

Helminthiasis masks  
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Over the past decades, the number of people infected with helminths and other parasitic infestations has been increasing all over the world.

An expert assessment by WHO indicates that more than 4.5 billion people in the world are affected by the causative agents of this group of diseases. According to experts, the number of people with helminthiasis in Russia annually exceeds 20 million, and there is also a tendency to increase. Perhaps, the Krasnodar Territory occupies a special place here - after all, the Kuban climate is very mild, there is practically no frost on the Black Sea coast, with rare exceptions. On cold winter days, helminth eggs can overwinter under the snow and remain viable in the soil. The cultivation of greenhouses and the year-round cultivation of greens, vegetables, strawberries increases the risk of infection with helminths at any time of the year.

This problem occurs especially often in children. If earlier among preschoolers and primary schoolchildren the main "scourge" was enterobiasis, now children and adults are more often infected with roundworms, hookworms, from the simplest parasites - lamblia and toxoplasmosis, although, of course, enterobiasis is also common. Strongyloids and toxocariasis are less common. The number of people infected with schistosomes, opisthorchiasis, hepatica fasciola has increased, paragonimus, although they are not as numerous as the aforementioned parasites.

Currently, due to serious changes in the environment, the widespread use of antibacterial, immunotropic, anthelmintic and other drugs by the population, the clinical picture of the manifestation of helminthiasis has changed. They disguise themselves as other infectious and non-infectious diseases, which makes their diagnosis difficult, complicates the course of existing diseases in children and adults, and contributes to the chronicity of diseases.

Every second or third child who was diagnosed with helminthiasis using the ART method was found to have roundworms or hookworms, and often we found 3-4 parasites at the same time. It is clear that with such helminthization of the child's body, the children lagged behind their peers in development, the students studied poorly, and were distinguished by increased excitability of the nervous system. Moreover, if their parents turned to pediatricians with a request to examine children for helminths, the test result was negative, only occasionally giardia or enterobiasis was found. Even multiple examinations of feces for eggs of worms did not help.

Among the complaints the patients addressed to us, allergic reactions, functional disorders of the gastrointestinal tract, poor appetite, insomnia, increased nervousness, asthenia, memory loss, anemia, and depletion of the immune system prevailed more often. If children still had typical complaints of abdominal pain, alternating diarrhea and constipation, nausea, headaches, then in adults, parasitic diseases were often asymptomatic and were detected only during diagnosis.

We want to share some observations in the diagnosis and treatment of helminthiasis. We work on the device "MINI-EXPERT-DT" of the company

IMEDIS. We always begin the survey with the identification of blockages and interference fields. The presence of blockages can hide some pathology, and interference fields, on the contrary, give a picture of violations that do not exist in the body. Diagnostics of helminthiasis is carried out after removal of geopathogenic, radioactive, electromagnetic loads to obtain the most complete and reliable picture. First, the presence of toxic loads is determined: Intox 1, Intox 2, Intox 3. If a patient is tested for a substantial toxic burden, this gives us the right to assume that he has a recent infection, for example, a bacterial, viral or parasitic burden. We find the specific type of infection with the help of the OHOM DIS series preparations. If the Intox 1 + DIS chain is triggered with parasites, then you should look for a specific type of helminth. We covered this topic in more detail in an article in the collection of reports of the 17th International Conference on Bioresonance and Multiresonance Therapy, and therefore we will not dwell on this issue now.

Unlike morally outdated methods for diagnosing parasites in orthodox medicine, which in the overwhelming majority of cases are not very informative, energy-informational medicine makes it possible to most accurately diagnose helminths, determine their localization and even the stage of development: eggs, larvae, adults. The most common helminthic infestation in the Kuban is roundworm. It is known that the insidiousness of roundworms, like other helminths, lies in the fact that they significantly reduce human immunity, which makes other diseases more severe and prolonged. When a person has already become infected with helminths, but does not yet suspect about it, he becomes especially vulnerable to a viral infection. We faced such a problem last winter. Last year's Kuban winter was especially warm. The rains alternated with cool weather with wind and frost, so that people did not have time to adapt to the sudden change in climate. It was during this period that the flu epidemic began in our country. Here are some examples from our practice.

