

Non-drug correction of elemental metabolism disorders. Part 1. Dynamics of compensation for violations of elemental metabolism in the course of therapy patients with elementosis

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Nonpharmacological correction of trace elements disturbances
Part 1. Dynamic of compensation of trace elements metabolism during therapy of patients with elementosis

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SUMMARY

The study of the effectiveness of the individually selected method of the vegetative resonance test for the treatment of disorders of elemental metabolism with potentiated blood autonosodes and biologically active additives with microelement complexes was carried out. The comparison of the results of therapy in dynamics was carried out. The high efficiency of therapy with blood autonosodes as a way to compensate for violations of elemental metabolism has been shown.

Key words: blood autonosode, elemental metabolism, vegetativeresonance test, KMX marker.

RESUME

The research of efficiency of individually selected using vegetative resonance test therapy of disturbances of elements metabolism by potenciesed autonosodes of blood and biologically active supplements with mineral complexes. Results of therapy are compared in dynamics. High efficiency of therapy with autonosode of blood for compensation of trace elements metabolism is shown.

Keywords: autonosode of blood, trace elements metabolism, vegetative resonance test, KMKh marker.

INTRODUCTION

Disorders of elemental metabolism, hereinafter referred to as elementose, represent a deficiency, excess or imbalance of certain elements in the human body. Elementoses not only accompany the pathological conditions of the body, but also contribute to the chronicization of pathological changes in it, "potentiate" the course of the pathological process, and provoke the development of new diseases. In this regard, the tasks of early identification and effective therapy of violations of elemental metabolism in the patient's body are of great importance [1]. V

works [2–3] showed the validity of the autonomic resonance test (ART) as a method of express diagnostics of elemental metabolic disorders. The development of effective, fast and free of negative long-term consequences of methods of non-drug therapy of disorders of elemental metabolism of a patient under the control of ART is urgent.

From the "orthodox" point of view, the occurrence of elementoses is due to a deficiency or excess of one or another element entering the body. From the point of view of the authors, it is more correct to define elementosis as a violation of the processes of normal (biologically reference) assimilation, accumulation, use in metabolism and excretion by the body of a certain element or a group of them. Such disorders, in addition to those caused by a deficiency or excess of the intake of elements in the body, include:

- violation of the passage of the required quantities of the element through the sequence of biochemical reactions in which he should participate, ousting him from these reactions, or vice versa, involvement in pathological reactions in which he normally should not participate. Examples are violations of elemental metabolism as a result of chronic inflammation and chronic viral infections, when the depot of one or another element in the body is depleted, or when at some stage of metabolism the element is not absorbed, although it enters the body in the required amount, as occurs in patients with diseases of the gastrointestinal tract;

- violations of the normal quantitative proportions of passage the element under consideration through those organs, tissues and systems of the body that take part in its exchange - a deficiency or excess of an element in some structures of the body, while in others a diametrically opposite picture is observed. An example is osteoporosis, against the background of the deposition of calcifications in soft tissues, in patients suffering from disorders of phosphorus-calcium metabolism.

Thus, the causes of elementoses can be not only a deficiency or excess of the intake of elements into the body from the environment, but also pathological processes in the patient's body that are not caused by this deficiency or excess. From this point of view, elementoses should be considered not only as indicators of a deficiency or excess of elements entering the body, but also as indicators of pathological processes in the body, which make it possible to judge their nature, severity and direction. Disruption of the processes of normal assimilation, accumulation, use in metabolism and excretion of any element leads to its deficiency or excess in biosubstrates used for clinical analyzes (blood, hair) and is often interpreted as caused by a deficiency or excess of its intake into the body. This, in many cases,

We have compared the effectiveness of three different therapies

patients with elementosis:

1. Therapy with an informational preparation of the patient's blood autosode, selected using the KMX system marker (Kudaev system marker-Mkhitarian-Khodareva), characterizing the constitutional features of the patient [4].

2. Therapy with an informational preparation of the patient's blood autosode, selected using the total marker of elemental metabolic disorders (SMNEL) - the sum of test indicators of elemental metabolic disorders identified during the preliminary ART examination.

3. Correction with biologically active additives (BAA) mineral complexes prescribed for joint clinical indications, taking into account both the results of ART and the results of mass spectrometry.

OBJECTIVES OF THE STUDY

1. Evaluate the effectiveness of therapy for disorders of elemental metabolism with the help of information preparations of the blood autosode, selected with the help of markers KMH and SMNEL.

2. Compare the effectiveness of therapy for disorders of elemental metabolism with the help of informational preparations of the patient's blood autosode, selected using the systemic marker KMH with the effectiveness of therapy with informational preparations of the blood autosode made using the SMNEL marker.

3. Compare the efficiency of correction of violations of elemental metabolism with the help of dietary supplements of elemental complexes with the effectiveness of therapy of informational preparations of the blood autosode, selected using markers KMH or SMNEL.

