Experience in the application of the systemic nosological approach when using ART and BRT methods S.V. Donbrova (Khabarovsk, Russia)

Introduction

Recently, a new direction has appeared in the application of ART and BRT methods: the systemic-nosological approach, developed by K.N. Mkhitaryan [1]. The systemic-nosological approach is the treatment of a specific nosology of a person, taking into account his constitution and the integral tasks of self-fulfillment that he faces. From a methodological point of view, the systemic-nosological approach assumes that the formulation of any nosological task (the task of treating a specific nosology) generates a partial constitution of the bodyregarding this task. This (partial) constitution is privatean aspect of the general constitution of the body, it stands out when solving a particular problem of self-fulfillment (in this case, the problem of treating a certain nosology) and describes the possible long-term consequences of its solution arising from a non-systemic approach, that is, the price for adaptation to this task. Consequently, a full-fledged solution of a certain task of self-fulfillment is possible only in the case when, in addition to the drug directly aimed at its solution, additional therapy of the patient is carried out with drugs that compensate for his (partial) constitution, relative to this task. Technically, the systemic-nosological approach is characterized by the following features:

- when selecting or manufacturing a control signal for therapy, the successive amplifications of the KMX marker [2], obtained by rewriting it through the 4th container of the IMEDIS-EXPERT apparatus, are compensated, followed by the summation of the original and amplified signal;
- the alleged constitution of the patient is "divided" into two components: conditionally negative and conditionally positive. The conditionally negative component is usually compensated for by one of the potentiated chemical elements, in accordance with the scheme developed by T.V. Akayeva and K.N. Mkhitaryan [3]. The conditionally positive component of the constitution is supported by Systemic Spiritual Adapters (SDA) and Fateological Preparations (SBP) [4].

The practical application of the systemic-nosological approach requires a clear understanding of what the primary task of therapy looks like (in relation to which the derived constitution is determined), from the point of view of constructing a control signal. Sometimes a separate drug or group of drugs is generally needed to solve the primary task of therapy. Currently, according to the author, approaches have been developed and specific groups of drugs have been constructed to solve the following primary tasks of systemic nosological therapy:

- 1. The tasks of finding and maintaining a "natural" positive constitution.
- 2. Tasks of regeneration and restoration of functions of tissues, organs and systems organism.
 - 3. Geriatric tasks.
- 4. The tasks of changing the life scenario (fateful, in terminology [4]).

In this work, the effectiveness of the systemic nosological approach is illustrated by cases from practice. The designations used in multilevel systemic adaptive diagnostics and therapy (MSADT, [4]) are used. Abbreviations used:

- "drug X is aimed at the test indicator Y", instead of "the electronic potency of drug X is chosen so that it compensates for the test indicator Y";
- "drug X was selected through the group of test indicators Y" instead of "drug X was selected so that it would compensate for all test indicators from group Y".

The key from below, or the weakest, was called a test pointer from somegroup of patient decompensating test pointers, which compensated for all other test pointers from this group.

The key above, or the strongest, was called a test pointer from the grouptest-pointers that compensate for the test-pointer given by the key from below, which was not decompensated by any other test-pointer from this group.

Objectives of the work:

- 1. Assess the effectiveness and scope of the systemic-nosological approach in the treatment of various diseases of the patient.
- 2. To investigate the possibility of combining the systemic-nosological approach with other techniques, in particular, the technique of multilevel systemic adaptive diagnostics and therapy.
- 3. Within the framework of the systemic nosological approach, assess the effectiveness of some special informational preparations, in particular, Preparations for regeneration and the horiatric preparation "Syvstar".
 - 4. Conduct the specified assessments on the example of several cases from practice.

Clinical examples

1. Patient A., 56 years old.

She applied in September 2013 with complaints of: a feeling of a lump in the throat, heaviness, pressure in the neck, tension in the mammary glands, weakness in the legs, paralytic gait, anxiety, irritability, insomnia.

