Methodology for remote assessment of the effectiveness of bioresonance therapy

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Existing methods electropuncture diagnostics and appraisals the effectiveness of bioresonance therapy is faced with the problem of the subjectivity of the measurement (R. Voll's method, vegetative resonance test) and require sufficient experience and skills in work. The method of segmental biofunctional diagnostics is completely objective, but it requires time to measure only before and only after some kind of exposure, that is, without the possibility of simultaneous instantaneous determination of the significance of the effect on the patient (effectiveness) of a therapeutic effect that changes the vibrational (rhythmic) properties, in the first place , the nervous system and the whole organism as a whole. In order to increase the efficiency of registration of the above parameters and to obtain the absolute objectivity of measurements by remote means, for the first time in 2010, we used the technique of hidden registration of a vibraimage, not in contact with the patient and not affecting the psychophysiological state of the patient during the exposure itself. The vibraimage registers and analyzes vibrations, motor activity and psychodynamic features of a person, by algorithmic transformation of an ordinary video image into a new one - a vibraimage, which informally reflects the emotional and psychophysiological state of a person. Vibraimaging combines modern technical advances with fundamental knowledge in medicine and psychology and makes remote and non-contact automatic determination of a person's emotional state a reality. Vibraimage parameters are also primary and informatively characterize a person, as well as EEG, GSR or ECG parameters. The vibraimage registers and analyzes vibrations, motor activity and psychodynamic features of a person, by algorithmic transformation of an ordinary video image into a new one - a vibraimage, which informally reflects the emotional and psychophysiological state of a person. Vibraimaging combines modern technical advances with fundamental knowledge in medicine and psychology and makes remote and non-contact automatic determination of a person's emotional state a reality. Vibraimage parameters are also primary and informatively characterize a person, as well as EEG, GSR or ECG parameters. The vibraimage registers and analyzes vibrations, motor activity and psychodynamic features of a person, by algorithmic transformation of an ordinary video image into a new one - a vibraimage, which informally reflects the emotional and psychophysiological state of a person. Vibraimaging combines modern technical advances with fundamental knowledge in medicine and psychology and makes remote and non-contact automatic determination of a person's emotional state a reality. Vibraimage parameters are also primary and informatively characterize a person, as well as EEG, GSR or ECG parameters. which informatively displays the emotional and psychophysiological state of a person. Vibraimaging combines modern technical advances with fundamental knowledge in medicine and psychology and makes remote and non-contact automatic determination of a person's emotional state a reality. Vibraimage parameters are also primary and informatively characterize a person, as well as EEG, GSR or ECG parameters. which informatively displays the emotional and psychophysiological state of a person. Vibraimaging combines modern technical advances with fundamental knowledge in medicine and psychology and makes remote and non-contact automatic determination of a person's emotional state a reality. Vibraimage parameters are also primary and informatively characterize a person, as well as EEG, GSR or ECG parameters.

Clinical example

Patient M., 60 years old. At the reception, he shows pronounced concern and anxiety about his condition. When diagnosed by the method of vegetative resonance test, a pronounced psycho-vegetative load is determined. The selection of Bach Flowers preparations was made to compensate for this condition. In the video mode, we observe a change in the parameters of stress, aggression and anxiety downward from the initial ones.
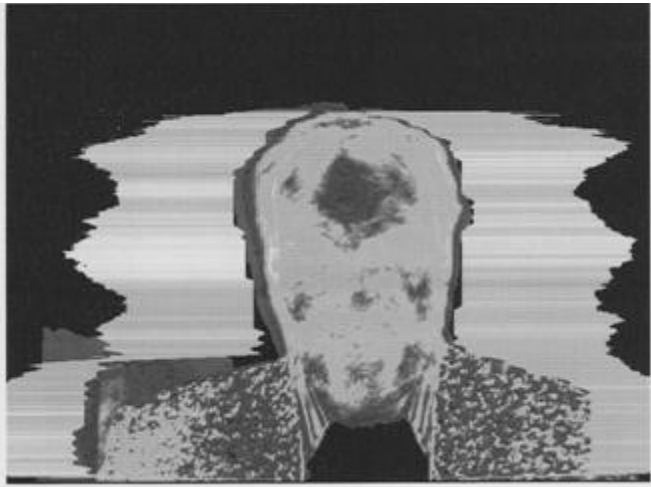
Rice. 1. The initial state of the patient: aggression -60%, stress 80%, anxiety 80%

Rice. 2. The state after the normalization of the psychoemotional state from selector: aggression - 35%, stress - 45%, anxiety - 40%

Literature
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