#### Clinical example 1

Patient 45 years old. She came with complaints: fever, bone aches, chills, runny nose, sore throat, cough. During the examination, she revealed the Coxsackie virus of group B, serotype 4 in 5th potency. The drug was prescribed crotalus, drainage of the respiratory tract, SIN 43 (bronchitis, cough) by OHOM, biocomplex phyto-lithotherapy for the lung meridian. She strictly took all the prescribed drugs, but on the fourth day her health deteriorated sharply, did not sleep at night due to a strong cough, and wheezing was heard in her lungs. On the phone, we advised her to add arbidol to avoid serious complications, and invited her for an examination as soon as she could get up. After taking arbidol, two days later she felt better. Purulent mucus streaked with blood began to cough up.

The patient reported that wheezing was strange, some moans were escaping from the chest, "as if the soul was crying, the feeling that someone was living in my chest." The chest and liver were "stitched" like needles with such a sharp pain that they caught my breath. These symptoms made us wary. After 4 days, the patient was able to come to us for an appointment. The virus was still being tested

Coxsackie as a key nosode. The preparation OHOM DIS for parasites and the frequency of ascaris larvae were not tested, although the clinic was obvious. But the anthelmintic "nemazole" was clearly tested as an effective and tolerable drug.

We know that the development of the parasite begins after the eggs enter the intestines through the mouth, the hatched larvae penetrate through the intestinal wall into the blood. Passing along the path of migration through the intestinal wall, liver, into the lungs, ascaris larvae have a traumatic effect on tissues, causing hemorrhages and inflammatory changes in them. In the lungs, the larva penetrates the alveoli, from them into the bronchi and, together with sputum, enters the gastrointestinal tract, where it develops into an adult capable of laying eggs. That is, the viral lesion of the lungs coincided in our patient with the migration of larvae into the lungs and liver, this explained the strange wheezing and coughing attacks at night during the period of activity of the lung meridian, blood streaks in the purulent discharge. But the frequencies of the virus overlapped the frequencies of the ascaris larvae, so they were not tested.

When in summer and autumn, in the warm season, patients complain of pain in the lungs, coughing, this makes the doctor show helminth alertness, which is not the case in winter during an epidemic of a respiratory viral infection.

Soon after, a colleague, who is also using the ART method, called and asked for advice on how to help her patient with bronchial asthma. She informed that all previously successfully applied methods and means do not give the desired effect. We told her that she should check the patient for roundworms and test the anthelmintic. A single dose of decaris solved all the problems. The attacks of bronchial asthma immediately stopped. That is, in this patient, the exacerbation of the chronic disease coincided with the larval phase of ascariasis.

## Clinical example 2

The baby is 6 months old. The baby developed a rash, the red spots increased and swelled. The parents called an ambulance, and the mother and daughter were admitted to the hospital. There, the girl was diagnosed with acute urticaria, was injected with diphenhydramine, and was given suprastin. Since the girl was only breastfed, they decided that it was a food allergy, and just in case, they forbade her mother to eat almost everything except vegetarian soup and bread. After 3 days, they were discharged from the hospital, and the mother and daughter came to us for examination. No food products were tested as allergens, the mother was diagnosed with heavy metal intoxication, "OHOM" DIS "dental focus" on the large intestine meridian was triggered. Mom remembered that she had her tooth filled 4 days before. The filling was removed as it was poorly tolerated. We prescribed drainage and detoxification therapy for my mother. The dentist was surprised that an allergy manifested itself, such fillings for a young woman she did before all the time. For the baby, we made a single BRT with breast milk inversion load, applied purple color therapy. The rash passed quickly. However, three weeks later, my mother returned with complaints, but now of nausea and pain in the intestines. According to ART data, roundworms were tested in her: eggs, larvae and young individuals. The baby has the same problem, only she did not have immature individuals. Now everything became clear. Acute allergic According to ART data, roundworms were tested in her: eggs, larvae and young individuals. The baby has the same problem, only she did not have immature individuals. Now everything became clear. Acute allergic According to ART data, roundworms were tested in her: eggs, larvae and young individuals. The baby has the same problem, only she did not have immature individuals. Now everything became clear. Acute allergic

the development of larvae gave rise to the reaction, although in the initial diagnosis the indicators of ascariasis did not work. Allergens secreted by roundworms are one of the most powerful parasitic allergens and can cause severe reactions, and then skin manifestations in the form of atopic dermatitis and neurodermatitis come to the fore. After treatment with medicines, homeopathy, resonance frequency therapy (program F.118), the well-being of the mother and child improved.

