Clinical thinking in the framework of "IMEDIS-TEST". The pathogenetic ring through the eyes of virtual reality ON. Dudnikova (Tashkent, Uzbekistan)

"Lord, give me strength, to heal those whom I can heal, give me humility, so as not to take on those patients who may become worse after my treatment, but send them to a hospital, and give me wisdom not to confuse one with the other." ... This prayer should accompany the doctor every time a patient comes to see you. In this case, you will never discredit the method by your actions.

PART 1

The fact that the reliability of ART is high, that many articles have been written, studies have been carried out, the Ministry of Health of the Russian Federation has given recommendations on its use of the method, many educated people know. Why is orthodox medicine still distrustful of the results of ART diagnostics? It's all about the total lack of awareness of the medical staff on the topic: "Why do we need this ART at all?" And it is needed for a comprehensive, often pre- or subclinical diagnosis of persons with an unclear etiology of the disease, with incomprehensible complaints: "fatigue", "headaches", "no joy in life", etc. Or patients who were saved in a hospital, but who need long-term rehabilitation. Or long-term sick "chronicles" who are not helped by allopathy. Or just people who do not like the touch of cold metal, do not like to walk from office to office,

Thus, ART helps, without leaving one office, in 1.5–2 hours to establish the complete pathogenetic ring of the disease, its primary cause, and to choose which stage of the pathomechanism of the disease should be influenced in order to obtain the best results in the shortest possible time.

This article is devoted to questions that will help classical doctors understand why the ART method is so good. And I dare to hope that the abbreviation ART will stop scaring them. The article also contains an algorithm for finding the most patient-friendly therapy strategy and explains why different patients respond differently to the same therapy.

That is, this article is a practitioner's comments on the methodological recommendations on ART, or recommendations on how not to discredit the method.

- 1. Find a representative point. Adjust the sensitivity of the device for individual patient conductivity.
- 2. Measure BI. Determine the min., Max., Optimal. Which organ corresponds to the worst BI. BI allows us to assume the degree of "deterioration" of the biochemical component of the body. Find out which organs are the most "worn out". We will find the maximum number of deviations visible in classical analyzes exactly there. If the actual index matches

optimal, the damage is very serious, and one cannot do without the use of pharmacology, informational methods of treatment are ineffective, because there are no targets for these methods

If the optimal BI differs by 7 points or more, then the use of information therapy methods will be so highly effective that the patient may become ill for a short time and require intervention to relieve possible symptoms of fever, vomiting, weakness, diarrhea or aches.

If the optimal BI differs from the actual one by 1–2 points, it is possible to use pharmacology and information drugs together to achieve the maximum effect. The main goal is to estimate the time it will take for the patient to recover and inform him about this in order to avoid excesses.

- 3. Determine FI. Determine which organs correspond to the FI. Add to selected. FI carries very interesting information it shows where the "program" has broken (by analogy with a computer). If the FI and BI on the same organs are broken both "programs" and "hardware". And it's very bad. The ideal FI is when it is not there at all. It is possible to "erase" the FI at one time without any special consequences for the organism as a whole. Exacerbation occurs rarely and only from a specific organ (tests suddenly become bad).
- 4. Determine the RA. Determine the optimal PA. Add to selected. RA allow you to assess the hidden reserves of the body. Is he capable of self-healing under your careful guidance, or will you have to take the patient to the intensive care unit right from the ambulance room? The lower the RA, the more pharmacological drugs the patient requires, and, of course, the results of your therapy should not lead to a worsening of RA, but only to the optimal RA index.
- 5. Determine geopathogenic loads. Add to selected. Geopathogenic loads: 1 is a grid, 2 is a local field, 3 is an endogenous pathogenic load that "walks" with us. Determine which mesh, which field and which endogenous load, as well as which organ corresponds. Which one can be determined by the essences of "Sprout", this is a pathogenic program, an informational mold of the problem; the body believes that this is normal, and does everything as the program tells. This is a systemic failure of the "health program".

1 and 2 degrees of GBV leave them without even trying to fight - they do not argue with the Earth. Grade 3 GN should be removed (tested for portability and issued in the final recipe or used as an indicator filter for the selection of correctors).

6. Determine the initial readings of the STK scales and the State. Add to complex testing. STK and State scales. An amazingly accurate way to find out which of the suspected organs is in fact the culprit. And it will not get out. His scores on the STK and State scales will be the lowest, even if he has a complete alibi in the form of normal tests.

