

Possibilities of the "IMEDIS" equipment in the clinic of neuroses

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When providing psychological assistance to a client, the IMEDIS equipment is an indispensable tool in the clinic of a consultant psychologist. Let's try to understand this direction of consulting.

Initially, let's clarify the terminology used. Since the time of Z. Freud, the basic basis in the counseling activity of a psychologist is known as the relief of psychological symptoms arising from the incompleteness of psychological processes. Psychoanalysis is based on the idea of neurosis and its pathogenesis as the materialization of various biological drives, first of all, sexual and aggressive, repressed into the unconscious, while ignoring the real situation and socially significant personal characteristics.

In the future, there are some specific points of view on the nature of neuroses associated with behaviorism, existentialism and humanitarian psychology. The concept of behavior therapy denies the existence of neurosis as an independent nosological unit. From the point of view of the behaviorists, only isolated neurotic symptoms really exist as a result of an incorrect learning process. As HJ Eysenck notes, "there is no neurosis behind the symptom, it is just the symptom itself." At the same time, the role of conscious factors of personal functioning is ignored.

Existentialists go even further, for whom neuroses are not at all a disease that has its own neurophysiological mechanisms. Like other mental disorders, from the point of view of R. May, neurosis is only "a special form of the patient's alienated existence", which gives rise to an approach of negative diagnosis and links neurosis with only biological determinants.

For humanitarian psychology, according to CR Rogers, neurosis is "a consequence of the dissatisfaction of the immanently inherent need for each person for self-actualization." Thus, presenting neurosis as a property of the nervous system.

In contrast to the above points of view of V.N. Myasishchev, even in Soviet literature, is based on the ideas of Lazursky, on the classification of personality according to the types of their relationship to the surrounding reality. V.N. Myasishchev put forward the position that the personality, psyche and consciousness of a person at any given moment represent a synchronous unity of reflection of objective reality and a person's attitude to this reality. The psychology of human relations in a developed form acts as an integral system of individual, selective, conscious connections of the individual with various aspects of objective reality: with the phenomena of nature and the world of things; with people and social phenomena; personality with itself as a subject and object of activity.

The system of relationships is determined by biopsychosocial ethical history

human development. The system of relationships expresses a person's personal experience and internally determines individual actions and experiences. The relationship as a connection between the subject and the object is one and contains the result of social imagination - individual reality. The attitude determines the relationship of sensations, perceptions, understandings with the direction of thinking and the style of further activity behavior.

A relationship has a structure, the individual components of which can act as private relationships, its sides or types. The attitude is determined by a number of signs: selectivity, activity, holistic personal character, consciousness. The most important types of relations V.N. Myasishchev considered: needs, motives, interests, assessments, beliefs and emotional relationships: affection, dislike, love, enmity, sympathy, antipathy. The dominant attitude that subjugates others is the focus of attention. He considered the level of self-awareness as a conscious attitude to the world around and to oneself to be the highest degree of personal attitude.

Relationships are associated with other substructures of the personality. So, from the point of view of V.N. Myasishchev, dynamic individual psychological properties at the level of a developed character are determined by conscious social factors of personal functioning, and not by the properties of the nervous system. Character is a system of relationships and a way of realizing them by a person. The properties of a person's reactions, expressing his temperament and character, are found only with an active attitude towards the object that causes the reaction. A person's abilities are in a natural relationship with inclinations, which represent the driving force behind the development of abilities.

The essence of the positive diagnosis approach developed by V.N. Myasishchev, closely related to his pathogenetic concept of neuroses, follows from the recognition of the category of "psychogenic", which includes the following basic provisions:

1. First, psychogenia is associated with the personality of the client, with traumatic situation, the difficulty of this situation, with the inability of the individual in the given specific conditions to independently resolve it.

2. Secondly, the emergence of neurosis is more or less associated with pathogenic the situation and experiences of the individual; there is a certain correspondence between the dynamics of the client's state and changes in the traumatic situation.

3. Thirdly, the clinical manifestations of neurosis in their content in to a certain extent associated with a traumatic situation and experiences of the personality, with the main strongest and deepest aspirations, represents an affective reaction, pathological fixation of certain of her experiences.

4. Fourthly, celebrated more high efficiency psychotherapeutic methods in relation to the entire disease and its individual clinical manifestations in comparison with biological effects.

In our time, the position of the positive diagnosis of V.N. Myasishchev formed the basis for the further developed by B.D. Karvasarsky and G.V. Zalevsky's pathogenetic concept of neuroses. The complexity of neurotic manifestations, respectively, gives rise to the complexity of the definition. Neurosis is interpreted as

psychogenic (usually conflictogenic) neuropsychic disorder, which occurs as a result of a violation of especially significant life relationships of a person, manifests itself in specific clinical phenomena in the absence of psychotic phenomena.