Objectively: the patient's clinical diagnosis is nodular and cystic goiter, nodesleft lobe of the thyroid gland, fibrocystic breast disease. In 2004, an operation was performed: removal of the right lobe of the thyroid gland for nodular goiter. Ultrasound of the thyroid gland from 03/29/2013: the right lobe is removed, the left lobe: thickness - 1.5 cm, width - 1.2 cm, height 3.64 cm, isthmus 3.6 cm. The contours are indistinct, uneven, echogenicity is increased , heterogeneous. In the middle third, a hypoechoic formation is a conglomerate up to 1.7 x 1.3 x 1.8 cm with fuzzy and

uneven contours, the structure is heterogeneous. In the area of transition to the isthmus, there is a hypoechoic formation up to 1.0–1.2 cm with indistinct and uneven contours. In the middle segment along the posterior surface, there is a hypoechoic solid node 0.54–0.68 cm, the blood flow is mixed. Hormone levels are within normal limits.

Diagnostics using the ART method: thyroid gland D3-D6-D15, nodular and cystic goiter D5-D30. Epstein-Barr, Coxsackie viruses, inf. mononucleosis, disorders in chakras 2, 4, 7, hippocampus, pituitary gland, hypothalamus, amygdala.

Therapy

Antiviral: potentiated Interferon and Crotalus, selected through the key Epstein-Barr virus. Blood autonosode targeting CMH. Triton-regeneration aimed at KMX2. Response 3 to potentiated calcium-iodine (subsequently, barium-iodine), selected according to KMX3. SDA and SBP: ZhK, "Business women", "Rainbow", preparations of the "Guna" company, Bach flowers, picked up through KMH4. Response-3 matching cards "Person" and "OX2. Psychosocial loads were selected through KMH5. Further - preparations "Annelida", embryo. myelin, The death of neuroblasts, aimed at the structures of the brain and spine identified in the process of diagnostics.

The intake of each drug was 1 month according to the scheme. The therapy lasted about 15 months.

The results of therapy: the state of health improved, the lump and pressure in neck areas, weakness and heaviness in the legs, the patient began to walk better, her mood improved, insomnia disappeared. Objectively: ultrasound scan dated January 27, 2014 showed:shield. gland right lobe: thickness - 1.3 cm, width - 1.2 cm, height - 3.2 cm, volume - 2.39 cm. Left lobe: thickness -1.5 cm, width - 1.4 cm, height - 3.6 cm, volume - 3.35 cm, isthmus - 0.35 cm. Diffusely inhomogeneous alternation of areas of different echogenicity of nodes with areas of fibrosis with a size of 0.87-0 , 78 cm with fuzzy nerve contours, mixed blood flow, single cysts 0.57-0.54 cm in size. Thus, in accordance with ultrasound data during therapythere was a regeneration of the missing right lobe, a decrease in nodes. Therapy continues.

2. Patient B., 40 years old.

Diagnosis: osteochondrosis of the lumbosacral spine, herniadisc L5-S1 radicular syndrome on the left with impaired sensitivity on the posterior and lateral surfaces of the left leg, numbness of the thigh, toes, paresis of the foot, walking is difficult, severe pain syndrome. Concomitant diagnosis: ovarian cyst, cystic mastopathy. On MRI, the disc protrusion was 1.18 cm. The operation was performed: the compression was removed, but there was still a violation of sensitivity and pain.

Therapy: urine autonosode targeting KMX + Spine, Triton-regeneration targeting KMX2, annelida targeting KMX3, embryo preparations: Discs, Myelin, Neuroblast death targeting the lumbar spine ligaments and disks; through KMX4 minerals silicon were found, subsequently, selenium, and responses-3 were made to them. Prescribed fateful drugs: Feminine principle, Destruction, as well as SDA: Star of Bethlehem,

selected through KMH5, psychological drugs from the firm "Guna", "Bach Flowers" were also used, fears were removed.

The treatment was carried out 1 time in 2 months, a total of 3 sessions of therapy were carried out.