The STK scale characterizes the state of the mesenchyme in the near past, as well as the rate of regeneration for the near future. The State scale characterizes the mesenchyme for a longer period of the past (the lower, the

longer the organ to which this or that indicator belongs accumulated toxins), as well as the forecast of recovery for a longer period of the future. (State - 7, STK - 39 - recently ill, very badly. Condition - 1, STK - 59 - chronicles in remission. Condition - 1, STK - 0 - chronicles in the stage of prolonged and severe exacerbation.)

The indicators of the State and STC scales are common for the whole organism as a whole and characterize the organism at the macrolevel, making it possible to assume what to expect from it. There are indicators of the State and STK organ (liver, kidneys) or systemic (lymphatic, reticuloendothelial, VNS), or even symptomatic (early menopause, osteoporosis, migraine). The degree of accuracy with which the State and STC scales characterize a person (not a disease and not a set of ART indicators) makes it possible to correctly quide a course of therapy, achieving maximum results from the patient in the minimum time for his body. This allows a person to be treated rather than a disease, which is often seen in allopathic (pharmacological medicine). And not to treat the patient with a scientific poke: "let's treat the one where the tests are bad, maybe your complaints will disappear." At the moment of universal independent use of medicines, the symptoms can be so general that they fit the complaints of a bunch of diseases, and the tests are better than those of a healthy person. They become bad when 80% of the organ's function is no longer working, and there, of course, only pharmacology really helps. Until this sad moment, the body uses the reserves of compensation and tries not to get to the doctors. So, the ideal indicators are considered to be State - 7-4 and STK - 100. One should strive to select the therapy so that they reach ideal indicators as quickly as possible. And then the disappearance of complaints will not keep you waiting long, and there, of course, only pharmacology really helps. Until this sad moment, the body uses the reserves of compensation and tries not to get to the doctors. So, the ideal indicators are considered to be State - 7-4 and STK - 100. One should strive to select the therapy so that they reach ideal indicators as quickly as possible. And then the disappearance of complaints will not keep you waiting long. and there, of course, only pharmacology really helps. Until this sad moment, the body uses the reserves of compensation and tries not to get to the doctors. So, the ideal indicators are considered to be State - 7-4 and STK - 100. One should strive to select the therapy so that they reach ideal indicators as quickly as possible. And then the disappearance of complaints will not keep you waiting long.

Why were the above parameters needed? They tell you clearly how to treat a patient:

- with medicines from a pharmacy (optimal BI corresponds to the actual one, RA is reduced, indicators of the State and STK scales are low);
- homeopathy, BRT, BMI, EM, color light therapy (optimal BI is better than the actual one by 3-5 points and higher, there is FI, RA high, indicators of the STK and State scales are decent);
- combined methods (indicators in the middle between the above data).

PART 2

When a patient comes into your office, he tends to complain. The doctor is guided by these complaints, differentiating diseases. Similarly, you can use the capabilities of ART for collecting complaints.

7. Select the frequencies corresponding to the patient's complaints. Recheck them in "Window" BRT. Leave only those that reliably change the ART readings. Find, as far as possible, a drug that characterizes the patient's complaints. Add to selected.

Complaints are subjective feelings of a person. The selector contains many types of the same complaint (for example, cough with croup, cough with phlegm,

dry cough). It is necessary to choose which type of complaint in the selector corresponds to the patient's complaints. Everyone will have their own type of cough.

In a database of fixed exogenous frequencies, the frequencies that characterize the complaints (for example, headache or fibromyalgia) are entered. Enter these frequencies into the BRT "window". We will receive a mobile, flexible characteristic of the process taking place in time and space, with the characteristics of the manifestation of a complaint characteristic of a given organism.

Further, having established the complaint, the doctor tries to find the causative agent of the disease in the patient's secretions. Analyzes are involved to help - these are smears, bacterial cultures. But it may take a long time, depending on the human factor, the quality and quantity of reagents and media in the laboratory. You can replace this type of research by testing the patient for the presence of parasites, helminths, fungi, bacteria and viruses. It is desirable to duplicate tests (section "Medpharm", nosodes) and fixed exogenous frequencies in the BRT "window". Leave reliable results and assume that a given complex of "flora and fauna" in a given patient has a set that fills all spaces possible for penetration that are not occupied by the host's immune system. When one species is destroyed, the vacated space will be occupied by others, if you do not take the necessary measures (which we will consider in the therapy section). Each identified pathogen must be named according to its potency in person, in order to know who is active (D3-D10), who is passive alive (D15-D30), who is intracellular (D60-D100), who has already become genetic garbage (D200-D400).

