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Book One
The Secrets and Wisdom of the Body
Introduction

At the beginning of our along with the revolution in the field of physics and chemistry and the subsequent development of mathematics, we observe a significant lag in medical science. In medicine, we are still in the pre-revolutionary period. Alone concept replaces another.

For decades, medicine has been working hard, but without accuracy plan, not methodically, rushing now into one stream, then into the Other. True science is not only the accumulation of individual facts, it is, first of all, the cognition of interconnections and certain biological laws. It should be emphasized that the volume of the unknown in medicine exceeds the volume of what is known. The difficulties of the medical art in much are less due to the lack of effective means than from the lack of their very use. We need to balance our scientific knowledge - to understand our needs, what has already been finally achieved and what we We don't know yet.

In order to reveal the connection of phenomena, it is often necessary to turn to the old. We must begin by learning to forget what is unnecessary. Roads of the past are strewn with fragments of numerous doctrines. As a result, it turned out to be the one mosaic of contradictory ideas or childish didacticism, which we We are watching. Despite the wealth of medical literature, or even as a result, fragments of facts without synthesizing ideas are piled up. Literature stifles the clinical mind.

Meanwhile, the science of the sick person must remain first of all the problem of human observations. We must re-examine life, and Namely, life in general. We must re-examine anatomy, physiology, pathology and therapy. Medical thought is still too saturated with information from the pathological anatomy of organs. Laennec's work is undoubtedly great success in medical science. We are not going to belittle the achievements pathological anatomy, but unwisely, as Prof. Roger points out, to ask death for an explanation of the mystery of the phenomena observed during the life. Our physiology is still purely laboratory in nature. The fact that We know that there is physiology of animals, not of man.

On the other hand, in our body at any moment there exists much more physiological possibilities than she herself says Physiology. But we need illness to open up these opportunities to us. We must never forget that a large number of diseases are initially are in fact only insignificant deviations from physiological ones processes. And we often do not know them. We don't even know the mechanism vasodilation, while these processes occur daily in the most elementary pathology. We are almost completely unaware of what regulates the life of connective tissue that forms scars, heals Our wounds after surgery to replace what has been lost substance in organs deformed by tuberculosis, syphilis, alcoholism and other diseases.

We do not know the relationship between connective tissue and function other fabrics. And yet, this fabric, this tireless restorer, it causes the slow death of organs affected by sclerosis. Pulmonary sclerosis, renal sclerosis, arteriosclerosis, liver sclerosis - these are always wrinkling of organs by connective tissue.

And now about humoral pathology. It must be almost recreated. Humoral pathology is a quantitative and qualitative disorder composition of body fluids. The anatomical structure is only a skeleton, On whichis based on the function; At the heart of each injury is impaired function. You always need to think about the fact that there is a disease violation of physiological phenomena. Dictatorship of medical equipment is accompanied by the collapse of clinical observation. In addition, too much Sharp boundaries were established between various diseases for the sake of their classification. Disease-causing processes, of course, are not so are numerous and not as significantly different as we think they are.

We have a scheme that says: cause-damage-symptoms. Treatment First of all, it is addressed to local damage. Between the cause and damage, between the damage and the symptoms is invariably wedged impairment (at first minimal) of body functions. This is a violation functions often give rise to damage.

"Illness," writes Leriche (1955), "is a drama in two acts, of which are the first to be played out in the gloomy silence of our fabrics, extinguished lights. When pain or other unpleasant phenomena appear, it's almost always the second act."

There are no local diseases, diseases of organs. Always sick person as a whole. There is no local treatment. There is none a therapeutic measure that does not produce large or less humoral changes in the body. The slightest therapeutic An act, even the most insignificant, has important biological consequences, causes complex chemical phenomena, the movement of fluids, leukocyte movements, vasomotor actions. The doctor of

the future should study significant value of these smallest phenomena. He must know that it is possible to be a great experimenter without ever revealing a single rabbit.

We may be excellent empiricists and will remain so, but this is not relieves us of the obligation to have solid, very solid knowledge in all sciences, in the field of medical technology and clinical knowledge. We we still know too little about the brain that allowed man to discover and know world.

According to Delore, our so-called scientific medicine is still in infancy. She is not even a hundred years old. It is also in the present time has not passed the transitional age.

The next revolution in medicine will not create anarchy or complete destruction. On the contrary, it will come to restore order and build, to establish clear new principles and at the same time return to old, correct, but completely forgotten. We need guiding ideas. Without "alignment in the ranks" is not an army, but a crowd.

In medical education, it is necessary to introduce numbers, imagination and fantasy. Anatomy and histology have been taught for centuries. But few people give clearly aware that our exact anatomical knowledge are only rough figures of the true structure, architecture and the size of organs. When every student knows that the total length of the adult's capillaries reaches 100,000 km, that the length of the renal capillaries reaches 60 km, which is the size of all the capillaries open and spread out into surface, is 600 m that the surface of the pulmonary alveoli is almost 8000 m (Krogh) when the length of the capillaries is calculated of each organ and the surface area of each organ when they are created "expanded anatomy" - real physiological anatomy - is a lot proud pillars of classical dogmatism and mummified routine will collapse without attacks and without battles!

With such ideas, we can achieve a much more harmless therapy, the unfolded anatomy will make us respect the life of tissues in every medical intervention.

Observation, patience, perseverance, critical approach and reflection - These are the best helpers of true medicine.

Main ideas

Every living molecules are a functional association of atoms capable of side, stimulate attraction or repulsion, on the other - combine with other molecules.

The aggregate of enzymes is a huge laboratory that constantly generates interactions of particles of the order of a millionth or billionth fractions of a millimeter; life triumphs, dominates, and regulates this tiny chaos, organizing an inexorable and full of wisdom order, preserving the structure of cells, tissues, organs, regulating the constant temperature, blood circulation, excretion.

The ideas of modern biochemistry, physiology and pharmacology will remain groundless dreams, if you imagine that they can means to change the majestic flow of life. Life avoids the coarse, arrhythmic, uncontrollable explosions. Small changes, small chemical reactions at moderate temperatures give the body resistance is stronger than steel and is guided with precision and fineness, not characteristic of the termite technique. This is the "great wisdom of the body" (Cannon).
Doctors can do a lot to preserve and prolong life if they will always respect this "wisdom of the body".

There are countless treasures in the old house of classical medicine. But these treasures are scattered in basements and attics, forgotten, left without attention, covered with dust. To detect these precious particles knowledge, in order to make a selection, you need to be armed with guides ideas, a doctrinal sieve for sifting out valuable grains.

A pile of marble is not yet a statue. A pile of impressions - more not a thought. The whiteness of marble and its purity are necessary to create a good statues. Equanimity, clarity of impressions are necessary for thought was clear and strict.

The time will come when biologists, physiologists, doctors, expanding their imperfect optics, learn with admiration the wisdom of the organism, so fragile and at the same time so capable of resistance. Glubokoe The understanding of the wisdom of life will penetrate into philosophy and science.

Living matter is characterized by the fact that the set of infinitesimal units (colloidal micelles) have an extremely large surface area in relation to the volume of the human body. Mass of colloidal substances in the cytoplasm of the human body is 5 kg in dry form. Since the average size micelles in the cytoplasm are about 5 millionths of a millimeter, then The surface represented by the micelles of the whole body is certainly no less 2,000,000 m, i.e. 200 hectares (Policard, 1944). 100,000 km of capillaries per 200 hectares of living surface! The importance of capillary blood supply obvious. Carrel (1927), taking into account the amount of nutritional fluid required to preserve tissue in culture, calculated that The human body's need for blood and lymph is 200,000 liters per day.
Infinitesimal, but wonderfully used means The human body completely irrigates the human body 5 liters of blood, 2 liters of lymph, 28 liters of extracellular and intracellular fluid.

From an energy point of view, work productivity is the result of two factors: intensity and capacity (volume). Cellular the mass is insignificant - and the intensity factor is limited. But the dimensions surfaces give the capacitance factor an unusually high value.

Chapter 1
Life and Death
Life Cycles

Lifecycles are denoted by two poles:

1) constant assimilation or integration, which is the transformation of inert, dead matter into living, dynamic matter;

2) permanent disintegration or disintegration, which is the transformation of living matter into inert, dead matter.

Partial withering away is, as it were, a sure guarantee of life integrity of the body. Only the permanent destruction of the cell contents, tissues, organs and the whole body guarantees a constant Restoration of cells, tissues, organs and the whole body. Deceleration assimilation causes a quantitative decrease in vitality, i.e. lack of oxygen, lack of plastic substances, energy minerals, hormones, enzymes. Slowing down the discharge leads to to qualitative damage - poisoning with own products vital functions of the body (retention of urea, sodium chloride, water, calcium, bile).

A very dangerous infection has been known for a long time, arising from penetration into the body of ptomaines - very toxic alkaloids, which are formed during cadaveric decomposition. In the human body Millions and millions of cellular microcorpses appear every moment. They leave the arterial loops of blood capillaries, penetrate into the intercellular fluids, into the lymphatic capillaries, into the portal vein network, into the blood, lymphatic and biliary capillaries of the liver, as well as into the brain. Despite the numerous opportunities to accumulate and get stuck in the different areas of the body, they, however, are subject to disintegration, are removed without damage to the body, provided that the body is not tired.

For a balanced body that breathes well, is well irrigated blood, for an organism that has a normal excretion - the system is good sewered pipes, - the invasion of poisonous ptomaines does not represent no danger. Such an organism is in a state of desensitization, complete neutralization. An army of living cells is capable of multiply and sustain life in all its manifestations and innumerable variations. From this point of view, biology is approaching modern biology Nuclear Physics: Condensation of Colossal Energy in a Very Small Mass matter is inherent in both.

In every living plant and animal organism there is a comparatively limited volume of enormous surfaces. Atom is condensed energy. The release of nuclear energy can to make an explosion, destruction. Compressed space, huge surfaces enclosed in our body contain in every tiny point a significant amount of energy. But the extension of surfaces huge. Maximum space with minimum energy at each point - This is a characteristic of life evolution. When there is a maximum of energy in infinitesimal space - there is a danger of destruction here. The accumulation of material power in a small space contains a threat explosion. The distribution of material power among the masses gives peace, gives life.

In the embryonic period from the moment of the appearance of the circulatory organs (heart and blood vessels), microbes brought in by the blood begin to penetrate mother, and despite this, intrauterine diseases of the fetus extremely rare. Symbiosis of an animal organism with microbes, without doubts are as necessary for prolonging life as the symbiosis of microbes and fungi for plant life. Such animals, like cats and dogs, do not subjected to dozens of preventive (precautionary, prophylactic vaccinations, do not know influenza and only very rarely in the young get pneumonia.

The view that a group of antigens attacks the "sterile" organism, and the latter in response puts up an army of antibodies against the enemy, becomes erroneous if we admit that the so-called sterile Life exists only in far-fetched abstract theories.

The eternal death of cells is as necessary for the animal organism as the fall of flowers and leaves - trees. Remaining after dying off cells, as well as liquid tissues (blood and lymph with their moving cells - erythrocytes, leukocytes, lymphocytes) and the infinite the number of enzymes is decomposed, purified, and continuously neutralized ptomaines, generated by protein fragments of the breakdown of dead cells. Without aggressive embryos, this vigilance can be put to sleep.

Vitality

Vital energy with a predetermined orientation of molecules, with the formation of molecular chains, with the dynamism of cell and species reproduction, ability to self-restore, with the possibility of rational planning, with its wonderful ability to transform the movement of cell contents into cellular "psychism" and the flow of nerve impulses into the brain, i.e. into thought, creation, art, science, will, desire, Diverse and multicolored active psychism is this vital energy must be outside the energy forms hidden in inanimate matter. It is impossible to order, it is impossible to counteract the energy of life.

If you want to change the flow of vital energy to some extent, be it in agronomy, horticulture, biology or medicine, it is necessary to approach the with infinite respect, with the delicacy of a watchmaker, irrefutable logic, sharpened vigilance of the hand, eye and ear, with constant self-control of each place, each observation. Neither biologists, Neither doctors have the possibility of increasing vital energy, although by one erg. They can only remove obstacles like gardeners, threatening the blossoming of vital energy.

Restoring the freedom of oxygen flow by clearing blocked flows fluids, a climate is created in the body in which the released Vital energy will turn into thought, into creation.

Energy balance

Instead, in order to raise the energy balance in the diseased body, modern The clinic tries to maintain a hot war against various aggressions, completely neglecting the importance of the energy balance of the body. The standard of living of the human body is proportional to the amount of energy.

If the body overcomes all attacks on it, then the health of a person Quite assured. If the energy balance is below average, The body will not be able to resist painful aggressions and hopelessly will get sick. Ignorance of this simple but primary physiological The truth that the old clinic foresaw has been deprived of the modern one medicine of the guiding idea common to all pathology.

Countless antibiotics against various types of microbes and viruses, ultrasound, intravenous injections that dangerously alter the composition of the blood, pneumo- and thoracoplasty, amputation of parts of the lung - are considered as great achievements of therapy.

A blind, inhuman chemical-physical technology has been created without any respect for the integrity and inviolability of the poor organism.

Is medicine, immersed in insane optimism, finally ready to follow the path of such schizophrenic destruction? Crippling medicine should give way to medicine trying to increase the energy balance.

Age is a mirror Diseases

In France, in Present (60s) 6,500,000 inhabitants over 60 years old. Statistics indicates that in France in 1945 one person over the age of 60 years accounted for 3.4 inhabitants, respectively in the United States in 1940 - one per 5.3, in Belgium it is one in 3.9.

In an extremely impoverished world after the two world wars of our century The interests of States, the interests of nations, insist that the elderly people could make a living instead of being unproductive burden on society. States are faced with the problem of increasing the working capacity of the elderly, the problem of postponement retirement age. Why Millions and Millions of Older People Should vegetate on his meager allowances, as the only source existence, or to live on the so-called savings, practically no existing?

In France in 1948 there were 138,000 hospital beds, of which 75,000 were intended for the elderly. How ridiculous this figure is, when Think about 6.5 million inhabitants over 60 years old. Every effort, every proposal to maintain and increase the activity of these economic pariah should be closely studied by governments, sociologists, economists and, first of all, doctors. An elderly person should not as a soldier, official, worker, taxpayer, as a nameless number, a statistical unit, but as a creature with a sick body and soul without illusions.

You have to die at the age of 90. It is necessary to preserve the social value, human dignity to the last breath. We must give it to the old man the opportunity to earn; For the state and for taxpayers, this is the healthiest economy; For an old man, this is the only possible life, for which life is worth living.

Let us now consider this problem from the point of view of a physiologist and a doctor. Let's balance the creative forces of our poor human machine and We will try to find the most effective and least expensive solutions. In First of all, old age means increasing fatigue. Calcium in combinations with phosphates and carbon dioxide salts moves from the bones, from the organs where it is useful, to the organs where it is harmful, as a consequence of which are senile osteomalacia, senile osteoporosis, hyperostosis, deforming rheumatism, bone fragility, senile fractures, which do not grow together.

Released and vagus calcium is deposited in tendons, ligaments and other bodies. The formation of periarticular nodes is often observed, leading to compaction of the spine. The skin becomes dry and loses its elasticity. All surgeons know slow scarring postoperative wounds in the elderly, the inability to make them transplants.

According to Carrel, the speed of wound scarring is proportional to the degree of cell reproduction. Healing is faster in children than in teenagers, faster in a young person than in an old man. Degree reproduction of cells and is the true measure of the degree of aging.

So, in the second place, we can say that histophysiological The substrate of old age is cellular senescence. Is it possible to influence the such cellular decrepitude, can it be stopped, can it be achieved cellular rejuvenation? Modern physiology and clinic refer to skeptical and reserved about these issues, especially after trying to rejuvenation undertaken by Brown-S?uard, Steinach, Voronov, Pilgrim. This skepticism is well founded, Especially when you think about the role of capillaries, which carry nutrients in their arterial loops, substances to each cell (oxygen, amino acids, glucose, electrolytes, vitamins), and about metabolites, products of cell metabolism, which are removed from the body by the venous loops of the capillaries.

If the capillaries around the parenchymal cells are blocked, then no nutrient influx; Accumulation of metabolites interferes with work cells and reduces or even stops the exchange between micelles. Here histophysiological substrate of cellular aging.

Why does this phenomenon occur? They talk about the self-combustion of cells, they talk about fat, mucous, pigment degeneration and replacement connective tissue. Fat degeneration is localized mainly by in organs and areas of the body that are poorly irrigated by blood, nourished,

and spreads in the case of anoxemia.

When the cell has fulfilled its role as a producer of digestible micelloids, it dies, giving way to a younger cell. All metabolites of these colloidal micelles enter the bloodstream and are excreted through liver, kidneys, skin, if there are too many of them, they are thrown into the extracellular fluids. It can be assumed that in 5-7 years all the cells of the human body are renewed at a rate of 5 to 7 billion cells per day (an exception should be made for nerve cells in which only Part of their cytoplasm is able to be restored, and completely renewed nerve cells cannot for the entire period of their existence). Thus, Thus, the huge role of? the intact excretory organs: liver, kidneys, skin, intestines.

The key to the so-called senile cell sclerosis, as well as and the key to all cellular degeneration in general pathology is lack of capillary irrigation in the body. Even partially restoring capillary circulation, thereby automatically restore "blood supply to all tissues as a whole. Half Dead cells resume normal metabolism. They are released from poisonous metabolic products, from metabolites that clutter and suppressing cellular micelles; metabolite-free cells after become able to take nutrients again. The action of cellular enzymes resumes, the life of cells again is being reborn. Cellular enzymes are born, live, act, and die in a very short period of time. For example, the conversion of glucose into Carbon dioxide and water require at least half a dozen aerobic and anaerobic reactions, but their entire chain occurs in the striated rejuvenation

of the body begins with the skin, which becomes smooth, elastic and better supplied with blood. Skin temperature rises, joint movements become more flexible, breathing - more intensive, peripheral blood circulation is revived. Magnification blood supply to the coronary arteries improves myocardial nutrition. Heart activity normalizes, the rhythm is restored. Brain Thanks to the improved blood supply, it is again more receptive, associations become faster and more definite, intellectual and emotional life is being revived. Senile numbness, indifference are replaced by an awakened interest in life.

Each breath injects into the body, especially in residents of large cities, several billion microbs. To destroy them from the body Extra effort is required. An old man with a superficial, poor breathing, with progressive fatigue of the respiratory muscles, is not able to to destroy the countless microbes that got into it. Senile bronchitis, foci of pneumonia spread, emphysema appears.

Dilation of pulmonary capillaries, bronchiole lumen, and alveoli restores gas exchange, strengthens the muscles of the chest and bronchi, breathing becomes deeper and more intense, the former pale or A bluish face becomes fresh, acquires a pink hue.

In the elderly, infectious diseases often end fatally, since develop imperceptibly in a worn-out body; cellular and humoral activity that could defeat microbial aggression is strongly lowered. By awakening the cellular reaction through capillary therapy, For example, in the treatment of advanced renal failure, create old people conditions that allow them to tolerate infectious diseases well diseases and significantly reduce the slow the period of convalescence.

Speaking of arteriosclerosis, they forget the role of vases-vasorums, which feed the walls arteries and arterioles. The use of capillary therapy opens these vaza-vasorum and tem in most cases avoid violations blood circulation in elderly patients.

An elderly person should always remain under medical supervision. Left without sufficient attention, a slight ailment can lead to to death.

An old man must rest before he gets tired, not only after he will get tired. "It's rare to find 75-year-olds who can work actively," argues Charles Richet in his excellent book "The Ability to Remain young" (Richet, 1959, p. 164). Not at all rarely, if you use methodologically, capillary therapy and a small reasonable gerontotherapy.

Along with cellular aging, there is humoral aging, caused by renal failure. We are talking about the accumulation of metabolites in extracellular fluids, lymph and blood plasma. To eliminate this humoral aging, it is necessary to free extracellular fluids from excess metabolites. It is possible to cleanse these liquids with a food regimen, enemas from the soda and small doses of diuretics (we never use mercury drugs).

When they talk about old age as a disease, they think first of all about the arteriosclerosis, coronary artery injuries, heart valves, a decrease in the elasticity of the arteries, and the relative atrophy of their muscular layers, about a consistent decrease in arterial contractility, etc., while forgetting about the role of vaza-vasorum. Also not take into account the fact that organs and large vessels contain only 10% of the circulating blood.

Arteriosclerosis, even in the intraparenchymal branches of the arteries, If it affects tissue nutrition, it is very weak, without causing senile changes in the morphology of organs. But it is quite logical in its entirety Join Bastai and Dogliotti (1938) regarding the role of feeding vessels, i.e. blood and lymphatic capillaries.

The capillary system proper in conjunction with the paracapillary system (pre- and post-capillary), in a word, the capillary network is so much superior The length of the arterio-venos-nu networkthat pathologists should have pay more attention to the explanation of disease processes capillary network. Anatomical studies usually do not go further arterioles. Changes in the walls of the capillaries should become the basis pathological physiology of the future. Rondelli's research, Vassi, Salvioli have shown that in extreme old age the capillaries thin, wriggle, weaken. Blood flow accordingly slows down. The most constant and important phenomenon observed in the is an almost general decrease in the diameter of the capillaries. Capillaroscopy shows that capillary loops in old people are expanded, then strongly compressed. Their blood circulation is less affected by heat and massage than in the young; In the elderly, the blood flow of the nail bed much slower than in young children; Red blood cells move with difficulty, stops and even reverse movement are often observed.

There is sufficient evidence to suggest that the elderly independently of all obvious arteriosclerotic processes, a change in the structure of the capillary walls, which occurs simultaneously with aging.

Senile capillaropathy can cause ectasia or stenosis or lead to to blockage of the lumen of the capillaries. The latter should be considered as The main factor in biochemical and metabolic disorders blood circulation in the capillary area. The velocity of blood circulation is It is an important element in the regulation of exchange between blood and tissues. In the elderly the blood flow rate is reduced by a third (Winternitz).

