

Reticuloendothelial system as an indicator of human health

A.N. Mathison

(Firma "Matisons" SIA, Riga, Latvia)

According to the WHO, the share of deaths from infectious diseases accounts for up to 1/3 of all deaths in the world. And this figure, with the spread of new forms of infections caused by resistant microbes and viruses, may steadily increase.

A large number of patients who turn to us for help suffer to one degree or another from various acute and chronic infectious diseases or from diseases based on an infectious agent.

In this regard, timely diagnosis of both the infectious agent itself and the body's immune capacity to cope with it becomes relevant. Recently, every working doctor is faced with the fact that, despite the arsenal of high-precision diagnostic devices and powerful medicines, the number of patients is not decreasing. Electroacupuncture diagnostic methods, or rather -vegetative resonance test (ART), allows in a different way, much more accurate and to examine deeper the patient and the processes that take place in him. The use of multilevel diagnostics of ART + allows tracking the depth of the process.

Of course, the main thing in our health is the immune system, which is represented by white blood cells, but one of the leading components of immunity are macrophages, which in the selector have a somewhat outdated name: the reticuloendothelial system (RES).

I think that the scale of the state of the reticuloendothelial system for a long time remained without special attention, not only from my side. Dr. H. Schimmel long ago (1978) placed it in the patient examination system.

Macrophages are cells that are long-living phagocytes responsible for our tissue immunity. These cells, depending on their location, have different names: Kupffer cells, dendritic cells, microglial cells, alveolar macrophages, etc. Depending on their location, these cells perform specific functions. They are formed by the release of monocytes from the bloodstream, in which they circulate for 12-24 hours in the tissues of the body, where they are converted into macrophages. Macrophages are closely related to neutrophils.

The main function of macrophages is determined from their name - to absorb and digest a foreign agent, while producing antigens and training the immune system through T cells to respond with a cellular and humoral response to the invasion of our body by a foreign agent.

Macrophages produce a large number of different enzymes that participate in and form the inflammatory response. One of the best known is lysozyme, as well as many other serum proteins and mediators.

Macrophages, producing nucleosides and cytokines, act on

hypothalamus, causing fever; interacting with the bone marrow, they stimulate the release of neutrophils from it and the activation of lymphocytes; in chronic inflammation, they contribute to the development of cachexia. They stimulate the proliferation of fibroblasts and the proliferation of capillaries, and destroy tumor cells. Macrophages are one of the most important components in the fight against intracellular infections, both with viruses and with protozoa.

Based on the above, we can conclude about the role of macrophages in maintaining the health of the body. Unfortunately, the blood test we receive from the laboratory does not inform us about the state of the reticuloendothelial system (RES), and the percentage of the number of cells in the analysis of the blood formula does not indicate the quality of these cells.

Possessing a unique method for diagnosing vegetative resonance test, and especially ART +, we can investigate the quality of the reticuloendothelial system at the level of both the outer membrane of macrophages (reticuloendothelial cells) and the state of the cytoplasm of these cells.

To do this, it is necessary to test all potencies of the RES organopreparation from D3 to D30:

- potencies from D3 to D5 indicate the degree of the degenerative process;
- potencies from D12 to D30 about compensating inflammatory response;
- potency D6 - the normal state of phagocytes;
- potency D10 - the tension of the immune system.

A sign of good reserves of the body is that when testing the indicators of the reticuloendothelial system in the presence of low (degenerative) potencies, there are high (inflammatory) potencies that compensate for them. The worst case scenario is when we test only the low potencies D3-D4 (D5). This indicates a deep degenerative process in the body, and is found in AIDS or other severe and long-lasting infections.

It is more correct to examine the patient at the second and third levels of the ART + device. Focusing on the lowest potency of the organic preparation RES, you need to look at which infectious agent is causing this degeneration and find a therapy:

- frequency in the form of exogenous magnetic influence;
- BRT in the mode of frequency and time modulation;
- homeopathic medicine;
- color or musical effect
- a combination of these methods.

Mandatory when drawing up a therapy plan is to check for its effectiveness (Fer. Met. D26, Fer. Met. D800), tolerance (Mang. Met. D26, Mang. Met. D800) and improvement in adaptation reserves.

Matison, A.N. The reticuloendothelial system as an indicator of human health. Matison // XXIII International Conference "Theoretical and Clinical Aspects of the Application of Bioresonance and Multiresonance Therapy". - M. : IMEDIS, 2017. -- S. 183-185.

[To favorites](#)