8. Determine through the index "effective medication" which are being tested fungi, parasites, helminths, protozoa, bacteria, viruses. Add to selected. Repeat the same test not through the nosodes and pointers, but through the frequencies in the BRT "window". Inconsistencies are possible. Leave only authentic ones. Determine the potency of each pathogen, if possible. Remember in selected.

9. In the BRT window there are frequencies indicating the patient's complaints and frequencies, characterizing the presence of certain pathogens in the patient's body. Start BRT in fast search mode. Include in the selected medicines everything that is entered directly (green light). Write down in 1 container for 2-3 grains for 2 minutes. Continue BRT recording, turn off the medication selector.

Next, the doctor begins to examine the patient to determine the state of his organs. To do this, use the methods of auscultation, palpation, if viewed from the outside, and instrumental research methods, if viewed from the inside (various SCOPES - esophagogastroscope, proctoscope, endoscope, etc., X-ray, MRI, reconstruction). Determine whether the type, size and consistency of the organ, the sounds that the working organ makes to the norm or not. Everyone knows the signs of a healthy and diseased heart, lungs, liver, etc. In ART it is possible to determine whether an organ is healthy or diseased by determining the potency of the corresponding organopreparation (D5-D6 - healthy, D10-D15 - different degrees of acute inflammation, the higher the potency, the stronger the inflammation, D30 is generally dangerous, the stage of tissue destruction, D3-D4 - signs of chronic inflammation),

D15 - signs of chronic inflammation with exacerbation, or liver D4, D6 - a chronic process in remission, or lung D4, D15, D30 - signs of destructive processes in the lungs in the presence of exacerbation of a chronic disease, for example, a cavity in tuberculosis. So, in turn, we test all organs. The narrower the specialization, the more detailed the research.

- 10. Select from the list all organopreparations, taking into account a narrow focus, convert to D6 potency. Find out the potency of each organopreparation (D3-D30), move to the selected one. Write down on the same crumbs.
- 11. Connect through the crocodile belt, placing it as close to the place as possible complaints and write down on the same crumbs through swinging along the nearest meridian for 145 seconds. This is necessary in order to maximize the individualization of the information collected about the patient. The carrier of the informational component is homeopathic grains.

Part 3

Any doctor is interested not only in the morphology of the organ, but also in the degree of preservation of the function. The same liver can be enlarged, but with excellent analyzes. That is, with a stored function. To clarify this, we use all ART markers.

12. Through 3 filters: recorded 2–3 crumbs, readings of the STK scales and State any Intox indicator (I, II or III), measure all ART indicators.

It is easy to find what ART indicators are in the recommendations of the Ministry of Health of the Russian Federation. I will dwell only on the clinical reading of the parameters that are called "ART pointers". Having tested exactly which positions of the ART pointers in your patient, you will have a more accurate idea of what reactions can be expected from him than at the beginning of the test.

VRT pointers

Radioactive and electromagnetic loads and their significance for the body are well described in many sources.

The degree of connective tissue insufficiency indicates the consistency of ligaments, tendons, joints, cartilage, aponeuroses. For example, in poorly growing children, the degree of connective tissue insufficiency is 6, they have nothing to grow with, with arthritis, arthrosis - the same picture. Such patients definitely need building materials for connective tissue: aminoglycosides, chondroprotectors, osteoprotectors, hyaluronic acid, zinc.

Endocrine index shows functional consistency endocrine system in relation to the entire body. And the state of tension or depletion of the endocrine system - at what cost is this functional viability achieved. For example, if the endocrine index is 1 (which shows weak endocrine disorders), and the state is depletion of the 5th degree, then the collapse of the functional viability of the endocrine system is not far off (because the endocrine system is already exhausted, using the last resources of compensation, which will soon end, and then the index will fly to the last, 5th level - extremely strong endocrine disorders).

The DNA index shows the number of breakdowns in the reading of DNA by ribosomes and, consequently, the formation of a pathogenic protein, which is a poison, an oncogene for the body.

