Application of the BRT method in traumatology

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The use of bioresonance therapy as a method of restorative medicine has shown its effectiveness in various diseases.

Osteoporosis is a decrease in bone density, as a result of which the bone becomes loose and prone to fractures, even with a slight load. In terms of prevalence, osteoporosis is among the leading diseases such as heart attack, stroke, and oncology. Worldwide, 75 million people suffer from osteoporosis. In Russia, 34 million people suffer from osteoporosis. Osteoporosis reduces life expectancy by 12–20%.

Purpose of the work: to assess the effectiveness of the use of bioresonance therapy (BRT) and homeopathy during the period of rehabilitation treatment of patients with injuries to the extremities.

Materials and methods

We analyzed 6 cases of traumatic fractures in patients over 80 years of age who were inpatient treatment at Clinical Hospital No. 5. All observed patients underwent surgical treatment, AFN osteosynthesis with Shants screws, and 2 bars in the flexion position of the limb.

Were considered 2 groups of patients.

The first group consisted of 3 patients: 3 women aged 84, 85 and 82 years with a diagnosis of open comminuted fracture of the left humerus condyles with displacement; fracture of the radius and femur with displacement; fracture of the ankle and calcaneus of the right leg, respectively. All patients of this group in the postoperative period underwent BRT on the device "IMEDIS-BRT-A" 1 strategy daily for 3 weeks. Additionally, injections of Traumeel and Echinacea Comp. 2 times a week, and also used the homeopathic drug OKOPNIK in potencies 3x, 3, 6 orally.

The second group consisted of 2 women aged 80 and 81 years and 1 man aged 82 years with similar injuries. Patients of the second group did not receive BRT and homeopathic treatment. He underwent symptomatic and antibacterial therapy.

results

In patients of the 1st group, the rehabilitation period was uneventful. With repeated hospitalizations for removal of ANF, the fracture area without signs of inflammation, neurocirculatory disorders were not observed. We were in the hospital for 17–21 days for the first time and 7 days for the removal of ANF. The functions of the injured limb were fully restored.

Patients of the second group were in the hospital for 28–35 days, and the postoperative period was more difficult, in one of them the

osteomyelitis. The restoration of functions in the injured limbs was not complete.

Output

The introduction of the BRT method in the Department of Traumatology was accompanied by a positive clinical effect and is recommended for further study and use during the period of rehabilitation treatment in patients who have suffered various injuries of the extremities.

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