

The use of multilevel systemic therapy in the treatment of patients with oncological pathology

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Introduction

Therapy with the combined use of ART-BRT in the treatment of breast cancer (MF) is almost always perceived as an auxiliary method. This approach has serious grounds, in view of the fact that most often breast cancer patients are patients in oncology clinics, and the ART-BRT method is used already in the postoperative period. The use of the ART-BRT method as the main method of breast therapy is possible in casuistic cases.

- when, for example, an oncological patient for any reason refuses the help offered by oncologists, or in clinically advanced severe cases, when the tumor was not detected on time and adequately treated, and as a result, time was lost.

A feature of the following clinical case is an the use of bioresonance therapy as the only one treatment method from the moment the patient turns to our Center for help.

Case description

Patient I., 48 years old, applied for help to LLC MCIT "Artemida" on August 4, 2009 regarding carcinoma of the left breast T2NxM1, stage IV; upper inner quadrant, with a tendency to germinate.

Event history: ex-husband is an alcoholic; the marriage was dissolved at the request of the patient, they do not live together. Two grown children. Profession - head of public utilities. There is no sex life.

Psychologically - fears, a high level of anxiety, disturbed sleep.

Anamnesis. On December 27, 2007, she first consulted a therapist about strong pain in the liver. Ultrasound revealed multiple focal changes in the parenchyma of the left lobe of the liver, presumably of secondary origin. The tumor was first detected on a mammogram on December 29, 2007, the size of the formation is 3.5 x 2.2 cm; perifocal lymphangitis. Scintigraphy revealed metastases in the lumbosacral spine; computed tomography - multiple metastases of the left lobe of the liver. The patient categorically refused the timely operation offered by oncologists, citing the fear of death in the postoperative period. In view of the patient's categorical refusal from the operation, since January 9, 2008, she underwent therapeutic chemotherapy (methotrexate, doxorubicin, cyclophosphamide, 5-fluorouracil) in the amount of 5 sessions; then - radiation therapy to the lumbosacral spine. Conservative therapy was fully completed on August 14, 2008. By the end of the course of treatment: the structure of the liver parenchyma is relatively homogeneous; intraosseous metastases were not identified. The patient again categorically refused the operation again proposed by the oncologists and turned to the Artemis center for treatment.

On 14.08.2009, treatment was started. During the therapy were used drugs that correct the patient's condition at all levels of integration of her self-realization [2]. Informational preparations were made on the apparatus

Biochemical blood test is the norm;
Complete blood count is the norm;
Ultrasound of the liver - uniform structure, no metastases; Scintigraphy - no metastases;
Computed tomography - reduction of tumor size from 3.5 x 2.2 cm to 2.2 x 1.5 mm (more than an order of magnitude); mammography - no upward trend.

Eventually - there was an adequate attitude to what was happening, a dream normal. She took off part of her job duties, devotes a lot of time to the house. The aggression directed at men disappeared, I began to think about the possibility of living together with someone. There are no somatic manifestations of the disease. There is a previously uncharacteristic openness in communication and healthy optimism. He is currently continuing therapy at our Center.

Discussion

Today, there is significant progress in the treatment of breast cancer, however, even the most modern highly effective chemotherapy drugs do not yet significantly affect the life expectancy of patients. Chemotherapy, whether adjuvant or therapeutic, is aimed, depending on the type, at preventing metastasis or reducing the size of the tumor; but in both cases it involves a subsequent surgical intervention. In this case, of particular interest is the pronounced tendency of the tumor to decrease in size, against the background of exclusively bioresonance therapy, without the use of chemotherapy or radiation therapy.

Conclusions:

1. Combined ART-BRT method, in particular, multilevel algorithm systemic adaptive diagnostics and therapy, can be used in the treatment of cancer patients not only as concomitant therapy in the postoperative period, aimed at restoring and supporting the body, but also in cases where surgical treatment for some reason was not timely.

2. Due to the insufficient number of investigated cases of this kind this method of managing cancer patients requires more detailed and in-depth consideration. In particular, it would be advisable to exchange descriptions of the course of similar casuistic cases encountered in the medical practice of specialists in ART-BRT.

Literature

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- M .:" IMEDIS ", 2010, v.2 - C.204-208