The definition of blockades is superbly described by A.A. Ovsepyan, determines cicatricial adhesions at different levels - macroscars and interorgan adhesions, intraorgan adhesions and cellular scars.

Psychovegetative loads are subdivided into:

- 1) Mental stress 5 degrees officially embody insurmountable conflict situations of varying severity. That is, there is a conflict within a given individual between an internal belief and an external demand, for example, hatred of an alcoholic father and the general demand to love a father from whom he did not see anything good. This is important, this is a neurosis, and therefore a completely different strategy of therapy.
- 2) Vegetative burden correlates with the endocrine index and shows the functional viability of the autonomic nervous system in relation to the entire body or, if used in the form of a filter organopreparation, to a specific organ. But the ANS test determines what reserves of rapid reaction forces are in the body. At what cost the existing degree of vegetative burden is achieved. If stress of 1–5 degrees can persist in a healthy person, then depletion of the ANS of 1–5 degrees is bad, this means that our patient is functionally incapable, and he would need to accumulate reserves in order to continue to remain healthy. As a rule, there will be hypothalamic, diencephalic disorders.
 - 3) Depressive states need no explanation.
 - 4) Endogenous psychosis is schizophrenia.
- 5) Disorders between external and internal perception this is autism. The definition of mental state is divided into 8 degrees of stress load, or how the body is adequate to external stress factors. Less is better. It is also advisable to find out what kind of psychosocial load (section "Medpharm"), so depresses the psyche. It may be possible to eliminate the cause of the stress.

The test of the immune system characterizes the degree of the body's immune capacity: you can assess what to expect - if you are exhausted, you need to use pharmaceuticals, there is nothing to work with information here. If, with a lack of building materials, there are no bricks, then in this case the workers who are building will not help. Global immune depletion is generally dangerous (indicates immunodeficiency), as well as a test for the presence of immune diseases (most likely, there is either rheumatoid arthritis or another autoimmune systemic disease.)

The test for the state of the immune system shows how long the compensation reserves of immunity will last, which must be assessed by three parameters - barrier immunity of mucous membranes, humoral immunity of blood and an excretory link of immunity - the state of the reticulo-endothelial and lymphatic systems. When the immune system is stressed, a stable state of the organism is maintained by a certain tension of immune factors within physiological boundaries.

And when the immune system is depleted, its state is unstable, goes beyond the physiological boundaries and can go into decompensation. It is dangerous, anything can be here, shock, anaphylaxis. This test often characterizes a state of a short period, because the body cannot exist for a long time in a state of depletion of immunity, and the greater the degree, the worse.

Anabolic and catabolic processes characterize the growth or decay of tissue. In context, this means inflammation with varying degrees of proliferation (2–6) or destruction (1–6). 1 degree of anabolism is the norm. In young children with rapid growth, the norm is the 2nd degree of anabolism. You can see the state of individual tissues or organs: for example, the rate of bone growth - anabolism 1–3 or catabolism 1–3 - these are destructive phenomena in the bone, or the degree of inflammation, say, of the liver - with proliferation of 2–3, this is hepatitis, and with destruction 1-2 - cirrhosis. In general, tissue decay, destructive-degenerative processes are always less well recovered than the phenomena of proliferation during inflammation.

Indicators of the state of Chakras 1–7 characterize the functionality of organs and systems. If the test reveals an abnormality in the chakra, this means that the blood flow in the organs controlled by the chakras is impaired. There, the level of regeneration is reduced due to the weakening of blood flow, and these organs are prone to recurrent diseases. Chakras have an entrance and an exit (A and B). In case of damage to the entrance, it is necessary to look for informational problems, in case of damage to the exit - problems of the spine (trauma, inflammation).

Microbiological cycles in the intestines, blood, lymph indicate where the symbiosis of microorganisms and a macroorganism is disturbed. You can, as through a filter, see what microorganisms are present in the intestines, blood, lymph. In fact, they duplicate the first two tests.

Bactericidal activity is normal 2-3 degrees in healthy people, 4-6 - this is an exceptional phenomenon of very healthy, they do not come to me, they have no need. "Nutrition" - shows sepsis to some extent. Generalized infection.

A focal test shows the presence of fixation, the binding of pathology to a specific place, for example, it indicates the topical location of the center of inflammation, ischemia, destruction. It is used as a filter to find an organ with focal pathology.

Violation of acid-base balance is well described in conference proceedings.

