

The effectiveness of cataract color therapy,
combined with involutional vitreoretinal syndrome

T.P. Teterina

(Center of color therapy "TETTA", Moscow, Russia)

The urgency of the problem

The term "involutional vitreoretinal syndrome" (IVS) was first proposed by A.M. Vodovozov in 1989 IVS is characterized by a complex of various intraocular pathological changes in elderly and senile persons, the clinical picture of which depends on the stage of the process.

At the initial stage, there are destructive changes in the anterior vitreous body and glial plaques on the retina, which, during ophthalmoscopy, reflect light reflexes in the form of coins, flaps or dots described by A.M. Vodovozov in 1963

The advanced stage of IVS is characterized by total destruction and detachment of the vitreous body, as well as fibrous changes and glial plaques on the retina.

The third stage of the progressive process is the stage of complications in which there may be "idiopathic" macular edema or a hole in the macula, retinal fibroplasia, "idiopathic" retinal detachment.

One of the forms of IVS can be the lentivitreoretinal form, in which the lens is also involved in the process. The initial sign of this shape is a gentle annular opacity of the optic zone of the posterior capsule of the lens. In the developed stage, its compaction occurs, and in the third stage, a nuclear or posterior capsular cataract is observed.

The early signs of IVS by doctors, as a rule, are not diagnosed due to their insufficient awareness of this pathology, and in the far-advanced stage, in the presence of nuclear cataract, it is not possible to examine the fundus. According to A.M. Vodovozov, among the operated patients with IVS for cataract complications were about 82%. Therefore, as the author points out, involutional vitreoretinal syndrome is a risk factor for operational and postoperative complications in cataract. Methods for the prevention and treatment of IVS, including its lentivitreoretinal form, do not exist.

Thus, an urgent problem is the development of a new approach to the prevention and treatment of the lentivitreoretinal form of IVS and complications, especially during cataract surgeries.

The aim of our research was to study the therapeutic efficacy color therapy in patients with lentivitreoretinal IVS.

Material and methods

The study included 181 people (362 eyes), of which 55 people with the initial stage of cataract (110 eyes) and developed - 71 people (142 eyes). The average age of the patients was within 58 years (from 48 to 87 years). Men - 84,

women - 97.

For the treatment of patients, the method of color therapy was used with the help of Teterina's "ATsT-02" apparatus. The choice of the method of treatment was carried out depending on the nature of the disease of the organism. The course of treatment consisted of 10 sessions, repeated courses were carried out after 3-6 months.

Results and its discussion

The examination found that in the group of patients with initial cataract, the corrected visual acuity ranged from 0.5 to 0.9, and on average was 0.65. The opacities in the lens were localized mainly in the anterior cortical layers, and in the optical zone of the posterior capsule of the lens - delicate annular opacities. Destructive changes were observed in the vitreous body. Retinal changes were found in 25 people, including those in the macular region.

In the group of patients with developed cataracts, the corrected visual acuity ranged from 0.1 to 0.4, and averaged 0.29. Lens opacities were localized mainly in the posterior cortical layers and the lens nucleus. In the vitreous body, pronounced destructive changes were observed, and various changes in the retina were revealed in the fundus, including in the macula - idiopathic edema, aperture and dystrophic changes.

In all age groups, patients had syndromes of systemic psychosomatic pathology with involvement in the process of dysfunctions of the central nervous system, autonomic nervous, endocrine systems, cardiovascular, immune and other systems. One of the reasons for this pathology was mainly stressful situations, both acute and chronic. In many patients, due to the general condition of the body, there were contraindications to surgical operations for cataracts. In this regard, they had a threat of complete blindness and visual disability.

As a result of color therapy, an improvement in visual acuity was observed in 94.4% of patients with the initial stage of cataract. The number of patients with high visual acuity, equal to 0.9-1.0, after the first course of treatment (10 sessions) increased threefold. Before treatment, this indicator of visual acuity was only 16.6%, and after treatment - 46.6%.

After the second course of treatment with an interval of 3 to 6 months, the same indicator of visual acuity (0.9-1.0) increased by 40%, and after three or more courses - by 50%.

Visual acuity before treatment averaged 0.56, after the first course of treatment - 0.78, after the second course - 0.81, after the third course - 0.95. The best results were obtained with earlier signs of cataract, when the process of lens opacity is still reversible.

