

Features of diagnostics of giardiasis by ART and Voll methods.

Methods for the treatment of giardiasis

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Epidemiology.

Giardiasis is a common protozoal disease in children and adults. Giardia is ubiquitous. Among children, the incidence is up to 70%. On average, every fifth person is sick with giardiasis.

Man is the only reservoir of infection; lamblia also parasitizes in the body of dogs, kittens, and rodents. Giardia cysts are excreted in the feces and remain viable for up to 70 days, in tap water - up to 3 months.

Pathophysiology

The most common route of infection is oral. Giardia cysts are not destroyed by the action of gastric juice. With the help of suction cups, lamblia are attached to the epithelium and villi of the small intestine, and then the entire surface is sucked in nutrients. In addition, lamblia live in the biliary tract, causing inflammatory infiltration and even micronecrosis.

Rapid reproduction of lamblia causes dysbiosis: the bacterial-fungal variant, as well as against the background of a decrease in the number of E. coli, the population of bifido-lactobacilli suffers. Giardia often causes biliary dyskinesia, leading to cholestasis.

When exposed to unfavorable environmental factors of the environment, which sharply reduce the body's resistance, conditions are created to enhance the pathogenicity of lamblia, leading to the formation of endogenous intoxication.

Formation of links of pathogenesis

1. Injury by lamblia mucous shells intestines, biliary tract, pancreatic ducts.

2. Changes in cellular metabolism in the affected tissues of organs digestion.

3. Development of atrophic processes in damaged tissues.

4. Changes in the intestinal biocenosis.

5. Strengthening of enzymatic deficiency and metabolic disorders proteins, carbohydrates and fats.

6. Development of motor disorders in the biliary system and intestines, the formation of persistent dyskinesias.

7. Decreased production of secretory immunoglobulins, depletion the immune system.

8. Accumulation of products of dysmetabolism.

Purpose of the study: study of the effectiveness of exogenous BRT in the treatment of giardiasis.

The hardware and software complex "IMEDISEX-PERT" and the module "MINI-EXPERT-T" were used in the work.

A group of patients was observed in the amount of 55 people, whose age ranged from 6 to 65 years, of which 23 were children and adolescents.

Complaints when applying:

1. Recurrent pain in the umbilical region of the abdomen, right hypochondrium, belching, bloating.

This group of complaints was more pronounced in the group of patients - children; in adults, pain was often absent.

2. Nesting of the language.

3. Increased stool with the appearance of more liquid - in 80% in children, in half cases in adults.

4. General weakness, irritability, asthenia.

5. Enlargement of the liver - minor hepatomegaly, while the liver palpable either along the edge of the costal arch, or +1 cm.

6. Pallor of the skin of the face - more often in children.

7. Positive Ortner symptom on physical examination - in 10 children (55%) and in 5 adults (23%).

In 100% of cases tested infectious burden duodenum: in addition to lamblia, bacterial microflora - salmonella, staphylococcus, streptococcus and fungal - saccharomycetes, penicillins, candida.

Diagnostics was carried out using an electrode, UMT "inductor," belt ", " loop ". Also, measurements (quantitative assessment) of indicators according to R. Voll were carried out:

- CTE of the small intestine;
- The upper horizontal part of the small intestine;
- PE 2a interlobular ducts of the liver;
- PE 3a internal lymphatic vessels of the liver;
- Choledoch;
- Cystic duct;
- The body of the gallbladder;
- SP 3a pancreatic duct;
- KTI pancreas;
- SP 4.1 internal lymphatic vessels of the pancreas.

At these points, the relevance of the previously found nosodes of infections was clarified, which made it possible to monitor and correct the healing processes and the positive dynamics of indicators in dynamics.

Patient therapy included:

1. Recommendations for a diet with mandatory exception carbohydrates.

2. Courses of exogenous BRT - 8-10 sessions.

3. Reception of the BR-drug prepared in the frequency modulation mode, with the use of F / E-programs, as well as D- (disharmonic) vibrations written off locally along the corresponding meridians.

4. Anti-inflammatory herbal medicine, choleric drugs.

5. Sorbents.

6. Lactobifidoculture.

Against the background of the treatment, the pain syndrome, on average, was stopped in a few days, dyspeptic disorders decreased in more long period (2-3 weeks). The indicators were normalized

an average of 20-30 days.

Giardiasis sanitation was assessed when testing giardiasis in dilutions not lower than D100.

Clinical example

Patient A.S., 12 years old. Complaints: pain in hypogastrium, flatulence, pronounced loose stools, pallor of the skin of the nasolabial region, restless sleep, general weakness. Objectively - palpation pain in the umbilical region of the abdomen.