Determination of toxic loads: 1 - acute acquired in blood and lymph, 2 - chronic acquired intercellular mesenchymal, 3 - intracellular chronic, sometimes acquired due to the ingress of a foreign genome into a cell, sometimes hereditary, due to "errors" in reading information from DNA by ribosomes.

Definition of physical fatigue. It helps to understand the degree of sleep deprivation of a patient, for example, a mother with 3 small children and a complex that she is a bad mother. Sooner or later she collapses from fatigue with excellent analyzes.

Indications of heart rhythm disturbances. Pointer to arrhythmias in which

interested atrioventricular node.

the degree of lymphatic burden.

Diseases of the gallbladder. Shows the presence of a focus in the gallbladder. Duplicates the focal test with the index of the gallbladder organopreparation.

Cholesterol level - a suspicion of cholesterolemia is not always correct. Index Test Diabetes - A pointer to a pancreatic pathology is not always correct, but in a context where there is still evidence for diabetes or the threat of diabetes, it can be useful. Especially if the essence of ROSTOK Diabetes is also being tested. Here, the threat of diabetes is almost 100%, even if there is no hyperglycemia yet.

The Hypertension Pointer Test is good in general context, further confirming other hypertension tests

Diaphragm irritation is an important test. This means the liver is enlarged, and it presses on the diaphragm. This means that the diaphragm is motionless and does not suck blood from the lower extremities during the act of breathing. And here there will be a suspicion of varicose veins.

Lymphatic burden shows how effectively the excretory link of immunity copes with the decay products of the vital activity of both the organism itself and its cohabitants. Normally, it should not be more than 1-2 degrees. But if grade 7–8 is tested, then lymphoid tissue throughout the body begins to hypertrophy reactively. The compensatory range is developing. tonsillitis, adenoiditis, which is cut, but it grows. Both the adenoids are removed from the child 2 and 3 times, until the parents get bored and they begin to look for the cause. Lymphadenopathies, lymphadenitis also have the same cause - the overload of the lymphatic tissue with toxins. In theory, all our activities should lead to a decrease in

If we use the index "Clinical and morphological data" as a filter, then it will point to an organ preparation that gives clinical manifestations - pain, discomfort, pathological sounds and other physical data.

An elevated uric acid test characterizes the presence of kidney failure. Although this is not always confirmed by tests, it encourages thinking about the kidneys. Duplicates other data on kidney problems

Head foci - the presence of any problems in the brain associated with conduction disturbances - fibrosis, inflammation, scars, cysts - whatever, but the conduction characteristics are impaired there. As a rule, treatment should be continued until the criterion when the indicator for head lesions is no longer tested (if you have a patient with a brain problem).

Dental testing allows you to test the effect of foci of inflammation or destruction or proliferation in the jaws on the general condition of the body. Can be used for a stand-alone dental testing procedure.

The detection of dental burden and interference fields complements the previous test, indicating the causes of certain jaw pathologies.

Mercury burden indicates the presence of mercury-containing compounds in the body.

Vaccine burden indicates a connection between the disease and the procedure.

vaccination, or vice versa, helps to eliminate the suspicion of a complication after vaccination.

Shock aggravation suggests sub- and preclinical forms of shock aggravations, especially if this index is used as a filter when testing shock aggravations from the "Medpharm" section.

13. All tested ART pointers. Add to selected. Sign up for that the same grits. This is an individual sample of the disease (OBI), which fully meets the laws of pathomorphology and pathogenesis, revealing the pathogenetic ring of the disease. When creating it, in the testing process, it becomes clear by the impact on which nodes of the pathogenetic ring it is possible to break it with minimum energy consumption for the patient and maximum results from the point of view of the doctor.

Part 4

In the process of creating OBI, the values of the STK and State scales for the whole organism are determined. These two indicators characterize the degree and rate of recovery or regeneration of the whole organism as a whole. For example, there may be a STK of the whole organism 100, a state of 7-4, and a person makes complaints. It is necessary to find a key organ and determine its indicators on the STC and State scales.

