

## Clinical studies of bioresonance therapy in the diagnosis and treatment of infectious diseases

V.E. Avseenko, O. V. Bessarabov

(Treatment and Diagnostic Center "Medicine of the Future", Kaliningrad, Russia)

In this work, we continue to present clinical studies and theoretical developments of the Center for Medicine of the Future.

The most important problem of modern medicine is the early diagnosis of diseases. According to the statistics of the Ministry of Health, every third diagnosis in Russia is incorrect. Our clinical studies show that in many cases it is impossible to identify pathogenic pathogens and make a correct diagnosis using chemical analyzes. With this development of events, patients find themselves in a desperate situation. The only chance for them to survive is electropuncture diagnostics using the ART or ART + method. As a striking example, we present one of such cases, although we have more than enough such examples.

On April 23, 2011, a 61-year-old woman came to the Center for Medicine of the Future with a complaint of high temperature - up to 39 ° C, skin rash, weakness, sore throat, pain in the knee joints, cramps in the calf muscles.

According to the patient, on March 20, 2011, she felt severe discomfort. Red spots appeared on the chest. A few days later, on her thighs under the skin, she developed a pattern resembling patterns of a leopard skin.

After a few more days, the joints of her arms and legs weakened to such an extent that she could no longer hold a spoon and fork in her hands and could not move around the room without assistance. In the right hypochondrium, severe persistent pains arose, due to which she could not sleep.

On March 28, 2011, she recorded a temperature of about 38 ° C, which was now held constantly. Appetite has completely disappeared. There are spots on the neck and forearms, a red rash on the legs. She was treated with antibiotics on her own (amoxiclav).

On 04.04.2011, she applied to the Vozrozhdenie medical center, where she underwent a clinical and biochemical blood test. According to blood tests: ESR - 23; Bilirubin - 23.1. Otherwise, no pathology was revealed.

On April 6, 2011, the patient turned to the local therapist at the polyclinic with complaints of pain in the joints, in the throat and an increase in temperature to 38.4 ° C for two weeks, blood pressure - 130/90. Diagnosed with acute pharyngitis. Prescribed treatment: cefazolin, vitamin B, vitamin B6 - in / m, inhalation inhalation. FG from 04/06/2011 - no pathology was revealed. The condition worsened.

On 08.04.2011, the local therapist was called at home. Complaints of severe weakness, pain in the joints (knee, elbow), an increase in temperature to 38.5 ° C, a skin rash. Objectively: the condition is serious. BP - 160/100, liver + 1.5–2.0 cm from under the edge of the costal arch. Diagnosed with ARVI, severe course. The patient is referred cito to the infectious diseases hospital.

The condition continued to deteriorate. On April 11, 2011, she was hospitalized by ambulance at the infectious diseases hospital of the Kaliningrad region, on April 12, she was given various tests at the hospital. According to blood tests: ESR-55,

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RW - negative, Vidal's reaction - negative, Listeriosis - negative, Mycoplasma - negative, Chlamydia - negative, Yersiniosis and pseudotuberculosis - negative, Toxoplasmosis - negative, Herpes and CMV - negative, Hemoculture, sterility - negative, ELISA for mononucleosis - negative. Feces, urine for salmonella. - negative. Feces on I / worms - negative.

The main diagnosis was: "Non-infectious fever, moderate severity", concomitant diagnosis: "Toxicoderma". In fact, according to the results of analyzes, the causes of the disease were not identified. Symptomatic treatment with medications was prescribed: gentamicin, ciprofloxacin, etc.

Treatment in a hospital was carried out until 04/23/2011. During the entire treatment period, t remained within 39 ° C. Three days before discharge, on April 21, 22 and 23, the patient underwent infusion therapy No. 6. This led to a sharp decrease in temperature to 36.8 ° C.

04/23/2011, after a sharp drop in temperature, the patient was discharged from hospitals with the wording: "According to clinical recovery, in satisfactory condition."

At the time of discharge, according to the results of analyzes, the ESR increased to 62 units. Thus, the patient's condition at discharge worsened in comparison with the moment of admission. If, upon admission to the hospital, the patient moved independently, then when she was discharged she could no longer walk on her own and moved only with the help of her husband.

