

Evaluation of the effectiveness of informational inactive Ayurvedic drugs in the treatment of the inflammatory process in the experiment using the apparatus "Artemis-Pro" S.V. Kruglova<sup>1</sup>, A.E.

Kudaev<sup>1</sup>, N.K. Khodareva<sup>1,2</sup>, L.P. Barsukova<sup>1</sup>

(<sup>1</sup>Medical Center for Innovative Technologies "Artemis"

<sup>2</sup>GBU RO "Treatment and Rehabilitation Center No. 1", Rostov-on-Don, Russia)

#### Introduction

In 2015–2016 On the basis of LLC MCIT "Artemis", an in-depth work was carried out to study the system "doshas - miasma - the main functions of a living cell (nutrition, excretion, reproduction)". The work is based on the research of R. Hooke, T. Schwann, M. Schleiden, R. Virchow, the study of Ayurvedic concepts, the theory of the correspondence of doshas to the main homeopathic miasms.

As a result of the research, we have obtained a unified model, which includes the compliance of the Ayurvedic theory of life and human development with the homeopathic canons, as well as the biological functions of a person as a single integral system. This concept is described in more detail in the materials of two original seminars "Ayurvedic concepts in bioresonance therapy" Kruglova S.V., Rostov-on-Don, 2015–2017.

Inflammation is a pathogenic process that accompanies or underlies many diseases. Starting with tissue damage from the action of any agent, almost the entire body is involved in this predominantly local process. Currently used in medical practice, anti-inflammatory drugs, mainly from the group of non-steroidal anti-inflammatory drugs and glucocorticoids, demonstrating sufficient clinical efficacy, have a number of significant adverse reactions, which stimulates the search for new, safe anti-inflammatory drugs.

From 11/01/2016 to 11/08/2016 on the basis of the vivarium of the "Center for Hygiene and Epidemiology in the Rostov Region" we carried out experimental work on rats to study the effects of Ayurvedic drugs.

The purpose of this study was a comparative study of the anti-inflammatory activity of the Ayurvedic drug used in practice (native drug), and its information drug - a copy (IP).

#### Materials and methods

The experiment was carried out on a small number of white outbred rats (9 animals), the study was in the nature of a pilot.

Inflammation was caused by the introduction of an aqueous 2% formalin solution (0.2 ml) under the skin in the ankle joint of the hind paw of the rat. A few hours later, local inflammation developed, accompanied by edema. This edema is easy to measure, compare with the volume of the paw prior to formalin administration, and test for therapeutic interventions. This technique is widely used in experimental medicine and pharmacology. The digression, which was made in the work below, concerned the initiation of anti-inflammatory actions. According to the original

method, the introduction of an anti-inflammatory drug is performed one hour before the introduction of formalin, which provokes inflammation. It seemed to us more correct in our studies to carry out anti-inflammatory effects after the introduction of formalin. In this modification, the model of subacute formalin inflammation was used in the proposed experimental work.

The native drug was selected when testing the rat by the MCADT method using the "Artemis-PRO" apparatus of the authors' team of LLC MCIT "Artemida" according to the original method after the manifestation of edema. The information drug (IP) was obtained by transferring the informational properties of the original drug to a secondary carrier - water for injection.

The experiment used 3 groups of rats with artificially simulated formalin inflammation of the ankle joint:

- 1 group (3 animals) - control, without treatment;
- Group 2 (3 animals) - received electronic Ayurvedic drugs;
- Group 3 (3 animals) - received the same native (original)

Ayurvedic medicines.

The choice was made by way testing drug, maximally compensating for the revealed pathology in the sections "Organopreparations" and "Nosodes". The Ayurvedic drug "Mahasudarshanchurna" was chosen as the optimal compensatory active drug, the main action of which is detoxification.

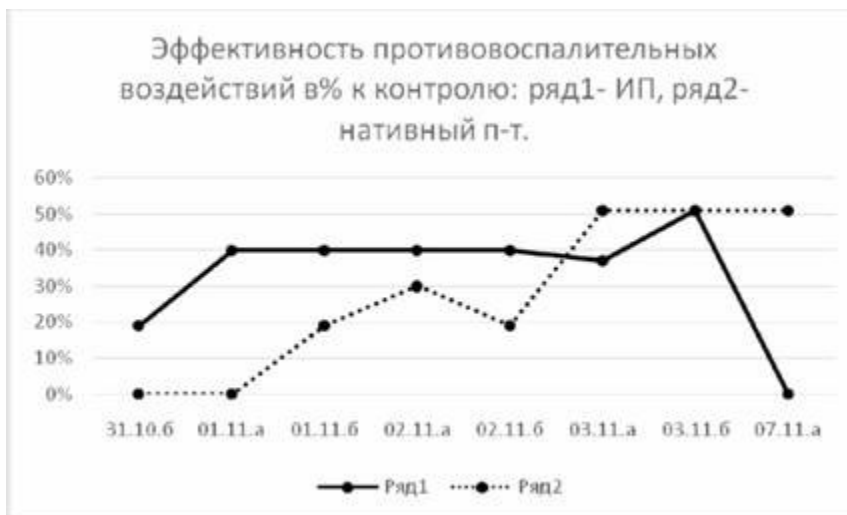
The test substances (as well as water for injection to control animals) were injected intragastrically with a probe in a volume of 0.5 ml 3 hours after formalin injection, then twice a day for 4 days (a total of 8 drinks). After that, a break was made in the impacts for three days, and measurements were taken again.

### Results and research

The results obtained showed that the greatest severity of edema was observed already 3 hours after the introduction of formalin and began to subside in control animals only on the 4th day. The action of the electronic drug "Mahasudarshanchurna" began immediately, while the native drug gave a more delayed result in time (Fig. 1, 2). However, after the termination of treatment email. with the drug, the inflammatory process manifested again, and the native drug continued to act.



Rice. 1. Change in the edema of the rat paw in% to the initial volume



Rice. 2. The effectiveness of anti-inflammatory effects in% to control

In the period from November 2016 to February 2017, the diagnostic and therapeutic model obtained by us was used in the examination and treatment of 357 patients with various nosological forms.

The following indicators were used to assess the results of therapy:

- duration of treatment;
- disappearance of the main symptoms of the disease;
- improving the quality of life in terms of the main indicators: sleep, appetite, performance, emotional background;
- the level of relationships with people around.

The control methods were the determination of the body's adaptive reactions by the Garkavi-Kvakina-Ukolova method; a detailed blood test on a non-invasive analyzer AMP for 135 indicators; valid psychodiagnostic methods (including L. Szondi's test and E. Wartegg's test), as well as anonymous electronic questionnaires of the patients themselves.

It should be noted that the percentage of improvement in the condition according to the given indicators of patients was 89% versus 85%, respectively, in the period before

November 2016

conclusions

Of course, the concept we have developed requires further study and research. However, using the above therapeutic model, we can not only successfully cope with the treatment of the inflammatory process and regulate homeostasis, but also affect the basic mechanisms of the development of the disease.

Literature

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