In the group of persons with developed cataracts and lower visual acuity, in the range of 0.1-0.4, after color therapy, its improvement was observed in 86%. Before treatment, visual acuity averaged 0.29, and after treatment - 0.55. At the same time, in 71% of patients, visual acuity increased in the range from 0.6 to 0.8.

Thus, in most patients with more severe cataracts

there is also an improvement in visual functions, which is achieved with regular courses of color therapy (at least three courses per year).

After color therapy, a significant improvement in the general condition of the body, normalization of blood pressure, improvement of the functions of all body systems, including the immune and hematopoietic systems, was achieved. Here is an example of color correction of the visual, immune and other body systems.

Clinical example

Patient M., 62 years old, disabled group II for a general disease. Diagnosis: dyscirculatory encephalopathy of complex genesis, cerebro sclerosis, akinetic-rigid form of parkinsonism, hyperthyroidism, widespread osteochondrosis, moderate diabetes mellitus, ischemic heart disease, postinfarction cardiosclerosis, hypertension, renal stone disease, metabolic polyarthritides vegetative-vascular dystonia, depression, drug allergy, cataract, glaucoma, macular degeneration, presbyopia.

In this patient, all of the above diseases became especially evident after retirement at the age of 56 years. For many years (over 30 years) she worked as a teacher in a comprehensive school. According to the patient, she constantly experienced both acute and chronic stressful situations, which, apparently, affected her state of health.

The patient was constantly monitored and treated by many specialists, including immunologists, allergists, endocrinologists, etc. However, the systematic drug treatment was ineffective, as evidenced by the indices of her immunogram, despite treatment with immunocorrective drugs. For example, the content of mature T-lymphocytes (DM3) was reduced in comparison with the norm by 3 times, and T4- lymphocytes (DM4) - 4 times. There was also a decrease in the content of T eight- lymphocytes and immunoglobulin M, an increase in the content of B- lymphocytes, phagocytic activity, immunoglobulin A, rheumatic factor and ESR. These data indicate that patient M. has a reduced body immune response to harmful factors, including the bactericidal activity of the blood and the body's resistance. Along with this, there is a pronounced chronic inflammatory process in the body.

After three courses of color therapy, almost all parameters of the immunogram significantly improved compared to the initial data. Thus, the content of mature T- lymphocytes in the patient's blood (at a rate of 1074–1256) was 372 before treatment, and 1080 after color therapy; T4- lymphocytes (at a rate of 618–801) before treatment - 198, after color therapy - 336; T eight- lymphocyte suppressor / killer (at a rate of 346–491) before treatment - 334, after color therapy - 576; B-lymphocytes (at a rate of 109-291) before treatment - 300, after treatment - 178.

The data obtained indicate that color therapy by the method of T.P. Teterinum has a powerful immunocorrective effect in patients with systemic psychosomatic pathology.

Of interest are the results of treatment and diabetes mellitus in this

sick. After the courses of color therapy, her blood sugar indicators steadily returned to normal, which before treatment ranged from 6.0 to 8.8 mmol / L, and after color therapy did not exceed 5 mmol / L. This allowed the patient to abandon drug therapy. Along with this, general well-being, sleep, the state of the cardiovascular system, as well as visual and other body functions improved, the symptoms of parkinsonism decreased.

Thus, the given example convincingly proves the high efficiency of color therapy through the visual analyzer in chronic systemic psychosomatic pathology. This method can also be used in preventive medicine for the prevention and treatment of diseases that are protracted and resistant to drug therapy.

There is speculation that color therapy may be beneficial in HIV-infected patients. Further research is needed to confirm this hypothesis in specialized hospitals.

Conclusions:

1. Cataract combined with vitreoretinal syndrome is one of the syndromes of systemic chronic psychosomatic pathology of the body.

2. Color therapy by the method of TP. Teterinum is highly effective in the prevention of cataract with vitreoretinal syndrome and its progression, especially in the early stages of its manifestation.

3. Color therapy through the visual analyzer is an effective method correction of health in systemic psychosomatic pathology and has an immunocorrective effect.

T.P. Teterin The effectiveness of cataract color therapy combined with involutinal vitreoretinal syndrome // XIX

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