

The effectiveness of the use of bioresonance and multiresonance therapy  
in the treatment of patients with neuro-ophthalmology  
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Relevance

For more than 10 years, I have been using bioresonance therapy (BRT) to treat diseases associated with pathology of the organ of vision. At the XI conference, generalized results of the treatment of eye diseases were presented:

- vascular and degenerative pathologies of the retina;
- atrophy of the optic nerve (of various origins);
- glaucoma (primary, asymptomatic, advanced);
- progressive myopia (myopia);
- farsightedness (hyperopia);
- accommodation spasm, amblyopia, asthenopia, double vision;
- astigmatism, strabismus, ptosis, nystagmus;
- "computer vision syndrome";
- dry eye syndrome, chronic conjunctivitis;
- presbyopia;
- macular degeneration, diabetic retinopathy;
- tapetoretinal abiotrophy / retinitis pigmentosa;
- trigeminal neuralgia, optic neuritis;
- neuro-ophthalmology, rehabilitation after removal of a tumor, brain cyst;
  
- infectious lesions of the optic nerve (herpes, cytomegalovirus) and other eye pathologies, such as
- hemophthalmia (hemorrhage inside the eyes);
- corneal opacity, retinal edema;
- opacity and destruction of the vitreous body;
- sensation of sand and foreign body in the eyes;
- the feeling of flying flies in the eyes.

At the XIV conference, we shared our experience in the treatment of glaucomatous optic nerve atrophy, at the XV conference - in the treatment of patients with various refractive errors, at the XVI conference - in the treatment of patients with tapetoretinal abiotrophy.

This time we present the experience of using energy-informational methods in the treatment of patients with neuro-ophthalmology.

Neuroophthalmology is a branch of neurology that studies the visual pathways and visual centers of the brain. The problem of the relationship between eye movements and perceptual functions of vision was clearly expressed in the works of I.M. Sechenov in the last century. In the subsequent development of the concepts of perception, this problem caused a lot of controversy and has retained its controversial nature to this day. At the same time, the discussion of the central issue of the so-called "constructive" function of movements did not lead the researchers to a unanimous opinion.

To this day, proponents of the motor concept assign eye movements a leading role in the formation of the visual image. Adherents of the sensory paradigm, in contrast, believe that perceptual functions, as such, are very

depend little on the motor components of vision. Both points of view are extensively substantiated by experimental data and conceptual models.

Ordinary people often believe that only the eyeball is involved in the act of sight. However, this is not the case. The eye, in essence, is only a converter of light energy into the energy of a nerve impulse. All processing is carried out in our personal "computer" - the brain. But, after all, there are diseases that affect these parts of the brain and pathways, these are injuries, tumors, hemorrhages, parasites and so on. And neuro-ophthalmology is engaged in the identification of symptoms characteristic of such conditions, as well as their treatment.

There is no standard and truly effective treatment for neurophthalmology.

In this regard, there is an increasing interest in modern innovative methods of treatment, for example, energy-informational methods: electroacupuncture diagnostics (EPD) according to R. Voll, vegetative resonance test (ART), adaptive bioresonance therapy (BRT) and MRI according to Yu.V. Gotovsky, Ancient Eastern Chinese Medicine, zhen-tszyu therapy, acupuncture (IRT) (acupuncture), stem cell therapy.

The positive experience of using energy-information technologies for diagnostics and treatment, especially BRT and MRI, opens up a fundamentally new direction in ophthalmology.

Purpose of work: Grade efficiency application adaptive bioresonance therapy in the treatment of neuro-ophthalmology.

#### Materials and methods

In the eye center over the last year of observation, 15 patients with neuro-ophthalmology were examined and underwent BRT and IRT. Patient age

- from 20 to 35 years old.

Bioresonance therapy was carried out on the apparatus "MINI-EXPERT-DT" of the Center "IMEDIS" according to the school of Yu.V. Gotovsky.

Initial and dynamic examination included refractometry, corrected visual acuity, computerized perimetry, intraocular pressure measurement, fundus examination, as well as CT and MRI.

General endogenous BRT was carried out in accordance with the diagnostic data and exogenous resonance therapy with fixed frequencies (R. Voll, P. Schmidt, R. Rife and individual, determined using BRT), In particular, P. Schmidt frequencies were used (70.0; 70 , 5; 94.5; 95.5; 99.5 Hz) and R. Voll (3.6; 4.9; 9.4 Hz). In most cases, induction therapy (according to indications), bioresonance therapy along the meridians (organs and systems) using the IMEDIS-BRT apparatus was used. In parallel with BRT, acupuncture was used, as well as acupressure of the earlobes, inner corners of the eyes and temples.

The number of sessions per course of treatment was determined primarily by the dynamics of the disease: on average, it was 10-12 sessions. The sessions were carried out daily or every other day. The number of courses is 1-5. The duration of observation of patients was 3-6 months, the frequency of sessions, the intervals between courses were determined individually in accordance with the dynamics of indicators, the severity of the disease. The assessment of the dynamics of visual functions was based on the results

observation of changes in the field of vision, visual acuity.

#### Results and its discussion

All patients tolerated the BRT, MRI and IRT procedures well, noted an improvement in general well-being, a decrease in irritability, and a normalization of sleep. After the first course, there was a subjective improvement in vision, a decrease in visual fatigue. After the end of the course of treatment, almost all patients showed an increase in visual acuity by 10–20%, while the visual acuity with correction increased by 20–40%, and the field of vision expanded. Re-examination, 6-8 months later, showed no negative dynamics of pathological changes in the fundus, and visual functions remained stable.

#### Clinical examples

1. Patient, 23 years old.

Complaints: blurred vision in both eyes (OU)

Vis Visual acuity: OD 0.07. OS 0.07.

DS. Hydrocephalus, OU partial (post-congestive secondary) atrophy of the optic nerves.

After treatment with IRT +

BRT: Vis OD 0.09 Sph - 2 =

0.3, OS 0.1 Sph - 2 = 0.2-

0.3. After re-treatment: Vis

OD 0.09 Sph - 2 = 0.3, OS

0.2 Sph - 2 = 0.4.

2. Patient, 23 years old.

Examination date 07.08.2011.

Complaints: blurred vision in both eyes (OU).

Vis Visual acuity:

OD per L in certa,

OS per L certa

DS after removal of a brain tumor, OU partial atrophy of the optic nerves, retinitis pigmentosa.

After treatment 08/16/2011 IRT + BRT:

Vis OD 0.08,

OS 0.03.

After the repeated course: 20.11.2011:

Vis OD 0.15,

OS 0.05.

Conclusions:

1. Bioresonance and multiresonance therapy in combination with acupuncture are effective non-drug treatments for neuroophthalmology.

3. According to our data, the use of bioresonance

therapy and acupuncture in the treatment of neuro-ophthalmology is significantly superior in efficiency to the existing ones conservative methods of treatment in ophthalmology.

3. When carrying out bioresonance therapy and acupuncture the likelihood of adverse side effects and complications was not identified.

#### Literature

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