The next day after discharge from the hospital, t rose to 39 ° C. On April 24, 2011, the patient was forced to seek help from the "Medicine of the Future" center with a request to identify the causes of the disease and provide treatment. Due to the fact that the patient could no longer move independently, she was actually brought to the center under the arms of her husband and son.

On the same day, the patient was diagnosed using the ART + method and the reason for the decrease in immunity was identified. The ART + method makes it possible to study the electromagnetic and magnetic properties of tissues of organs and the autonomic nervous system. In any disease, the magnetic properties of the tissues that make up our organs and their electrical conductivity change. Thus, by the state of the magnetic properties of tissues, it is possible to determine the disease and prevent its further development.

The most affected organs with maximum disturbances, metabolic disorders and functions were identified: hypothalamus, thyroid gland, right ovary, large internal, small internal nerve, femoral nerve, peroneal nerve, sacral plexus, pelvic plexus, brachial plexus, lumbar plexus, glossopharyngeal nerve, cervicothoracic ganglion, recurrent laryngeal nerve, sciatic nerve, left kidney, myocardium, bronchi, right lung, liver, gallbladder, small intestinal mucosa, knee joint, synovial membrane, ankle joint.

Organs with foci of inflammation with preservation of functions: the head of the sympathetic nerve, trigeminal nerve, pituitary gland, right and left adrenal glands, left ovary, right kidney, basilar artery, bronchi, hippocampus, cerebellum,

basilar artery, bronchioles, left lung, spleen, gastric mucosa, colon mucosa, knee joint cartilage.

As a result of the diagnosis, the organs of the endocrine system were identified, the disturbances in the work of which caused a decrease in immunity. These organs turned out to be: hypothalamus, thyroid gland, right ovary.

Impaired immunity in the foci of inflammation was associated with the following pathogens: green streptococcus, herpes zoster virus, yersinia enterocolitis.

Each pathogen or toxin has its own frequency characteristics. The ART + method makes it possible to identify various causative agents of diseases or other toxins and determine the degree of their pathogenicity for humans. In this case, the cause of a sharp decrease in immunity and the occurrence of numerous symptoms of the disease was the poisoning of the body caused by the bacterium Yersinia enterocolitic. This bacterium possessed the highest degree of pathogenicity in comparison with other pathogens.

In this case, the decisive factor that could lead to the death of the patient was that, according to the results of laboratory tests, the bacterium Yersinia enterocolitic was not detected. There is no doubt that the doctors of the Kaliningrad Infectious Diseases Hospital did everything possible to ensure that all analyzes were carried out in accordance with the currently accepted diagnostic standards. And, nevertheless, it was still not possible to identify the bacterium.

Obviously, in this case, it is not the doctors who are to blame, but the failure of modern diagnostic methods, which is especially pronounced during laboratory tests. Laboratory tests are important and necessary. In our work, we always take into account their results. However, according to our clinical studies, the cause of infectious diseases very often turns out to be far from those pathogens that were identified by the results of laboratory tests.

Based on the results of diagnostics using the ART + method, the patient was prescribed a course of endogenous BRT to restore the immunity of the affected organs. In addition, the capabilities of endogenous BRT were used to suppress the bacteria Yersinium enterocolitic. A course of resonance frequency therapy was also carried out.

We understood what a huge responsibility our center was taking upon itself. If we weren't able to save the patient, we would be in enormous trouble. We took on the risks that government agencies should have taken on. Knowledge of the principles of endogenous BRT and the accumulated experience of work allowed us to withstand this test with honor and save the patient.

In the first two weeks, the patient underwent 1-2 sessions of endogenous BRT daily. On the day of the first visit, her husband, along with her son, carried the patient to the center. The next day, 04/25/2011, she climbed the stairs on her own, albeit with the help of her husband. Two weeks after treatment, the patient climbed the stairs without assistance.

The temperature began to drop gradually. Two weeks after the start of treatment, t decreased to 37.2-37.5 ° C, but not yet completely

returned to normal. Only a month later,  $t$  was established within  $36.6^{\circ}\text{C}$  and did not increase anymore.

For the first two weeks the patient could not sit, and her BP was 60/40 several times. During this period, all sessions of endogenous BRT were performed on a medical couch. During these sessions, the patient was asleep. The session lasted about one hour. In the first few days after the end of the session, the patient remained asleep on the couch, and we took a break from treatment. After about an hour and a half, the session was repeated.