The neurosis is characterized by:

1. Reversibility of pathological disorders, regardless of its duration, which corresponds to the understanding of the neurosis of I.P. Pavlov as a breakdown of higher nervous activity, which can last for days, weeks, months and even years.
2. The psychogenic nature of the disease, which, according to V.N. Myasishchev, is determined by the existence of a connection between the clinical picture of neurosis, the characteristics of the system of relations and the pathogenic conflict situation of the client.
3. The specificity of clinical manifestations, consisting in the dominance emotional-affective response, pathological fixation of certain forms of behavior and experiences, even the corresponding somatovegetative disorders. The absence of psychotic symptoms, as can be seen from the above definition of neurosis, the latter differs from psychosis, including psychogenic nature.

Let's start compiling the "Spiritual Portrait of the Client". A prerequisite for a successful consultation is the establishment of full contact with the client. Whatever the client comes with, in any case, we must remember that the fundamental factor is the client's attitude. The client gets the opportunity to tell in detail about himself and his position ("pronounce the state"), to see that this story is listened to attentively and with interest, that they deeply empathize, sincerely want to understand and help. At the same time, the focus of counseling acquires particular importance not so much on the logical warehouse of the client's affectively predetermined thinking, but on the ability to positively recharge the client's attitude. Help the client to realize the coping sequence of himself - self-awareness in the chain of real events, self-identification,

The ART method allows correlations between standard practical tests and ART indicators, to clarify and objectify the assessment of mental overstrain and its consequences. This opportunity is provided to us by the energy-informational approach in complementary medicine. It is possible that the well-being or unhappiness of the flow of energy-informational processes of a person's mentality determines both mental health and psychoemotional problems. In particular, "homeopsychology defines a disease as a reaction of the body to a change in the energy-informational balance due to the effect of a psychotoxin. As an attempt to compensate for energy-informational deformations at the level of the psyche. " (N.L. Lupichev 1996). In other words, the psyche perceives the same intrapersonal conflict as a psychotoxin and reacts with a high intensity of the mental state. And homeopsychology defines psychotrauma as a consequence of constant psychotoxic stress. Psychotrauma begins to destroy the convergent structure of connections at the mental and somatic levels of functional systems

(FS) of the organism. As a result, the breakdown of the coordinated structure of perception through our senses, caused by the passage of excessive emotions, forms rigid mental connections of a person, and the functional systems of a person form a mental block. In the future, the functional systems of the human body in response to the mental block cease to normally energetically and informationally support the psyche. Various fixed forms of behavior emerge. The motivational sphere is narrowing.

A model of the pathogenetic ring of the client's psychological disorder is formed, expressed in the language of ART. Basically, psychotrauma also explains the observed shifts in the statistical structure of the incidence of the population: with a sharp decrease in infectious pathology, the proportion of neuroses that are not directly the cause of diseases, but are often an indispensable condition for the formation of exhaustion and chronic disorders, for example, the digestive system, relatively increases. Greed leads to constipation, anger to cholecystitis, depression to immune disorders, stinging ulcers, biliousness to cholelithiasis. It is also known that psychotrauma, disrupting the convergent state of functional systems, creates conditions for the manifestation of diseases at the physical level, as soon as there is depletion of all compensatory, reparative and regenerative reserves of the body. And we can determine the already formed diseases later in the clinic during instrumental examination.

Let's compose an algorithm for the study of the "spiritual portrait of a person with psychological disorder."

At the first step, in order to clarify the psychological diagnosis, it will be necessary to measure and write down on crumbs the general integrative indicators, such as: general condition, STK, adaptation reserves (RA), photon index (PI), the degree of psychological stress, psycho-vegetative stress, stress stress and section frequencies " Psyche ".

The second step in the study of the spiritual portrait of a person with a psychological disorder requires work with the energy centers of the body, chakras. Whatever goals are set for the therapy, it is necessary to first correct the activity of the chakras. To understand in more detail these phenomena, we first need a scale that allows us to assess the intensity of the initial mental state. In addition to psychological, stressful and psycho-vegetative loads, such a scale within the framework of the ART method is the "scale of frequencies of chakra disorders", which indicates the degree of disruption in the convergence of functional systems associated with chakras.

For measurements, take the Platinum met. 1000 ↓ + seven pointers "metals for chakras ↑ and let's determine their state according to the STK scale. The ratio of the values of chakra activity will express the initial indicators of psychological disorder and the corresponding FS of the body. We get the scale of the intensity of the initial mental state, expressed in terms of STK indicators:

- Ferrum met. D60 for chakra test 1;
- Mercury sol. D60 for chakra test 2;
- Kuprum met. D60 for chakra test 3;

- Aurum met. D60 for chakra 4 test;
- Plumbum met. D60 for chakra test 5;
- Argentum met. D60 for chakra test 6;
- Platinum met. D60 for chakra test 7.

ART pointers "metals for chakras" indicate a complex of violations of various energy-informational processes. "Chakras are what connects the body, mind and soul" asserted N.G. Zol. The chakras represent to us a model of the state of dynamic homeostasis. If we identify violations at the entrance of the chakras, then we find a picture of the energy-informational load. If we identify violations at the exit, then we already have violations of physical structures. Each of the seven main chakras is responsible for a specific aspect of life and different life situations. The location of the chakras in the body coincides with the location of the nodes of the human endocrine system, and the value of the STK of each chakra is closely related to the functioning of the corresponding structure node.