After the wonderful works of Lewis, Hocker, Klungm?l (Klungmuhl) there is no longer any doubt about the ability of capillaries actively reduced. Capillaroscopic observations of Bastai and Doliotti, Moreau and Bartolini and Observations of Education histamine "vesicles" indicate that changes in the diameter of the capillaries in older people are more limited and advance more slowly. Relative Atonia capillaries in the elderly, their partial blockage cause an increase in resistance in peripheral circulation.

Atrophy of numerous nephrons in the kidneys, especially in nephritis, should considered not as a specifically renal disease, but as a spread of general capillaropathy. Glomeruli are a composite part of the circulatory system: they filter the blood and regulate the composition extracellular fluids.

Reduced capillary contractility, slowing down blood flow, the number of open capillaries, an increase in resistance in peripheral circulation cause essential hypertension. The increase in pressure is caused either by increased activity of the adrenal glands (which is rare), or (in most cases) significant general a decrease in the capillary network.

When capillaropathy affects the renal glomeruli, it leads to renal high blood pressure. We are not talking here about renins, vasopressins, etc., but about general capillaritis, about a massive decrease in capillary current for tens of thousands of kilometers due to temporary closure of vessels or their final blockage.

From the point of view of hemodynamics, a change in circulation in the capillaries should is considered as the main factor of age-related disorders in the blood circulation. Insufficiency of countless peripheral hearts is of paramount importance for the development of various pathological statesOther factors - myocardial insufficiency, reduced At rest, metabolism are secondary.

A decrease in the capillary blood supply to the brain causes disorders blood circulation and nutrition of nerve centers (subtubercle, sleep, speech, higher brain centers).

Chapter 2
Physiology
Does human physiology exist?

Until now, we We do not have a real work on human physiology. There is only animal physiology, based on countless experiments in the laboratory animals. But their composition of extra- and intracellular fluids is completely it is different from the humoral composition of the human body. For example, in The juices of the dog's body contain much less potassium and much more sodium chloride than in humans. The percentage of histamine in a dog is different from such in man. Rabbits, guinea pigs are herbivorous animals, Man is carnivorous and omnivorous. Frogs and mice in terms of species, the more, far from man. Most experiments on laboratory animals was carried out in an atmosphere of coercion. Animals in experiments are connected, they were physically and morally wounded. They are kept poorly ventilated cells, their functions are abnormal.

We do not deny the great importance of animal physiology, but we think that the living conditions of laboratory animals must be taken into account, in order to have the right to draw conclusions that are not too hasty. For There are cases when painful physiological experiments on animals lead to "tortured" conclusions. Below we will try to outline some of the reflections on truly human physiology.

On the basis of a comparison of some data of classical physiology, we Let us present several of the most important functions of human organism.

Capillaries

Between blood and extracellular fluid is the endothelial barrier - this is the capillaries. Their diameter is different. There are very wide capillaries (20-30 μm) and narrower (5-6 μm). Capillaries are formed endothelial cells, some of them are poorly differentiated, more are capable of phagocytosis. These young cells are able to detain and digest aging red blood cells, pigments (in malaria), cholesterol components.

Blood capillaries are constantly changing. In certain places, they They can reproduce or undergo reverse development. When they filled with blood, endothelial cells retain a flattened shape. With In the event of a delay in the flow of blood in the capillary, endothelial cells again form outgrowths (buds). At the same time, their original numerous potency, and from these cells develop various variants of mesenchymal tissues due to the cessation of their normal functions. Capillary diameter changes by 2 and 3 times. At maximum tone, the capillaries are so they narrow, so that they do not allow blood cells to pass through; can leak Plasma only. And vice versa, with a sharp relaxation of the tone of the walls capillary, a lot of blood accumulates in their dilated lumen. In the case of shock, this phenomenon is of great importance, since the real bloodletting into the vascular network of the abdominal cavity as a consequence of stagnation in the super-expanded network of capillaries.

The motor function of the capillaries plays a role in every painful process: in inflammation, in traumatic, toxic, infectious shock and trophic disorders. In the regulation of blood Pressure also plays a very important role in changes in the lumen of the capillaries: When all the capillaries are dilated, there is a strong drop in arterial pressure.

Capillary permeability. The endothelium is a living filtering membrane, by no means inert, with varying permeability, governs exchange between blood and extracellular fluids. In normal condition The membrane allows small molecules (water, crystalloids, amino acids, urea), but retains protein molecules. In pathological conditions capillary membrane permeability increases, and then the protein molecules in the blood plasma can seep through the endothelium. Degree of permeability of the capillary wall plays an important role in normal and pathological physiology (in secretion and resorption phenomena and in the pathogenesis of edema and inflammation).

The passage of fluids through the walls of the capillaries is controlled by the following factors.

1) The total length of the filter surface. It happens sometimes huge. Krogh believes that the common surface of the adult capillaries of a person is equal to 6300 m, i.e. a ribbon with a width of 1 m and a length of more than 6 km. This is an important factor for the processes of exchange, it changes due to the changes in the diameter of the capillaries (gout, diabetes, chronic rheumatism, arteritis).

2) Permeability of the walls themselves. The endothelial membrane is much more permeable than other membranes in the body. In frogs, endothelial membranes are 300 times more permeable than the walls of other cells, and 100 times more than the walls of red blood cells.

3) Pressure on both sides of the membrane. Pressure from the outside and from the inside is carried out in two opposite directions, blood pressure promotes filtration to the outside. In a normal state, it reaches person 40 mm of water. st. in the arterial loops, 22 cm - in the venous loops. How to showed by Starling, filtration pressure is opposed by oncotic pressure of plasma colloids, tending to retain water in the vessels. This pressure in humans corresponds to 36 mm of water. Being subject to numerous influences, blood pressure is very variable, which causes alternating filtration and absorption of water, and also of all metabolic processes that characterize the life of tissues.

Innumerable normal and pathological processes are conditioned by these factors. In this part of the circulatory mechanism, there are continuous oscillations that establish the average equilibrium are one of those equilibriums, of which Claude Bernard said that "they stem from constant and precise alignment, produced as if by on the most sensitive scales."

Between filtration and absorption at the capillary level, there is a endless movement of liquids back and forth on a limited space; Liquids are constantly striving for equilibrium.

Capillaries have some resistance adapted to blood pressure in the area. The fragility of capillaries increases with vitamin C (scurvy) and under the influence of histamine, therefore it is necessary to extreme caution in the treatment of peptic ulcer disease. Cupping (blood-sucking) increase the resistance of capillaries. The strength of capillaries depends on Apparently, especially from the fibers surrounding them.

Classical hemodynamics considers the heart as the central engine, which drives blood into the arteries, transporting nutrients substances into areas where there is a continuous exchange between blood and tissues, where, according to the classical concept, the capillaries remain inert, passive, as well as the entire venous circulatory system.

Chauvois (1957), a former collaborator of d'Arsonval, in pamphlet "A Place for Veins" states that the primary and dominant The role belongs to the venous sector of blood circulation. "The heart does not do Nothing else, he said, as soon as it provides a push blood forward, and it is not this that returns the blood to such primary elements such as proteins, carbohydrates, lipids, etc."

In fact, after the important work of August Krogh, it must be admitted that The initial and dominant role belongs to the capillaries, which are pulsating contractile organs. Weiss and Wang (Weiss, Wang, 1936) established this peristalsis (systoles) of the capillaries by means of capillaroscopy. Magnus observed the same phenomenon on a piece intestines, on tissue culture according to the Carrel method.

Hagen stated changes in the diameter of the capillaries in various periods of the day, month, year. In the morning, the capillaries are more narrowed than in the evening, The total metabolism is reduced. This explains the decrease in internal temperature in the morning and its increase in the evening. In women in the premenstrual period the number of open capillaries increases, hence a more active exchange substances and fever. Between September and January there are spasms of capillaries, numerous congestions.

This is the cause of seasonal diseases, including peptic ulcer disease in September, as well as in March.
Nico observed by capillaroscopy at the Medical Clinic T?ingen the effect of X-rays on the body. In cutaneous erythema caused by X-ray beamNico traced the exudation of serum through capillary walls; after discontinuation of X-ray therapy, massive reduction of skin capillaries. Ailments experienced after a series of X-ray therapy sessions, the appearance of radio-radiation dermatitis were, Thus, as early as 1920, David confirmed Nico's observations. But no one for 32 years thought to do it Capillaroscopy before X-ray therapy in patients suffering from hyperthyroidism, renal failure, i.e. syndromes that are always accompanied by capillary weakness.

During treatment with digitalis (after appropriate preparation patient) and small doses of theobromine derivatives (not exceeding 0.5 g in day in

two doses) there is a disappearance of atonic expansion venous capillary loops and post-capillary small veins, disappearance of blood stagnation, decrease in capillary pressure (Weiss, Wang, 1936, and many others).

Capillary diseases: capillaritis (Fahr) or capillaropathy (Zalmanov) constitute the most important chapter in pathology. We have the right to assert that this is the basis of every disease process; without physiopathology capillaries, medicine remains on the surface of phenomena and is not able to understand nothing in either general or particular pathology.

Classical neurology with its almost mathematical accuracy of diagnosis is therapeutically powerless because it neglects blood circulation of the spinal cord, peripheral nerves and thus deprives many means in therapy.

The degree of lesions caused by local capillaropathy depends locally from the anatomical area. This was well proved by M?ler (1922) at the Example of Salvarsan. The reaction does not lead to serious complications if its It is used on the genitals. When Salvarsan is exposed to the initial aortic segment distension of the vasa-vasorum and coronary vessels can lead to to sudden death. Finally, in the central nervous system, it can entail a very serious disease.
Periodic congestion or spasms of the capillaries of the fingers are at the root of the symptoms of "dead fingers", acrocyanosis, Raynaud's disease. Stagnation or periodic spasms in the organs of the labyrinth of the inner ear cause dizziness in Meniere's syndrome.

In patients affected by the so-called angioneurosis, capillaroscope Instead of a normal picture, a real vascular storm is established in capillaries, precapillaries and postcapillaries.

Some capillaries are highly atonic, dilated to a maximum in a state of stasis, and in nearby areas the blood flow is much more accelerates; Atony and spasms can spread to the arteries and veins. At the same time, there is a decrease or excessive increase in permeability of capillary membranes and a tendency to edema according to the method Gansslen from T?ingen, which consists in measuring a segment the time required for the formation of a pustule when several square millimeters of Spanish fly plaster. Asthenics of high growth most often have dilated convoluted capillaries, while picnics have capillaries are easier to destroy.

Varicose veins often start in the venous loops capillaries. In women complaining of vague disseminated pains (back of the head, shoulders, sacro-lumbar region), in which neither joint changes, nor bone deformities, no signs of neuritis, often you can feel the thickening in the muscles; Then you need to think about intramuscular nettle fever, according to Quincke's assumption (Quincke). These countless microscopic hematomas around the muscular fibers better explain muscle pain than the formation hypothesis gelatin-like substance.
Hinselmann and Nettekorn observed eclampsia disseminated capillary stasis in the skin, in the intestinal loops and in the uterus. This stasis is noted in convulsions and increased arterial pressure.

The old hypothesis of angiospastic anemia of the brain as a cause of eclampsia thus finds objective confirmation in capillaroscopy. Parrisius noted significant changes in the skin capillaries in almost all cases of glaucoma and Meniere's syndrome.

In infectious diseases, vasomotor paresis affects not only the arteries and arterioles, but also the entire capillary network. Hornstetter described congestion in the capillaries in typhoid fever, J?gensen - in influenza. After a period of excitement, when the blood flow is still satisfactory, the stage of capillary paralysis begins. All capillaries equally dilated, filled with bluish-purple blood mass. By continuing observation for a few minutes, you can make sure that There is no trace of blood movement. The same phenomena occur in typhus, scarlet fever, septicemia. Huber observed capillary paralysis in diphtheria. Von Geibner (1931) was able to experimentally induce the same paralysis of capillaries by means of gold salts.

When we observe how a hypertrophied heart gives up, having worked satisfactorily for a fairly long time, we can explain the weakness of the insufficiently irrigated myocardium by an increase in gaps between capillaries. The myocardial fibers have become longer and thinner, while new capillary formation, an increase in the number of open capillaries were not accompanied by an increase in the number and size of myofibrils; hence myocardial anoxemia with its consequences: myomalacia, proliferation of connective tissue, fatty degeneration.

It is known that lack of oxygen causes characteristic muscle pain. We now know that the flow of oxygen to the heart depends on irrigation vasa-vasorum of the coronary arteries and from the percentage of oxygen content in the blood. When the heart is overstrained, when the atmosphere is poor in oxygen, electrocardiogram of even a healthy person shows a decrease in the tooth ST and the deformation of the T wave is exactly the same as in the case of the pectoral toad.

Lack of oxygen always causes pain due to malnutrition myofibrils; The longer the lack of oxygen, the greater the appears in the myocardium of micronecrosis. The fusion of these micronecroses can end with a picture of myocardial infarction even without blockage of one of the branches of the coronary artery. Angina attacks at rest much more dangerous than an attack at a time of tension. Seizures during rest indicate, in fact, a long-term blockage of the vasa-vasorum coronary arteries.

Nico found changes in the capillaries and increased capillary pressure 6 weeks after scarlet fever, when the rash has already disappeared. Kilin established that the increased capillary pressure persists for quite a long time long after the temperature drops. For patients in this category, it is necessary strictly Observe: They are easily exposed to the danger of glomerulonephritis. Ophthalmologists are well aware of changes in the arterioles and capillaries of the retina during the the time of renal hematogenous diseases. Schleyer states, that acute hematogenous nephritis is always preceded by general capillary-ritis, toxicosis of capillaries of infectious origin. Do not There is not a single disease with morphological

changes, There is not a single functional disorder in which The condition of the capillaries did not play a primary role. But, of course, Never forget about the relationship between the blood flow in the capillaries and other functions of the body.

We need to think about the interaction of all organs. Respiration, nutrition, excretion each patient should be carefully studied, but there is no need to get confused in small details. It is necessary to establish a hierarchy for each patient diagnostic indicators. The clinic should use laboratory and X-ray data, but the last word belongs to the clinic. The laboratory and the X-ray are the experts, and the clinic is the judge.

Capillary blood circulation. Rivers originate from many streams, whose water is always in motion: rising, overflowing its banks, washes underground irregularities, gives birth to streams, which multiply they merge into small channels that feed large pekns. Movement intermediate water - the source of blood circulation - is a striking analogy with the sources of rivers. Arterial loop of capillaries squeezes plasma water through its walls. Venous loop absorbs water intermediate space washed by extracellular fluids, which affects droplets of extracellular fluid and causes changes in it pressure. This is the real beginning of the circulation of organic fluids and, ultimately, blood.

Higher unicellular organisms, possessing pulsating vacuoles, represent is the first stage of intracellular fluid circulation. Extracellular The fluid for unicellular organisms is the sea or river where they live.

The T?ingen school has a great merit in the use of clinic of capillaroscopy data, she opened for a physiologist and a doctor the great chapter of capillaropathy. Unfortunately for the clinic, these works are not Neither physiologists nor doctors used it. Only in France Baruk and Racine became interested in the wonderful life of capillaries. They revealed significant capillaroscopic changes in all pathologically altered tissues, a violation of the capillary circulation in various tissues in those suffering from a loss of strength.

In his writings on mental illness, Luys emphasized that melancholic, cerebral blood circulation is reduced, while in manic excitement, the flow of blood to the brain is increased with simultaneous vasodilation. Results achieved with regard to treatment melancholy by electroshock methods, are obtained, according to Baruk, from instantaneous increase in blood circulation in the brain. This enhancement is achieved by at the cost of too crude and dangerous an effect on the circulation of the blood and on the the brain tissue itself.

Baruk, Racine, David, and Lerouz have experimentally shown that the use of folliculin causes significant dilation of cerebral vessels and a rush of blood to it. An attack of catatonia is accompanied by an unusual pallor of the face as a result of vasoconstriction. Baruk & Claude described orthostatic acrocyanosis of the lower extremities in catatonia, which can sometimes simulate obliterating arteritis. With catatonias are observed psychovascular, psychodigestive, psychorespiratory and other psychovisceral synergies. Using an example catatonia, it can be understood that there is no single and stereotypical treatment even for the same disease.

Venous system and Blood movement

Each impaired blood circulation causes a decrease in its volume, intended for tissues, and reduces the supply of oxygen. Coming hypoxemia. Each decrease in the volume of oxygen in the arterial blood causes circulatory disorders. And this fact is not sufficiently appreciated cardiology.
Any decrease in the volume of respiratory function (pneumonopathy, pulmonary compression swollen lymph nodes, whooping cough, Hodgkin's disease, pulmonary tumors, retrosternal goiters, artificial pneumothorax, pleurisy), reducing the volume of alveolar air in the flattened alveoli and The number of erythrocytes in narrowed capillaries causes not only tissue hypoxemia in all organs, but also deprives the myocardium and muscle hypoxemia system of arteries necessary for their normal activity oxygen.

At the same time, there is an accumulation of carbon dioxide in the circulating blood and other non-oxidized or insufficiently oxidized metabolites. Hence - constant intoxication of the myocardium and the muscular system of the arteries. Miscellaneous Disruption in the work of the respiratory center during intoxications and infections causes a decrease in oxygen saturation of the circulating blood. Miscellaneous changes in the acid-base balance in the blood (hyperglycemia, hypoglycemia, azotemia, hyperchloremia, hypochloremia, acetonemia) affect to absorb oxygen and cause hypoxemia.

Each venous congestion (arrest of venous circulation) in the pulmonary (mitral stenosis, cyanotic disease), and decreased mobility of the diaphragm as a result of an increase in volume liver and spleen (pneumothorax, frenectomy) cause tissue hypoxia. Potassium cyanide leads to instantaneous tissue hypoxia and death.

Tissue and cellular hypoxia can occur despite complete serviceability of the cardiovascular system. When you deal with a sick person, suffering from cardiovascular disorders, should never limit yourself to the heart, electrocardiograms, it is necessary to carefully investigate other sources of hypoxia: lungs, blood, motility diaphragm, measure the volume of the liver and spleen in order to approximate the to determine the volume of circulating blood.

Venous congestion in varicose veins, in the area of the portal vein, in the depot blood - spleen and liver, sensibly reduces the volume of blood, brought to the heart by the vena cava in each diastole. Since the volume of of blood circulating in the arteries is always equal to the volume of blood circulating in the veins, then after any decrease in the flow of venous blood there will be a decrease in the volume of blood pushed out by each contraction heart.

The law of equilibrium between the volume of arterial blood and the volume of venous blood blood is the main basis of all hemodynamics. If in For only one hour, the flow of venous blood would decrease only by one gram for each diastole, then there would be a shortage of 70-80 g per minute, i.e. from 4 to 5 liters per hour (80 x 60 = 4800), the heart would be empty. Cardiac The contractions would stop. Formula "primum modens, ultimum mofiens" should not be applied to the heart, but to venous blood, continuous flow which is the true river of life. The main engine is the flow venous blood, the miraculous mechanism of the heart is of secondary importance factor.

And therefore, it is not without reason that we have been demanding the cessation of abuse of intravenous injections, wounding, maiming and deforming the walls of the veins and impairing the composition of thein venous blood, the main engine of life.

The volume of cardiac blood supply could be compensated by an increase in the cardiac systoles, but then tachycardia would be accompanied by a decrease in the amount of blood in the pulmonary alveoli and a decrease in the time contact of hemoglobin with parenchymal cells. There would be a fabric and cellular hypoxia. From this follows another important conclusion. Inflow venous blood to the heart cavity causes a sharp stretching, rapid dilation of the heart cavities and should be considered as additional A factor that is quite important among others.

Any stretching of elastic, contractile tissue accompanied by compression: systole. The energy required to to cause myocardial contraction, occurs, on the one hand, from the rhythmic and a continuous flow of venous blood through the superior and inferior vena cava and arterial blood through the pulmonary vein, and on the other - from a sharp myocardial sprains. The heart is only an engine that receives energy from a single fluid that is poured in and must be pushed out. The heart is an engine wound up for 70 or 80 years.

Insufficient attention was paid to the importance of venous blood flow to the cavity heart. From now on, consider every venous congestion as an important factor weakening of the heart and hypoxia.
The volume of circulating blood is the dominant factor of a well-balanced blood circulation. Decrease in circulating blood volume, accumulation of blood in the depot (in the liver, spleen, portal vein network) is accompanied by a decrease in the volume of blood that arrives at the heart and which is thrown out by every systole.

A sharp decrease in blood volume causes acute cardiac insufficiency, cardiovascular collapse - sharply manifested syndrome characterized by extreme loss of strength with cyanosis and fall body temperature, with a fast and weak pulse, with a sharp drop in blood pressure. Collapses are known after severe bleeding, during acute infections, after major surgical interventions, in severely burned, with acute peritonitis with perforation, in the latter period of severe diabetes, after severe vomiting and choleroid diarrhea Collapses are also seen in Addison's disease and severe uremia. Collapse is caused by very little blood flow to the heart cavity. Volume fluid becomes insufficient to cause myocardial stretching, accompanied by a contraction of the heart. I.P. Pavlov (1894) at the same time He noted a large accumulation of blood in the plexus of the portal vein.

Retention of toxic metabolites in blood and extracellular fluids can lead to stretching of small veins and capillaries, accompanied by general venous stasis. The toxicity of metabolites can in further modify the permeability of the capillary membrane. When the walls capillaries expand, part of the plasma leaves the capillaries, the volume of circulating blood decreases, blood flow slows down and the heart receives a reduced amount of blood. These processes can localized in any area of the body, but can also get a wide Distribution. In the latter case, we have a general stagnation of blood in the of the abdominal cavity, this is a very dangerous collapse. For a decrease in volume blood, of course, always follows serious tissue and cellular hypoxia. How many severe cases of the so-called cardiac decompensations attributed to myocarditis and myocardial dystrophy, how many cases attributed to arrhythmic hyposystoles are caused by insufficient venous blood flow to the heart cavity.
Modern neurophysiology has fully accepted Pavlov's teaching, that the inhibition mechanisms in the brain are not the result of exhaustion, i.e. passive processes. Inhibition of the brain, rather, The phenomenon is active, dynamic.

