

Traditional medicine methods in the complex treatment of patients with arterial hypertension

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Methods of traditional medicine in complex treatment of patients with arterial hypertension

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RESUME

The aim of the study was to optimize the treatment of patients with hypertension by using pulsehemoincication and homeopathy one of the methods of traditional medicine. The work confirmed a distinct increase in efficiency in response to the inclusion of this method in the base therapeutic complex. In favor of this show positive dynamics of the psychological status, cardiovascular system, including cerebral blood flow and lipid levels. The proposed complex is characterized by an integral therapeutic effect, which determines the prospects for its practical application.

Keywords: hypertension, pulsehemoincication, medical rehabilitation.

SUMMARY

The aim of the work was to optimize the treatment of patients with arterial hypertension by using one of the methods of traditional medicine - homeopathy in combination with pulse-hemoindicication. In the course of the work, a clear increase in the effectiveness of therapy was confirmed in response to the inclusion of this method in the basic therapeutic complex. This is evidenced by the positive dynamics of indicators of psychological status, the state of the cardiovascular system, including cerebral blood flow, as well as the level of lipid metabolism. The proposed complex is characterized by an increased therapeutic effect, which determines the prospects for its practical application.

Key words: arterial hypertension, pulsogemoindicication, medical rehabilitation.

Introduction

In the Russian Federation, there is a steady trend towards an increase in morbidity and mortality from cardiovascular diseases and, first of all, arterial hypertension [1]. Here, despite the undoubted success of pharmacological therapy, the frequency of the formed negative reactions should also be taken into account. Proceeding from this, interest in traditional methods of treatment and rehabilitation of patients with arterial hypertension is sharply increasing.

In this system, the use of ultra-low intensity factors is considered promising, examples of which are bioresonance therapy and homeopathy. In case of arterial hypertension, the use of homeopathy in combination with pulse-hemoindicication can be therapeutically significant, which makes it possible to optimize this method of traditional medicine [2, 4, 5].

Material (contingent), methods of examination and treatment

There were 75 patients under observation at the age from 29 to 63 years (women - 62.7%, men - 37.3%) with grade I-II arterial hypertension. In particular, in 72% of observations, a pathological process of I was revealed, in 28% - II degree.

Research methods

The antihypertensive effect was determined by the reaction of blood pressure and pulse both to single procedures and to a treatment course. Here tonometry and electrocardiography were performed using the EK 34-01 apparatus (Russia). Echocardiography was performed on a Combison-5 apparatus with a Doppler-300 attachment from Kretz-technic (Austria) in M- and B-modes. The state of cerebral circulation was assessed by ultrasound Doppler sonography on an automated complex "Spectrum-1000" (Russia) with an analysis of the linear blood flow velocity. The lipid spectrum of blood serum was determined using a Shemetrics biochemical analyzer (USA) and Biocon diagnostic kits.

(Germany). In the course of the psychological analysis, we used the questionnaire techniques of Spielberger-Khanin's reactive and personal anxiety (Khanin Yu.L., 1987) and "well-being - activity - mood" (SAN).

Special indices of pulse-hemoindication (pulse, pulse and vegetative variability, gradient of amplitude variability, etc.) were assessed using the hardware-software complex "ASGARD".

Treatment methods

The patients were divided into 3 groups, each of 25 people: in the 1st control group, basic therapy was prescribed. In the 2nd, the main group, a complex of basic treatment and homeopathic treatment prescribed according to the results of pulse-hemoindication was used, in the 3rd group, an imitation of the exposure procedure was performed against the background of basic therapy.

The course of treatment in all groups was 5 weeks, procedures were carried out 2 times a week.

Evaluation of the effectiveness of treatment was carried out in dynamics, using parametric and nonparametric methods of statistics.

results

In the course of the work performed, a significant ($p < 0.05$) therapeutic advantage of the complex, including pulse hemoindication (group 2), over compared groups 1 and 3 (Table 1) was established.

Table 1

Comparison of the effectiveness of exposure methods

Группы	Улучшение		Без эффекта		Ухудшение	
	Абс.	%	Абс.	%	Абс.	%
1-я (n = 25)	16	64	9	36	0	0
2-я (n = 25)	21	84	3	12	1	4
3-я (n = 25)	9	36	15	60	1	4

Примечание: n – количество наблюдений.

Thus, when analyzing the regression of the main complaints, the absolute priority of the 2nd group was established (Table 2). At the same time, the negative effects in the form of dizziness, headache or itching, noted in 3 patients of this and 2 patients of the 3rd group, were short-term, and their relationship with the therapy was doubtful.

table 2

Comparison of the dynamics of the main complaints during treatment in the comparison groups (detection rate in% before and after the end of therapy)

Жалобы	До лечения (суммарно в 3-х группах)	После лечения		
		Группы		
		2	3	1
Боли в сердце	36,0	16	28	32
Сердцебиение	32,6	8	24	28
Головные боли	38,9	16	28	36
Головокружение	28	16	24	24
Шум в ушах	25,33	16	20	20
Слабость, утомляемость	66,67	20	48	56
Неустойчивость при ходьбе	6,67	4	4	4
Снижение памяти	65,33	48	60	60
Раздражительность	54,67	28	40	44
Нарушение сна	53,33	20	44	48

These data were verified by the results of an objective examination. In particular, in the 2nd

group, the level of systolic pressure decreased from 165.7 ± 6.2 to 153.2 ± 3.8 mm Hg. Art., diastolic - from 101.5 ± 3.1 mm to 93.9 ± 3.8 mm Hg. Art, significantly exceeding in this respect ($p < 0.05$) the indicators of the compared groups. Moreover, a stable hypotensive effect developed here on average by the 7th procedure with a tendency to normalize blood pressure indicators by the end of treatment.