Three weeks after the start of treatment, the patient was already undergoing one session of endogenous BRT per day. In the fifth week of treatment, after complete normalization of  $t$ , sessions of endogenous BRT were prescribed every other day. On the sixth week - after two days, on the seventh - after three days, and on the eighth - once a week.

In addition to endogenous BRT, the patient underwent exogenous BRT sessions to suppress the *Yersinia enterocolitica* bacteria. These sessions began to be prescribed only a few days after the improvement of the patient's condition as a result of endogenous BRT.

This tactic of treatment is preferable in all cases when patients have a high fever associated with infectious diseases. If you start frequency resonance therapy during a period of high  $t$  values, then there is a danger of getting an exacerbation of the disease and a sharp jump in  $t$ .

In cases with high fever (especially with viral diseases, bronchopneumonia and pneumonia), it is preferable to improve the patient's immunity with the help of endogenous BRT, and then, after a decrease in temperature, apply resonant frequency therapy. Within a month, the patient gradually disappeared pain in the muscles and joints. During the treatment period, edema of the legs occurred, which completely stopped after the end of the treatment. After two months, the symptoms of the disease completely disappeared:  $t$  returned to normal, the patterns on the skin disappeared, the patient began to lead a normal life again and went to work.

During the entire period of treatment, the potency of the bacterium *Yersinia enterocolitica* was tested by the ART + method. 06/24/2011, the patient made an analysis for the detection of *Yersinia* in the laboratory "INVITRO". The analysis showed: IgA - 0.26.

Due to the fact that all treatment was aimed at curing this bacterium and restoring the immunity of organs affected by *Yersinia enterocolitica*, we estimate such an insignificant amount of IgA as residual after treatment.

One thing is certain: the patient could not recover with conservative methods of treatment and her condition was constantly deteriorating. After applying the methods of endogenous and exogenous BRT, it was possible to completely restore immunity, metabolic processes and functions of the affected organs.

On 03.08.2011, the treatment was completely completed. In total, the patient underwent 32 sessions of endogenous BRT. Based on the diagnostic results, the functions of the affected organs were restored, except for the gallbladder, thyroid gland, left kidney, myocardium, lumbar plexus and sciatic nerve. As a result of treatment, the patient completely disappeared all symptoms of the disease, including temperature,

rash, muscle and joint pain.

Follow-up: 02/11/2014, 2.5 years after the end of treatment, the patient underwent free control diagnostics using the ART + method. The bacterium *Yersinia enterocolitica* was not detected, the condition of the organs did not deteriorate, the state of health is good, during the past time the patient did not go to doctors, did not use medications.

Homeopathic constitutional, medicinal, drainage and detoxification preparations were not used in the treatment. Nosodal therapy was not used. Thus, the homeopathic principle "Like cures like" was not implemented and homeopathic treatment was not used.

Pathophysiological chains from homeopathic drugs for simulations of signs of similarity to exchange processes were also not used. All treatment was fully based on clinical research and development of the Center for Medicine of the Future, based on the assumption of the possibility of "Quantum control in the atoms of substances of living matter."

In these clinical studies, we continue to present the theoretical developments of our center in the field of endogenous bioresonance therapy. In treatment, we rely on the analysis of physical phenomena that occur during endogenous BRT.

These phenomena are described in a scientific article of our center "Theoretical substantiation of the essence of physical phenomena that cause the therapeutic effect of endogenous bioresonance therapy. The theory of quantum control in the atoms of substances of living tissues "

The specialists of the Center for Medicine of the Future invite the participants of the XX international conference to write a written appeal to the Ministry of Health and Social Development of Russia to introduce bioresonance therapy and diagnostics of ART in the nomenclature of medical services in the section "05 - registration of electromagnetic signals emitted or potentiated in organs and tissues with their subsequent decoding and description" and section "17 - electromagnetic therapeutic effect on organs and tissues ". Or create a special section "diagnostics based on the study of the magnetic properties of organ tissues with their subsequent decoding and treatment based on the restoration of the magnetic properties of organ tissues." This section could include all relevant instrumental methods, including ART, MRI and bioresonance therapy.

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