14. Place the OBI in container 2, through it identify the complaint authority and, if it is necessary, the most affected organ. This is the key organ. For example, a key organ in the D6 potency has STK 5, State 3-3. That is, its functioning will be disrupted when exposed to any external or internal factors due to a decrease in the ability to regenerate

Now we define the key level

15. Determine the JCC and OBI State. Polarize to 100 and 7-4, that is, using the OBI as a filter, rotate the elevator wheel counterclockwise or clockwise, while measuring the values of the STK and State scales, until the indicators of these scales reach the highest values. Place the crumbs with the recorded OBI into the lower cup of the GShK polarizer. Connect the lower cup of the polarizer with the 3 (inverse) socket of the APK "IMEDIS-EXPERT". Connect the top cup of the polarizer to 1 socket of the APC. Place 2-3 clean grains in the upper cup of the polarizer. In the "window" of the BRT select the "Swing" mode, turn off the electrodes. (Then do not forget to turn it back on!) Through the selected meridian, through which you have already made a record, in the "Swing" window for 145 seconds. Modulate the grits from the lower polarizer cup to the upper one. This is PIEB. This sample is very different from its predecessor. He lets you see what happens at any level in the body. There are no more cell membranes, cicatricial adhesions as obstacles to a reliable test. And to identify the key level of damage in a key organ. This is critical.

16. Through the filters of the PIOB, the key organ is determined by the degree of anabolism - catabolism in a key organ. Let's remember the histology. Proliferative changes will be characterized by 2-6 degrees of anabolism, degenerative changes will be characterized by 1-6 degrees of catabolism. Next, you need to find out

inflammation in a key organ is acute or chronic, accompanied by proliferation or degeneration. ART indicators include a test for an acute or chronic process at the intercellular level (the "Morphology" scale), as well as tests for all types of chronic degenerations - protein swelling, fatty degeneration, fibrotic changes, etc. Thus, we can assume the morphology of the organ, without taking a biopsy. How much this fact makes life easier for the doctor and the patient, you yourself understand. A biopsy is painful and time consuming. Of course, there are situations in which a biopsy is simply required - oncology, systemic diseases. But, for example, with fatty hepatosis, it is not necessary to do a biopsy, an ART test is sufficient. Next, we look at the morphology at the intracellular level - what it is: necrosis, cell ulceration, degeneration, proliferation, oncology. If oncological susceptibility is tested, we recommend biopsy. Further, using all the above tests as filters, we find out the etiology of the disease. Thus, we find out at what level the defeat is and what caused it. That is, we determine the key level and cause of the disease. Write down on the same crumbs. Thus, a virtual sample of the disease (VOB) of a given patient is created, with respect to which we will be guided when choosing an effective and tolerable therapy for a given patient.

If the connective tissue inside the organ is damaged, then we are dealing with an inflammatory process of bacterial, parasitic, fungal or autoimmune origin (a genetic factor will certainly be present here).

If the damage is intracellular, then we will deal either with viruses or intracellular obligate infections such as mycoplasma, chlamydia or miasma, etc.

If the damage is intranuclear, then, most likely, we are dealing either with miasms, acquired by damaged DNA, or with genetic mutations passed down from ancestors.

It will be clear to us whether this is a proliferative process, destructive or with signs of malignancy. The choice of the doctor's strategy for influencing the patient's body will depend on the precise definition of the pathomorphological characteristics, which include: the degree of anabolism-catabolism, acute or chronic inflammation, primary chronic or secondary chronic, autoimmune or associated with an intracellular defect in RNA synthesis.

The diagnosis is ready. Now therapy. All types of it must be effective and portable.

Part 5

The selection of therapy takes place in several stages.

Electronic Medicines are tested through the PIOB + Key organ-level-cause filter. We select Effective and Portable from them. It is being tested what happened.

Homeopathic remedies are tested through the PIOB + Key organ-level-cause filter. We select the effective and portable ones from them. E&P remain.

Electronic medicines and Homeopathy are combined. E&P. It is tested what happened in terms of organopreparations, frequency of complaints, BI, FI, STC and Condition scales. We must strive to test the norm everywhere. It is possible to connect the ChRR-2 to those areas that have not been corrected. With prolonged destructive processes, medications containing organic substances are required, which are necessary for the full restoration of organ tissues. Detoxification, rehydration, dehydration, etc. are often needed.

Nobody canceled the basic principles of treatment. These include: detoxification from decomposition products; sanitation from pathogens; restoration of the normal functioning of the excretory link of immunity; humoral immunity; barrier function of all organs in contact with the external environment; restoration of microcirculation of the damaged area; regeneration of tissue of the damaged organ at the intracellular and intercellular levels with maximum preservation of function.

I wish you all patience and good luck.

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