factor is the increasing prevalence of chronic prostate disease and infertility among young men.

During the reporting year, the referral rate was 25% of men aged 20 to 80 years, of which 70% of patients over the age of 40. All patients, before contacting the Eliseeva Medical Center, repeatedly underwent various types of treatment: antibiotic therapy, physiotherapy; prostate massage,

mud therapy, rectal and urethral physiotherapy, thermal infrared and laser therapy.

Leading complaints - "prostatic triad":

1. Pain in the genitals and small pelvis;

2. Violation of urination of various nature;

3. Sexual disorders.

These symptoms lead to psychological distress and problems in family life.

When diagnosed by the method of autonomic resonance test, disorders in the immune and endocrine systems, deficiency of vitamins and

microelements, psychological stress, the presence of benign and processes; malignant viral, bacterial, fungal burdens,

helminthic invasion.

The distribution of infectious agents is shown in table. 1 (based on the results of diagnostics of 52 patients)

Table 1

1. Gram-positive bacteria	
E. Coli	15 people
Klebsiella	3 persons
Proteus	7 people
2. Gram negative bacteria	
St. aureus	4 people
Enterococcus	8 people
3. Gram-negative, -positive bacteria	
Citrobacter	2 persons
4. Anaerobic	
Corynebacter seminale	1 person
5. Viruses	
Herpes Epstein Barr	1 person
Herpes II type	15 people
Papillomavirus	18 people
6. Fungi of the genus Candida	
Fungi of the genus Candida	7 people
7. Testing of nosodes of urogenital infections	
Chlimidia D30	10 people
Trichomonas D60	5 people
Ureaplasma D30	3 persons
Mycoplasma D30	6 people
Gonorrhea D30	8 people
8. Parasitic pathogens	
	11 people
9. Mixed infections	
Bacteria + Viruses	24 persons
Bacteria + fungi	12 people
Bacteria + Viruses + Fungi	3 persons
10. Absence of pathogenic microflora	
	5 people

The patients underwent frequency, endogenous bioresonance to the therapy for meridian of the urinary bladder. Homeopathic medicines were prescribed drugs; organic preparations from the selector; nosodes, as well as trace elements, vitamins, enzymes, antiseptics as needed.

Individual control was carried out after 1–3 months, ultrasound and laboratory tests were carried out.

As a result of the treatment, the psychological load decreased, the endocrine load decreased from very high to pronounced. The immune system went from a state of exhaustion to stress. The prostatitis nosode was tested in the D32 potency. Resonant frequency programs are not tested, pathogenic flora is tested in nosodes in potencies D15-32-60. Dysuric disorders, pain sensations disappeared, potency was restored in 99% of patients.

Conclusion: vegetative resonance test, exogenous and endogenous bioresonance therapy is highly effective in the diagnosis and treatment of chronic prostatitis.

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