When you open or close a window, some flow is necessary energy. In the same way, when you light a candle or extinguish it, you make an effort, you consume energy. It seems to me that we must assume that periodic The expansion of the heart during diastole is just as active process, as well as periodic inhibition of the brain. It is necessary to recognize the importance of venous blood for hemodynamics.

Continuing to compare the nervous and venous systems and taking into account venous valve system, which has been remarkably analysed and explained by Dr. Delater (1932), we will allow ourselves to to expand and supplement his views on the role of venous valves. We could consider each venous segment between the two valves like a small venous contracted heart, pushing with venous blood into the right ventricle with remarkable dynamism.

Prof. Dubreuil, already in 1931, at the general meeting of the Paris anatomical society, on the basis of numerous histological details, the probability of propulsive function of the veins. H?#351;ar (Huchard, 1913) foresaw the existence of innumerable peripheral hearts. But it was mostly Delaterre's idea. It is thanks to him his keen imagination, remaining an ever-thinking anatomist who knows how to compare, enriched our knowledge and highlighted the primary factor which before him remained unclear in the field of hemodynamics.

Cardiology did not deign to pay attention to Delaterre's great discovery. She preferred to mark time in the jungle of electrocardiograms. Delataire (Delater, 1932), stating the venous function of the dynamic pushing blood, was surprised that the mechanism of this pushing was not can be captured with the help of our devices. He had no occasion Meet Krogh! For Delater, the capillary network was a dam. For Krogh's followers, the capillary network is a huge source of propulsive energy.

The veins receive blood from the venules, and the latter from the venous loops capillaries. Capillary systoles, as it was shown by the school of prof. M?ler in T?ingen, are a source of blood circulation, like like streams supply water to large rivers.

Imagine the contractions and dilations of the capillaries over the course of a hundred thousand kilometers, the power of their continuous activity, the water exchange between capillaries and extracellular fluids, continuous change in volume capillaries - and you will find an unfolded hemodynamics, the flow of life, which begins in the contracting membranes of capillaries, spreads into the venules and veins with their valves and reaches the right ventricle.

Phlebology, i.e. the science of veins, is recognized as the most important field cardiology, and the latter is destined to leave the narrowly technical framework in order to get used to such phenomena as anoxemia, renal insufficiency and the pathophysiological role of the skin.

Closed and free circulation. Internal circulation of liquids in organs is free circulation. Its volume without special is about 9-11 liters. filling blood and lymphatic vessels, is 7 liters: 5 liters blood and 2 liters of lymph.
To ensure the secretory functions of the mucous membranes of the mouth, tongue, esophagus, glands of the digestive tract to provide irrigation cells and tissues throughout the body, it is necessary that the blood and lymph (closed circulation) obtained a continuous influx of extracellular fluids through the walls of venous capillary loops.

Without this influx, blood and lymph would lose their normal composition, his homeostasis (Cannon). This inflow must be regulated every minute from precision beyond the imagination of the most famous biochemists. Never forget about the continuous circulation between blood and lymph, on the one hand, and extracellular fluids on the other. This is the same it also applies to the exchange between intra- and extracellular fluids.

To help the body restore the flow between closed and free circulation, there is no therapy other than hydrotherapy with its immense possibilities. Therapy without hydrotherapy is dried therapy, hiding its powerlessness under a whole mountain of poisonous or useless medicines. Of course, hydrotherapy should be accompanied by a regime that helps to correct violations of the closed and free circulation.

Aperture is the second Heart

History The pathophysiology of the diaphragm is both funny and extremely sad. The clinic is well aware, of course, of diaphragmal pleurisy, paralysis diaphragms, abscesses under the thoracoabdominal barrier. Not particularly large meaning muscles that play a role in breathing! That's how about her, By the way, they say. Pathologists have described hypotrophy in pulmonary emphysema of the diaphragm muscles, ending in atrophy and fatty degeneration of the muscle. Diaphragm atrophy also occurs after phrenicectomy. Known changes in the diaphragm after empyema, peritonitis, purulent pericarditis.

In trichinosis, the diaphragm, muscles of the tongue, pectoral and intercostal muscles. In scurvy, especially in adults, significant bleeding can occur in the muscles of the diaphragm; Abdominal Typhoid can be complicated by foci of necrosis in the same muscle. It is also known diaphragm paralysis during the development of polio: it is an ascending Landry's palsy, which soon causes asphyxia. But the pathophysiological role diaphragm in the development of chronic diseases is completely ignored medical literature.

Let's take a closer look at the diaphragm and try to summarize it activity, taking into account its impact on various functions of the body. In In a healthy body, the diaphragm makes 18 oscillations in one minute. She moves 2 cm up and 2 cm down. Average range of motion 18 oscillations per minute, which means 1000 per hour and 24,000 per day! Now think about the work done by this muscle, the most powerful in our body, and about the impressive area that descends like a perfect pressure pump, compressing the liver, the spleen, intestine, revitalizing all portal and abdominal circulation.

By compressing all the blood and lymphatic vessels of the abdomen, the diaphragm empties his venous system and pushes the blood forward to the thoracic cell. This is the second venous heart.
The number of diaphragm movements per minute is a quarter of the number of movements heart. But its hemodynamic pressure is much stronger than contractions heart, because the surface of this pump is much larger and the blood it pushes much harder than the heart.

It is enough to imagine the surface of the diaphragm once to agree with the fact that, having this muscle, we have, at least, a second heart, or perhaps something more.
Physiologists should begin by establishing a precise balance of expenditure blood diaphragm in parallel with cardiac consumption, with the determination of the role of diaphragm in the emptying of the blood lakes of the liver and spleen, which can conditions, for example, during the cold season, to keep from 30 to 50% the total volume of circulating blood; and also to find out the role of the diaphragm as a pump when pushing lymph into the thoracic duct and its role in systematic reduction of intestinal villi - the only place general metabolism, where the mysterious transformation of the indigestible nutrients into digestible nutrients intended for tissues and cells.

Diaphragm is a good mill working for the benefit of nutrition organism. By systematically squeezing the liver, the diaphragm relieves, and can and directs the flow of bile, provides blood circulation to the liver and indirectly affects all its functions: glycogenic, urea-forming, antitoxic, lipo-pexic, proteopexic, etc.

diaphragm in the entire physiology of the liver, then easily understand the relative value of different functional studies liver, because, unfortunately,

it is taken as a decisive test the result of tests taken on an isolated liver, and an isolated The liver exists only in the imagination of enthusiasts of laboratory work.

Improving the functioning of the diaphragm, they always restore the liver function, despite any, even catastrophic, indications. And vice versa, if, with successful treatment, the increase in volume of the liver and spleen, this also contributes to a decrease in the retention of the diaphragm function, and increase its movements.

What means do we have to release the blocked diaphragm and increasing the amplitude of its movements and its overall productivity?

1. First of all, it is necessary to reduce the volume of the liver and spleen, which are, in fact, from the point of view of blood circulation, a close functional synergy in overall gantry irrigation and closely interrelated.

To do this, you should: take three days of each month half an hour before lunch sodium sulfate (Glauber's salt) - one teaspoon on the first day (4 d), on the second and third days, 1/4 teaspoon of Glauber's salt, dissolved in 200 ml of mineral water (Essentuki No 4) or boiled water. In this way, washing and cleansing of the circulatory, lymphatic and bile capillaries of the liver. Decreased liver volume will automatically entail a decrease in the volume of the spleen.

2. Systematically apply a fairly hot heating pad to the liver area in the flow for at least 40 min 3 times a day after each main meal in the case when the liver and spleen are very enlarged in volume, and only 1-2 times a day in less serious cases. Usually, heating pads are used for relief of abdominal pain. But in reality, they should be used in avoiding abdominal pain.

The enlarged liver and spleen lift the diaphragm and make her motionless. A diaphragm that is too raised compresses both bases of the lungs and causes alveolar and circulatory congestion in the bases of the lungs. The use of heating pads achieves better ventilation and the disappearance of stagnation with their consequences (bronchitis, foci of pulmonary inflammation, emphysema).

You need to rinse, you need to warm up, you need to feed the liver with sugar. Warming up the liver, raising the temperature of the blood in the blood lakes of the liver and spleen, we activate blood circulation in the hepatic and splenic capillaries and achieve an increase in the volume of circulating blood.

The influx of thermal energy reduces the need for increased nutrition. This A simple and cheap procedure has an invaluable preventive value, if it is used systematically for months and years. After 2-4 weeks of such simple therapy, the diaphragm begins to unblock, its movements become fuller, stronger. Breathing, blood circulation and general nutrition improve for the benefit of the whole body. I I do not know a simpler, deeper and more effective treatment than the use of a heating pad on liver area. Every day you wash your face and hands, it is also necessary flush the liver daily. You need to warm up the liver if you want to live longer and get sick less often.

"Ventilation" of the human body

To To exist and lead an active life, a healthy person needs from 2500 up to 3000 calories per day plus one and a half liters of non-alcoholic liquids. A healthy person consumes 11,000 liters of air containing 360 liters per day oxygen. With this amount of air, the human body must to be placed at every moment of life (16-18 breaths in and out per minute).

If you think a little about these ratios, you will understand the life-giving effect of chest wraps, the value of a thorough chest wrap auscultation, with which you can determine the degree of ventilation of the lungs (while X-rays could be sometimes avoided), and, finally, to assess the pathogenic significance of the general or local hypoxia. You will replace inhaling oxygen with breath-activating wraps and intramuscular injections of camphor, which expand pulmonary capillaries.

Blood composition and its Changes

Each organ it is irrigated by blood capillaries and lymphatic capillaries. Hematologists believe that the same blood circulates in all organs of the same composition, with the same chemical components. Is this physiological axiom correct? Does it not exist miraculous chemical mutation of the blood, which changes in depending on the location? Is there a sudden change the biochemical properties of the blood that delivers to each organ a specific substance necessary for its specific functions?

In the lungs, the blood gives off carbon dioxide, and it is supplied with oxygen. In liver, the same blood leaves the breakdown products of hemoglobin in the form of biliverdyn and bilirubin, which pass into bile, and are supplied with cholesterol; In the kidney, the blood makes its way in, 300,000 glomeruli, directing its plasma through the walls of the capillaries (200 liters of blood in 24 hours), and again removes 90% of the substances filtered in the convoluted tubules. In the intestinal villi, blood takes part in a continuous hydrolysis of proteins, fats, carbohydrates, is supplied with nutrients; In the muscles, it is freed from its glycogen and supplied with milk acid; in the brain, blood forms cerebrospinal fluid; in endocrine glands, it brings tiny bricks for the construction of hormones; Everywhere Blood performs a strictly specific work.

This work, of course, is carried out with the assistance of specific parenchymal tissue cells. But the blood, changing its composition in each organ, at the same time retains its chemical individuality. And she manages to do all this for 23-27 seconds, repeating this work in mobile laboratory for

70-80 years.

Can there be a miracle more implausible than the life of blood? Have to assume that there are regional changes in blood composition, invisible to us, but supremely effective.

Membranes

Life is the eternal movement of fluids between cells and within cells. Stop of this movement leads to death. Partial deceleration fluids in some organ causes a partial disorder. General slowing down extra- and intracellular fluids in the body causes disease. Exchange is carried out mainly by means of capillaries and membranes.

In the section on capillaries, you will find numerous examples and convincing illustrations. Before examining each patient, it is necessary to remember about the phenomenon.

Changes in capillary membranes do play an important role in the development of the disease:

1) lungs (all pulmonary diseases, including devastating tuberculosis);
2) digestive organs (peptic ulcer, liver disease and gallbladder);
3) kidneys (pyelitis, nephritis, hydropyelonephrosis, lipoid nephrosis);
4) blood vessels (arteritis, phlebitis, lymphangaitis, elephantiasis);
5) skin (eczema, nettle fever, pemphigus);
6) the heart and its circulation (valvulitis, endocarditis, infarction myocardium, pericarditis, etc.);
7) nervous system (cerebral edema, encephalitis, epilepsy, myelopathy);
8) organ of vision (glaucoma, cataract, etc.).

In all cases, first of all, it is necessary to restore the permeability of the membranes. Never forget about endothelial membranes, capillaries, and membranes parenchymal cells.

Membranes can thicken, become impermeable, the distance between cell membranes can be enlarged due to wrinkling endothelial cells. This is the so-called "hyperporia". The distance between the membranes can also decrease, then we get - hypoporia". Cell membranes can be destroyed - disintegration occurs or cell death.

One should always think about the accumulation and excretion of metabolites; These are Again, the question is about filtering, scattering, osmoting membranes. It is necessary to forget the labels of individual diseases and, above all, to restore energy balance: breathing, blood circulation, digestion of food and excretion. You should always keep your brain membranes fresh, moist and permeable.

If you strictly adhere to book labels, if you limit yourself to habitual classification, then you will be like a dried entomologist, who collects dead or half-dead insects.

To become a specialist in membranology means to throw away everything medical specializations and become a true sower of life and health.

Movement against force gravity and "microexplosions"

Explosive Projectile weighs 500 kg - 1/2 t in the case. force of 25,000 tons and covers a distance of 20 km, overcoming the force of severity. The energy of the explosion, expressed by the mass of inert matter, overcomes gravity.

The process of expectoration, the rise of phlegm, the accumulation of mucus droplets and pus from the depths of the alveoli, bronchioles, in other words, movement against force gravity could be explained as the result of innumerable enzymatic explosions in the cytoplasm of the endothelial cells of the alveoli, epithelial cells of the mucous membrane of the bronchioles and bronchi.

The ascent of groundwater to the top of the plant, this stream, which begins in the roots that suck up groundwater and carries it to 40, 50 or 60 m up, could also be explained by enzymatic microexplosions occurring in the cytoplasm of plant cells of roots and cells covering the tubules - real vessels in the depths of the trunks trees. Accurate calculation of adjusted enzymatic explosions is the main source of vital and mental energy.

In order to explain this phenomenon, it is necessary to compare it with what happens in the powder warehouse, when it is poorly ventilated (self-ignition). Lack of ventilation, local hypoxemia in general can cause inflammation in cells and tissues. Pneumonia can serve as an exhaustive example. In cytoplasmic and extracellular fluid proteins, we we find acetone, and in catabolic reactions - ether and alcoholic substances. In this way, it is possible to explain the sudden outbreaks of acute infectious diseases and acute dermatitis.

The purely microbiological view is too na?e and too simplified. It is more correct to consider that enzymatic explosions represent normal course of life. The same enzymatic explosions, but irregular, weakened, irregular, become the primary cause chronic degeneration.
An explosion of nitroglycerin is possible only if the explosive has gelatinous nature. To make nitroglycerin, you need gelatin and a very strong

oxidizing agent (jelly + sulfuric acid).

Cytoplasm is jelly, constantly irrigated with oxygen, brought from outside and released by an enzymatic reaction. Cytoplasm contains sulfur, which binds substances together and creates conditions necessary for cellular microexplosions. In the cellular cytoplasm enzymatic microexplosions occur continuously; in countless micropoints of cytoplasmic jelly, these explosions are energy sources of life.

Countless micro-explosions in each cell extend across the surface in 200 hectares (the surface of the cytoplasm of the entire human body). In each point this wonderfully organized and well-limited explosion is weak and harmless, but the huge number of micro-explosions provides a constant the flow of the life force.

Fever can be explained by an increase in enzymatic microbursts. Fatigue may be a consequence of a decrease in the number and intensity of enzymatic microexplosions. Enzymatic Pathophysiology is a new era in biology and pathology.

The hypothesis of enzymatic microexplosions was first put forward by the famous botanist Soueges (1949, 1954). In his wonderful books "Plant Life" and "Kinematics of Life" he wrote that the egg represents model cell, perfect and omnipotent, possessing all properties, but without bringing anything to an end. This a cell that contains all the hereditary potencies, but in which have not yet learned to distinguish any particle of this inheritance, necessity has a special physicochemical organization. Her very is successfully compared to a powerful capacitor, all parts of which, even the most insignificant, are in an unusually close connection.

This capacitor can act as an explosive or explosive complex. Its action would correspond to a series of different explosions. Explosive reactions occur in the depths of colloidal micelles between the unstable, impermanent giant molecules of which they consist of. The smallest chemical and physical factors can to affect these molecules, to change them deeply, to cause isomerization or the formation of ethers, etc. the emergence of a new state of equilibrium.

Here is a quote from the excellent work of the famous physiologist Shochar: "The release of the chemical binder must be carried out with a very great speed. If we are talking about synthesis in the nervous system stimulation, we are talking about the explosion of a pre-existing phosphorus molecule" (Chauchard, 1943, p. 111).
Any disease is a quantitative process, characterized by an excessive number of destroyed cells, whether it is blood or parenchymal. The disease is always typically large the amount of toxic proteins that result from destruction of microbes, sacrificed phagocytes or decay tissue cytoplasm that has undergone traumatic, chemical, thermal or microbial shock.
To eliminate an attack of the disease, you must first of all open the excretory tract: cleanse the intestines, lungs, kidneys, skin, liver; it is necessary to immediately open spastically and atotonically closed capillaries; then the movement of plasma will increase, the plasma will be freed from toxins and will perceive antibodies, enzymes, diastases, oxygen, glucose and nutrients substances from the body's reserve. The body is cleansed and toxic substances removed.

If the therapy remains strictly medicamentous, the body will get rid of some microbes, but there will be room for others microbes. Toxic proteins will remain in the body, affecting various areas of the body. Acute dangerous phenomena of the disease may disappear, but are replaced by chronic diseases, atypical and difficult diagnosable.

Microexplosions and Radioactivity

Hypothesis about microexplosions was confirmed in 1960 at the National Laboratory nuclear physics in the United States. A report was transmitted to the Commission on Atomic Energy This message has been repeated by several American scientific observers.

A completely isolated chamber with an area of 1.8 m was built. For the best isolation of the chamber from the penetration of atmospheric radioactivity used 60 tons of steel with a wall thickness of 20 cm.

special fabric lies on the couch. Near the couch there is a crystal potassium iodide (its diameter is 20 cm), enclosed in a steel cassette. Potassium iodide crystal has the ability to glow every time, how a radioactive particle hits it. Registration of light waves, caused by radioactive particles, is carried out using photo animation mechanism on a special installation. On the screen, located outside the chamber and connected to the counters, physicists record the number of infinitely tiny radioactive particles sent human body. These experiments were carried out repeatedly on a large number of subjects.

Thus, it has been proven that every minute in our body there are billions of micro-explosions. Hence new problems arise. First of all It would be necessary to try to establish where the warehouse of biological microbombs. It is known that cell membranes are the site of activity enzymes located on the surface of cells. Their explosive Activity is a biological phenomenon. But there is also another, pre-explosive system - myriads of microbomb depots, attached to mitochondria. Each mitochondria is a metabolic intracellular apparatus of extreme importance. Their number many times more than the number of cells in the human body.
Mitochondria of a very thin formation in granules or rods are located around the cell nucleus. They have an enzymatic ability explosives. Mitochondria are the main, if not the only, the focus of oxidation processes in the cell, i.e. cell respiration occurs with the help of mitochondria. This is a fundamental fact.

Alleged effects of gradual explosions of radioactive microbombs of our body allow us to put forward some hypotheses, quite plausible within the limits of available observations.

1) Radioactivity in the human body is "tamed", detoxified, specially oriented, well-adapted to the needs of life, is the primary source of vital energy.

2) Life-giving animal radioactivity is exposed from destructive radioactivity radioactivity, which kills quantitatively and qualitatively. Nuclear Physics is designed to measure the rhythm of atomic microexplosions in each section human body, in every organ, in every tissue, in every cell.

3) Groups of biologists who have a very elementary knowledge of the field of nuclear physics, should cooperate with physicists.

Huge horizons are opening up for biology, physiology and pathology. The birth of nerve currents, their transformation into elements of thought, screams newborns, restful or restless sleep, hunger, thirst, vegetative and mental phenomena, the first efforts to catch, grasp walking, the birth of curiosity about the things around you, a sense of security In Ma's armsEach enrichment of the tactile, visual, acoustic and gustatory sensations should be accompanied by a modification of the intensity and rhythm of microexplosions in various areas of the body.

It is already possible to measure the number and register various rhythms microexplosions and to determine the interdependence between primitive mental processes and modifications of rhythm and intensity micro-explosions. It would also be possible to measure the correlations between the former babbling, the first spoken words and micro-explosions. Physiologists and Teachers will be forced to work together with physicists.

Biochemistry and Biophysics

Name of the first science in no way corresponds to the subject contained in this section chemistry. Biochemistry, in fact, means: the chemistry of life, the chemistry of life phenomena. However, neither chemists nor physiologists are able to give some explanation of life. Biochemists do not even try to put this The main question. Biochemistry describes only substances that are in the animal body; It studies the changes in these substances in the body. But biochemists cannot produce real biochemical reactions in their laboratories.

Chemical transformations in the body occur with an extraordinary rapidity or extraordinary slowness (closure of wounds, the process of scarring, accumulation of phosphocalcium reserves, recovery cytoplasm in damaged cells); All these reactions in the body decompose solutes at a temperature of 38-39 ?C, while as in a biochemical laboratory, a much higher temperature.

In the human body, for each hydrolysis or synthesis reaction innumerable enzymes and components are instantly mobilized; not there are organs, tissues, cells that would not receive a signal; not There is an amount of energy that would not change its energy potential. The dog swallows a piece of meat. Type of meat excites her retina and her brain; the salivary glands secrete saliva, causing contractions of the esophagus, gastric peristalsis, changes in release of carbon dioxide and various juices. Everything changes in the body. Everything and everywhere.

Biochemical tests, which occupy a dominant place in physiopathology, are unable to explain the mechanism or underlying factors of painful changes. It is impossible to explain the chemical reaction in cells, it is possible only observe the availability of the product and you can only distinguish the main substance and final product. Intermediate reactions do not lend themselves to observation.