Thus, we can conclude: if in the larval phase, with the simultaneous presence of an acute infection or acute urticaria, pointers to ascariasis do not work, then we can judge about this pathological process in the body by testing an anthelmintic as an effective therapeutic drug. First of all, it is necessary to treat helminthic invasion.

We see a different picture in the intestinal phase of ascariasis. Being in the intestines, mature roundworms cause epigastric pains, heartburn, vomiting, diarrhea, flatulence in the patient, there may be sharp fluctuations in appetite from "wolf" hunger to aversion to food. The mother of our recent patient, 5 years old, was amazed that her daughter ate a portion of an adult man engaged in heavy physical labor at dinner, and after a short time asks for food again. Not surprising, because all the nutrients from her food were absorbed by the adults of five types of worms. When tested, she was found to have a large deficiency of vitamins, minerals, trace elements. With ascariasis, the structure of the intestinal wall changes, the absorption of vitamins A, C, B6 is impaired, the composition of the intestinal microflora changes. By the way, if in the intestinal phase of ascariasis the patient has an acute viral infection and an allergic reaction at the same time, then both indicators are triggered: parasitic and viral intoxication. The key nosode will be the one that causes the greatest depletion of the immune system.

The literature provides data on the penetration of larvae through the placenta to the newborn. And then a baby of 30–40 days of age can already hatch mature roundworms. There was such a case in our practice. Mom and grandmother brought a month-old boy to the pediatrician for an appointment. They unfolded a diaper for him, and there ... *Ascaris* moves. Everyone was quickly sent to us for examination. It is clear that this helminth was diagnosed in all three, as a rule, this is always a family problem. They were prescribed treatment.

Let's return to the intestinal phase of ascariasis. The intestinal phase of ascariasis can also often disguise itself as other diseases and cause severe complications. Adult roundworms cause mechanical injuries due to the elasticity of bodies and mobility. They can cause reflex dysfunction of the stomach, intestines, spastic intestinal obstruction, injure the walls of the small intestine, up to its perforation. The presence of *ascaris* in the intestine greatly complicates the course and outcome of surgical interventions for various pathologies.

### Clinical case 3

Friends asked to urgently examine their 65-year-old father. At night he was greatly disturbed by pain in the navel, weakness. During the diagnosis, the appendicitis nosode, an acute inflammatory process, was tested. We

advised to take him to surgery, because elderly patients often have complications. By lunchtime, the man was operated on. Ten days after surgery, we were asked to help this patient recover from anesthesia. He was weak, lost a lot of weight, and had no appetite. He was also diagnosed with ascariasis, larval stage and immature individuals. Roundworms got into his appendix and caused a purulent process. After the operation, they interfered with the healing of stitches, the restoration of the body. The patient was prescribed anthelmintic therapy, which we mentioned above, the inversion of chemical drugs used for anesthesia, drainage therapy, handpicked vitamin complexes and microelements, drugs for eliminating dysbiosis.

#### Clinical case 4

Two years ago, my mother brought a 5-year-old boy diagnosed with Acetonemic Syndrome for diagnosis. He was diagnosed with such a diagnosis when he was 2.5 years old. Since that time, the boy was hospitalized seven times in the intensive care unit, where glucose and saline solutions were instilled. In the hospital, he was diagnosed with high acidity, erosive gastritis, Helicobacter, lamblia. The liver is enlarged. In the interictal period, the boy received hepatoprotective drugs, choleric drugs, creon. Mom monitored the level of ketone bodies, tried to keep him on a diet. The baby had complaints of abdominal pain. The examination for ART revealed a double geopathogenic zone, psycho-vegetative load of the 5th degree, blockade of chakras 2, 3, 6, 7 (entrance and exit), toxic loads Intox 1, 2, 3. Allergic, bacterial, mycotic, parasitic, viral burdens were tested. Dysbacteriosis of the large and small intestines was determined. Through Intox 1, the key nosode was parasitic burden, through Intox 2, viral; in addition, congenital cytomegalovirus was tested. Outwardly, it was a thin child with black circles under the eyes, hyperexcitable. He could jump up during the diagnosis, rush around the office, start screaming, spill a glass of crumbs while recording the drug. It was very difficult to predict his future actions. The doctor was alert every second. The therapy was started with the removal of geopathogenic, psychovegetative burden, the normalization of energy according to the method of A.A. Hovsepyan, removing the blockade of the chakras, leveling the acid-base balance, selecting the diet.