Diagnostics by R. Voll's method:

- CTI of the pancreas - 78 conv. units;
- SP3a - 82 conv. units;
- SP 4.1 - 78 conv. units;
- CTE of the small intestine - 80 services. units;
- PE 3a - 80 conv. units;
- Choledoch - 82 conv. units;
- Cystic duct - 83 conv. units

Diagnostics using the ART method: very high tension of the immune system, endocrine tension of grade 3, lamblia D8; frequencies F188, F59, affected organs are tested: small intestine, pancreatic duct, bile ducts.

Therapy:

1. 8 sessions of exogenous BRT.
2. Diet with restriction of carbohydrates and fats.
3. Polyphepan.
4. BR-drug in a tested dosage 4 times a day.

After 10 days, the patient has no pain syndrome, there remains moderate flatulence, a tendency to loose stools occasionally. The lamblia nosode is defined in the D30 potency.

Diagnostics by R. Voll's method:

- CTI of the pancreas - 72 82 services. units;
- SP 3a - 73 82 conv. units;
- CTE of the small intestine - 76 82 conv. units;
- Choledoch - 78 82 conv. units

Further, nosodotherapy with this drug was prescribed.

A week later, at the control visit, there was no pain, no flatulence, restful sleep, and the stool was decorated.

Diagnostics using the ART method: lamblia D60, salmonella D60; moderate tension of the immune system. The tested nosodes were recorded on granules and given for administration over the next month.

Results. On this example, it is possible to assess the importance of monitoring the state of the pancreatic ducts, the state of its lymphosistem, since in some cases enzymatic insufficiency occurs. In this case, no separate enzyme therapy was required.

It is interesting to note that Giardia was tested in 50% of patients who came to our Center with opisthorchiasis and clonorchiasis. This is due to the fact that lamblia, causing dysbacteriosis, enteritis, biliary dyskinesia,

cholestasis, contributed to a change in the intestinal mucous membranes, creating a beneficial environment for opisthorchs and clonorchs for their penetration, development and reproduction.

Investigating analyzes of such patients with co-infection (27 people), we came to the conclusion that infection with lamblia was primary, and opisthorchia and clonorchus - secondary. Patients recalled that at the beginning they had intestinal disorders, abdominal pain. And only after a long period of time there was heaviness in the right hypochondrium, attacks of cholecystitis, icteric skin color, severe weakness.

It should also be noted that the method of exogenous BRT in combination with herbal medicine provided not only a quick cure for lamblia, but also a cure for opisthorchiasis and clonorchiasis in a shorter period of time - up to 3 months.

Clinical example

A 35-year-old patient came to the center with complaints of persistent severe abdominal pain, heaviness in the right hypochondrium, weakness, depression.

From the anamnesis: the patient considers himself within 5 years. The disease began with abdominal disorders, swelling, itching of the skin. She was treated for 2 years by a therapist with a diagnosis of intestinal dyskinesia. There was no improvement. 3 years ago, abdominal pains, heaviness in the right hypochondrium began to appear. The diagnosis remained the same - intestinal dyskinesia.

2 years ago there were severe pains in the abdomen and in the right hypochondrium. During these 2 years, the patient was twice hospitalized in the therapeutic department, where she was examined and continued to be treated with a diagnosis of intestinal dysbiosis, cholecystitis. The abdominal pain did not go away day and night, the patient was offered diagnostic laparoscopy. The patient refused and turned to our Center.

Giardiasis and opisthorchiasis were detected by the ART method. Jaundice of the skin and mourning on the face are noted.

Recommended: sessions of exogenous BRT with frequencies of lamblia and opisthorchiasis and herbal medicine, mainly with aspen bark.

Already after 3 sessions of treatment with the frequency of abdominal pains significantly decreased, after 5 sessions the pain stopped, the patient smiled, her gratitude knew no bounds. After 10 sessions, the patient felt completely healthy. Giardia was not tested by the ART method; opisthorchias were detected in small quantities. Comprehensive body cleansing, exogenous BRT, liver tubing, lymph cleansing, ozone therapy were performed. A control study after 1 month, diagnostics using the ART method showed the absence of both lamblia and opisthorchus. The patient was feeling very good, she had no complaints.

Conclusions:

1. Using APK "IMEDIS-EXPERT" for versatile diagnostics of the state of the small intestine, liver and biliary system, pancreas allows for a more adequate complex therapy of giardiasis using effective BRT techniques.

2. Treatment of giardiasis by exogenous BRT helps to accelerate the healing process in cases of co-infections, in particular,

opisthorchiasis and clonorchiasis.

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