Cytochemistry (or histochemistry) is as old as cytology itself. To observe chemical reactions in droplets a few thousandths in size millimeters, you must first make the substance immovable, without changing the cell structure, then you need to find a color reaction for coloring small grains or choose a characteristic solvent to distinguish grains from other components of the cell; From all this it is clearly seen that cytochemistry is going through a period of its childhood. It points us to presence of the substance in significant quantities, but does not reveal the exact the place where these substances were formed. When the movement of the cell is observed, caused by exposure to a chemical is called chemotaxis. When the effect of a physical factor on the cell is observed, for example, severity, speak of barotropism. When the effect of light on the cellular substances, speak of phototropism, or phototaxis. This They are satisfied, but the biochemical laboratory is not a circus, not a cabaret.

When chemists have the courage to say, "We know very little," and in some cases: "we don't know anything", then the incorrect habit - inventing useless terms, assigning identification marks phantoms - will disappear. And, perhaps, they will begin to think, think, select facts, instead of collecting facts without a plan, without a guiding idea fragments of chemical knowledge.

The smallest branches of the pulmonary artery have a fairly powerful muscle layer and are able to tolerate significant changes in caliber. This The caliber can be reduced threefold. And the decrease caliber three times means 9-fold reduction in cross-sectional surface and increase in resistance to blood outflow by a factor of approximately 27 (Policard, 1Q55).

But both in normal physiology and in pathology there is talk of observations of areas where the surface of the vessels can withstand the resistance of a significant blood pressure without causing serious disorders. This means that resistance of the walls of blood vessels and blood cells to mechanical or physical phenomena is enormous. On the other hand, every change in pH in body fluids are very limited. Knowing this, you will understand that our The use of physical influences (heat, cold) is wide a field of activity that is much wider and more controllable, than our chemical prescriptions, which are very limited, because The range of biochemical changes associated with life is extremely small.

The speed of biochemical reactions (12 reactions to decompose the molecule glucose in 1/10 s), the inability to influence the enzymatic and The cellular world requires a little modesty and reflection from our conscience in assessing the beneficence of pharmacology alone.

Do an arithmetic calculation and you will establish that balneotherapy (heating pads, hot wraps, baths) is more effective than the whole Pharmacology. Balneotherapy, well performed, never is a danger of growing resistant microbes, it does not Narcotizes, does not poison.

General Eurrhythmia

There are cases when and they are not uncommon when the death of the patient cannot be explained by any the development of morbid phenomena, nor the insufficiency of the most important types of activity of the body (respiration, blood circulation, excretion), nor serious near-death complications. The hypothesis remains probable: Disturbance of synchronous eurhythmia.

In a healthy person, the number of breaths per minute should fluctuate between 26 and 20, the heart must beat 72 to 80 times per minute and the kidney filter a certain amount of urine. Oxygen discharge on the way: lung, blood, myoglobin, oxygen, lactic acid, muscle fiber - It happens very rhythmically: 300 times a minute.

It is surprising that the quantitative correspondence between the rhythm of breathing - 18 per minute, heart contractions - 72 times per minute and rhythm myoglobin dissociation - 300 per minute. Number of breaths per minute (R): 18, multiplied by 4, gives the number of heart contractions (C): 72 per minute; The number of systoles - 72, 75, multiplied by 4, gives the number of oxygen release in skeletal muscle delivered by myoglobin (M), 75x4=300. This Proportion can be represented as an algebraic formula synchronous rhythm: Rx4=C, Cx4=M.

It takes one breath to deliver enough oxygen to four contractions of the myocardium. It takes one myocardial contraction to deliver the volume of oxygen for the four contractions of muscle fibers striated and smooth muscles. Synchronized rhythm of numbers breaths, the number of systoles and the number of oxygen intakes into the muscle fiber obvious.

If oxygen were simply dissolved in the blood and not combined with the red blood cells, the heart, in order to ensure the respiration of tissues, must It would be 40 times faster than it is at present.
Proponents of intravenous injections, doctors who for 40 years various substances are injected directly into the blood, often very poisonous, do not realize what confusion they cause in the composition how much blood cells are destroyed by these injections, how much shocks occur in the plasma, what inflammatory processes and phenomena degeneration is caused by them in the deep endothelium of the repeatedly damaged arteries and veins. This tragic misconception has been going on for almost half a century. Number of phlebitis, thrombosis, embolism, arteritis has been steadily increasing since the use of intravenous injections.

Only one indignant voice, the voice of the physiologist Bacc (Back, 1956), rose up against this professional and moral frivolity.

The study of the rhythm of various physiological functions could lead to very interesting discoveries. The rhythm of peristalsis of complete and empty of the stomach, the rhythm of the secretion of gastric and intestinal juice, the rhythm of excretion hepatic and cystic bile and the rhythm of urine excretion, duration and the rhythm of some reactions of catabolism and anabolism could greatly to increase our knowledge of synchronized eurrhythmia.

Chapter 3
Between Health and Illness
Fatigue

Fatigue is a phenomenon common to the entire animal world. There are different degrees Fatigue: physiologists know the fatigue of "amoeboid" movements leukocytes, ciliated cilia (epithelium of bronchi, bronchioles, etc.) and muscle fiber fatigue.

Fatigue in a healthy normal person is a decrease functional capacity of organs caused by excessive work and accompanied by a characteristic feeling of malaise.

Movement stops due to a change in turgor in Mimosa pudica after some time, if it is subjected to too often repeated mechanical irritations. A certain period of rest is necessary for restoration of the plant's motor ability. Striated The muscle gets tired faster than smooth muscle. Muscle fatigue It is characterized by a decrease or loss of the ability to contract. With Maggiora's attempt to establish "optimal" working and leisure conditions (Maggiora) observed that by bending the middle finger under the control of an ergograph, every 10 seconds, it is never possible to tire him; So, a 10-second rest between contractions is sufficient for full recovery.
Rapid combustion of glycogen, rise in temperature, increased sweating cause muscle fatigue. In the fresh air with cool temperature muscle fatigue occurs later than in the room with high or even moderate temperatures and a suffocating atmosphere.

Fatigue causes a huge consumption of oxygen and glycogen, an excess of lactic acid, the accumulation of amino acids and other protein substances in the blood. Poor in oxygen and glycogen, the liver cannot decompose protein particles into harmless metabolites. Nerve fatigue is recognized by reduction or loss of conductivity: in the organs of vision - by decrease sensitivity to light, in the organ of hearing - by loss or decrease susceptibility

to sound.

Along with physical fatigue, it is necessary to note fatigue from the heat and fatigue caused by chemical changes. Fatigue is distributed in a certain way. The most important organs (nerve centers) are protected from fatigue is better due to a special hierarchy of tissues. This suggests itself a close comparison of fatigue with hunger. It is known that under the influence of depletion of body tissues are lost in mass so that the brain can be nourished organic reserves. The brain that dies last (ultimum moriens), is also the most active (ultimum movens).

Fatigue accumulates in the body progressively. Oxidation products during muscle contractions, they are released into the blood and chemically affect the sensitive nerve endings contained in muscles. Fatigue can be reduced by training, which makes the body more resistant to fatigue. Engelmann and Verworn It was possible to accustom various single-celled organisms to concentrated salt solutions, which at first caused them a pronounced excitement. You can get used to weak poisonous solutions, to high temperatures, to intense light. You only need to use small doses and gradually increase them. This is the secret of physical and mental training.

With muscle fatigue, the muscle absorbs nutrients and poisoning by their waste products, which cannot be quickly isolated or neutralized. Every fatigue is poisoning. Increased release of metabolites leads to liquidationand poisoning.
Fatigue reduces the body's ability to get rid of ptomaines. It can be argued that ptomaines become dangerous only if if the body is tired. They can be called fatigue toxins. Poisons fatigue, the result of the accumulation of unharmed ptomaines, cause predisposition to infectious or degenerative diseases.

If we agree with this hypothesis of "fatigue toxins" (and it is difficult to disagree) as the predominant factor of loss of immunity, it is necessary to revise the classical theory of immunity. Complete sterilization of the organism - Ehrlich's dream - was and remains a utopia. Without colibacilli in the normally functioning intestine, The last phase of digestion would be
impossible.

When working when brought to fatigue, complete combustion does not occur nutrients. Since work is associated with spending oxygen, it is useless to treat fatigue with increased nutrition. Tense muscular work very often causes a slight feverish state, feverish brokenness (lumberjack fever, heat strokes in soldiers after long marches).

Overexertion during military exercises and in sports. At the beginning of the war training there is always a decrease in the body weight of soldiers. Change living conditions causes a decrease in organic reserves and an increase in metabolism. After 3 months of exercise, the mass increases again by 3-4 kg. This increase is mainly due to hypertrophy of the leg muscles. The muscles of the arms do not change, and the respiratory muscles may even decrease in volume. This means that it is possible to state an increased blood supply capillary network of respiratory muscles that need an excess of oxygen, while reduced blood supply to the respiratory muscles leads to depletion of oxygen and causes hypertrophy. Mosso collected There is ample evidence that smaller muscles can to do the same great work and act even better than the big ones muscles. The extraordinary speed and endurance of the Ethiopians are well known during hikes; But it is the Ethiopians and Arabs who are very slender feet. Mosso observed in the Alps famous guides with underdeveloped leg muscles.

The work of muscles does not increase their volume until it becomes for excessive. Respiratory muscles, diaphragm and intercostal muscles are not increase in volume, although they remain in effect throughout the life. The heart muscle does not hypertrophy under normal conditions. She increases only with valvular disease or as a result of excessive work. Hypertrophy of a muscle does not increase its ability to perform in for a long time, a lot of mechanical work. Teachers gymnastics are the least hardy in campaigns and are the most tired of military life.

Emotional fatigue. Symptoms of emotional fatigue: sweating, dilated pupils, increased release of adrenaline, thyroxine, palpitations, respiratory arrhythmia, spastic state of the intestinal tract, diarrhea, polyuria, in a word, all disorders of oxidation, nutrition and excretion.

Acoustic fatigue. The use of ultrasound sometimes causes bleeding in the meninges and in the brain tissues. This is the maximum harm caused by irritation of acoustic centers. It can be considered that irritation of these centers or other areas is centralNervous systems with waves of a lower frequency than ultrasound, can cause much smaller changes. But they still require attention, because these irritations are more prolonged, although less intense.

Day, night, terrestrial, water, air deafening noise causes an increase in nervousness, weakening of attention. In the canton of Grisons (Switzerland), For some time, the movement of cars was prohibited, during this period The level of achievement of schoolchildren was higher than in all other cantons. A minimum of rest is necessary to get together with at least a few meager thoughts. Brain fatigue corresponds to a decrease in blood supply nerve cells; At the heart of it is an unexplored mystery of the brain.

Different types of fatigue inevitably cause different diseases. These are An immutable law. It is very important to cure granuloma or tuberculous meningitis, but if fatigue is not eliminated, it occurs the return of tuberculosis or other serious disease.

The pathogenic role of fatigue. Carrier showed the importance of fatigue in most diseases. Reudon has published a dissertation on fever due to overwork. We can also name convincing works Lagrange, Leyden, Robin, Roger, Marfan.

Excessive temperatures contribute to fatigue. Fatigue sets in rather, when the atmospheric pressure drops and the relative air humidity. According

to Mosso, fatigue fever can be compared to traumatic (absorption of metabolic products, fever after prolonged recovering tuberculosis patients). Axel Kay (Key) noticed an almost constant increase in the number of painful children in the transition from grade to grade in a Stockholm school: the first class 17%, second - 30%, fourth - 40%. Increase in myopia in the relationship with the duration of classes is well known to ophthalmologists. Inconvenient distribution of lessons, uninteresting and useless training can have a destructive effect on mental abilities children.

The cause of fatigue is the accumulation of metabolic products in the muscles during the transformation of chemical energy into mechanical and thermal. You can call symptoms of fatigue in a muscle at rest, introducing into it arteries aqueous extract from tired muscles; On the other hand, it is possible eliminate the effects of fatigue by "rinsing" the arteries of the tired muscle isotonic saline solution, which removes metabolites, enhancing irrigation of the muscle, opening closed capillaries in it. Balneotherapy capillaries eliminates the poisons of fatigue. A cat has a tired muscle pH drops to almost 6.2. In fresh muscle, the pH is 7.0-7.1. Blood is the conductor of animal heat, the "human Gulf Stream". Muscle is heat motor In the resting muscle, only a twentieth of the capillaries expanded; In the working muscle, all or almost all capillaries are dilated. Do not There is not a single ailment, not a single illness without prior fatigue.

Humoral syndrome fatigue

Each Fatigue - muscular, emotional - generates changes in the composition blood and urine. Some authors, studying the blood of people after fatigue, note an increase in the number of red blood cells, other researchers, on the contrary, - Reduction. In cases of moderate fatigue, intensification of erythropathoids (neoformation of erythrocytes) and the appearance of reticulocytes. When fatigue becomes excessive, the number of red blood cells decreases, there is an inhibition of the activity of the brain - the plant, continuously producing red blood cells. Globular anemia appears. It becomes understandable relationship between excessive fatigue and hypochromic fatigue anemia.

On the other hand, thickening of the blood, an increase in the hemioconcentration in the a period of moderate short-term fatigue could be considered as the dominant factor of thrombogenesis. Hemoglobin either increases or decreases, which depends on changes in plasma volume Fatigue also provokes an increase in lymphocytes and polynuclear cells. leukocytes. Blood clotting is accelerated, and the bleeding time is closely related to the degree of fatigue; hemoconcentracin is accompanied by an increase in the number of platelets and fibrinogen.

Comparing the shape of red blood cells, their fragility, thinking about the increase in the number of leukocytes and lymphocytes caused by fatigue, it can be argued that that every fatigue, even moderate, is accompanied by temporary anemia and microleukemias. If fatigue lasts too long, if it becomes excessive, it may in some cases appear etiological factor of Birmer's anemia, leukemia, bone fatigue of the brain and the formation of blood clots.

A therapeutic gesture is the organization of a long rest. Already 95 years ago, they understood the need for rest for the sick, the afflicted progressive pulmonary tuberculosis. It is also necessary to organize elimination of countless corpses of erythrocytes, leukocytes and lymphocytes through the urinary tract. It is necessary to stop the anti-physiological use of radioactive substances that indiscriminately kill erythrocytes and the patients themselves. No one wants to think that by increasing the number of dead red blood cells, they clog the excretory pathways and increase protein intoxication.

Fatigue is accompanied by acidosis, the release of adrenaline, stimulating the contraction of the spleen, which drives into the blood stream large lymphocytes. Increased formation of lactic acid by muscles provokes disaggregation of liver glycogen, a decrease in glucose reserves, and the appearance of hypoglycemia.

The harmful effect of hypoglycemia on the nervous system is well known. How many patients suffering from hypoglycemia are treated as epileptics because of morning convulsions. 4-5 pieces of sugar on waking up cure these "unfortunate epileptics". Hypoglycemia also causes acetonemia, which regresses after taking sugar; The role of carbohydrates is known metabolites in the combustion of acetone.

Hemoconcentration, dehydration of blood plasma, increased fragility erythrocytes, increased potassium, decreased glycemia, leukocytosis, an increase in the number of platelets, a tendency to form blood clots - all this characterizes the consequences of fatigue as a pre-painful state, which can give rise to a real disease, if the rest did not take off blood fatigue, erythrocyte fatigue, leukocyte fatigue, dangerous fatigue bone marrow and spleen - cradles and cemeteries of red blood Ballov.

Muscle fatigue, emotional, digestive, visual, acoustic, generates humoral, tissue and cellular fatigue, Most of all, perturbation in the blood is reflected in the composition of the urine. There is a reduction in diuresis during exercise. Albuminuria of fatigue occurs in more than half of the tired individuals, especially those who have suffered prolonged muscular Voltage.
It has been observed that albuminuria of fatigue is accompanied by the appearance of granular cylinders. This is the pathogenetic bridge between fatigue and nephritis, which can become chronic. Therefore, it is necessary to do a urine test after exhausting walking in soldiers and athletes.

Prof. Tayeau believed that humoral fatigue syndrome was rare can be complete: some forms of fatigue elude it biological detection. The ideal would be to have such an analysis, which, apart from any elements, would indicate the degree of suffering. This analysis should serve as a distress signal an immediate suspension of work should be ordered.
Now, this distress signal exists. This is a dermographic reaction. With the back of the hammer for percussion, go slightly over the back patient. If instead of a pink or thin red line (the contractions of the skin capillaries), you will find a white line that remains white until it disappears, this will indicate absence of a capillary reaction. And when you detect the presence of of this white line, your diagnosis of capillary inertia has already been

established. At the same time, the viability of the examined patient is minimal. Therefore, the cessation of long-term work must be ordered.

True preventive medicine should avoid anti-infectious vaccinations. True Preventive Medicine should contribute to the organization of such primary, secondary and tertiary education, in which the memory of children and young people will not be loaded people, their studies will be revived, programs will be reduced, stimulating students intellectual curiosity. A school doctor should become authoritative a member of the pedagogical council prohibiting overload of convalescents students. The modern school produces physically tired subjects, intellectually indifferent, devoid of a sense of citizenship, sense of responsibility.

Statesmen responsible for future nations are obliged to to understand that the future of each nation depends primarily on the value of of the increasing capital of the human mass, the only source of material and cultural enrichment. We must do everything possible to reducing the degree and duration of fatigue in each workshop, At every construction site, in every institution, in every administrative point.

Occupational medicine, which so far only registers accidents, Accidents at work must be submitted to the management of the plant as a sufficiently authoritative person to organize such conditions work that will help to avoid fatigue incompatible with the preservation of ability to work.

The problem of elderly people who are removed from active life at the age of 60 should be be revised. The number of inactive old people will decrease, they will work up to 70-80 years. The state budget will be reduced and life expectancy. The number of infectious diseases will decrease, qtydegenerative changes in organs will fall to a minimum, The pharmaceutical industry will lose 30% of consumers, disappear drug diseases, the madness of politicians will disappear, striving to conquer the whole world.

Rational Treatment of the consequences of fatigue

In cases where When dermographism is white, absolute rest should be prescribed, but without sleep therapy, fruit and vegetable diet, heating pad on the liver after meals, bladder with ice on the back of the head twice a day for 20 minutes, baths with an infusion of herbs.

If dermographism is very pronounced - fruit and vegetable diet, normalization of kidney activity, bath with walnut leaf infusion nuts. In any case, it is necessary to restore breathing and circulation blood digestion, digestion of food, and elimination of metabolites.

In addition to general fatigue, there are various forms of localized fatigue fatigue: respiratory fatigue, circulatory fatigue digestive tract (liver, intestines), kidney fatigue, cerebral fatigue fatigue. Each localized fatigue inevitably generates a general fatigue. It is necessary to overcome various forms of fatigue in time.

Chapter 4
Pathology or From Health to Disease
Inflammation

Classic The formula of inflammation is pain, redness, fever, swelling, disorder functions (dolor, rubor, calor, tumor, functio laesa). Can it save Is it a centuries-old definition that has been known for centuries? There are many reasons that compel pathophysiologists to proclaim the necessity of revision of this definition.

Let me begin this revision by studying the role of leukocytes in the body, given their protective barrier under the skin, in muscles, in parenchymal organs and body cavities. Until now, it was believed that purulent rhinitis does not poses no danger of septicemia; that abundant leukemia is very unpleasant, but not dangerous for the patient; that even purulent sinusitis, threatening the penetration of pus into the respiratory tract, does not affect the general condition; that purulent conjunctivitis, which is very common in Middle East and among tribes with malnutrition, poor living conditions, causes only ulceration of the shells.

However, all these diseases cannot be considered local. Why? Because that when white blood cells accumulate with or without bacteria, when pus cannot be isolated, leukocytes along with the ubiquitous bacterial flora (which is well known to bacteriologists) undergo decomposition with the formation of protein toxins and the release of gases from fermentation in dead cells. This The concept is still controversial. Theories of Reilly (1942) and Selye (Selye, 1956) confirm our theory of clinical and therapeutic the regret of the high priests who adhere to the theory of antigens and antibodies.

If the hyperthermic baths introduced by Prof. Valinsky, modified by us, applied several times, cure purulent otitis, erysipelas, then this cure is due to the fact that increased temperature of blood and extracellular fluids accelerates bloodstream, causes the combustion of protein poisons and eliminates through the blood and through the lymph and, finally, through the kidneys, protein and microbial toxins. For Protein toxins are excessive products of protein breakdown, as well as Microbial toxins are a pathogenic factor. Classic microbiology knows microbial endotoxins, but we introduce microbial endotoxins into the medical terminology, the concept of "intracellular toxic proteins".

Until 1907, when Ehrlich introduced the treatment of syphilis with Salvarsan, classic treatment of syphilitic ulcers and even rashes (in the second stage) vigorous rubbing with gray mercury ointment was considered. Now it is clear to us that The success of this treatment should be attributed to the breakdown of protein toxins. If to compare the effects of mercury and hyperthermic baths on different types of mercury microbes (with staphylococcal infections, boils, phlegmons, salpingitis, osteomyelitis with the whole range of bacteria), then you begin to understand that there is a

common denominator in all inflammatory processes, in all microbial aggressions: intracellular protein toxins.

Of course, it is possible that toxic proteins of some microbes may have different molecular structures, but one thing is certain: all Protein toxins are affected by hyperthermic baths. Think about it conclusions and you will see how much it is necessary to take a deep revision of the concepts adopted in microbiology and immunobiology.

Having organized the excretion of dead leukocytes from the body in leukemia, malignant anemia and Biermer's anemia, we will help the patient survive your illness and give you the opportunity to lead a normal life. In cases of spastic pneumoniaaralich, the consequences of poliomyelitis we achieve our method of restoring nerve and muscle fibers that have been compressed swollen connective tissue, even in chronic intoxication, caused by protein toxins due to the breakdown of muscle and nerve fibers.

In every infectious process, in every process of degeneration The game that takes place in the depth of the tissues is determined by the relationships between the cell, on the one hand, vessels and extracellular fluids - with another. Bichat established the foundations of histology (the life of tissue), Virchow (Virchow) took Bichat's thoughts and in doing so discovered the world of cells, and the cellular pathology was created.

After the works of Peters (1935) and Gamble (1954), it is impossible to to continue pathophysiological studies without starting the study of each syndrome of the disease in the light of cytohumoral pathology.

