

Results of treatment of stress secondary amenorrhea with multiresonance therapy and Bach flowers

G.N. Khafizova

("Eliseeva Medical Center", Moscow, Russia)

Stressful (psychogenic) amenorrhea refers to hypogonadotropic amenorrhea.

Stress is a non-specific reaction of the body that occurs under the action of various extreme factors that threaten to disrupt homeostasis and are characterized by stereotypical changes in the function of the nervous and endocrine systems.

Insofar as nervous and endocrine systems are the main regulatory systems of the body, changes in their functions are accompanied by changes on the part of almost all organs and organ systems.

By its biological nature, stress is an adaptive reaction that occurs under the influence of unusual, extraordinary or extreme influences on the human body, contributing to the adaptation of the body to new conditions. However, with a sufficiently strong and prolonged effect on the body of a stress factor, a breakdown of adaptive (compensatory) reactions and a violation of homeostasis can occur. A state of distress develops.

An irritant that causes a stress response is called a stressor. The stressors can be such factors as: trauma, blood loss, surgical interventions and associated anesthesia, the effect of high and low temperatures, noise with an intensity of more than 85 dB, excessive physical and mental stress, ionizing radiation, emotional stress. Stress is triggered by infections and intoxication.

The action of the stressor is realized through the receptors of the peripheral nervous system. Emotional stress can be induced through visual, auditory, and other analyzers. Stimulation of receptors activates the autonomic nervous system, mainly its sympathetic division, and enhances the formation of a number of releasing factors in the hypothalamus.

In women, stressful secondary amenorrhea may occur on the background of exposure to a stressor. The pathogenesis of development is shown in Fig. 1.

The only sign of the disease is amenorrhea. The development of amenorrhea is associated with a stressful situation, the diagnostic therefore criteria for stressful amenorrhea are:

- Low levels of gonadotropins and estrogens in the blood serum;
- Often increased serum cortisol and ACTH levels. In ordinary medical practice, this pathological condition is corrected by the appointment of "small" tranquilizers, and in the absence of menstruation for a long time (more than 6 months), combined, low-dose and cyclic hormone replacement therapy (HRT) is used.



An increase in the concentration of cortisol and PRL in the blood leads to:



Rice. 1. Pathogenesis of the development of stress secondary amenorrhea

Here are two clinical cases of correction of stress secondary amenorrhea using multiresonance therapy and Bach Flowers.

The aim of Bach's flower therapy is to restore harmony and

getting rid of a negative state of mind. Bach's flower infusions relieve fear, fatigue, irritation, shock, stress, help to cope with sadness, despair, self-loathing and others.

Clinical example 1

Patient L.S., 36 years old. She turned to the Eliseeva Medical Center with a complaint of menstrual dysfunction for one year, and the last 6 months there was secondary amenorrhea. This condition is associated with mental stress due to a long-term illness. Operated 7 months ago, gastric resection was performed for malignant ulcer. In the postoperative period, weight loss was 15 kg. Feels like a "squeezed lemon", loss of the joy of life, weakness, complete decline of physical and spiritual strength. When diagnosed by the method of autonomic resonance test (ART), electromagnetic load of the 2nd degree, mental load of the 4th degree, depletion of the immune system, viral and bacterial burden were revealed. On ultrasound: the size of the uterus is slightly below normal, M-echo - 0.6 cm. The size of the ovaries is within normal limits, the follicular apparatus is not expressed. In the analysis of blood: a reduced concentration of FSH, LH, estradiol. The concentration of PRL (prolactin) is in the upper limit of the norm, cortisol is above the norm.

The patient underwent frequency resonance therapy, bioresonance therapy; induction therapy using the program P10 (Stress program III - endocrine regulation) and P13 (Depression program II). To regulate the psycho-emotional state, the drug Bach Flowers (olive oil) was prescribed, 3 drops 3 times a day for one month. Against the background of therapy, regular menstrual function was restored.

Clinical example 2

Patient A.P., 18 years old. She complained about the absence of menstruation for 2 months. He has no other complaints and cannot explain the reasons for the absence of menstruation. From the anamnesis: menarche from the age of 16, were established six months later, for 5-6 days, painless, moderate. The menstrual cycle is 30 days. Notes the periodic disturbances of menstrual function when changing the environment and during the examinations. Ultrasound: the size of the uterus and ovaries within normal limits, M-echo - 0.5 cm. The follicular apparatus is not expressed.

From the conversation with the patient, it was found that she is preparing for admission to the university, sets high requirements for herself, is dissatisfied with herself, believes that she could achieve great success. Feels guilty if he does not solve the assigned tasks. Extremely demanding of herself.

In addition to multiresonance therapy, she was prescribed Bach Flowers (Scots pine and spring water), 3 drops, 2 times a day. During the exams, it is recommended to take the drug Bach Flowers ("Life-saving remedy").

Thus, regular menstrual function is restored without the use of cyclic low-dose oral contraceptives and "small" tranquilizers.

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