But it would be a mistake to consider this mutually open connection only in the physical plane. Symptoms of the intensity of the mental state are traced in the same manifestations of symptoms of psycho-neuro-endocrine-immune (hereinafter PNEI) disorders, which makes it possible to measure and work not only at the level of physical problems, but also at the level of mental, emotional, and sometimes parapsychological problems. This aspect is extremely important in the treatment of difficult clients, when it is necessary to highlight the main complex of problems, or the "core" of pathology associated with latent intoxication, or when problems may lie at the informational or even noetic level, above the level at which modern medicine works.

As soon as we grasp the main thread of chakra preparations, the balance of the general condition of the client becomes clear to us. It is known from homeopathy that in a disease it is necessary to treat a central disorder, and not just a specific pathology. The ratio of chakra activity measured by us is a representation of the deformation of the balance of the general PNEI state, where the mental block will be the central disturbance. Mental blockage of chakra connections caused by psychotoxin leads to false perception and, as a consequence, to disruption of the convergent connection of the structures of the functional systems of the body as a whole. This is expressed at the subconscious level by an intense mental state with the formation of a corresponding psychoemotional state:

Chakra 1 is responsible for survival, normal work is blocked by fear; Chakra 2 is responsible for joy, normal work is blocked by guilt; Chakra 3 is responsible for willpower, normal work is blocked by shame; Chakra 4 is responsible for love, normal work is blocked by grief; Chakra 5 is responsible for the truth, normal work is blocked by lies; Chakra 6 is responsible for illumination, normal work is blocked by illusions; Chakra 7 is responsible for cosmic energy, the norm is blocked by earthly attachments.

Mental blockage will also manifest itself at the level of the subject's consciousness by neurosis, a feeling of discomfort, loss of strength, fear and the formation of conditions for the emergence of serious physical and infectious pathologies.

We enter into the selector all the indicators of chakra disorders in aggregate and write them down on the same crumbs as in the first step, within 2 minutes. Let's get a virtual sample of psychological disorder (VOPD). The client's VOPR model obtained by us characterizes an individual mental blockage with the formation of a corresponding psychoemotional state in the "language" of ART.

At the third step of the study of the spiritual portrait of a person with a psychological disorder, it is necessary to take into account the complete coordination of all body functions, all organs and systems with the current process, covering individual psychological determinants that destabilize the adaptive state. To do this, it is important to assess the positioning of the client in the surrounding real situation and to include the "interview" technique in the recording of the client's virtual sample of psychological disorder (VOD). It is necessary to turn off the connection of the electrodes in the BRT window. Place one magnetic therapy device (UMT) "loop" on the head next to the "neurasthenia line" area. Connect the electrode with the "crocodile" adapter to the 2nd socket of the "IMEDIS-EXPERT" apparatus. Select "Swing" in the BRT window, set the value of the swing filters to the meridian of the gallbladder in case of aggression or to the meridian of the urinary bladder in case of depression and asthenia. Time for 1 filter - 1 sec. Starting from the 145th second at least, conduct a conversation with the client, during which allow him to freely speak his attitude out loud. At the same time, record on the same crumbs as in step two.

Now VOPR covers all the agreed aspects of the client's psychological disorder: functional states of organs and systems (ART indicators), frequencies of the "Psyche" section, mental blockage with the formation of a corresponding psychoemotional state, the current process of relationships (client complaints).

At the fourth step in the study of the spiritual portrait of a person with a psychological disorder, the GSHK polarizer will help us. We need to polarize VOPD, test a polarized virtual sample of psychological disorder (hereinafter PVOD) for efficacy and tolerability. We are based on the methods of using the IMEDIS-EXPERT apparatus and the GShK polarizer provided by M.M. Shraibman and N.A. Dudnikova.

As a result of the study of the spiritual portrait of a person, we will obtain a marker of psychotoxic load - a polarized virtual sample of a client's psychological disorder (PVOD). And with it, an amazing opportunity to objectively measure and interpret energy-informational responses that characterize determinants that affect the psyche and the body as a whole, both at the psychoemotional level and at other levels of self-regulation.

At the fifth step, we will put the client's VOCR in the load, and we are ready to select a composition of drugs or a separate drug from different groups to remove mental blockage, restore the convergence of the chakra balance and, as a result, increase resources while creating conditions for a successful choice of the desired future.

Usually, at the peak of psychotoxic overstrain, treatment requires a combination of psychotherapy and adequate psychopharmacotherapy, complementary and

reinforcing each other's action to consolidate the effect of the entire course of treatment in the client's long-term memory. Control over the conversion of fixed forms of behavior. A clear evidence of the success of the combination of counseling and appropriate therapy is the client's unconditional trust in the psychologist, only with which it is possible to achieve amazing therapeutic effects and form the conditions for the successful self-realization of the client.

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