We must finally realize that in all our therapeutic attempts at microbial, chemical, thermal, traumatic aggression, we can do nothing to restore the affected structure, nor to normalize impaired cellular metabolism. If We will change the intracellular currents, we will kill the cell, we can only deliver nutrients to cells through arterial loops capillary network and organize discharge through venous loops of the same networks and at the same time preserve the composition of extracellular fluids, including lymph. All medicinal and hydrotherapeutic influences must be reviewed and subordinated to this physiological axiom.

Any illness is a local or general stop in the movement of life; without circulatory arrests, without obstructing the movement of extracellular fluids There is no disease. The cell endures hunger, endures thirst. To every exhaustion, To every anoxemia, to every suffering of the cell, there is a corresponding slowdown extracellular fluids, blockage of excretory pathways.

Each cell is a microbrain, microlungs, microgut, micro-kidney, "micro-electric plant"; The cell does not allow you to penetrate into its cytoplasm sodium chloride and jealously guards its supply of potassium. Our knowledge of cell physiology, cell metabolism is in the embryonic state; we know about the flows between the nucleus and the cytoplasm, Approximately different phases of the cytoplasm are known, we know about existence of electric currents and we are almost certain of the existence and activity of countless diastases in the life of the cell, causing intercellular microexplosions. We want to propose one hypothesis: it was possible various disease states of the cells caused by the anoxemia, blockage of the excretory tracts, slowing down of the intercellular movement of fluids, erosion, rupture, disintegration or edema of the cellular membranes, slowing down the humoral inflow, as a consequence of the formation of various protein toxins that enter the bloodstream, extracellular fluids.

We were convinced of this after a long medical practice, during which For 20 years, we have been collecting classical clinical and patho-logoanatomical observations, and after 37 years of my own clinical observations, the influence of the ideas of Krogh, Polycard, Peter and Gamble. Phagocyte-related and with different kinds of microbes, these toxins may possibly create biochemical synergy with microbial endotoxins, or perhaps cellular protein toxins provide nutrition to microbes that In these cases, they play the role of phagocytes, or, finally, mIt can be, Some microbes are kind of poor "coolies" that carry protein cellular toxins.

Here is an immense field of work for microbiologists and immunologists; Here's the new one A road for pathophysiological studies.

Infection

Karrsl (Carrel, 1927), working at the Rockefeller Institute with Flecksner, stated that during a thunderstorm, tissue cultures die if they are very Do not change the nutrient medium quickly. Every housewife knows that During a thunderstorm, milk curdles. Atmospheric, as well as psychic Depression causes cytolysis in certain tissues. Cytolysis produces toxic protein molecules, in connection with which intoxication occurs nerve centers. Then there is stagnation of blood in the capillaries and the possibility for germs to invade.

It is impossible to affect atmospheric pressure and it is not always possible eliminate mental depression, but it is possible to increase resistance to the action of cytolysis, improving breathing by simple means, blood circulation and excretion. Capillary stasis can be affected wraps, heating pads, soothing or stimulating baths. With serious acute diseases do not need to immediately grab antibiotics, but to give the body the opportunity to react. We have no right to interfere the body to use its own defenses.

Before applying antibiotic treatment, give action "polybiotics". To do this, it is necessary to restore blood circulation in the capillaries, i.e. to cleanse the blood, restore its circulation, remove it from the blood harmful substances, open the way for phagocytosis, wash microbes circulating plasma; then it will glue together, precipitirust, render harmless and will remove the invading microbes, as the water in the river removes its impurities,

Because each drop of blood has more antibodies than all laboratories of the world.

Virchow believed that the reaction of tissues depends not only on external factors, the body's response is rather determined by the state of its internal parts. The same streptococcus can cause panaritium, erysipelas, arthritis, peritonitis, thrombophlebitis. Great discoveries in the field of bacteriologists have created the idea that microbes can act as a factor completely alien to the organism, like an almost mechanical invasion foreign army. Now the microbial factor is looked at as a source "irritation", "stimulation" of the body. They begin to understand that when infectious diseases, the general condition of the patient plays a more important role in the development of the disease than microbes. Experimenting with laboratory animals, when a virulent dose of microbes with mathematical precision causes infection, is not applicable in human pathology.

In most cases, the infecting factors are the same microbes who always, even before the disease, lived on the skin of the sick, in the mouth, in the pharynx, in the digestive tract and even in the blood and tissues. We have been living in state of latent infection, but we rarely get infectious diseases.

Health, from a microbiological point of view, is harmonious harmless symbiosis of different races of microbes in the human body, similar to the symbiosis of trees with mushrooms, in other words, a good neighborhood. A significant number of piococci always nest on our skin, who live without causing painful phenomena. This is a normal skin flora. In certain cases, the same pyococci cause furunculosis, erysipelas, phlegmon.

Kindler failed to make erysipelas, despite being 14 He administered streptococci and pyococci to three patients in the tertiary stage syphilis. In 75% of healthy people, gas microbes are found on the skin gangrene and in 30% - tetanus (Coehnen). In patients with burn wounds in 50% of cases, they find diphtheria bacilli in the complete absence of clinical manifestation of this disease (Hermann). During the of pregnancy, colibacilli are often found in the renal pelvis of healthy women. In other cases, severe reactions (Gynes). Cultures can be obtained from the blood of healthy people microorganisms that cause gangrene, gas edema, anthrax without signs of illness during a long period of observation after blood sampling.

There is a non-specific resistance of the body, the nature and the mechanism of which is unknown. Study of the influence of age, nervous tone system, the state of hormonal economy, nutrition, metabolism are not has yielded tangible results; antibodies in the blood serum, their Quantitative difference and serological tests do not explain non-specific immunity.

The life expectancy of a person is the result of his habits, image the life he leads. The great epidemics that have disappeared, which used to be have claimed many lives, and are now re-emerging as a result of physical and mental disorders, as a result of demagoguery, political lies (the greatest social disease), as a result of total wars and mistakes science.

Allergies

The so-called Allergic diseases now occupy the first place among chronic diseases diseases. The number of allergic diseases is increasing everywhere since amazing speed. In 1900, there were several hundreds of hay fever cases, in S928 - 100,000 people (result intravenous injections after the First World War). In the USA in 1910. There were 10,000 cases of hay fever, in 1922 - 1,200,000, in 1922 1937 - from 4 to 5 million cases.

During the First World War, the number of recruits released by the military the presence of conscription due to asthma was 2.6%. During World War II, 12% of American recruits were Exempted from military service due to asthma. In At present, 10% of the US population constantly suffers from allergies diseases (15 million).

30-40 million patients who have undergone a single allergic disease, are forced to monitor their diet, avoid allergens, always be in a state of anxiety. About 500 works devoted to allergies. There are more than 3 thousand specialist doctors in the United States allergy. Special hospitals have been established for the treatment of allergic diseases. A large number of factories produce food without milk, eggs, no cereals. They produce mattresses, pillows, soap, lip allergen-free lipstick.

In the United States, there is an "American College of Allergy", "American Allergy Academy", "International Association of Allergy Sufferers". In England - "British Allergy Association", in France - "French Allergy Society". And yet, in spite of, or perhaps because of, of these efforts, allergic diseases do not decrease.

Allergists consider the following factors to cause allergies:

1) vegetative leafing (vegetative neurosis), major life shocks;

2) constant irritation of the mucous membranes of the respiratory tract by vapors gasoline and exhaust gases;

3) the use of an increasing number of new drugs (sulfonamides and penicillin are now prescribed not only in serious cases, but also with minor diseases);

4) an increase in the proportion of protein substances in the national diet;

5) development of the production of canned food that contains irritating chemicals (various acids and dyes), especially canned vegetables and fruits containing traces of poisonous insect repellents;

6) development of cosmetics: creams, lip pencils, blush, often containing stimuli.
Abderhalden (1950) does not hesitate to name allergies disease of modern civilization. But there is another big decisive one a factor that could be, if not completely eliminated, then at least weakened by the efforts of doctors. We are talking about a passion for intravenous injections and various vaccinations. Moreau (Mogo) and Keller were able to establish on the basis of an extensive questionnaire that A negative skin reaction turns into a positive one in healthy people children after smallpox vaccination. Inflammation is often observed at the same time tonsils (tonsillitis).

In healthy circulating blood, pathogenic microbes do not multiply, exclusion of malaria and typhoid pathogens. Even complicated infections in oral cavities flow favorably and pass quickly due to good Ksupply; Infection in the anus is not dangerous, despite for the passage of feces with a large number of microbes. Dermatitis in anal area never cause serious complications also due to the presence of abundant blood circulation.

But the bactericidal ability of blood is limited. Don't Go Too Long to tire the blood, forcing it to decompose irritating substances that are alien to it (not to mention preventive mania). Each new shock in repeatedly injured body responds primarily to injured areas. Microstimuli are summed up, and microreactions turns into a macro reaction.

Allergy is the body's basic ability to mobilize its weight protective forces to eliminate pathogenic agents. To desensitize the body means to reduce the defenses and to inhibit the protective activity of cells and tissues. Medicine is obliged to transform a "pricked" humanity into a humanity less protected crude precautionary means.

Arteriosclerosis

Articles, works and studies of arteriosclerosis are no longer in the medical literature numbers. However, can we say that the problem of arteriosclerosis has been solved? There are words, terms, thoughts that do not express any reality, Although no one dared to issue them a death certificate.

For some reason, the fact of a secondary role is neglected in arteriosclerosis arteries in the nutrition of cells and tissues. The volume of blood circulating in the arteries, in reality is only one-tenth of the total blood volume. Atheromatosis, calcification and proliferation of the connective tissues must be considered by pathologists as phenomena of protection.

It can be rightfully stated that with each microtrauma of the walls arteries, there is an attempt by the body to clog the place damage and protect it with other protective equipment to avoid fatal bleeding.

The delivery of nutrients to the parenchyma is carried out by pre-pillaries and extracellular fluid, which, due to the correctly directed permeability of the envelope perceive oxygen, glucose, amino acids and remove harmful metabolites.

The cause of the disease in cases of tissue degeneration must be sought, therefore, not only in the arteries, but also where the true distributors, i.e. precapillaries and extracellular fluids. Arteries are only suppliers of nutrients to the destination.

Can arteriosclerosis be considered as a nosological unit? The cause of changes in intimacy should be looked for in the composition of the blood, in the adventitial, elastic and part of the muscular membrane of the arteries - in the damage to the vase-vasorum. If the arteries are clogged somewhere, it is endoangeitis and vase-valorum are the cause of this (see section "Arteritis").

The role of the skin in the overall Pathologies

Although Dermatology has long used all the discoveries of normal and pathological histology, microbiology, biological chemistry and animal experiments, but the state of our etiological and pathogenetic knowledge of skin diseases is still very sad. Indeed, what do we know about the pathogenesis of eczema, neurodermatitis, psoriasis, pemphigus?

Despite the great literature, the same is true of other cutaneous diseases. Together with Bichat, and among modern authors together with Speransky, we will only have to admit our profound ignorance. For too long, it has been believed that the skin performs only the most simple and passive functions of the protective shell of the body, or, according to Metchnikoff, protective cover. Clinical observations and modern research in the biology of the skin teach us that the skin, this widely developed parenchyma, the boundary between the external and internal environment, carries the functions of vital importance. It is an organ endowed with miraculous and diverse activity.

First of all, the role of the skin in heat regulation is important. It fulfills cleansing functions by excreting numerous substances:

1) some products of intermediate metabolism, microbial toxins and endogenous poisons, products of cellular autolysis;

2) certain medicines, in particular halogens, as well as liquid, dry and emulsified substances.
The skin is able, like a reservoir, to accumulate numerous organic and inorganic substances that can be mobilized for the needs of the body. Due to its permeability, irritability blood vessels and the nervous system, in addition, the skin is a comfortable The way for the administration of certain medications. The most important thing is that the skin is a huge surface area for the application of thermal and balneological treatment that affects the whole body.

But the skin apparently has still other functions and another activity, about which there are many indications from various authors. Considering a large area of skin, ranging in size from 1.7 to 2.6 m, and its biological structure, it can be rightfully considered that this organ does not is not only under the influence of the centrifugal activity of the organism, but also he is able to direct his influence inward. Some The authors believe that the skin can be considered as a large endocrine gland. According to Dejust, the weight of the skin is about 4 kg. Metabolism in it takes place directly through the basalt membrane with the help of circulation of blood plasma and lymph.

Endocrine functions of the skin. Numerous studies have shown that The skin is an organ exceptionally rich in enzymes. Robert, Director of the Dermatology Clinic in Bern, was able to establish 70 enzymes found in the skin. Groups of hydrolases and desmolase. Selye was the first to name a group of skin diseases dysenzymes, i.e. diseases caused by enzymatic violations. Selye isolated persistent lipase in scleroderma and achieved interesting therapeutic results using enzyme preparations stomach and pancreas.

The enzymatic functions of the skin are, as it were, harmoniously connected with the entire enzymatic system of the body, Meltzer established reduction of cutaneous lipase in tuberculosis patients. Ottenstein (Ottenstein) observed an increase in amylases in diabetics.

Reticuloendothelial functions of the skin. Kaufmann, Schreiner, and Wendelberger (Kaufrnann, Schreiner, Wendelberger) studied cytology experimental bubbles from the Spanish fly on the skin.

They established a parallelism between the state of general immunity and the percentage of elements of the reticuloendothelial system (RES) and serous fluid of these blisters. Leszinsky observed increased activity of RES in women during menstruation. He states, that the hypofunction of the cutaneous RES is the cause of the observed menstrual rash due to delayed removal of toxic products.

Immunobiological functions of the skin. It has long been known that the skin is the tightest is associated with the body's protective reactions. Clinical Observations teach us that the skin performs a protective function in febrile diseases. Hoffmann (1919) examines the skin like a grave of microbes. Experience shows, for example, that the development of rash Typhus without a rash is very dangerous. Patients with lupus usually tolerate it easily tuberculosis of internal organs; early syphilis with abundant skin manifestations seem to prevent later complications in the nervous system system.

Generalized dermatitis, such as mercury or salvarsa erythroderma, are serious diseases (similar to massive burns). There is reason to believe that in this case it fell out neutralizing and detoxifying effect of the skin. Bezredka's works are also have shown that the skin plays a specific protective role in the body. With anthrax, mainly the skin is susceptible to infection and only Her immunity alone could be successful. Thus, it is possible to say that one vaccination on the skin is enough to immunize animals.

Bezredka established that intradermal vaccination against strepto-i staphylococcal infection is more effective than subcutaneous infection. Biglieri (Biglieri) and Villegas observed that grafting into the skin of the vaccine against rabies creates a stronger immunity and at lower doses, than subcutaneous. Consequently, the skin apparatus carries specific functions in immunobiological processes. Bezredka attributes these functions of certain receptive cells of the reticuloendothelial layer. (The observation is correct, the conclusion is problematic imagine an impenetrable barrier between cells and extracellular liquid).

Skin pathology is comprehensible only against the background of a general pathology of the body. The skin is the mirror of health and disease. The skin is an important gland of the outer and internal secretion, with a vast surface, richly supplied with vessels, closely connected with all internal organs, with other endocrine glands and connective tissue. It produces heat, electricity, radiation, ohm -- the focus of the metabolism of the set organic and mineral components, it is a source of numerous humoral reactions. The skin reacts humorally to all physical, chemical and microbial agents, whether external or internal. So Let's support the resistance and youthfulness of the skin and we will become more adapted to the fight against all aggressions!

The Malpighian layer of the skin is of great biological importance. Its thickness 30-60 μm, it consists of 6-8 layers. The last layer, the deepest, Adjacent to the dermis, the layer capable of reproduction produces new viable cells, constantly pushes the latter to the surface instead of constantly wearing out in the surface layers. There is a Perpetual Flow From BelowEPX cells that are released on the surface skin from their cytoplasm, like weary soldiers throwing their weapons into the A time of exhausting hiking. Among the particles along this flow there is a well-known cholesterol, which is important for cardiologists factor in the development of arteriosclerosis. In reality, cholesterol is necessary for the formation of many hormones, especially for corticosteroids and for the formation of fat and carbohydrates.

Skin glands. The approximate number of sweat glands exceeds two million. The amount of sweat secreted per day is from 600 to 900 g, can even

reach 1400 g. External temperature, the amount of alcohol consumed fluids, renal failure, circulatory rate, Excitement, fear, anger increase the amount of sweating. During the development of subacute diseases, instead of an attack of fever, there are night sweats.

Sweat contains dissolved or suspended mineral salts, fatty acids, lactic, formic, acetic acids and urea. Sweat glands ensure the constancy of body temperature; at the same time acute attacks of the disease, they remarkably intensify their activities to rid the body of toxins and other substances, which cannot be excreted by the kidneys, lungs and digestive tract. Their enormous work during profuse sweat resembles the desperate efforts of the sailors who pump the water out of the hold of the ship, shipwrecked.

The size of the sweat glands is very different, some of them can reach 3-4 mm, others do not exceed 0.1 mm. a tangle located under the dermis. The ball secretes sweat through a special canal, the sweat gland is supplied with muscular elements. By its structure The sweat gland resembles a nephron. Sweat quasinephron protects the body from the retention of water, urea, sodium chloride.

Counting 500 glands per 1 cm2, the total sweating surface will be about 5 m2. The excreting surface of the buds is 8 m. These figures indicate the important role of the sweat gland system in the body. With In a normal state, sweat contains about 1 g of urea per liter, while in a painful state, the amount of urea increases significantly, deposited as crystals on the surface of the skin. Sweat and tears are the richest For example, the average content of mineral salts in solid residue is: in blood plasma 8 %, urine 30, tissue fluid 64, lacrimal secretion 72 and sweat 75%. Analyze these numbers and you can easily establish a wonderful interdependence between sweat and renal secretion, on the one hand, and the degree of hydration of the ocular liquids - on the other; let us be allowed to draw attention ophthalmologists to this indisputable connection.

In case of excess fluid in the body, the degree of hydration of the eyes and the amount of cerebrospinal fluid decreases due to water loss and minerals caused by profuse sweating and increased diuresis. Remember the frequent cases of cataracts and glaucoma in diabetics. Obviously, that the drying of the lens contributes to the formation of cataracts, and this is the one the same process of mineral salt seepage, which is observed in the the formation of sand in the gallbladder and stones in the ureters. Ophthalmologists should seriously engage in hydromineral farming.

Only the restoration of hydromineral balance in everything, the body will help create a rational therapy for serious eye diseasesney: retinitis, glaucoma and cataracts. Ophthalmologists will be forced to be interested in a complete urine analysis, demineralizing and remineralizing diet, physiological hydrotherapy. Surgical The scalpel will give way to a more modest and more effective general one therapy.

Among the sebaceous glands, 9/10 accompany the hair follicles, and 1/10 opens directly on the surface of the skin. Their excretory duct is short and most of it opens into the hair follicle. The sebaceous glands are lubricated grease the hair and protect the skin from drying out. Secretion of the sebaceous glands begins at the age of five. Their number reaches 250,000, of which 225,000 relate to hair follicles and 25,000 directly provide the epidermis. On the forehead, on the wings of the nose, on the eyelids of the sebaceous glands more than sweat cells, although their total number is 8 times less than the number of sweat glands. When the forehead. the wings of the nose and the front of the chest are too brilliant, there is undoubtedly insufficient fat metabolism and a tendency to to acetonemia.

The sebaceous glands secrete products of intestinal fermentation, iodine, bromine, antipyrine, salicylic acid. The secretion of the sebaceous glands is under the the influence of the autonomic nervous system and under the influence of the brain center, which is located in the wall of the 3rd ventricle of the brain. Facial neuralgia, Trauma to the temple, parkinsonism can cause increased secretion sebaceous glands.

In addition to the organ of external secretion, the skin is a giant endocrine iron. It abounds in enzymes, enzymes that decompose protein substances into polypptids and amino acids. The skin contains oxidases and alkalizing enzymes.

Biochemistry of the skin. The biochemical structure of the skin can be compared to the structure of the connective tissue. This is a colloidal complex, which is located in the state of an organized protein gel. In the composition of the skin, it is important The substance is collagen. Recently, a new Disease state: collagenosis. This is scholastic nonsense. There are no diseases of only one system. The organism is one and indivisible. No one has the right to invent infertile people in the clinic systems. In fact, all aggressive agents change their composition collagen. Erythemal lupus, scleroderma, rheumatic diseases and even serum sickness is a change in collagen, but The dominant factor in these diseases is not the same.

Skin lipoids make up 2% of their total amount. Neutral fats and The fatty acids of the skin make up 5/6, and the famous cholesterol is about 1/6. Fatty acids, free and combined, form a protective acid cover; The basis of the skin's immunity is its self-cleansing. Water makes up 70-72% of the chemical composition of the skin. It contains a significant amount of alkali metals - potassium, sodium, magnesium, calcium; metalloids - bromine, fluorine, iodine, phosphorus, arsenic. All of them are in an ionic state of stable equilibrium.

Since all these substances are in the ionic state and are dissolved in the They do not belong, in the strict sense of the word, to the composition of the skin, but They are part of the intermediate fluid that irrigates the skin tissues. Have to respect their stable balance and avoid the use of rough therapeutic funds.
The skin contains one-third of the body's sodium chloride. In the following cases: persistent weeping eczema and pemphigus you will find in the urine a strong reduction of sodium chloride. Instead of 10-12 g, only 2-3 g per liter, the rest will be retained by the skin. The acidity of the skin is normally higher in surface layers, the pH here is 3.2-5.2, in the deep layers it is more weak, almost neutral.

The skin is the primary regulator in the field of water exchange. With kidney failure, the skin retains water, with myxedema (hypothyroidism), serous-mucosal liquid. Extracts from the skin can act as vasoconstrictors and anti-infectives. It is completely unclear why endocrinologists can find

neither the interest nor the time to engage in the biggest endocrine gland.

Itching, like other so-called allergic signs, is caused by an excess of metabolites accumulated in the body as a result of a number of deep disorders of the excretory tract (renal failure, hypoxemia, liver failure). In all cases of pruritus, analysis urine will show a strong decrease in sodium chloride or urea. Itching is a consequence of an excess of various metabolites in the extracellular liquids.