The results of therapy: the patient's well-being improved: pain disappeared, numbness, sensitivity in the leg is fully restored, walks normally, cystic mastopathy and ovarian cyst have disappeared. The treatment is complete.

3. Patient C., 82 years old.

Complaints of severe general weakness, dizziness, increased blood pressure up to 180-200 mm Hg, lost a lot of weight - up to 42 kg - a month did not eat because of intestinal infection, unwillingness to live, the patient was prepared to die.

Diagnosis: general atherosclerosis, sclerosis of the vessels of the brain, heart symptomatic hypertension, widespread osteochondrosis, dysbiosis, chronic cholecystopancreatitis, depression. The patient had a history of oncology.

With ART: viral infection - Epstein-Barr virus, which was tested forstructures of the brain: cerebellum, corpus callosum, hippocampus, hypothalamus, cingulate gyrus, carotid arteries, cerebral arterial network, vertebral artery. Tested in the large intestine: Escherichia coli. Also tested were: gallbladder stones D26, lack of sodium, iron, zinc, amino acids, enzymes, very pronounced depletion of the immune system, disorders in the 4th and 7th chakras, low adaptation reserves of the 4th degree, oncoprotein in the lymph nodes.

Therapy: blood nosode targeting CMH, antiviral therapyinterferon, magnesium was selected through KMX2, Response-3 was made, trepang regeneration is aimed at KMX3, SDA: ZhK, Vsetsaritsa, the Virgin's belt are aimed at KMX4, ZhP stones are aimed at the gallbladder, psychological drugs from Guna, Bach Flowers, electronic copies of endorphin and dopamine target KMX5. All manufactured preparations were verified through RA.

The very next day after therapy, the patient's mood improved, a desire to live appeared, headaches and dizziness disappeared, after 2 days the pressure became normal, appetite appeared, began to gain weight, RA is good 5 tbsp. The treatment continues.

4. Patient G., 36 years old, has been undergoing treatment since November 18, 2013. In October 2013 The operation was performed - removal of the ovary and part of the peritoneum for serous cystoadenocarcinoma of the ovary. Regional metastases in the peritoneum in the Douglas space, cystic process of the left ovary. The patient was offered a repeated radical operation with the removal of the uterus and the second ovary with the peritoneum, followed by chemotherapy, which the patient categorically refused.

Diagnostics using the ART method: strong mental stress 8 tbsp., The sum of fears, endogenous psychoses, disorders in the brain: hippocampus, hypothalamus, cingulate gyrus, corpus callosum, ovary - cyst, uterus - endometriosis.

Therapy: a response is made through the KMH3 at lithium, SDA is targeted through KMX2:

the source of the Trinity-Sergius Lavra, the life-giving source of Seraphim of Sarov, the cross of 32 relics, the LCD, the source of Mary Magdalene. Through KMH3, psychological drugs were selected from the Bach Flowers group, as well as firms "Rostok", "Guna", Response-3 was made to the cards "Person", "OX", and to the drug "Summa Fears". Chronosemantics: the life line was "cleaned" by the nosode of ovarian cystoadenocarcinoma. Various psychotherapeutic techniques were carried out, work on Simonton. The patient herself actively worked with forgiveness, got rid of offenses, confessed, and received the Holy Communion.

On February 20, the patient happily informed me that everything was normal on PET and MRI - there were no metastases, the cystic process had completely disappeared.

5. Patient D., 73 g.

Complaints: general weakness, severe dizziness when moving, instability of posture, falls, headaches, increased pressure up to 180 mm Hg, pain in the spine and joints, constipation, lack of good mood, says that everything is falling apart.

Diagnosis: acutebasilar insufficiency, cervical and thoracic osteochondrosis, general atherosclerosis, symptomatic hypertension.

Diagnostics using the ART method: disorders in the small and large intestine, chronic colitis, Meckel's diverticulum, E. coli, Coxsackie virus, campylobacter, salmonellosis, streptococcus, staphylococcus, fungi. Organ preparations of the brain are tested: hippocampus, pituitary gland, cerebellum, cingulate gyrus, reticular formation, external and internal carotid arteries. Among infectious agents: cytomegalovirus and Ebstein-Barr virus.

