Plane Coil Frequency Wave TherapyA.E. Kudaev1, N.K. Khodareva 1,2, V.V. Vinokurov1, L.P. Barsukova1 (1Medical Center for Innovative Technologies "Artemis" 2GBU RO "Treatment and Rehabilitation Center No. 1", Rostov-on-Don, Russia)

The purpose of this study is to study the possibility, using frequency-wave exposure, to induce anti-stress adaptive reactions that contribute to an increase in nonspecific resistance, including antitumor resistance, as well as to increase the effectiveness of energy-information drugs obtained using ART and BRT methods.

The therapy was carried out in three volunteers aged from 53 to 63 years with diagnoses: acute monoblastic leukemia; acute malignant thrombocythemia; ductal cancer of the left breast, cystoadenocarcinoma of the right ovary. All patients were examined, respectively, by a hematologist and an oncologist. No special treatment was performed in hematological patients, but it is planned in the near future. A patient with ductal cancer of the left breast and cystoadenocarcinoma of the right ovary was recommended for surgical treatment, from which she temporarily abstained.

All patients received energy-informational preparations created according to the IRADT system [1], which were updated every 14 days. For ART and recording of information drugs, we used the ARTEMIDA-PRO apparatus of the team of authors of MCIT "Artemida" LLC. For frequency-wave therapy, we used a flat coil with the definition of local frequency resonance (authoring by LLC MCIT "Artemida"). Among the many resonances, one was chosen, determined by the maximum luminescence of the LED. During the therapy, the resonance frequencies were changed in accordance with the given maximum luminescence of the LED. The dose (impact strength) was varied according to the principles of activation therapy according to L.Kh. Garkavi, E.B. Kvakina, M.A.Ukolova. [2]. The device design does not allow adjusting the power, therefore, depending on the tested adaptive response (stress, response of training, calm or increased activation) changed the exposure time using the coefficients of transition between responses. To control the effectiveness and select the exposure time before and after the frequency-wave therapy according to the level of reactivity were determined according to the degree of adaptation tension.

As a result of the therapy for the period from 01/30/17 to 02/19/17 in a patient with malignant thrombocythemia, according to laboratory tests, there was a decrease in platelets from 1051 to 266 (Table 1). A patient with acute monocytic leukemia received frequency wave therapy from 01/12/17 to 01/28/17, as a result of which, according to laboratory analyzes, monocytes decreased from 30.97 to 21.6, and platelets - from 710 to 581 (Table 1).

Table 1

	"BEFORE" held	"AFTER"	Reference values
	impacts	ongoing impacts	indicator
Patient "A"	Platelets 1051	Platelets 266	150-400 thousand / μl
	Leukocytes 16.55	Leukocytes 11.91	4.00-11.00 thousand / mcl
Patient "B"	Platelets 710	Platelets 581	150-400 thousand / μl
	Monocytes 31%	Monocytes 21%	3-11%

Changes in some significant blood parameters "Before" and "after" frequency-wave therapy

In a patient with ductal cancer of the left breast and cystoadenocarcinoma of the right ovary, the dynamics was monitored by ultrasound. So, on the ultrasound of the left breast dated 26.10.2016, a solid volumetric lesion was determined at a depth of 12.8 mm, motionless during compression, with clear uneven oval-shaped contours, measuring 10.2 x 6.8 x 7.7 mm with a spread beyond the fascia, reduced echogenicity; homogeneous internal structure,

in the CDC and EC modes, the vascular component is revealed in the projection of the formation. Axillary lymph nodes on the left with dimensions of 14.0 x 5.9 mm and 10.0 x 5.3 mm are located. In the pelvic cavity above the uterus on the right, the formation of a cystic-solid structure with a predominance of the cystic component is visualized, the contents are homogeneous, anechoic, a solid component measuring 20x18 mm along the anterior internal contour is dense with clear, vascularized contours (data for cystoadenocarcinoma).

After completing the course of frequency-wave therapy on January 18, 2017, a second ultrasound was performed. A solid formation with dimensions 10.0 x 8.1 x 9.8 mm of reduced echogenicity of a heterogeneous internal structure is located in the left mammary gland, due to the presence of single hyperechoic point foci along the periphery; in the CDC and EC modes, the vascular component is not detected in the projection of the formation.

Regional lymph nodes (axillary, supra- and subclavian) are not changed. Volumetric fluid formation in the projection of the right ovary with clear, even contours, rounded, measuring 22 x 20.2 mm with thickened walls, containing an anechoic internal component. The formation manifests itself as a weakly pronounced additional acoustic effect of the distal pseudo-amplification; in the CDC and EC modes, the vascular component in the projection of the formation is not detected (serous cystoadenoma). With ultrasound of the pelvic organs dated 02.21.2017, a fluid volumetric formation in the projection of the right ovary is determined, with clear, even contours, rounded, dimensions 31.0 x 29.5 mm, with thickened walls, with inhomogeneous internal contents, with active peripheral blood flow;

The dynamics of adaptive responses in a patient with acute monoblastic leukemia varied from stress to anti-stress responses (training, calm activation). In a patient with ductal cancer of the left breast and a patient with acute malignant thrombocythemia, there was a decrease in the number of storeys of stress reactions (an increase in the level of reactivity with a decrease in the tension of adaptation).

Thus, the variant of frequency-wave therapy proposed by us contributes to an increase in the body's nonspecific resistance, including antitumor resistance, and also increases the efficiency of energy-information drugs obtained using the ART and BRT methods. Research in this direction will be continued.

Literature

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