The role of chlamydial infections in the development of acute and chronic diseases. Peculiarities diagnostics and therapy

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Briefly about chlamydia

Chlamydiae are one of the oldest bacteria on Earth. These are small round formations 100-200 nm in size. First of all, they settle on the mucous membranes. Infection begins to manifest itself rather quickly in the form of various symptoms, after a few days, destruction of both the mucous membrane and the underlying tissues begins. True, these processes are rather slow, and are asymptomatic for many days.

Chlamydiae develop and multiply in the human body in a very unusual way, significantly different from other bacteria. Chlamydiae have the properties of both bacteria and viruses. Therefore, the detection of chlamydia in the body and the treatment of diseases caused by them is not at all the same as when it is infected with bacteria, and is associated with a number of features and difficulties.

Chlamydiae develop and multiply intracellularly. Outside the cells, chlamydia move freely inside the body in small groups called reticular bodies - RT. RTs freely moving inside the body are not pathogenic. Once in the cell, they go through several stages of development, moving into new groups, the so-called elementary bodies - ET. ETs are very pathogenic! In addition, they are very tenacious and hardy. They can well exist in the extracellular space. The process of transformation of RT into ET lasts from several hours to several days and depends on the state of the immune system, the aggressiveness of RT, and many other parameters, including the state and informational content of the environment. The process of transformation of chlamydia in the cell goes through several phases, denoted in the literature (and in the Selector) by Latin capital and small letters A, B, C, D, etc. In this case, several different phases can be simultaneously in the cell.

The sequence of processes is as follows.

ETs penetrate the cell. Moreover, they have the ability to penetrate into a healthy cell. Immediately after entering the cell (process A), chlamydia produces special substances that almost completely block the ability of cells to fight uninvited guests, and at the same time, the processes of transformation of ET into reticular intracellular forms - RT (processes B and C) begin. These RT groups begin to grow, develop and multiply (process D) and a moment comes (after 2–8 hours) when they are ready for the next transformation again into elementary bodies - ET - of a new generation (process E). The destruction of the infected cells begins due to the fact that these new modified EBs, after several generations of reproduction, again turn into reticular bodies - PTs and exit into the extracellular space (process F), and the cells die at the same time. These chlamydiae released from the cells in large numbers can immediately infect other cells in the body. But they may not do this, but simply move around in the extracellular space. They can, for example, enter phase D - limiting development and slowing down all processes. Moreover, this can suddenly occur in the cell, for example, in the F phase - long-term passive existence in the cell - an atypical form.

During the period of existence inside the cell, and especially during the periods of reproduction, chlamydiae feed only on foods that are inside the cell. These are various products of cellular metabolism, but there can also be intracellular viruses! Laboratory attempts to force chlamydia to multiply outside the cell have been unsuccessful. Extracellular EBs are very resistant and unpredictable in their behavior. If, for any reason, for

chlamydia, difficult times come, for example, threats to life due to changes in the environment (radiation, taking antibiotics, etc.), they quickly turn into the so-called. abnormal shape (process L). In this form, chlamydia cannot develop and multiply inside the cell, therefore they do not kill the cell, but they are transmitted during cell division to the daughter cells. L-chlamydiae are resistant to antibiotics and cannot be detected and diagnosed by conventional methods (propagation in a culture environment). It is because of L-chlamydia that many diseases do not respond to antibiotic treatment. And attempts to change the antibiotic several times also do not give success.

Diseases caused by chlamydia

Until recently, chlamydia was considered only a venereal disease. But in the last decade, in connection with the development of medical diagnostics, it became clear that it is chlamydia that is the cause of a number of completely different, often systemic diseases. Moreover, systemic chlamydia at the beginning proceeds haphazardly for a long time! WHO has declared the 21st century to be the century of chlamydial diseases.

In men and women, chlamydia proceeds in different ways, which is due to the difference in anatomy. Today it is already reliably known that chlamydia leads to at least the following diseases:

- in men: urethritis, epididymitis, conjunctivitis, prostatitis, proctitis, vesiculitis, orchitis, infertility, Reiter's disease;
- in women: urethritis, cervicitis, endometritis, conjunctivitis, salpingitis, proctitis, infertility, Reiter's disease;
- in children: conjunctivitis, pneumonia.

Modern research also shows that chlamydia is often the main cause of diseases such as arthritis, fibromyalgia, multiple sclerosis, scleroderma, chronic fatigue syndrome and a number of mental illnesses.

It was also found that infection with chlamydia is often accompanied by simultaneous infection with other infections. So, the simultaneous contamination of chlamydia - Trichomonas, chlamydia - fungi, chlamydia and some viruses and bacteria is often found. Recently, combined infections of chlamydia and hemophilus influenza (virus and bacteria), chlamydia and pneumococci and many other diseases are common. And the most unpleasant thing is that chlamydia is transmitted from mother to fetus! Chlamydia in 50% of cases is the cause of infertility and ectopic pregnancy and premature birth.

Chlamydia is a very symbiotic bacterium, but it also has many enemies. All this is still at the research stage.

When working at APK "IMEDIS-EXPERT" there are very serious advantages and opportunities.

Firstly, this is the possibility of a very accurate diagnosis: the presence of chlamydial infection, its localization, transformation phases and methods of therapeutic action.

Secondly, it is possible to clearly trace which viruses, bacteria, fungi accompany this infection, and, accordingly, make the necessary changes to the therapy.