In our dermatological practice, we do not recommend the use of any vitamins, nor hormones. They can cause digestive upset. Why chasing complex therapy when it is possible to heal with simple and true means? We also do not share the enthusiasm for ACTH and cortisone because they suppress the sensitivity of the skin to toxic and inflammatory effects. This neutralization, this narcotization of skin and general protection means is often accompanied by too much serious diseases. Except for skin injuries and deformities of the skin, its reaction always indicates deep disorders in the body.

The stratum corneum of the skin protects it from the penetration of water and chemicals substances; Due to its acidity, it protects the deep epidermis from development of microbes and fungi. Less acidic areas (with an increase in pH) - armpits, genital folds, anal circumference - more than are predisposed to infections. Other layers of the skin, where the pH is lower (3.2-5.3), better protected. This saving acidity is the result of activity sweat and sebaceous glands, which deliver the necessary fatty acids. In corneous substance, oxidation occurs, which is necessary for a constant of impeccable acidity. Therefore, it is necessary to take into account The importance of providing the skin with sufficient oxygen during treatment skin diseases.

The skin breathes. Experimentally, you can kill an animal if you put it in an atmosphere of carbon dioxide or hydrogen sulfide, even if you leave your head in an ordinary atmosphere. If you varnish a person, he will begin to suffocate, The heartbeat will slow down, the temperature will drop and death will occur. In In this case, death should be considered as a consequence of a combination of suffocation with heat loss.

The skin is the organ of touch. It distinguishes between superficial and deep touches,, pressure, shape, density, relief of the object. Skin It is a huge surface covered with nerve endings. There are fewer sensory nerve plexuses in the epidermis than in the dermis. On the sensitive nerve endings in the skin there are special tactile cells, which form the so-called Wagner bodies, Meissner, Pacini, Timofeev, Golgi. Each of these nerve endings has a specific sensitivity (cold, heat, pressure, draft, pain).

The sensitive nerves of the skin transmit nerve irritation to the posterior horns gray thingsspinal cord. They are accompanied by motor fibers that control facial muscle contractions and movements the smallest muscle fibers in the depths of the sweat and sebaceous glands. Psychologists and neurologists do not bother to think about the currents between the skin and nerve spinal centers. Debilitation or Fade of tactile differentiated sensations is accompanied by significant changes in the psyche. Neurological examination with pins, fixing the anesthesia of some areas of the skin, is too rough. It would be It is logical to observe the difference in temperature and color of different areas of the skin, to establish vasoconstriction, venous stasis, ischemia, or hyperemia. Studying the degree of blood filling in some areas of the skin, Interesting explanations can be found for many neurological and mental disorders.

The transmission of skin sensations to nerve centers can also occur without contact, as if our coverings were affected by means of radiation, and the antennae would be small hairs of skin. Cat with blindfolded, he perfectly finds direction with the tips of his mustache; If the mustache is trimmed, it loses orientation and bumps into everything. Hands and The legs, especially the soft tips of the fingers, have an exceptional sensitivity.

State-of-the-art clinical knowledge based on fluoroscopy and encephalography are largely devalued without art palpation. Without palpation, you will not find local muscle atrophy, aortic points, periarteritis, neck stiffness, sinusitis, pyloric stenosis, duodenitis, cholecystitis, etc. with a small sharp hammer with a rubber tip, should accompany the search for hypersensitive points of the digestive tract, both ureters, spine. Make the skin talk and it informs you better than most studies with devices.

We must never forget that the skin and nervous system, including the brain, they are of the same endodermal origin. The skin is a giant "peripheral brain", a tireless watchman who is always on the alert, constantly notifies the central brain of every aggression, every danger.

Some Reflections on the Problem of Cancer

How it happens Wound healing, turning a purulent wound into normal tissue? Known two possibilities.

1) The so-called primary healing, when the affected area, deformed and full of pus, turns into normal tissue with such structure, with the same functionality as before diseases.

2) Secondary healing, when a certain number of parenchymal cells is replaced by connective tissue elements that penetrate blood and lymphatic capillaries by newborns.

If scarring occurs in areas with a high functional surface, such as in the lungs and pleura, functional activity is not fully restored. Scars after Disappearances of acne, pustules, boils do not pose great hindrances for the corresponding functions.

But if the recovery ends with the formation of rough scar tissue, e.g. in the pancreas, adrenal glands, thyroid gland, pituitary gland, ovaries, then the connective tissue, instead of preserving its protective role, suffocates parenchymal cells and provokes fatal cases.

In the brain, where each neuron is a microfield of explosive forces, General Staff of Logic, a super-radiophonic center with 14 billion radiophonic receivers and transmitters that continuously send orders to each cell, each tissue, non-stop receive signals from the most tiny dots of our body that put things in order card index of our memory, plan and manage our physical and intellectual work that create, dream, in this wonderful an ensemble that surpasses all electronic machines in grandeur and depth In this brain, every scar, even the smallest one, is accompanied by difficult to restore the normal course of the main functions organism. Under the apparent immutability of tissues, there are processes that the meaning of which we are only beginning to understand with difficulty.

Just as the life of plants is subject to the orders of the roots from below, so is life complex organism is controlled by the neurons of the brain from above. It is well known that the cells of our body are regularly renewed. The ability of cells to reproduction does not stop after their maturation. Thus, each Digestion of food causes temporary hyperleukocytosis, birth leukocytes. The formation of new liver cells after surgical intervention, kidney hypertrophy is known, developing after amputation of a diseased kidney. Hypertrophy in this case is not consequence of an increase in the size of kidney cells is the appearance of new cells.

It must be assumed that almost all cells, except, perhaps, the brain cells, retain their embryonic character, their embryonic abilities growth and development. We keep a constant source of rejuvenation, but we are not able to control it. embryonic cells is monitored and constantly managed by the vigilant vigilant brain, it serves to protect the inviolability of the body.

Before each aggression from the outside, whether it is an infection or an injury, the body builds a defense system in order to, on the one hand, destroy the invader, and on the other hand, to restore the losses inflicted. In the case of tumors, on the contrary, the same organism seems to contribute to its own destruction. Having stopped his splendid protection, his miraculous regulation, it is as if is working on its own destruction. He sends into the cluster of the original newly formed cells capillaries, arterioles, arteries with their branches to nourish tumor cells that multiply rapidly and growing into large tumors.

The body (its brain) does not fight these deadly phenomena, it supplies tumors with sufficient nutrition. He gives his own to the enemy supplies, their weapons, their own lines of communication, as commander-in-chief, who betrayed his country and betrayed it. Confusion and numbness begin army, confusion in the headquarters of the brain. It reminds me of sad days Hitler's invasion in 1940, the brain of the nation was paralyzed. Same The same thing happens at the birth of malignant tumors.

Such observations force us to look for explanations of these phenomena for outside the area where the first cluster of malignant cells. Is it not possible to consider that the system of protection depends on the supercenter, controlling, commanding, and organizing the struggle? If this the supercenter for some unknown pathological reasons does not perform more of its task, then in the areas of the affected tissues there is a uncontrolled activity and as a result excessive reproduction of tumor cells. It can be assumed that the origin of of this "delusion" of the supercenter must be sought in its change metabolism as a result of overstimulation or the influence of some endoagent from another area of the brain.

The increase in cancer cases in our turbulent era can create mental climate, which is the cause of these brain diseases. Viruses, lack of nutrition, the action of harmful chemicals serve as secondary factors. Restore the brain if you want to take action It is logical against malignant tumors. Remember that the thickness of the wall blood capillary does not exceed one micron (micrometer), Remember that the line between life and death is so fragile when you consider A huge number of emotional shocks that are daily transferred to the during all the years lived. To free the body from malignant tumors, first of all, we need to free our brain from false concepts, to change the attitude to the nature of tumors. First of all, you need to restore All the possibilities of regulation and control of the brain. And we are not unarmed.

In 1886, the first institute was established in Moscow for the study and cancer treatment. About a hundred years have passed since then, now there are at least 400 cancer institutes in the world and at least 200,000 oncologists devoted their lives to this problem. There are leagues in every country fight against cancer. Every three years, cancer specialists gather for solemn convention to sum up the results of their diligent studies that are practically zero - the result of innumerable zeros!

Why we are facing research failures for a century, undertaken for the most part by capable and active people? Cause Very simple: a cancer cell was studied separately. They did not bother themselves It is good to get to know a cancer patient with all his endless reactions. A when limited to the study of a single cell or a single tissue as a isolated organ, always a neobituary is obtained, and never - biology.

You should always think about fatigue and loss of connective tissue ability to perform its protective role (in the case of adenoma and epithelioma), as well as with the anarchic uncontrollable growth of the connective tissues in sarcoma. But tissue fatigue in the first case is disturbedIn this case, the The speakers in the second are equally subordinate to the supercenter, which, instead of In order to think about salvation, the defense of his fortress, he gives the order to open the fortifications.

On the basis of our long medical practice, we allow ourselves to Assert what is needed in all cancer treatment facilities review your work. Examining tens of thousands of patients with cavernous open or closed tuberculosis, we have never seen any one case of lung cancer. On the other hand, in patients with malignant tumors we never, neither at the time of examination, nor anamnesis, no traces of pulmonary tuberculosis were found. Is it accidental coincidence or incompatibility of tuberculosis infiltration with reproduction of tumor cells? We tend to accept the probability of the second

hypotheses.

In our opinion, the living space formed under the influence of exo- or endogenous factors, creates an opportunity for anarchic reproduction of epithelial or endothelial cells. With the development of tuberculosis in front of us is the destruction of cells epithelium through Koch's bacilli (CD) and their toxins; when the cells of the alveolar or bronchial epithelium are destroyed, microcaverns, a living space where logically cancer cells develop. In histological sections, this is never they find it. How can this fact be explained if the following is not allowed. BC and their toxins, by destroying epithelial cells, can probably weaken intoxication and biological dynamics of other epithelial cells reduce their ability to reproduce and block access to the development of cancer. This is for experimental medicine and for therapy Another conclusion is revealed. Maybe oncologists will try to treat through BCG of animals artificially infected with cancer. Maybe in clinic will try to treat stomach cancer with cautious doses of BCG.

Lung and breast cancer is curable if conventional treatment is applied in parallel with hyperthermic baths with yellow turpentine solution and hot chest wraps.
A normal healthy cell can be considered as microscopic a tissue unit surrounded by a membrane, the permeability of which is especially it is high in actively multiplying cells. Such a cell has destructive and synthetic functions (microsomes, genes, lysosomes, mitochondria) and the energy center. It is under constant the influence of living conditions (connections), as well as humoral factors, controlling bioregulators, hormones, vitamins. Chemical groups in cells are real receivers of orders coming from the think tanks.

A cancer cell devoid of vital connections contains altered receptors subject only to the influence of humoral substances. Metabolism of a cancer cell is characterized by increased glycolysis, a decrease in the ability of to oxidation and reduction, hyperhydration, permeability of the shell and changes in synthesis processes.

Hyperthermic baths could reduce the hyperhydration of cancerous cells and cause the cytoplasm to dry out accordingly. Old An anti-diabetic regimen (a temporary reduction in carbohydrates) could Reduce intracellular glycolysis - an important source of cellular energy. The use of protein therapy for lung and breast cancer does not give such results, such as hyperthermic baths. Colchicine and podophyllin are still in the study period. Uretan and arsenic have a well-known effect on the tumor, but do not stop further growth.

If you try to induce cytostasis in a cancer cell, pycnonec-rose, delay mitosis and at the same time not take care of increased blood circulation or the mobilization of all the body's defenses around the cancer cell, and on the elimination of the remnants of the decay of tumor cells, it is impossible to achieve successful cancer treatment.

Attempts to find an antidote to cancer remain fruitless because The strategic key is the cancer cell, the cancerous tissue, not the a person affected by cancer. There is a huge literature on cancer cell and a few minor works on a person with cancer. Here what is the reason for the failure of all efforts that have lasted about a hundred years.

The idea of introducing BCG injections into general cancer treatment poses a problem dosage of this vaccine. In the medical literature, there are descriptions of many too violent reactions after the first vaccination - strong local inflammation and softening of local regional nodes. Baumann explains this by an increase in the number of microorganisms in 1 ml of the vaccine. Since 1951, this number has increased from 30,000 microbes per 1 ml to 100 000. Baumann requires a reduction in the concentration of microbes and stresses the importance of establishing a permanent relationship between the killed microbes. He rightly believes that the optimal The reaction can be at a minimum concentration. In addition, he mentions the studies of Strom and Spiess, who the method of labeled isotopes ascertained the accumulation of microbes after vaccination in the lymph nodes of the hilum of the lungs, bronchi and lymphatic network of the lungs.

We believe that this massive accumulation of microbes is indisputably a shock that should be avoided. In cancer treatment, we offer a dose of 30,000 microbial bodies for the first vaccination. Before and after vaccination It is necessary to arrange the removal of tumor metabolites. Within three days before vaccination should be given 3 times a day, two teaspoons English glycerin in 150 ml of mineral water an hour before the three main ones meals. After vaccination, the patient should be prescribed a diet of fruits and vegetables for 4-5 days.

If clinically and radiologically a decrease in tumors, it is necessary to wait 3-4 weeks, continuing hyperthermic baths and general treatment. If the tumor shrinks rapidly, you need to wait until at least 4-8 weeks before repeating the vaccination. Have to avoid overloading blood and extracellular fluids with metabolites decayed tumor cells, it is necessary to avoid poisoning the body protein toxins.

If the general condition improves, if the urine test does not find an increase in urea and uric acid (an increase in these substances in the urine indicates cell breakdown), then you can repeat the vaccination with 40,000 Since BCG therapy for advanced cancer has great importance, then it is worth being diligently studied by doctors, Moreover, there is no risk with this treatment. However, the application of BCG is contraindicated in intracranial and intra-abdominal cancer.

Reflection on abdominal cancer. In plants, respiration plays a huge role in the rearrangement of carbon chains, and consequently in the synthesis of cytoplasmic proteins (by M. Champigny), assistant of the Faculty of Natural Sciences of the State University of France). Oxygen Involvedt in the accumulation and breakdown of amino acids. Labeled atoms make it possible to trace the integration of carbon dioxide in intermediate substances of respiratory or photosynthetic metabolism.

It was impossible for us to understand why we could achieve a cure for cancer lungs with hyperthermic baths and hot chest wraps cells and why it

was impossible to achieve a cure for abdominal cancer cavities. Now, more informed by the work of Madame Champigny, who highlighted the role of oxygen and carbon dioxide in the intermedian metabolism of amino acids, this mystery has become explainable to us.

In the pulmonary capillaries, oxygen resorbed from the alveoli remains relatively pure, very little mixed with other ingredients blood plasma. The lymphatic vessels of the lungs are not overloaded, blood plasma can easily push its metabolites through capillary therapy in lymphatic flow. In the lung, an increased influx of oxygen is able to burn, re-oxidize cancer cells, while increasing resistance of healthy cells.

In the abdominal cavity, the oxygen pressure in the blood plasma is weaker. Here plasma is overloaded with food metabolites, brought in part lymphatic vessels of the intestinal villi, partially by metabolites, accumulated in the portal vein basin. Thus, there is no enough space for oxygen molecules. Add to this the bowel movements that mechanically irritate cancer cells, and you You will easily understand that in the case of abdominal cancer, it is necessary radically reduce the inflow of so-called strengthening nutrients: It is necessary to prescribe a diet based on plant-based carbohydrates, -fruit juices, avoid foods rich in fiber, give very little protein and fat.

By reducing the number of metabolites in the capillary system, it is possible to increase the oxygen pressure in the visceral plasma, establish favorable conditions for the combustion of malignant cells, and strengthen healthy parenchymal cells. With all the painful phenomena, it is necessary first of all to deal with the restoration of normal proportions between the volume of oxygen and carbon dioxide, it is also necessary to normalize the permeability of blood and lymphatic membranes capillaries. Outside this problem of treating malignant tumors, all diseases provoked by degenerations of parenchymal organs give up when sufficient oxygen is supplied and eliminated metabolites.

The difference between a healthy and a cancer cell has been established for a long time. But there are no conclusions Experts did not make a sharp difference from this. We are far from claim a definitive solution to the problem of cancer treatment. But we were guided by some guiding thoughts; on the basis of a general view of the the importance of cancer cell hyperhydration, increased glycolysis, decrease in the oxidative capacity of the tumor cell, we came to the acceptable therapeutic concept that can do no harm and represents the first attempts at rational cancer treatment.

Natural Self-healing

In cells with their nuclei, mitochondria, deprived of sufficient oxygen supply, overflowed excess metabolites, with too dense or too permeable membranes, which change the degree of osmosis and diffusion between the cytoplasm of the cell and the blood plasma, the rhythm is disturbed selective penetration of essential nutrients through membrane and the energy balance is reduced.
By increasing the flow of oxygen to the cells, stimulating capillary systole, increasing flows and exchange "back and forth" between blood and lymph, on the one hand, side, and the intracellular environment, on the other, organizing the elimination of intracellular waste, we can protect the integrity and energy of the cytoplasm, nucleus, mitochondria and membranes. This is a real therapy for all diseases without exception, which does not cure, but modestly and obediently opens the way to self-recovery.

The anatomical substrate of self-healing is the number of embryonic cells in the body that are not affected by painful aggression. Functional The capabilities of embryonic cells are limited by the integrity of the nuclei and mitochondria. Synergy of brain centers and undisturbed dynamism embryonic cells is the basis of self-healing in all painful disorders.

By self-healing, we mean the restoration of anatomical structures and normalization of the following functions:

1) restoration of normal circulation in capillaries, arterioles, and venules;
2) restoration of the normal rhythm of opening and closing of venous valves in large, medium and small veins;
3) normalization of the functions of the sweat and sebaceous glands;
4) normalization of the motor and sensory centers of the head and spinal brain;
5) dilation of closed pulmonary alveoli;
6) restoration of the caliber of renal tubules filled with metabolites;
7) restoration of the rhythm of oscillatory movements of the diaphragm, improvement of functions of the gastric mucosa, which secretes not only pepsin and hydrochloric acid, but also performing an anti-anemic function;
8) decrease in the volume of the blood lakes of the liver and spleen, containing reserve blood;
9) restoration of normal blood circulation in the capillaries of the liver;
10) normalization of the activity of tired phagocytes.

Leukocytes, taking into account their number and mass, should be they are included in the system of digestive organs. Without phagocytosis, the final the conversion of some nutrients would be impossible. It is striking that enterologists did not bother to pay attention to the The huge role of phagocytes in the digestive process. Leukocytes digest not only the residues of nutrients, but, in addition, are the line of defense when entering the gastrointestinal tract infectious or toxic elements.

Normalization of the listed anatomical and physiological structures cannot can be achieved by pharmacological means alone, only balneotherapy with a range of different baths, hot chest wraps cells, cold on the back of the head and visceral hydrotherapy (use of various mineral water) are able to create conditions self-healing.

In order for self-recovery to be realized, one should not forget about mental and emotional balance of patients. In an excited restless patient, normal functions will be underestimated and the improvement of will come much later than the mentally balanced patient. The authority of the attending physician, the attention he will show to anxiety of the patient and his surroundings, play an important role in the process of self-healing.

When the structures of all the above functions, which we study have devoted their long lives, are in order, then this means that The human body becomes invulnerable and no microbes attacking will not cause the disease. Every time prolonged fatigue will change one or more structures, each time they weaken functions, the doors to infections and intoxication.

Antigens, antibodies - all these demons of modern microbiology in In most cases, they are protein formations that appear in the degeneration of tired cells or with unbearably severe overload. I I would like to offer clinicians and pathologists a hypothesis about the pathogenesis leukemia.

Remembering the string of patients affected by this disease, I was surprised the fact that most of them liked to eat well and drink well. It can be assumed that in the last phase of digestion, phagocytes due to constant intake of insufficiently digested food numerically progressively increase to complete the final stage digestion. It is quite natural that the bone marrow, the cradle of leukocytes, is forced to produce tens of thousands of new leukocytes in order to replace functional insufficiency of already existing leukocytes. Then bone The brain, the hypertrophy of which should be temporary, begins already produce white blood cells in abnormal numbers for no reason.
Various forms of self-healing. In the event of pneumonia, neither Staphylococci, neither streptococci, nor pneumococci are ever a decisive factor in the development of the disease. These microbes are constantly in the sinuses, throat, bronchi and bronchioles. While the volume of breathing is sufficient until it falls below 2 liters in a child and 3-4 liters in an adult humans, microbes are quickly phagocytosized, enveloped by mucus, secreted by the mucous membrane of the bronchioles and bronchi, and are excreted from the with the help of breathing.

But an oxygen reserve is also needed in the areas of the lungs that are not affected inflammation. In most cases, pneumonia is prone to subjects with poor inhibited breathing.

Examination of a large number of patients by our team since 1952 in Paris showed that almost everyone had very weakened breathing. The atmosphere of Paris is reinfected. And we think that inhaling soot, gasoline, factory smoke, as well as radioactive particles, causes paralysis ciliated cilia of the trachea, bronchi and tiny bronchioles. This paralysis combined with a decrease in the amplitude of diaphragm movements is much more more dangerous than billions of microbes. If you unlock the aperture, restore blood circulation in the alveolar capillaries, as well as in the capillaries of the bronchioles and bronchi, then it is possible to restore the ability to remove harmful particles from the body, mucous secretions along with microbes.

If the paralysis of the ciliated eyelashes lasted for a very long time, if Breathing has been weakened for too long, breathing can be restored cause real pneumonia. Accept it as a salvation a beneficial reaction. After a few days of fever, convulsive cough, you will achieve an increase in the volume of the chest, increased rib mobility and inhalation strengthmuscles and, as a consequence, this is an increase in the volume of breathing. However, such results are achieved in a few months, but completely change the future of patients.

Now a few pathophysiological remarks. Paralysis of ciliated cilia prevents the secretion of harmful particles that fill the bronchioles and alveoli. These particles, due to the dryness of the inhaled air, become dry, petrified. Their clumping together can lead to the formation of tiny stones, "pneumolites". After a series of hot chest wraps and injections of an aqueous solution of camphor, these micro-pebbles and dust begin to liquefy. One part of them will be excreted with sputum, the other - absorbed, resorbed by newly opened capillaries, which can cause an increase in temperature, since protein particles absorbed by the blood cause the same reaction as microbial toxins.