MATERIALS AND RESEARCH METHODS

To diagnose by the ART method and create an information preparation of the patient's blood autosode, we used hardware and software complex (APC) for electropunctural diagnostics, drug testing, adaptive bioresonance therapy and electro-, magnetic and light therapy according to BAT and BAZ "IMEDIS-EXPERT", Registration certificate No. FS 022a2005 / 2263-05 dated September 16, 2005 To assess the content of chemical elements in the biosubstrate (hair), in order to select dietary supplements, the assessment of the elemental status of a person by the method of A.V. Skalny ANO "Center for Biotic Medicine", in accordance with the method of spectral analysis of the content of chemical elements in the biosubstrate (FSNSZSR license No. 77-01-000094) [1].

The study was conducted on a sample of 108 patients aged 18 to 64 years, suffering from chronic diseases of various nosologies. Patients permanently reside in Moscow and the Moscow region. All patients underwent primary diagnostics using the ART method according to a unified algorithm [2, 3] in accordance with the methodology [5, 6]. Determination of violations of elemental metabolism was carried out in 17 positions corresponding to the test

signs of elemental metabolic disorders... At the same time, biological material (the patient's hair) was taken and the violations of elemental exchange were assessed by mass spectrometry. To assess the metabolic disorder of a chemical element, the following criterion was used: a deficiency or excess of an element in the biosubstrate (hair) outside the norm corridor.

The patients were randomized into three groups of 36 people each:

1. Patients of the first (main) group received information therapy a blood autonosode preparation, selected according to the system marker (CMH), in accordance with the methodology given in [7].

The KMH system marker was proposed by the team of authors: A.E. Kudaev, K.N. Mkhitaryan, N.K. Khodareva in order to take into account the constitutional characteristics of the patient when creating informational preparations [4]. The KMX marker is the sum of electromagnetic signals from the end points and points of intersection of the main chiroglyphic lines located on the patient's palms. The marker is made using bioresonance therapy equipment.

2. Patients of the second group received informational drug therapy autonosode of blood, selected according to the total marker of SMNEL.

3. Patients of the third group underwent a course of individual correction in the form of individual dietary supplements of elemental complexes produced by ANO Center for Biotic Medicine. Elemental dietary supplements were selected taking into account both ART data and the results of mass spectrometry analyzes.

The selection of information preparations for the markers KMH and SMNEL was carried out by electronic potentiation of the blood autonosode, up to the fulfillment of the ART condition:

$KMH \downarrow + \text{rot} \alpha ANK_r \uparrow (1)$

or

$SMNEL \downarrow + \text{rot} \alpha ANK_r \uparrow (2)$. Parameter α indicates the potentiation coefficient, ANK_r

- autonomic blood of the patient, symbols \downarrow and \uparrow are used to designate, respectively, the occurrence and compensation of the autonomic resonance response of the organism.

The therapy consisted of two stages, each lasting 1 month. At the end of each stage of therapy, a follow-up examination of the patient was carried out in order to determine his general condition and the dynamics of violations of elemental metabolism.

For a comparative assessment of the effectiveness of the methods of therapy by groups, the following were used:

- general clinical assessment of the patient's condition, taking into account the results laboratory research;

- screening ART examination;

- assessment using ART of the dynamics of compensation for violations of the elemental exchange during therapy in different groups of patients. The choice of the ART method was dictated by its simplicity and, at the same time, its validity in determining violations of elemental metabolism [2–3].

To assess the effectiveness of therapy in the group "on average" for each of the groups, at each stage of therapy, the total number of test indicators identified in the course of the ART examination was calculated - violations of elemental metabolism - before the beginning, as well as after the first and second stages of therapy. ... The percentage of the number of violations of elemental metabolism of the total number of possible ones (equal to $17 \times 36 = 612$) was calculated; in this group, at this stage of therapy, the indicator M₁... At a fixed significance level p, it was assumed:

One of the methods of therapy is statistically significantly more effective than the other, at a certain stage of therapy, in accordance with the indicator M₁ if the percentage of violations of elemental metabolism in the group receiving therapy using this technique is statistically significantly lower than in the group receiving therapy using another technique.

For a statistical comparison of the effectiveness of therapy for disorders of elemental metabolism in the 1st, 2nd and 3rd groups of therapy, in accordance with the M₁, at its various stages, the criterion - * Fisher was used [8, 9], the choice of which was due to its suitability for assessing the statistical reliability of research results, expressed as a percentage.

RESULTS AND DISCUSSION

In the course of dynamic observation, a decrease in complaints and an improvement in clinical symptoms were noted, mainly in the 1st group.

The study of patients by the ART method showed: In the 1st group:

- significant improvement in the results of ART examination, previous ART diagnosis (the sum of violations of macro- and microelements) in most cases (23 people) is not tested, it is compensated, the term for achieving compensation is on average 30–35 days;

- improvement of BI and RA indicators according to the results of the ART test, up to optimal (in 16 people).

In the 2nd group:

- improvement of the results of ART examination, previous ART diagnosis (the sum of violations of macro- and microelements) is partially not tested, compensated, the term for achieving compensation is on average 55–65 days;

- improvement of BI and RA indicators based on the results of ART, however, these indicators do not become optimal.

