

## The use of nosodes in the treatment of chronic bacterial prostatitis

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Under our supervision there were 47 people aged from 27 to 53 years with diagnosed with chronic bacterial prostatitis (CKD) (category II). To all the patient was diagnosed tired on the basis of leukocytosis in secretion and prostate (UOJ) microbiological study of culture, bacterial mixed ALE, in which were infections were isolated, due to both facultative anaerobes and anaerobic bacteria. The average rate of contamination was  $10^4$  CFU.

Representatives of the family Enterobacteriaceae, Streptococcus sp. Were most often identified in the inoculation of AOF, less often - Enterococcus faecalis, Streptococcus agalactiae, Bacteroides.

After the standard course of antibiotic therapy (selected taking into account the sensitivity of the pathogens according to the antibiogram), 30 patients achieved a complete cure, however, 17 patients failed to achieve elimination of the pathogen in the repeated AOF culture, and clinical signs of the disease persisted. For further treatment, instead of a repeated course of antibiotic, all patients were prescribed a private bioresonance drug with a combination of bacterial nosodes isolated in culture and confirmed by testing by ART. Dilutions of D6-D100 nosodes were selected during testing or a complex preparation was prescribed. In addition, all patients received a drainage preparation for the prostate - Staphysagria 3, Sabal 3, Tuya 6, Yohimbi 3.

After 4 weeks of treatment, in 13 patients, repeated microbiological examination of the ALE did not reveal pathogenic flora, and in 4 patients, the titer of the pathogen significantly decreased. In all patients, subjective complaints characteristic of exacerbation of CKD disappeared. In 15 patients, AOI indicators returned to normal.

Conclusions: the use of this approach in the treatment of chronic bacterial prostatitis makes it possible to increase the effectiveness of treatment and in some cases replace antibiotic therapy.

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