When the last harmful particles are removed, the saving pneumonia will disappear and the patient will disappear after the illness will turn out to be stronger and completely healthy.

Changes in life conditions and diseases

Disappearance in In civilized countries, croup pneumonia is considered as a large achievement of modern therapy. From the beginning of our century to the end of the First World War, clinicians knew that pneumonia only affected strong subjects, with overflowing vitality. In asthenics Pneumonia was observed much less often.

According to modern medical terminology, pneumonia was a disease hyperergic. It was the body's dynamic response to microbial and thermal aggression. To limit vasodilation with subsequent the formation of stagnation in them in order to prevent massive invading microbes, the body mobilized thrombin to accelerate exudation of fibrin and inhibition of the action of protein auto- and microbial toxins. The enemy army was surrounded. In addition, protective fever accelerated biochemical reactions and stimulated motility of leukocytes with their proteolytic enzymes. It was a storm in an organism full of the strength and wisdom of its tissues.

Now we are seeing the reverse development of pneumonia, but at the same time we have and a marked increase in cases of capillary bronchitis (bronchiolitis), which was extremely rare before the era of antibiotics. This disease are rarely detected because it requires careful auscultation,

replaced, unfortunately, by silent X-rays.

The disappearance of hyperergic disease and the growth of progressive asthenic disease is an eloquent consequence of the general decline of the civilized world. This is a consequence of extreme abuse antibiotics and vaccinations. Negative factors include add sports with its mania of records and - let me be allowed to say - an increase in the number of cars. Nicolle spoke about various types of diseases. Changes in living conditions, decrease in energy Acute illnesses in sthenic subjects turn into asthenic and already inevitably chronic in subjects drained of blood blind sports medicine chasing ostentatious records.

Since the beginning of the era of antibiotics, we have been witnessing a progressive variability of classical disease patterns. At present, we very rarely we encounter a genuine disease, with a certain etiology and development, with a clear anatomical substrate, and finally, with appropriate treatment and prognosis. The "individuality" of diseases is not are taken into account. Vascular thunderstorms and convulsive storms subside, they are not paid attention to and they give way to chronic ones rebirths.

Adapting to the impetuous rhythm of modern life, the body a person begins to avoid dynamic battles with various aggressive factors; he tries to "cooperate" with the enemy, he leads a "double game" in anticipation of the liberatory therapy. In reality It is a question of the true adaptation of the whole organism to the conditions changed life.

"Diseases of adaptation" (Selye), covering only diseases endocrine system, make up only a small part of hormonal disorders among other, much more

Chapter 5
New Medicine
The Wisdom of the Body

In the works on physiology, one can occasionally find information concerning the important role of autoregulation of physiological processes. In the works on pathology there are numerous descriptions of a large number of disease processes. They talk about the etiology, benignness, seriousness of diseases and they do not even raise the question of natural self-healing.

Teaching physiology cluttering with descriptions of laboratory equipment, indigestible biological formulations. It suppresses In the thoughts of the future doctor, even the rudiments of the initial idea of mechanisms of self-regulation in the human body. Thus, physiologists and doctors, who are overloaded with petty details, unable to fit these trifles into a grandiose perspective life.

Clinical teaching, in which extreme specialization prevails, saturates the students' thoughts with endless blood samples, bioscopy bodies, very controversial, dubious laws, and here natural self-healing is never mentioned. Teaching deafened by the noisy advertising of the chemical industry, offers students of widely used chemical and therapeutic agents, weakening the body's own resistance.

Therapy has forgotten the autopharmacology of the body. There is an inexorable a witness to the harmfulness of modern therapy. Its name is "hospitalization". Speech We are talking about diseases caused by staying in hospital wards. This The absurdity is well known: institutions created for treatment, sometimes themselves are sources of infection. And the conscience of public safety, and The conscience of the army of doctors remains calm and serene.

In order for physiological thinking to become clear, it must within the framework of its studies to include the idea of autoregulation. Clinical and therapeutic thinking must be subject to the omnipresent self-healing and autopharmacology.

The unhealthy abundance of the pharmaceutical arsenal must give way the use of a minimum of drugs that do not harm the body, but stimulate its defensive reactions to remove the blockade from the mechanisms of autoregulation.

Our therapy is based on physiological hydrotherapy, detoxification and respect for autoregulation.

More than a hundred years ago, the great French clinician Trousseau I conducted the following experiment in a medical clinic. During the year, he led 50 % of all patients with the same disease without drugs, and the other 50% he treated patients with the same disease with ordinary medicines. Percentage of recovery - was the same in both groups. This wonderful The lesson is completely forgotten.

Now, armed with sensible hydrotherapy, the ability to increase oxygen flow from the outside without oxygen pads, ease of pH change extracellular fluids through renal elimination, we can make better and bigger than our unforgettable teacher Trousseau.

Reduce the amount of medicines by 90%, build in each city hydrotherapy facilities, organize at every large plant diet and you will achieve significantly less occupied beds in hospitals. It would be possible to turn the majority sanatoriums into rest homes for overtired and convalescent patients and organize hygienic re-education in sanatoriums hypodynamic patients. State and Social Budget providedI would have been reduced by 20%.

The idea that illness is cured by natural forces was expressed by Hippocrates (466-377 BC). Belgian physiologist Leon Frederic (Fredericq, 1949) stated that every functional The violation itself activates the compensatory apparatus, which neutralizes and repairs the damaged organ.

There are a huge number of miraculous mechanisms in the human heart to maintain the body's stability, despite sometimes significant changes in external and internal factors. Everything is provided in the body man for his protection from both wild animals and microbes (Cannon).

The rule "do not damage" means: respect the resistance of tissues and humoral composition. Man is surprisingly protected against heat, against extreme cold, against microbes, but it remains defenseless against cruelty, envy, against the stupidity of people.

Crisis of medicine

Instead, to erect and enlarge the Tower of Babel, full of small details, of course, interesting, but not important for our therapeutic activities, clinicians need to think about large resources, large spaces, great speed of reaction of our organism. It is necessary to radically change the prospects of physiopathology. Our Not 50-60 kg of the patient's live weight is waiting for help, but 200 hectares of colloidal irrigated surface, on which 140 hectares are irrigated outside and intracellular fluids.
These surfaces are like lakes with living organic water. These are the organs the surface of which is far from our classical ideas - the heart has a weight of about 350 g, kidneys 75 g, brain 1400 g, skin 6 kg at surface of 2.6 m. The sizes, the numbers are correct, the prospects are na?e and illusory.

Myriads of cells, myriads of myriads of diastases, biochemical reactions, countless splits, countless dizzyingly fast restorations, countless explosions at every point of this ultradynamic landscape are nourished, ventilated, and purified by countless an army of cells that are the source of hunger, thirst, sensations, thought, art, love, crime, sublime self-sacrifice, If we remain pretentious, if we keep our ultra-scientific if we are not filled with amazement at these miracles organism, we will remain small helpless craftsmen with with their little plastering works, inflated by pseudosciences, locked in the Tower of Babel, where biochemists, physiologists, support the "elephant-frog dialogue".

Before chronic diseases, modern medicine, despite this The great achievements of recent years are almost powerless. Staying modest gardeners on the two hundred hectares entrusted to our art, trying to equalize the energy balance, improving the soil, directing irrigation, ventilation, soil drainage, we achieve significant results. The role of pharmacology will then remain very, very modest and always harmless.

Continuing the invading pharmacological bacchanalia, we will come to the the final collapse of dehumanized and technicalized medicine. In the clinic, students need to be taught deep observation, it is necessary to teach to interpret the patient's gaze, the expression of his face, to notice dryness or elasticity of the skin; It is necessary that inspection, percussion, auscultation, palpation have again taken their dominant place, it is necessary to almost give up magical X-rays, need to go back to to learn the physiological explanation of morbid signs, it is necessary think again about the meaning of the wrong rhythm, you need to evaluate the quality vital forces, to establish the boundaries of surfaces, poorly irrigated, poorly ventilated, poorly drained; you need to learn to reckon with it again with a history of illness and, first of all, it is necessary to restore energy balance. Everything else will be done by the body.

In order to become effective, medicine must become free from all pseudo-scientific complacency. Forget the main thing, delve into the details, to distinguish them with impeccable precision and at the same time to neglect the essential is to show the unforgivable frivolity. A broad view is the basis of planning and successful implementation. Specialists who are familiar with the technical accuracy of parts, live and act in a world of mirages, deal with small patches, forgetting about the main problems.

We cannot change anything in the structure of cells, tissues, organs. But we We can remove mechanical obstacles - stones, stenosis, blockages and exudates. We can avoid the formation of mechanical obstacles without knife, with the help of periodic general examinations of the body and preventive therapy. In chronic processes degeneration, progressive atrophy of tissues and organs with the help of chemotherapy, we will never be able to stop the sclerosing, deforming processes.

We can do a lot with restorative therapies vitality, which increases energy balance. Our powerlessness to change the structure of organs and tissues requires us to revise teaching descriptive anatomy. 90% of the existing descriptive Anatomy is useless for doctors and surgeons. Completely unnecessary to know Memorize every little artery, every little nerve.

When a small vessel is cut during the intervention, it is necessary to apply ligature, of course, needs to be run from the incisions of the terminal arteries, not creating a vicarious anastomosis. But the multiplicity of anatomical terms greatly overwhelms the heads of future doctors. It is necessary to limit knowledge of anatomical terms to a minimum, but it is necessary to significantly Deepen basic knowledge of irrigation, oxidation, nutrition and elimination (metabolites) of tissues and organs.

Histophysiology, cell life, tissue life must be taught teachers who neglect dead schemas but are passionate about the mighty flow of the river of life, respect for the processes of life, admiration for the natural forces of the body (Hippocrates). When Diagnostic and therapeutic vision will be freed from infertile statistical knowledge, when you understand that a diagnostician should be engaged in functional disorders, when you will be able to assess the degree of hypoxemia, the approximate volume of blood enclosed in blood lakes liver and spleen, when you establish a retention by means of a urine test urea, uric acid, sodium chloride and calcium, excess or lack of fluid production when you get used to looking at the skin as an

organ for the excretion of pathogenic substances and as a peripheral brain, When you understand the great value of hydrotherapy, you will become real doctors.

In science, as in literature, even conservatives, even doctrinaires are compelled to guard the continuous burning of the creative fire. If the fire search is extinguished under the ashes of routine, arsonists are needed, who again will light a dying fire.

Chapter 6
Arteritis Clinic

Huchard As early as 1908, he established the importance of innumerable peripheral hearts. Rouget emphasized the muscular character of the cells that carry it Name. For Tinel, the Rouget cells are neuromuscular apparatus. Capillary contractions, rhythmic capillary systoles are indisputable for both Tinel and Clarke.

Zweifach, according to Laborit, emphasizes The role of metaarteriole sphincters (strictly speaking, the term "precapillaries") would be more accurate). Evans gave a detailed description capillary sphincter in the human retina. The capillary as at its exit from the arteriole, and at the junction with the venule it narrows. In arterial loop of the capillary is a narrowing, this sphincter (I prefer the term "valve") can reduce blood consumption; in the venous loop The sphincter at the junction with the venule narrows and causes in the capillary stagnation and then expansion of the venous loop.
Think of each capillary as a microheart with two halves ? venous and arterial and with their respective valves and you will understand The great importance of these peripheral hearts for normal and pathological physiology. To neglect this phenomenon means neglect the crucial part of blood circulation. (Great names are quite often, alas, they cover up great ignorance).

Respiration and nutrition of tissues, all gas and liquid exchanges are in the dependence on capillary circulation and on the movement of interstitial liquids that are a mobile reserve of capillary circulation. The place given to capillaries in physiology manuals, very little, although it is in this part of the circulatory network that The most important phenomena of circulation: the function of the heart, arteries and veins is reduced to transit of blood to the capillaries, while the life of tissues depends on capillaries. S on the other hand, the walls of arteries and veins, their integrity, their nutrition and Oxygen saturation is very much dependent on vasa-vasorum, and these are the capillaries that nourish the adventitia, half muscular and elastic membrane of the arteries.

It is for this reason that I take the liberty of asserting that sympathectomy is an antiphysiological intervention that can to be replaced and is already being replaced by balneological therapy, effective. Capillaries, vasa-vasorum are active and living organs. Their The cytoplasmic epithelium has an autonomous ability to be reduced; Biologists are well aware of the ability to contract and live cytoplasm. But there is another function of the capillary endothelium, and it is its purposefully changing degree of permeability, regulation absorption, filtration and excretion of various substances.

Endothelial cells divide all ingested substances into retained and highlighted. They allow only gas, salts and water to pass through. This is the first thing A prerequisite for tissue health. When Endothelial permeability is impaired when selective permeability of the endothelial membrane is paralyzed, the cells die from overload. Hyaline, fat, pigment, calcareous degeneration are determined by the rapidity of the development of capillary disease - capillaropathy.

Asher, Kalikava, Zvereva, Hamzaeva, cited Baillard (1953) showed that the removal of the cervical sympathetic The ganglion reduces the permeability of the capillaries, despite the expansion arterioles. This is enough proofindependence of capillaries and their independent activity. Despite the dilation of arterioles, they act in opposition to the latter, reducing their permeability. Bayard believed that the life of the endothelial cell, its disorders have great importance. But this is always little thought about.

Histological studies have found nerve endings around the capillaries. Sensory sympathetic innervation is undoubtedly ends in Rouge cells, perhaps in the endothelium itself (Tinel). By According to Leriche, the vasomotor of capillaries plays a dominant role in the circulatory system. His surgical work is based on this concept Strategy. Capillaries nourish and oxygenate the sympathetic system (ganglia, sympathetic nerves and their endings), but not vice versa: not Sympathetic plexuses nourish and supply oxygen to the capillary walls.

Consider the relationship between the sympathetic system and the capillary kingdom And you do not hesitate to recognize the primacy of capillaries. If you accept This point of view, you will also accept the therapy directed primo loco to restoration of capillaries, for capil larotherapy.

Bayard has a great merit - attracting the attention of doctors to fundus capillaroscopy. With the help of a capillaroscope Fortin ophthalmologists can state the onset and development of cerebral capillaropathy. Here is a beautiful observation by Bayar. The first disruption of capillary circulation is manifested in the disappearance of rhythm (capillary asystole). As soon as the damage appears capillary endothelium, cell life is suppressed and anoxia occurs. Even if the blood flow is still ongoing, the movements of the capillaries are imperceptible. The normal rhythm of pulsation no longer exists.
At rest, many capillaries are closed, while in an active state all they open up to such an extent that some of them are able to receive 700 times more blood than at rest. From this reserve of closed, dormant, inert capillaries carefully applied capillary therapy is able to "suck" oxygen and nutrients substances and fill with new life the stunned, suppressed and deformed vase-vasorum.

Imagine a capillary flow multiplied many times, imagine murmuring of blood waves in the arterial loops of capillaries, dilation of arterioles around the islands of damaged tissue, imagine the discharge metabolites, cell residues entrained through venous loops capillaries, and you will understand the life-giving role of capillary therapy.

Deschamp mentions that in the intradermal and subsapillary plexus, there are capillary loops that remain empty in the normal condition and serve as a backup safety depot. This is - resting Krogh capillaries. Increase in the number of trains during the holidays is a negligible value compared to more than a hundredfold number of reserve capillaries. Extremely elevated permeability of the capillary endothelium leads to edema.

Marceau Cervelle (1952) in his excellent book "Vascular pathology" states that the treatment of arteritis can only be palliative; it cannot remove the blockage and only temporarily stops spasms. In his opinion, drug therapy should not be last more than 6 months. Cervel is equally categorical in his assessment heat treatment. It acknowledges its appointment in the period of intermittent lameness and after surgery. "Arteritis of the lower extremities, writes Servel, is not only a disease exclusively limbs, but also disease of the brain, coronary and mesenteric arteries. After surgery, such patients should be carefully monitored and to cure" (p. 63). That's right, treat. But with the help of what methods?

If treatment has been powerless to stop arteritis of the lower extremities, why it will act on the arteritis of the cerebral arteries, coronary arteries and mesenteric arteries? Why are vasodilators, carbon dioxide, which did not help before operations, will be life-saving in mutilated amputated organism that has undergone physiological and Moral shock?

The tragic delusion of these great minds, these tireless workers with their extensive medical and universal culture is that they focused their pathophysiological thought on vasomotorics, on the role of the sympathetic nervous system and on endocrine factors. These are was necessary. But that was not all, not the most important, not decisive.

If arteritis is a disease of the arterial system, if Each local arterial disease should be considered as expression of general arteritis, then local, partial treatment, directed at the isolated arterial segment, will remain, unfortunately unsatisfactory, and the clogged arteries will spread inexorably beyond the area operated by classical methods (sympathectomy, gangliectomy). Arteritis is a single and indivisible.

Rational physiological therapy of arteritis becomes possible and effective, if the following are taken into account: the role of vaza-vasorum, expenditure respiration, removal of metabolites from the walls of the arteries, movement of the diaphragm, composition and movement of extracellular fluids, quantitative and qualitative diuresis test, skin activity, and finally huge benefits balneotherapy and capillary therapy, which every patient can to carry out at home instead of a course of hydrotherapy at a resort, too much short to be effective, and too expensive to be long.

Vasa-vasorum. The walls of arteries and veins, their integrity, their nutrition, their Oxygen saturation depends to a very large extent on vasa-vasorum (i.e. from capillaries).

The selective permeability of the vasa-vasorum creates a strong barrier to protection of adventitia, muscular and elastic membranes, irrigated through capillaries, from the penetration of harmful substances and large molecules, which are in the blood. Each contraction of the arteries causes confusion blood supplied by the vasa-vasorum with the blood of the greater circulation, which irrigates the intima of blood vessels.
An artery is capable of contracting: each segment of the artery has its own an engine that provides rhythmic and continuous contraction. These are - muscular and elastic membranes. They need most of all a continuous and sufficient flow of oxygen. If oxygen not enough if breathing is disturbed due to some pulmonary diseases (bronchitis, bronchiolitis, pleural adhesions, bronchoadenitis, consequences of whooping cough), blood brings less oxygen to the muscles of the arteries, Each muscle fiber becomes hypoxemic and an excess of asphyxiating carbon dioxide.

Pleural excursions and chest breathing, supported by diaphragm movements, rhythmically change the lumen of the pulmonaryvessels and facilitate the flow of blood into the inhalation time (at the moment when the lungs have the most air, they also have most of all and blood).

Blood circulation in the portal vein is enclosed between two areas capillaries: on the one hand, gastrointestinal and splenic capillaries that receive arterial blood and pour it out in the branches portal vein, on the other - sinus-like hepatic capillaries, flowing into the large hepatic veins.

The presence of the spleen and liver, the existence of numerous arterial and venous anastomoses in the intestinal mucosa make the portal area veins with an extremely peculiar system, which plays a primary role in the role in the overall distribution of blood mass and may include more 50% of the total blood volume.

Is it possible to establish rational treatment of arteritis without taking into account the the possibility of stagnation of half of the total blood volume in the blood lakes of the liver and spleen? Is it possible to establish the correct treatment of arteritis without taking into account the The role of the diaphragm? The diaphragm, that powerful muscle pump, revitalizes blood circulation in the liver, spleen, intestines and pushes out the venous blood from the abdominal cavity through the portal system to the chest cavity; We are talking about the second venous heart, which pushes lymph into the thoracic duct.

In every patient with arteritis with respiratory insufficiency, it is necessary first to improve respiratory metabolism in order to relieve hypoxemia of arterial muscles in order to free it from excess carbon dioxide (purpose: daily hot chest wraps, heating pad on the area liver, intramuscular

injections of 1-2 ml of aqueous solution of camphor in buttocks).

The arterial muscle has its own phases - rest (relaxation) and work (abbreviation). During the resting phase, some of the lactic acid is burned, The other part, having passed through the grock-phosphoric acid, turns into glycogen; In this way, the muscle fiber receives energy again and again ready for action. If during the resting phase there is insufficient amount of oxygen, lactic acid will not burn completely and hypoxemia arterial muscle will be accompanied by the accumulation of lactic acid and glycogen stores, Millikan showed that in a normally functioning muscle of the vessel (remember the vase-vasorum) the supply of oxygen begins soon after its contraction and are accompanied by myoglobin dissociation. Myoglobin gives up its oxygen to the muscle 1/5 s after the start of contraction, i.e. myoglobin rhythmically gives its oxygen 300 times per minute.

Considering the direction of the small biochemical movement, you will understand Importance of the Highway Pathway: Lungs-Myoglobin-Oxygen-Lactic acid-arterial muscle membranes, and maybe it will be easy understand our statement about the benefits of chest wraps and the introduction of camphor solution, because both expand the pulmonary capillaries and increases the respiratory excursions of the lungs. Thus, the The first step to renewing oxygen in the muscles of the arteries and increasing the energy balance of the arterial walls.

Movement and composition of extracellular and intracellular fluids. Weight plasma in the area of blood vessels is determined in 5% of the weight of the whole body. All Blood, including its formed elements, makes up 8.6% of the body weight. In arteries, the volume of blood does not exceed 10% of its total volume. The same in veins. ASteel 80% fall on arterioles, venules and capillaries.

The normal life of the arterial walls depends not only on sufficient the quantitative content of blood in them, but also on the state of the blood and from the exchange between blood and extracellular fluids.

Capillary exchange ensures the migration of fluids between lymph and tissue fluids. Acceleration of fluid leakage through the walls capillaries increases blood viscosity and blood clotting tendency, the formation of microthrombi.

To defeat circulatory decompensation, it is necessary to use capillary therapy to restore the normal course, normal filtration, normal absorption between capillaries and extracellular liquids.

The use of mineral waters, the dosage of which depends on the full urine test, from the pH of the urine, together with a salt-free fruit and vegetable diet, without proteins, or with salt and with proteins, directly affects the composition extracellular fluids and indirectly - on the structure and biochemical composition blood.