In the 3rd group:

- unstable change in ART results, some of the test pointers stop emerge, but new test pointers begin to emerge;

- lack of positive dynamics of BI and RA.

For some patients, more detailed information about the clinical results of therapy can be found in [11–12].

The presence of statistically significant differences in the indicator M₁ was tested on the basis of the application of the * Fisher criterion. At the time of initial examination, all three groups are statistically indistinguishable.

After a month of therapy:

- therapy in group 1 is statistically significantly more effective than therapy in group 2 ($p \leq 0.01$) and group 3 ($p \leq 0.05$).

After 2 months of therapy:

- therapy in group 1 and group 2 is statistically significantly more effective, than therapy in group 3 ($p \leq 0.05$).

Table 1

Dynamics of the number of tested violations of elemental exchange from the total number of possible (indicator M1)

	первично		через 1 месяц		через 2 месяца	
	всего	в %	всего	в %	всего	в %
Группа 1 (КМХ) (n = 36)	298	48,69	42	6,86	36	5,88
Группа 2 (СМНЭЛ) (n = 36)	267	43,62	129	21,07	54	8,82
Группа 3 (БАД) (n = 36)	234	38,23	187	30,55	148	24,18

According to the results of the study, it can be assumed that in the study region the vast majority of elementosis is secondary: it is caused not by a deficiency or excess intake of elements into the patient's body, but by a violation of the processes of normal assimilation, accumulation, use in metabolism and excretion of some of them. It is possible that the pathological processes causing these disorders are partly due to an increased background of potentially dangerous trace elements (in particular, heavy metals) in the urban environment, however, confirmation of this hypothesis requires additional research. The efficiency of correction of violations of elemental metabolism of dietary supplements of elemental complexes in the study region is problematic, since it does not interrupt the pathological process, the consequences of which are these violations.

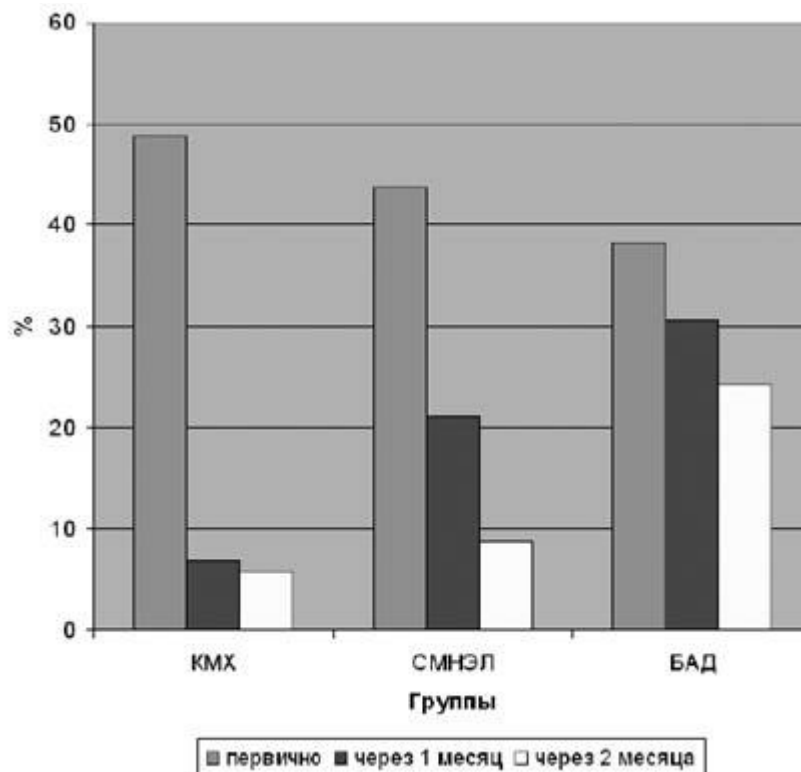


Diagram 1. Dynamics of the number of tested violations of elemental exchange.

On the contrary, the therapy of the body with informational preparations of the blood autonosode leads to the interruption of pathological processes, for which elementoses are a consequence, and, ultimately, to complete or significant compensation of elemental metabolism. A higher efficiency of therapy is observed when selecting an informational drug for the KMH marker, which can be considered as confirmation that systemic, capturing the body as a whole, pathological processes are decisive for the occurrence of secondary elementosis.

With the aim of treating elementosis in the study region, it is apparently advisable to first conduct a course of therapy for the patient with informational preparations of the blood autonosode, selected according to the KMH marker, and only then assess the need for further therapy using dietary supplements of elemental complexes or other "material" sources of elements.

CONCLUSIONS

1. Therapy with autonosodes of blood, under the control of ART is effective by the method of compensation for violations of elemental metabolism.
2. Use of informational preparation of blood autonosode selected according to the KMH marker gives a significantly greater ($p \leq 0.01$) effect of therapy, compared with the use of the SMNEL marker.
3. The use of dietary supplements of trace elements developed for therapy

violations of elemental metabolism, gives a significantly lower ($p \leq 0.01$) therapeutic effect than the use of a blood autonosode, selected using both the KMH marker and the SMNEL marker.

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