

Expanding the possibilities of using ART-BRT
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As a rule, the patients themselves come to see the information medicine doctors. Rather, those who want and can come come. But there are those who would like to come, but cannot, for example, disabled people with limited motor function, very old and weak people, seriously ill. This category includes newborns and children, both young and other ages, as well as animals.

It turns out that all these patients can be assisted with the use of information technology in full without participation in the testing process and the creation of drugs by the patients themselves. To carry out such a reception, you need the following:

1. An intermediary is needed, he can be any person who wants help and become a conductor of information from the patient. Most often, the patient's relatives become intermediaries, but this is not at all necessary.

2. Any photograph of the test object is required, regardless of what camera it was taken with. It is better if the picture is fresher, but it is possible to obtain information from fairly old pictures, because the photograph is a kind of information phantom associated with the object and allows you to get any required information about this object in real time, and with virtual testing - ahead of time. determine the expected changes in the body.

3. The operator should tune in to the test object. Compliance

This condition allows to separate the flow of information going through the photograph from the testimony of the intermediary.

4. The operator tests, as usual, on the hand of the handler lying on photographs of the patient.

In the beginning, I checked the reliability of such testing on my loved ones. It turned out that when testing with a photo, and when testing live, the same results are obtained.

Further observation of the results of treatment showed that both the group of patients for whom the drugs were prepared with their direct participation, and those for whom the drugs were created from a photograph through a guide, have comparable results in terms of effectiveness, strength and depth of impact, and in the ability of the body to keep what was achieved in the result of treatment.

Diagnostics and therapy were carried out within the framework of IRADT on the equipment of the company "IMEDIS" using the apparatus "golden section" and a light probe of the company "Artemida". But since it is impossible to carry out such techniques as HST and C-responses in the absence of the patient, we had to deviate somewhat from the classical scheme of IRADT.

So, in those moments when, according to the stage of the development of the disease, it was necessary to conduct a CT scan or to prepare C-responses (second and third levels), two preparations were prepared:

1. Through the key organ (KO) found by the method of A.E. Kudaeva, a complex fate marker was selected, which, as a rule, was not directly tested, i.e. was transparent (or pseudo-transparent -

technique of pseudo-transparent marker according to A.E. Kudaev). He then targeted KO. Dosage, frequency and duration of drug administration were determined mentally.

2. Through the selected first drug that does not reduce measuring level, a complex preparation (CP) SDA was selected. Moreover, each SDA separately reduced the IU, and the SDA KP was also transparent. He was appointed without targeting. Dosage, frequency and duration of administration were determined mentally.

At the first level, in addition to these two drugs, other targeted drugs were manufactured. In addition to targeting KO, targeting was also applied to other complex markers (the sum of infection nosodes, etc.), as well as direct adaptation to a photograph, which in terms of efficiency resembles adaptation to KMX.

At this level, it is possible to use targeted blood and urine nosodes, if the patient's relatives bring prepared nosodes prepared in advance: 1-2 drops of blood (or urine) into a test tube and 4-5 ml of vodka, shake all this vigorously 100 times. We make an electronic copy of the nosode and then either aim at a complex nosode marker, or adapt it to a photograph.

In the absence of testing of hereditary nosodes, a constitutional preparation was prepared according to A.E. Kudaev.

An exception to this scheme was the primary methods of testing and treatment based on photographs of patients with a combination of external influences and depleting reserves of adaptation. In these cases, the first drug was a complex drug of negative programs, childbirth and fears aimed at photography. And the second is the amount of SDA found through the first drug. Plus targeted nosodes.

Diagnostic and treatment sessions were carried out once every 1–2 months.

Examples of

1. Patient P., 70 years old. Diagnosis: amyotrophic lateral sclerosis. On the treatment since June 2010. At the beginning of treatment, severe weakness in the muscles, the inability to hold the head in an upright position, hold a spoon in the hands, and walk. Reception once a month with the preparation of drugs according to the above scheme. I was present at 2-3 receptions, the rest of the time the preparations were prepared through my son and wife. He began to hold his head upright, eat on his own, and tried to walk with the help of crutches. The treatment continues.

2. Patient K., born in 2008 Receives treatment through mom. The girl hearing loss of 4 degrees. She has been undergoing treatment for a year. During the first 6 months of treatment, the degree of hearing loss decreased to grade 3. The treatment continues.

3. Patient O., 26 years old, is being treated from a photograph through a mother with a diagnosis psoriasis, chronic gastritis since May 2010. Currently, there are no stomach pains. The stomach and most of the internal organs are not tested. The skin was clean for 4-5 months, but after a stressful situation at work, plaques reappeared on the scalp. The treatment continues.

4. Cat, 15 years old with urinary incontinence. Diagnostics and treatment were carried out from a photo through the owners once every 2 months. After 3-4 sessions, she became more active, good appetite, no urinary incontinence. Looks and behaves much younger than his age.

In animals, a much faster restoration of internal organs, an increase in adaptation reserves, a decrease in biological indices and restoration of lost functions is observed in comparison with humans. These are very grateful patients in terms of efficiency.

Thus, based on the above examples, the following conclusion can be drawn: the use of a patient's photograph for distance testing and treatment through a guidewire significantly expands the possibilities of using the combined ART-BRT methods, making it possible to bring information technologies closer to those patients for whom they were not yet available. ...

Literature

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