# On the question of the mechanism of transfer and conversion of wave radiation in the "IMEDIS-TEST" system

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Previous studies prove that objects of living and non-living nature are sources of radiation caused by moving particles (electrons, protons, atomic nuclei, etc.).

The interaction of this radiation with biological objects, as well as the control processes in them, are frequency-dependent in the form of a resonant response. In living objects, resonant effects are manifested at the subcellular, cellular, organ and organism levels. The resonant response of cellular structures to the radiation of individual substances and, in particular, test preparations, generates the corresponding electromagnetic oscillations in a wide range of frequencies, which control the vital processes of the body.

The frequency range generated by test preparations and perceived by cellular structures is extremely wide - from a few millimeters to tens of microns. Every cell, organelle, atom, proton, electron, etc. together they create a complex wave pattern associated with a multitude of moving particles - sources of vibration. The propagation of waves comes from both particles located on the surface and from particles located in deep layers.

The wave pattern of radiation of a substance, organ, tissue, etc. due to the addition of waves of different frequency, amplitude and phase from a variety of sources of oscillations with combination (sum and difference) frequencies, which are widespread in a limited space. The resulting multifrequency signal is frequency bunches formed at the moments of coincidence of the amplitudes of the sum frequencies, and frequency discharges at the moments of coincidence of the difference frequencies. These coincidences do not occur simultaneously, but at regular intervals. Any part of the human body is a source of vibrations that carry information about the current state of the body. Such a spectrum is uneven in frequency and amplitude, has low-frequency repetition periods, and has the properties of a frequency- and amplitude-modulated signal.

Thus, each radiation, be it a substance, mineral, metal, organ, chromosome, homeopathic preparation in a certain potency, etc., is unique and differs in polarization coefficient (CP), initial resonance frequency, resonance with a certain potency of connective tissue ( STK) and a functional curve constructed using the spectral complement method.

The objectivity and reliability of the spectral portrait taken from the patient has been repeatedly confirmed by the coincidence of the results of biofunctional diagnostics using ART using a transducer and the results of a clinical examination, as well as by a double-blind method. When examining the patient's radiation spectrum by the spectral addition method, the same type of curves are always obtained, characteristic of a cancer patient (straight horizontal line), precancer (sawtooth) and a healthy person (arched curve).

During the vegetative resonance test (ART), the radiation spectrum of both the patient and the drug is transferred to a secondary carrier. When preparing a medicinal product, its spectrum is purposefully changed and rewritten using a spectral converter.

Despite the widespread use of recording spectra on secondary media, this process is poorly understood. Until now, we have not found in the literature information on a possible mechanism for rewriting drugs on a solid carrier (in particular, on homeopathic grits and aluminum foil).

To get any idea about this process, a series of experiments was carried out aimed at studying the effects of recording spectral information on secondary media and its subsequent erasure.

As a result of the experiments, the following patterns were revealed:

1. Clean globules were placed on a wooden table at a distance of 1 cm, 3 cm, 5 cm and 10 cm from the globule with the recorded information. At an exposure of 5 minutes, a complete re-recording occurred on a globule located 1 cm from the original. This globule, when placed on a medicamentous plate, resonated with the original one. According to the spectral complement method, the curves of functions of the original and the recorded ones are identical. The rest of the grains, located at a distance of 3, 5, and 10 cm, did not resonate. In the study using the spectral complement method, the spectrum of a globule located at a distance of 3 cm was shifted somewhat to the right, and the spectrum of a globule located at a distance of 10 cm was a straight horizontal line. With an exposure of 20 seconds, globules located at a distance of 1 and 3 cm from the original were completely re-recorded, the spectrum of a globule located at a distance of 10 cm was shifted somewhat to the right of the spectrum of the original.

2. On two pieces of foil, laid one on top of the other, shiny side to matte, Sulfur 3 radiation is transferred from the drug selector. By placing each piece individually and both together on the drug plate, they resonate with Sulfur 3. When these pieces are placed with the shiny side to each other or the matte side to each other, the recorded radiation is neutralized. Then the radiation from Sulfur 3 is successively transferred first to the 1st piece of foil, then to the 2nd. If you stack these pieces together, shiny side up, one on top of the other and place them on the medication plate, they will resonate with the radiation of Sulfur 6.

Two Sulfur 3 globules recorded in succession, when added together, resonate with Sulfur 6, and three globules resonate with Sulfur 12.

3. Spectral portrait of the preparation both when rewriting on the transfer, and when placed in a secondary medium at the exit of a plastic waveguide 20 meters long is recorded instantly if a clean globule is illuminated with a laser.

4. Spectra of radiation of the north and south poles of the magnet in the study by the spectral complement method have different curves. When rewriting through a hollow waveguide onto a secondary carrier, if a magnet is placed near the waveguide,

there is a change in the radiation spectrum of the recorded drug.

5. The spectra of various preparations can be transferred to 1 globule, with testing with each of the recorded drugs will resonate.

6. The erasure of the radiation spectrum recorded on the secondary carrier occurs not only when the passive and active electrodes are closed on the aluminum container where the globule is placed, but also when the globule is irradiated with a laser. Hitting a piece of aluminum foil with information on it with a hammer also erases it.

An analysis of the results obtained in the presented experiments suggests that the transfer of the radiation spectrum from one carrier to another occurs as a result of the action of the wave spectrum of the emitting drug on the substance of the secondary carrier, in which the planes of rotation of electrons are displaced. A coarser external effect removes the previously induced effect and returns the substance to its previous state, stable for it.

Changing the radiation spectrum of the patient by rewriting it from the 3rd container into the 1st one and placing this spectrum at the input of the transducer allows obtaining more reliable indications of changes in the body. The transducer also provides very important information about the degree of polarization of the patient's radiation. The choice of the target marker from the received pointers, through which the therapeutic drugs are selected, and the transformation of the radiation spectra of the selected drugs, increases the quality of therapy by several orders of magnitude.

The algorithm for working with two converters by the ART method in the "IIMEDIS-TEST" system will be discussed in detail at the seminar.

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