Therapy: blood autonosode targeting KMH through KMH2, Response-3 was made to calcium, Triton-regeneration is aimed at KMX3, through KMX4 SDA was selected: the powers of Alexei the healer, ZhK, LF, psychological drugs "Guna", "Rostok", drainage drugs from "ONOM". The course of treatment after the first session of therapy was 2 months.

On the 2nd session: the drug "Syvstar" is aimed at the KMH. The therapy continued for a month.

The results of therapy: the patient's condition quickly improved, disappeared dizziness, unsteadiness of gait, tendency to fall, pain stopped, pressure and gastrointestinal tract function normalized, good mood became stable, according to her own assessments and outward appearance, the patient became younger. The therapy continues.

6. Patient E., 68 years old.

Diagnosis: deforming arthrosis of the right hip joint 4 tbsp.Objectively: in November In 2013, he was operated on: replacement of the right hip joint with an artificial one. The operation was difficult. The patient was in intensive care for several days, was discharged from the hospital ahead of schedule (on receipt), not walking.

Therapy: light-information therapy according to SU JOK correspondence pointship joint and pain points corresponding to the lumbar

sacral spine. Light probe A.E. Kudaev, the information of the preparations was applied: Regeneration of newt, Regeneration of the tail of a lizard, organopreparations of the Turtle, Boar and Tiger "Synergy". Previously, all drugs used were targeted at the patient's CMH. At the same time, BRT was performed on the area of the hip joint with a load of the same regeneration drugs through a device for magnetic therapy "belt". They were picked up through KMH2 and assigned to the SDA: ZhK, the relics of Alexei the Baptist. Homeopathic medicines Traumeel, Arnika, Symphitum were prescribed. Osteoblasts, neuroblast death, and Response-3 to calcium, selected through KMX3, were included in the treatment.

The patient took the adapted drugs by mouth for 3 months. The treatment was started one week after the operation and was carried out once a week.

The results of therapy: the pain syndrome was quickly stopped, the patient becamemore active. On average, the recovery accelerated by a month, instead of the usually planned 3 months on crutches, the patient used them for 2 months. Objectively: the control X-ray shows very good fusionalloplant with bone tissue of the femur. The therapy is complete.

7. Patient J., 50 years old. Fracture of the metacarpal bone of the right hand and soft contusion fabrics.

Therapy. Removed "D" - vibrations from the place of injury and pain, they were aimed atthe drug Triton-regeneration, which was used both as a load during BRT according to the second strategy, and in the form of taking the drug inside. Osteoblasts were targeted at the "D" -vibration, homeopathic medicines Arnica, Traumeel, Symphitum were selected. Through KMH, Response-3 was selected and made to Calcium phosphoricum.

Therapy results: through 2 days, pains, tissue edema disappeared, the formation of callus occurred after 15 days, and the hand was not fixed with a plaster splint, the patient continued to work.

Conclusions:

- 1. The systemic nosological approach is a highly effective method therapy of any pathology, regardless of the state of health of the organism, its individual constitution, the state of its adaptation reserves and other individual factors, acquired or hereditary. It can be implemented using various information drugs and in all cases contributes to the improvement of the patient's quality of life, raising his mood, positively changing his life scenario and solving even very difficult problems of therapy.
- 2. The use of the systemic nosological approach is successfully combined with the use of other, close to it forms of therapy, in particular, IRADT. In this case, the systemic-nosological approach constitutes, as it were, a "constitutionally-oriented" framework of therapy, while the MCADT drugs, which compensate for the "key" organs, have to solve particular problems.
 - 3. Preparations for regeneration are effective in trauma, in the postoperative

period, in the treatment of many difficult to treat diseases, in inflammation, in the rehabilitation and recovery of patients.

4. The drug "Syvstar" is effective for solving geriatric problems, according to at least in combination with other information drugs.

Literature

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