

Statistical results of the work of LLC MCIT "Artemida"

on the example of the treatment of patients with hay fever

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In 1819, the English physician John Bostock made the first official report of hay fever, believing it to be related to hay.

Later in 1873, David Blakely first proved that the cause of hay fever was pollen.

In 1889, at a meeting of the Society of Russian Doctors in St. Petersburg, Dr. L. Silich made the first report on hay fever in Russia.

In the early 60s of the twentieth century, a disease broke out in the Krasnodar Territory caused by wormwood, which was accidentally brought to Russia from the United States along with wheat grain.

The reason for the development of hay fever is an pollen predominantly wind-pollinated plants, since these are rather small particles with a size of about 0.02–0.04 mm, which facilitates their penetration into the respiratory tract.

In the European part of Russia, there are three main periods of flowering of plants with pollen with allergenic properties [1, 2]:

- trees: late April - early May: birch, alder, maple, oak, poplar, etc.;

- cereal plants: late May - early July: rye, wheat, oats, barley, timothy grass, hedgehog, feather grass, ryegrass, wheatgrass, etc.;

- weeds: late July - early September: wormwood, ragweed, quinoa. Symptoms of hay fever appear at almost the same time every year - runny nose, redness of the eyes (conjunctivitis), fatigue, irritability, sore throat, cough, sometimes asthma attacks, rarely - skin manifestations. Fever develops - hence the name of the disease.

There are three main complementary methods of therapy [2, 3, 4].

Pathogenetic and symptomatic therapy during an exacerbation, which usually includes the use of antihistamines and topical glucocorticosteroids.

Allergen-specific immunotherapy with a causative allergen, which is carried out outside the period of exacerbation.

Barrier method of protection against allergens. In the most efficient ways to prevent the ingress of allergens into the nasopharynx, that is, a barrier method of protection. In this case, specialized nasal filters and "invisible" respirators are used.

The disease is very often confused with the common cold, which sometimes delays patients seeking professional medical help, sometimes for many years.

In the period from July 2011 to January 2012 inclusive, we treated 20 patients with hay fever of varying severity, who sought help from LLC MCIT "Artemida". Unfortunately, not all patients before treatment at MCIT "Artemida" LLC sought medical help from specialized allergists. In this regard, the treatment was carried out only by the method

bioresonance therapy according to the MRADT system [5].

Informational preparations were made on the equipment of the company "IMEDIS", namely, on the device "IMEDIS-BRT-PC" (set 2, "Medicamentous selector") (registration certificate No. FS 022a3066 \ 0414-04 dated 08.07.2004); as well as on the author's apparatus for information transfer "Golden Section".

Many researchers considered the body from the standpoint of a systems approach, to which the works of P.K. Anokhin. E. Revici used the same approach in his works, building a biological hierarchical system of organism levels, linking them with microelements (ME) and the evolution of life on Earth.

Therefore, a distinctive feature of the therapy of patients in this group was the use of electronic copies of trace elements that have a metabolic effect, according to the views of E. Revici [6].

According to E. Revici, some of the microelements are heterotropic, and some are homotropic, which is associated with the structure of the electron shells of the atoms of the microelements.

E. Revici and his students experimentally established that the hetero- and homotropic action of microelements corresponds to their alkalizing or acidifying effect on the scab of the second day of the wound and change the pH of urine in one direction or another. Based on the dynamics of the wound process, acidifying microelements were classified as catabolic, and alkalizing ones - anabolic, i.e. to trace elements that inhibit and stimulate healing.

In the therapy, compensating MEs were used, targeting, respectively, a "weak" organ (SO), a "preweak" organ (PSO) and a brain region (BM) found through a compensated "weak" organ. Thus, when choosing a ME, a prerequisite was observed: O ↓, ME ↑.

Targeting is one of the methods of potentiation, in which the target drug acquires the ability to perform all the tasks set when targeting. In the above case, ME was used as the target drug.

"Weak" in this case is an organ that is compensated by any other tested organ. At the same time, a weak organ can be tested in any potency.

In accordance with the relevance of the current task of the organism, as a single functional system at a specific point in time, different organs acted as "weak" and "pre-weak" each time. Due to the changing metabolism, different microelements were used each time as compensating drugs.

Thus, at each appointment, three preparations were made for the patient: targeting microelements at the "weak", "pre-weak" organs and a region of the brain through the compensated "weak" organ.

The duration of treatment for patients with hay fever was 2 years, as a result of which we were able to observe the change in the clinical picture of the disease during two seasons of allergy manifestation.

By the beginning of the second season, 17 patients with hay fever showed a visible improvement in their general condition, while the symptoms characteristic of this type of allergy were insignificant. In the remaining three patients, the symptoms were less pronounced than before the start of therapy, but they were more intense than in the other 17 patients.

By July 2013, 17 patients had no clinical symptoms, and three showed a visible improvement in well-being and quality of life.

Thus, these results of the treatment of hay fever deserve attention, and the above treatment algorithm can be taken as a basis for the treatment of allergies using ART and BRT methods.

Literature

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