

Expanding the possibilities of correcting endocrine disorders by  
identifying food toxicity as the cause of pseudoallergic  
delayed-type reactions and their control by ART and BRT

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Unlike classical allergy, much less is known about pseudo-allergy (delayed-type cumulative allergic reaction), as well as about the possibilities of correcting these latent conditions, manifested in such diagnoses as: atopic dermatitis, psoriasis, eczema, neurodermatitis, bronchial asthma, diabetes, obesity, hypothalamic syndrome, juvenile dyspituitarism, thyroid diseases, migraines of various origins, sinusitis, vasomotor rhinitis and many others. There are practically no unambiguously recognized recommendations; they are all very contradictory. Only one thing is known for sure: they are all immunological reactions, mainly of homotoxic origin.

Our team is closely tackling these problems with natural methods using algorithms of bioresonance and multiresonance medicine. Since October 2012, we have taken a control group - 104 people with the above pathologies: 34 people with different forms of obesity, 27 people with type 2 diabetes, 8 people with autoimmune thyroiditis, 35 people with psoriasis, eczema and various types of dermatoses. All of them have latent allergic reactions of the accumulative (sometimes for many years and even decades) delayed type, characterized by the absence of specific antibodies or sensitizing cells, although their symptoms are similar to allergic reactions. The central link in their origin is occupied by arachidonic acid - a component of the phospholipids of the cell membrane.

In our patients of the control group, the balance shifts towards the increased formation of leukotrienes, which are mediators of the inflammatory process. This mechanism does not require the presence of antibodies, in contrast to allergic reactions associated with immunoglobulin E. Routine allergen tests cannot detect latent delayed allergic reactions.

When treating our patients, we used electropuncture diagnostics and bioresonance therapy, and we also took blood from them from a vein to detect the cytotoxic reaction of leukocytes to 150 ingredients of food hydrolysates and saw on line how cells of the immune system - leukocytes and lymphocytes - die from or another food product (there are 4 degrees of tolerance and 4 degrees of food intolerance according to Mark Lovendale). As a result, we came to the conclusion: the immunological response to food is individual and is not repeated in anyone. There are many reasons for this: heredity, living conditions and human activities, his habits, acquired pathologies, factors of ecology and endoecology, nutrition. More than 80% of health problems, including the development of chronic diseases, people

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lays down to himself, using incorrect, and, at times, simply destructive food for his immune system.

Prescribing BRT sessions and detailing a personal diet based on studies of the prime test for latent food toxicity according to the degree of food intolerance and monitoring the immune status, endocrine status, adaptation reserves, nutritional adequacy, hematopoiesis formula and some other indicators using the ART method, we achieved remarkable results in treatment the most complex diseases that are difficult to treat even with BRT methods (psoriasis, diabetes, eczema, etc.). Also, the terms of rehabilitation of patients were significantly reduced and a stable remission was achieved. Against the background of the therapy, weight was normalized, blood pressure indicators improved, outwardly all patients looked significantly younger than before the start of treatment, lymphatic edema disappeared, sleep normalized, and efficiency increased. The therapy was effective in all patients.

Thus, the results presented by us indicate the advisability of using Prime-Test in combination with BRT in the treatment of endocrine and immune disorders, which leads to beneficial significant shifts towards the restoration of healthy cells of the immune system, an increase in their working number and removal of inflammatory mediators from the blood and an improvement in quality. life of patients.

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