Table 3 shows the shifts in the indicators of central hemodynamics in patients with hyperkinetic type of blood circulation, however, similar positive changes were noted in the case of hypokinetic circulation.

Table 3

Dynamics of indices of central hemodynamics in patients with arterial hypertension with hyperkinetic type of blood circulation before and after treatment in comparison groups

Показатель	Группа 2		Группа 1		Группа 3	
	до	после	до	после	до	после
САД мм рт. ст.	$165,7 \pm 6,2$	$134,6 \pm 7,7^*$	$168,3 \pm 4,1$	$164 \pm 2,7$	$166 \pm 1,6$	$150 \pm 2,8$
ДАД мм рт ст	$101,5 \pm 3,1$	$88,9 \pm 7,7^*$	$101,4 \pm 2,2$	$92 \pm 6,8$	$101,6 \pm 3$	$91,7 \pm 6,4$
ЧСС уд./мин.	$89,5 \pm 5,4$	$76,8 \pm 4,3^*$	$86,3 \pm 4,1$	$83,6 \pm 4,0$	$88,2 \pm 4,2$	$79 \pm 3,6$
УОК смЗ	$95,2 \pm 5,4$	$78,4 \pm 6,7^*$	$96,7 \pm 7,1$	$94,6 \pm 5,2$	$95,8 \pm 4,8$	$82 \pm 6,2$
МОК л/мин.	$7,68 \pm 0,3$	$5,69 \pm 0,2^*$	$8,15 \pm 0,2$	$7,46 \pm 0,4$	$7,98 \pm 0,3$	$7,14 \pm 0,2$
СИ л/мин./м ²	$5,2 \pm 0,19$	$3,2 \pm 0,2^{**}$	$5,8 \pm 0,23$	$5,4 \pm 0,18$	$5,6 \pm 0,2$	$4,99 \pm 0,24$
ОПСС. Дин. с. см-5	$1967 \pm 78,7$	$1934 \pm 70,9$	$1985 \pm 85,7$	$1983 \pm 78,8$	$1972 \pm 72,6$	$1948,9 \pm 82,1$

Достоверность различий: * $p = 0,05$; ** $p = 0,01$.

The study of the state of cerebral blood flow also confirmed the advantage of the complex, which includes pulse-hemoindication. Only in this group there was a decrease in the difficulty or restoration of venous outflow in the vertebrobasilar system (in 82.1% of cases), the development of collateral circulation in the basins of the carotid arteries (32.3%), a decrease in the asymmetry of the LBF (31.4%), the normalization of the reaction to compression tests (76.4%).

The effect of the studied complex was accompanied by a positive dynamics of lipid metabolism indicators. The level of α -cholesterol here increased by 61% ($p < 0.001$), the level of triglycerides decreased by 25% ($p < 0.001$), total cholesterol - by 12.5% ($p < 0.001$), β -blood lipoproteins - by 14.1% ($p < 0.001$), P-cholesterol - by 11.1% ($p < 0.001$), which was accompanied by a decrease in the atherogenic coefficient on average in the group by 17.42% ($p < 0.02$).

The dynamics of indicators in the compared groups was not so convincing.

In the case of the use of the medical complex, positive shifts in the mental status of patients were also traced. According to SAN data, "well-being" increased on average from 3.22 ± 0.21 to 4.52 ± 0.23 points ($p < 0.02$), "activity" - from 3.53 ± 0.15 to $5,31 \pm 0.17$ points ($p < 0.01$), "mood" - from 3.84 ± 0.14 to 5.35 ± 0.19 points ($p < 0.02$). In parallel, the corrective effect of the method on the level of reactive anxiety of patients was observed, decreasing from 68.6 ± 3.6 to 48.8 ± 0.8 points, ($p \leq 0.05$). In contrast to this, in the compared groups there was only a tendency ($p > 0.05$) to improve these indicators.

This fact testifies to authentically significant raising tolerance to psychoemotional stress in patients under the influence of the complex used, including pulse-hemoindication.

Discussion and conclusions

The results of the study allow us to consider pulse-hemoindication as a way to optimize the selection of therapeutic procedures with homeopathic preparations, organopreparations and nosodes in the treatment of patients with arterial hypertension. This approach ensures the achievement of stress-protective, vasoregulatory and vegetotropic effects. In turn, this contributes to the growth of the body's functional reserves and its resistance to hyperadrenal influences. This allows us to consider this approach pathogenetically justified in the treatment of patients with arterial hypertension.

Literature

1. Aleksandrov A.A. Non-drug prevention of vascular complications with mild arterial hypertension // Soviet medicine, 1988. - №12. - S. 35-39.

2. Bokova I.A., Tsvetkov N.A. Diagnostic and therapeutic capabilities of the method pulse-hemoindication // "Resort business". - 2008. - T. 2. - No. 2. - P. 16-20.
3. Britov A.N. Assessment of cardiovascular risk in patients with arterial hypertension // Cardiovascular therapy and prevention. - 2003. - No. 3.
4. Razumov A. N., Tsvetkov N. A., Bokova I. A., Lyubovtsev V. B. "The method of bioresonance homeopathic restorative correction ". A guide for doctors. 2003 .-- S. 30.
5. Khairullin R.N. Pulse-hemoindication - diagnosis and treatment // Kazan Medical magazine. - No. 6. - 2008. - P. 867-874.

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