Thirdly, targeted and general drainage can be carried out simultaneously, since the therapy of chlamydia is associated with a strong release of various toxins and clogging of the mesenchyme.

Fourthly, by supporting natural DNA repair, stabilizing cellular metabolism and accelerating the natural process of the corresponding development of the immune system, we can optimize the work of the whole organism as much as possible, which may use other mechanisms that are still unknown to us for these purposes. We have many opportunities to eliminate chlamydia. These are special preparations in the selector, and resonant frequencies in a wide variety of options.

As already mentioned, chlamydia is asymptomatic for a fairly long time. Understanding the role of chlamydia in the general state of health in the present and in the future, for almost a year now I have been carrying out preventive therapy in many patients, i.e. I test for chlamydia and associated infections and have at least one session of anti-Chlamydia therapy.

I carry out all the therapeutic effects against chlamydial infection only against the background of bioresonance therapy. I believe that chlamydia should simply be “driven into a corner” so that it does not dominate, because if it has not yet spread systemically and has not led to very strong dysfunctions, then, firstly, the body itself will cope with it further, and, in - secondly, a little chlamydia in our body may bring some benefit, like many of our "roommates".

In this article, I tried to briefly touch on the problems of chlamydia. The seminar will discuss in detail the methods of treatment of chlamydia and its results. In fact, elimination of the pathogenic effect of chlamydia requires very careful work. For these purposes, it is necessary to accurately determine in which phase the hamidia is in the body. Table 1 can help with this.

Table 1

Pathogenic types of chlamydia

Species and serotypes	Diseases and information
Chlamydia trachomatis	C. trachomatis has several subgroups that differ in appearancestructures of their surface and are divided into serotypes. These serotypes, in turn, are subdivided into three groups, each of which causes its own disease inherent in it.
C. trachomatis Serotypes A to C	The main disease: Trachoma Serotypes A to C are the causative agents of trachoma (a severe form of inflammation of the mucous membrane of the eye - conjunctivitis). It is the most common eye disease in developing countries, often resulting in blindness. In Europe, trachoma is much less common. Infection occurs mainly due to a violation of hygiene rules.
C. trachomatis Serotypes D to K	Underlying disease: Urogenital infections Serots D to K are the most common subgroup in industrialized countries. It causes infections in the urogenital area, which are collectively called chlamydiases. Infection occurs through sexual contact. These serotypes are responsible for conjunctivitis and pneumonia in newborns and paratrachoma (swimming pool disease) in adults. Subsequently, this, although rarely, can cause reactive arthritis in men, or Reiter's disease.
C. trachomatis Serotype L1 to L3	Underlying disease: Limofgranuloma Serotypes L1 to L3 cause Lymphogranuloma venereum. Most common in tropical countries. Infection occurs through sexual contact.
Chlamydophila pneumoniae	C. pneumoniae is much more common than C. trachomatis. MostIn some cases, it is the cause of inflammation in the lungs. It can often cause chronic cough and play a leading role in the onset of heart disease due to arteriosclerosis.
	Main disease: Psittacosis C. psittaci is the causative agent of disease in parrots (Papageien krankheit). These microbes are naturally found in birds, especially parrots. They can also get this disease. Disease

Chlamydophila psittaci	transmitted from birds to humans. This disease is common among poultry workers. Its course is very similar to severe inflammation in the lungs.
Chlamydophila felis	C. felis, like Bordetella bronchiseptic is a bacterial causative agent of feline rhinitis. C. felis is also the cause of infectiousa disease known as Feline Chlamydiose. People get sick with thisdisease is quite rare.
Chlamydophila caviae	C. caviae is common in guinea pigs, but it can affectdomestic pigs. It settles on the conjunctiva of the eye and causes prolonged conjunctivitis.
Chlamydophila pecorum	C. pecorum causes infections of the urogenital tract inkoala cubs and makes them childless. In other animals, this disease leads to miscarriages, encephalomyelitis, conjunctivitis, enteritis, pneumonia, and polyarthritis.
Chlamydophila abortus	C. abortus causes chlamydial abortion in goats and sheep. And sometimes miscarriagesobserved in women in contact with these animals.

In the last decade, Reiter's disease has become increasingly common. This disease is expressed in the presence of common microinflammatory processes, especially in the joints, in the genitourinary organs and often recurring conjunctivitis. Often this disease appears after a long-term infection in the gastrointestinal tract or in the urinary ducts with complex infection by chlamydia itself, accompanied by salmonella or mycoplasma. Doctors sometimes refer to this disease as autoimmune, but this is not the case. Rather, it is the reaction of the immune system to the rapid spread of chlamydia, leading to the so-called reactive arthritis.

Reiter's disease is often accompanied by a high fever and severe lower pain. Often, psoriasis-like skin rashes and severe conjunctivitis occur at the same time. Treatment with antibiotics and cortisone-containing drugs does not give the desired result. In such situations, AIC "IMEDIS-EXPERT" provides irreplaceable assistance. Three such cases will be discussed at the workshop. In all three cases, one therapy session was sufficient!

At the seminar, we will also discuss the problems of the combination of asthma and chlamydia, multiple sclerosis and chlamydia, scleroderma and chlamydia, and the problem of recurrent lingering cough. I am pleased to share our experience with chlamydial infection and describe the specifics and features of anti-Chlamydial therapy.

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