Then they began to eliminate the parasitic invasion. The boy was found to have roundworms, hookworms, lamblia. Resonant-frequency therapy of pathogens was carried out using F- and E-programs, preparations from the series "OHOM" DIS and DRE were prescribed, homeopathic complexes were additionally selected to normalize the state of the nervous system.

Bioresonance therapy was applied to the core of the pathology. Healing sessions were held once a month. The necessary vitamins, trace elements, minerals, probiotics were prescribed. After the treatment of helminthic invasion, the following viruses were treated: adeno- and Coxsackie, cytomegalovirus, creating PBS and OBR, psycho-correction of the child's personality was constantly carried out. The boy's health gradually improved. He has grown up, his complexion has changed. The psyche also normalized, prudence and observation appeared, if earlier the boy lagged behind his peers in terms of development, now he has caught up with them. For two

years of therapy, vomiting was once and then after a 5-month break in treatment, when the boy again became infected with ascaris. At the same time, the level of ketone bodies in him was not increased, that is, it was not acetone vomiting. This year he went to school, masters the school curriculum, established contact with peers, and attends the sports section.

Recently, the number of people infected with schistosomiasis has increased in the Kuban. If ten years ago people who had been abroad were more often sick with it, then recently we tested it with a boy from a farm who had never even traveled to Krasnodar.

#### Clinical case 5

A 52-year-old patient, a university teacher, turned to us with complaints of frequent urination that appeared after the summer holidays. During the lecture, due to the strong urge to urinate, I could not stand the bell. Also, when urinating at the end, he sometimes bleeds. He went to the clinic, the urologist suggested that this was due to prostatitis and urolithiasis, which the patient had suffered for a long time and was constantly taking supportive therapy. Previously, such complaints did not arise. Allopathic treatment did not work.

The diagnosis of ART revealed *Schistosoma haematobium*, which belongs to genitourinary schistosomiasis. Since the patient is a fan of photography, he travels a lot to the protected areas of the region. Apparently, there he contracted schistosomiasis. Most often, this type of helminth affects the bladder. When a bacterial infection is attached, pyelonephritis often develops. He was prescribed an electronic analogue of biltricide, because due to a strong allergy, the allopathic drug was intolerable. The F.140 program was prescribed for this type of helminth, OHOM DIS preparations for parasites, DRE of the male genital organs and urinary tract, as well as OHOM SIN 15 and 17. At the next session, we made the BNR-1 with inversion of the nosode of this parasitic infection on the key urinary meridian. bladder, ChBR-2 with tested organ products: bladder, ureters, prostate, large intestine, OBR. The therapy carried out significantly changed his state of health for the better. The helminth was not tested, there were no health complaints.

Summarizing what has been said, we can draw conclusions:

1. Helminths are often disguised as various diseases and can cause serious health complications.
2. Vegetative resonance test allows you to most accurately identify the presence of helminthiasis and determine the most effective method of therapy, including exogenous and endogenous bioresonance therapy.
3. In case of simultaneous infection with ascariasis (at the very beginning disease) and acute viral infection, the frequency of the virus can overlap the frequency of the larval phase of ascariasis. In this case, testing the anthelmintic as an effective therapeutic drug will help to accurately establish the presence of helminthiasis.
4. Anthelmintic therapy will be effective in a complex solution problems, including elimination of pathogens, restoration of the gastrointestinal tract, normalization of the nervous system,

strengthening the immune system, teaching patients the right diet to create an acid-base balance in the body.

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