Since the brain is limited by an inextensible cranium, Any increase in the volume of blood in the brain network must be compensated by equal displacement of cerebrospinal fluid into the central spinal cord canal. This possibility, however, is not unlimited. And although It is known that, on the one hand, the brain regulates normal blood circulation in all parts of the body, on the other hand, even Functional disorders of cerebral circulation can cause residual effects, and therefore it is necessary to establish a preventive treatment of each patient with arteritis in order to preserve the not yet affected arterial areas.

To do this, hypertensive patients need to be prescribed leeches behind the ears once a month in the fruit regimen compiled according to the data of the urine analysis, and capillary therapy with baths that reduce high blood pressure. Hypotensive patients are prescribed baths that increase blood pressure. Such a Modest therapy can achieve optimal blood pressure in the functioning capillaries (vasa-vasorum) or recanalization clogged arteries, or neoplasms of collateral pathways, sufficient to restore impaired blood circulation.

Changes in the volume of organs. The organs of our body are constantly changing their volume. Lungs - during inhalation and exhalation, liver and other abdominal organs cavities - during digestion, muscles - during physical work; All organs decrease in volume during local contraction of blood vessels, all organs increase in volume during their expansion.

Physiology has long been concerned with vasomotorics. She did not accept attention to the fact that the contraction and dilation of blood vessels is a a constant force that cannot be neglected, which must be take into account when listing all the factors that govern blood circulation and the movement of extra- and intracellular fluids. Each A change in the volume of organs causes a mechanical push and a wave-like movement in extracellular fluids.

If the movement of extracellular fluids is slow, the precipitation of (precipitation) of colloidal chains is increased, as well as thickening collagen and fibrin fibers. This is the essence of all diseases precipitation. Precipitation of substances dissolved in extracellular fluids are formed when these fluids stagnate, in the blood or in the lymph. Pneumonia is an extremely acute deposition of fibrin. Thrombosis is First of all, changes in the velocity of blood flow not only in the vascular network, but also in the entire aquatic, humoral economy of the organism.

Swelling and reduction of organs is an additional hydrostatic force. During the development of pneumonia, the process of hepatization, rapid and continuous gel formation in the alveoli. In the The time of the drop diuresis in pneumonia is a dramatic situation.

A hepatized lung stops the movement of the diaphragm, prevents portal circulation, slows down hydrolysis in the intestinal villi, completely disrupts intermediate metabolism, stops elimination sodium chloride.

If they forget about humoral disorders in the body, if they do not prescribe a diet of fruits and fruit juices, if they do not do hot breasts wraps (without mustard), if routine treatment is adhered to pneumonia with antibiotics, then the fever will disappear, but resorption hepatization will remain incomplete, the patient's future will be darkened chronic pneumonia, hepatic and biliary attacks and, possibly, phlebitis or arteritis, the starting point of which will be microthrombosis of venules and arterioles.

Physiology has an indisputable right to measure everything measurable. The clinic, however, is obliged to take into account all the phenomena of life even those that are not measurable. General blood circulation, changes in the volume of organs, vasoconstriction and dilation, movement, oscillation and mixing of extracellular fluids, pulsation of vacuoles in cytoplasm, secretion of the glands, all continuous movements of the extra- and intracellular fluids - all this takes place in a vicious circle, in the pre-existing orbits, as the motion of the planets in their orbit and as the rotation of electrons inside an atom.
To understand in order to take and apply capillary therapy, you need to give is aware of the importance of the pathophysiology of the skin. The life of the skin, its Numerous functions are a special area of dermatology.

In the Internal Medicine Clinic, in the Surgical Clinic in the Case Histories The skin is examined only to mark the scars. But the skin Far from being a simple protective covering. It is an organ with a miraculous and diverse activities: participates in the thermoregulation of the body, has the function of purifying the blood from some metabolic products, emits liquids, emulsified and solids, possesses enzymatic and endocrine functions. In addition, the skin carries out immunobiological functions. Clinical observations have shown that the skin it performs protective functions in rash fevers.

In his studies of skin immunity against staphylococci and streptococci Bezredka found that antistaphylococcal and Antistreptococcal vaccines injected into or onto the skin give the best results than injecting them under the skin. Antivirus Bezredki is completely forgotten. It's a pity. It gives faster results without subsequent results complications observed under the influence of antibiotics.

Capillaropathy

Capillary Circulation is the main and, perhaps, the only point of exchange substances. The capillary endothelium has secretory properties, young Cells develop significant phagocytic activity. This ability periepithelial cells and myoepithelium cells were discovered by Rouget. Cells of his name they are able to narrow and even clog the lumen of capillaries.

The number of open capillaries is the key to the pathogenesis of each process rebirth. At rest, 1/4 of all capillaries. If any organ or any tissue is sufficient supplied with blood, the capillaries in this area begin automatically narrow. This is how the radiator is closed in an overheated room.

Capillary diseases, which Phar called capillaritis, but which I I prefer to call it capillaropathy, make up the most important chapter in pathology. We can rightly say that capillaropathy lies in the the basis of each painful process. Without capillary pathophysiology we have to stay only on the surface of morbid phenomena and nothing It is impossible to understand either in general pathology or in particular pathology.

The founders of the T?ingen school were able to use the capillary scope to show that with a wide variety of morbid phenomena it is possible to to ascertain capillaropathy. Disorders of capillary physiology are so common and so often observed that they should be to consider not a secondary phenomenon, not an epiphenomenon of various paintings diseases, but, on the contrary, one of the main elements of organic disorders in the patient, whatever the disease. In my opinion, it's not about to find a specific therapy for a precisely defined disease, But it is to restore the impaired functions of the diseased organ regardless of the diagnostic label. And the reason for these functional disorders lie mostly in the capillaries.

Spasm or stagnation of the capillaries of the fingers leads to frostbite, goosebumps, dead finger symptom, Raynaud's disease; spasm of the labyrinth capillaries - to Meniere's disease. The same applies to dizziness in brain anemia. The same capillary stagnation occurs when the blocked parenchyma, due to anoxemia, followed by massive absorption decay products of dead cells and protein toxins.

Patients affected by glaucoma have numerous disorders of the capillaries of the skin. Eclampsia during pregnancy is a consequence of capillary stasis in the uterus, skin and peritoneum. In prodromal period of hemorrhagic nephritis, there is a massive constriction of capillaries. Such nephritis is the second stage of general capillaritis. Increased blood pressure is the result of a huge contraction capillaries. In the case of nettle fever, pathological dilation of capillaries.

Blood pressure in the capillaries is quite measurable physiological size. With the help of the Shamber manometric microneedle, you can determine the height of blood pressure in the capillaries of the nail bed: In a normal state, it is equal to 10-12 mm Hg, in hyperemia - rises to 40 mm, in Raynaud's disease it decreases to 4-6 mm Hg.

In a functioning organ at any given moment there are always open and closed capillaries. There is no inflow around closed capillaries oxygen, cell metabolites are not carried away by the blood, they remain in the tissues on the place. In the absence of oxygen, metabolites irritate the walls of capillaries, the tone of which decreases, the capillaries expand and enter them oxygen-rich blood. Then the metabolites that caused the expansion capillaries, are carried away and oxidized. The tone of the capillaries increases again and they narrow.

Siedenhoff, who worked in Vienna for Zeiss, recorded on film of systoles and diastoles of capillaries. And the great French As early as 1903, the cardiologist Huchard established rhythmic capillary contractions, speaking of them as "innumerable hearts". Krogu in Copenhagen with unparalleled patience, through careful observations, with iron logic, to show and explain the activities of these "innumerable hearts" in the heaven of physiology.

This is truly the "Milky Way" life.

Starting from the age of 40-45, there is always a progressive decrease in the number of open capillaries. This progressive drying is anatomical and physiological basis of aging. Man is becoming more and more dry, dehydrated. This is the time of rheumatic diseases, neuritis, angina pectoris, arteriosclerosis (progressive closure of the vasa-vasorum), hypertension.

Capillary therapy

Physiological the importance of capillaries, the significant length of their surface, calculated by the Mole at 6300 m, their length is 100,000 km in the body their dominant role in blood circulation, continuous systoles These innumerable peripheral hearts are presented for therapy Great features.

Violation of the physiology of such ubiquitous scattered capillaries does not is a secondary factor, an epiphenomenon of various paintings diseases, but, on the contrary, one of the main elements of deep disorders of a sick organism in any disease. If found a remedy for dilating capillaries when they are compressed by spasm, a remedy stop paralyzing atony when they are dilated, if found the ability to improve their lack of permeability or curb them violent permeability, then the nutrition of tissues and cells will be improved, the supply of cells with oxygen is established, tissue drainage is facilitated, and energy balance of the affected tissues; if improved, adjusted tissue nutrition, the cells in the state of bionecrosis, and the elimination of cell toxins in the avoiding slow but dangerous protein intoxication.

Krogh's fundamental work on capillaries has stimulated and stimulated us, and 1921 We began our physiological and physiotherapeutic research in the field of capillary therapy. We studied one by one capillarotropic effect of diathermy, short wavelengths, ultraviolet and infrared rays, galvanic and faradic current, iontophoresis, darsonvalization, in short, the entire physiotherapeutic scale electrical apparatus.

We have firmly established that the application of electricity produces an effect strictly local, limited, purely physical. Warmth of general medical has a physicochemical and physiological effect with a great range of action. Electric heat is a single-string musical instrument, balneoheat is a keyboard. By adjusting the water temperature, By changing the concentration of substances dissolved in therapeutic baths, you have the ability to adapt balneotherapy to each disease.

Therapeutic baths stimulate the autopharmacology of the body (term, introduced by the Belgian physiologist Bacca), which is the basis of the spontaneous extraction and eurhythmia of the sick organism. Every disease It begins with dysrhythmia - a rhythm disorder. In a healthy body, everything rhythmically: breathing, pulse, capillary systoles, oxygen release, biochemical reactions. To correct the rhythm means to act on the inflow the required amount of quantum energy to cells and tissues. You will say To me: It's too beautiful to be true. Fortunately, this is true.

The therapeutic value of heat treatment has been known for two thousand years. But the period of heat treatment is limited to the season (May-October), The duration of the courses is too short (3 weeks) to produce effective and long-lasting action. If heat treatment at the resorts, despite its short duration, it gives remarkable results, Why didn't they think about organizing systematic heat therapy for of all patients suffering from chronic diseases?

If it is not always possible to carry out treatment with warm baths at home conditions, then why not think about organizing for this purpose hydropathic clinics operating all year round? We must not forget that nounThere is a close connection between the human body and water. Everyone The animal organism came out of the sea, it carried away the salty water of the sea, it lives in it.

Water is a protective factor of the body, provides flexibility and elasticity tissues, it is a mediator of heat regulation, conducts nutrition and removes secretions, saturates tissues, without which it is impossible to exist cytoplasm, in which crystalloids are dissolved and the suspension colloids, dissociation of electrolytes into ions with increased reactivity. Consequently, water has a primary physiological significance. U In adults, water makes up two-thirds of the body weight. Thanks to water, we We do our daily outdoor toilet, but water also provides washing of tissues and their continuous nutrition.

The remedies I use are heat and cold, mainly in local or general baths, the duration and temperature of which Easy to adjust. They are wonderfully accurate, easily variable On this basis, I accepted and developed the works of Schweninger on hand baths, Winternitz on cold baths and Walinski - about hyperthermal baths. Hyperthermic baths are the most powerful and effective method in cases of arteritis, diabetes, glaucoma and chronic rheumatism. To to reduce the duration of Valinsky's baths, after a number of years research, found the formula of a turpentine solution that allows you to vary balneotherapy, which in its effect on the capillaries really deserves to become a weapon of therapeutic arsenal of medicine of the future.

Blood diseases

Blood cells are born in the bone marrow of the sternum, ribs, vertebrae, in the diaphyses tubular bones, in the lymph glands and in the spleen. Total Weight of bone marrow is 2 kg. erythrocytes. After two months, the entire number of red blood cells is renewed.

The human body contains 25 trillion red blood cells. Young red blood cells in the bone marrow retain the nucleus and dynamic metabolism. The formation of hemoglobin in the erythrocyte is accompanied by reduction of the nucleus and its displacement. Adult red blood cell without nucleus leaves the brain and begins its life in the circulatory system. His Metabolism becomes less dynamic. Without a core, it cannot reproduce. When an erythrocyte ages (its life lasts from 42 to 127 days), it passes into the capillaries of the liver and spleen and settles in the endothelial cells of the

walls of blood vessels.

The capillary endothelium is an accumulation of reticuloendothelial cells. These cells keep the integrity of the vascular system intact, as bridge and road engineers, and clean capillary roads by phagocytizing aged red blood cells. Lack of the ability to proliferate It is characteristic of the picture of red blood in its disease. We are talking about decrease in the number of red blood cells in hypochromic anemia, normochromic anemia and Birmer's ganerchromic anemia. Enlargement of red blood Taurus, hyper-globulia is not a blood disease, but a deficiency reticulo-endothelial system of capillaries of the liver and spleen. Dying erythrocytes are not phagocytized by the capillary endothelium and continue to circulate, making their way through overcrowded capillaries, obstructing and slowing down blood flow. From time to time, these veterans call congestion in the movement of blood and hemorrhages.

Erythrocytes and nephrons. Every day, 200 billion people are born and die erythrocytes. 2,600,000 renal nephrons are required to be removed daily 200 billion corpses of red blood cells. Each nephron is required to remove 200,000 corpses erythrocytes, and hematologists, locked in their special branch sciences, do not think to take into account the condition of the kidneys when prescribing treatment of blood diseases. In order to successfully treat blood diseases, First of all, it is necessary to arrange the removal of dead red blood cells, in order to to avoid intoxication of the body with protein toxins.

Platelets. The volume of a normal neutrophil leukocyte is 60 times larger, Than the volume of a platelet, the volume of an erythrocyte is 20 times greater than the volume of a platelet platelet. And, despite its infinitesimal size, each A grain of this platelet dust is quite a living being, It has a very active metabolism. Remember that in one cubic millimeter of normal human blood there are 230 thousand platelets, which their total number reaches astronomical figures, that their vigilant The activity is always ready to protect every injury to the injured walls of blood vessels and that they secrete a substance, for example, serotonin, narrowing the lumen of capillaries, and thromboplastins.

Until now, the main function of platelets was considered to be their participation in the blood clotting. However, we have to admit that platelets are able to perform some other functions unknown to us; must be admitted, that they have a very well-defined cellular structure with their own own metabolism. Platelets assimilate and process proteins, they must remove the remnants of their metabolism, for which An influx of oxygen is required.

Platelets are the field of activity of some enzymes: dipeptidases, tripeptidases, alaninglicinases, protein enzymes, enzymes of the phosphatases. In women during menstruation, these diastases are blocked, blood clotting is slow. Modern anticoagulants cause inhibition of diastases in platelets.

Since we can hardly penetrate into this orchestration of diastases in myriads of platelets and imagine them as synergistic, coordinated, then disturbed, then rhythmic, then unbridled in diastatic storm, we are forced to state our impotence to change anything in this world of infinitesimal forces representing one of the innumerable substrates of mysterious life.

Every new biochemical discovery encourages us to be more humble and be more prudent in our therapeutic interventions, which is not excludes effective therapeutic options if we choose to stay on the paths of general physiology available to us.

The role of hidden renal insufficiency in diagnosis and therapy

Laboratory is sufficiently rich in research tools and biological constants, to determine the composition of blood and urine well. Some constants play important role in diagnosing and determining the doctor's course of action: are, for example, the constants of urea and cholesterol in the blood. It is known that, according to Widai's laws, an increase in urea above 0.70 g/l indicates moderate azotemia; if urea exceeds 1.0 g/l, the prognosis becomes threatening; if urea exceeds 2 g/l, the patient finds himself in a more than dangerous position.

Despite the new achievements of physiology, which established a constant diffusion of blood urea in the lymphatic vessels and lymph in the extracellular vessels liquids, the clinic had not yet realized that the time had come to revise the interpretation of the percentage of urea in the blood.

If blood dialysis is performed in uremia, passing all the blood through the a filter that retains urea, again injecting purified blood into the vein, doing this for 24 hours, the amount of urea eliminated reaches 300 and 400 g. lymph and extracellular fluid and gradually returned to the from the degree of dialysis into the blood. Such a temporary cleansing from urea now is well known, but no one thought that the urea constants, in entities are very variable and do not give precise indications either for diagnosis or for treatment. Profuse sweating, diarrhea, vomiting, causing dehydration, increase blood concentration and give higher urea values, not corresponding to its volume in the body.

Complete urinalysis. This is a very simple, elementary method that gives it is possible to calculate approximately, but with a much larger credibility, the total volume of urea in the body. This is a complete analysis urine in a person after three days of a regular diet with the prescription of proteins, fats and carbohydrates according to the physiological norm. If after these three days with normal water excretion of 1200 ml in women and 1.500 ml in women Men find that the amount of urea excreted is 12 g instead of 25-30 g in 24 hours, then it can be easily concluded that Urea is retained in the amount of 13 g in 24 hours, which is 390 g per month.

To stay at the level of metabolism, it is necessary to take into account the following ratios: if the patient excretes 0.30 g of uric acid in 24 hours, its detention for a month will be equal to 9 g. of the usual dietary regimen releases sodium chloride in the amount of 5 g for 24 hours instead of 12-15 g absorbed with food daily, then it retains 7-10 g of sodium chloride per day, i.e. 210 g per month.

With the help of this simple elementary calculation, we can state and illuminate many serious diseases before the body is oversaturated excess urea, uric acid and sodium chloride in the blood, and not only in the blood, but also in the lymph and in extracellular fluids. Numerous cases of cerebral edema force to resort to trepanation skulls, but could have been discovered and treated without surgery intervention. How many skin diseases (eczema, pemphigus), antineurotic currents, cases of asthma, cardiac decompensation (so called heart, this is a false term: it does not exist in isolation cardiac decompensation, it always includes the myocardium, arterioles and capillaries), how many cases of angina pectoris, hypertensive crises can be avoid and cure if take into account the percentage of allocation in of sodium chloride, urea and uric acid.

In relation to asthma, which is only a syndrome, not a separate one disease, the following classification can be adopted.

1) There is asthma, the cause of which is the retention of urea or urinary acid, or sodium chloride, or several of them at once, and which decreases after the restoration of renal functions. It is a renal species asthma.

2) There is an asthmatic syndrome caused by irritation in the lungs (due to pleurisy, neglected focus of chronic pneumonia, bronchiectas), the presence of tracheobronchial lymph nodes, stopping lymphatic circulation in the thoracic cavities.

3) There are also cases of asthma caused by circulatory and trophic disorders of the liver and spleen, greatly enlarged in volume that made the diaphragm immobile, causing portal stagnation and obstruction of venous outflow that compresses both bases of the lungs and entails followed by a pronounced anoxemia of the lungs.

A complete urine analysis also reveals the degree of calcium excretion, which is why it necessary in case of osteomalacia, chronic rheumatism, disease Bekhtereva. In this way, it is possible to detect both enhanced elimination and too much retention of this substance by the body.

Calciuria. Normally, the human body excretes some Amount of calcium: a little through the skin, more through the intestines and more a certain amount - with urine. Calcium excretion through the skin is low studied. With scleroderma and some forms of skin atrophy, there are increased infiltration of calcium from the skin with dystrophic consequences. Excretion through the intestine is very important: several grams. It continues during the famine. Acid fermentation in intestines reduce calcium excretion. The vegetable regime increases it.

At the equilibrium of calcium in the body, urine contains from 180 to 200 mg/l. Starting from 250 mg/l, we already have a pathological condition. Study calcemia is not enough to find out the movement of calcium in the bones and its use by tissues. Calcium studies should be supplemented by the study of calciuria. Each hypercalciuria indicates increased calcium consumption in the body. In malignant metastases tumors, the determination of calciuria is very important, especially with multiple bone metastases or, for example, with kidney tumors; Abundant metastasis in the "spines" causes osteolysis.

Increased urinary calcium excretion accompanied by disorder of the urinary system, can cause the formation of kidney stones. In case of illness Bekhterev, with deforming progressive hypertrophic rheumatism with hyperostosis, a decrease in calcium excretion in the urine and simultaneous retention of it in the bones and periosteum. In the case of deforming progressive hypotrophic rheumatism with multiple erosion bones in the urine there is an increased excretion of calcium.

Such an analysis provides more accurate and more detailed information than basal metabolic studies, which indicate only the consumption of oxygen and the elimination of carbon dioxide. This complete urinalysis plays a huge role in assessing the development of pulmonary tuberculosis. If the protein fraction (urea, uric acid) is increased if the patient excretes for 24 h 30-35 g of urea, 1.2 g of uric acid - in front of us is blooming tuberculous process in the lungs. This is an increased amount of proteids indicates massive destruction of lung tissue. Same It also refers to hyperthyroidism.

Diabetes is almost always accompanied by renal failure in the the ratio of the protein fraction and the excretion of sodium chloride. Reducing appropriate treatment for kidney failure, can be done quite soon reduce insulin doses and achieve faster and longer results.

Microscopic examination of centrifuged urine sediment determines the degree of loss of renal substance, if epithelial or renal cells, red blood cells, cylinders, leukocytes. The so-called colibacillosis is often accompanied by renal insufficiency.

It can be easily cured by oxidation of urine, which changes its pH, alternating regimen (4 days of oxidizing mode, 4 days of alkaline mode, and so on in 24 days), consequently, by gradual adjustment of the renal tissue, nephrons to sudden changes in urine pH (biochemical gymnastics).

It should always be remembered that a third of the kidneys pass through the glomeruli of the kidneys in 24 hours of all the blood, namely 200,000 liters, i.e. with each systole from 70 to 100 ml blood. In the thinnest renal tubules, the kidneys concentrate urea and other substances to release 1200-1500 ml at an amazing rate urine. Think a little about this huge amount of blood passing through through the kidneys, and you will realize that the renal filtrate is excellent mirror of blood.

There are about 2,600,000 glomeruli in both human kidneys. Diameter one glomerulus ranges from 175 to 250 μm. Glomerular surface is of particular interest from the point of view of filtration. For both The total surface area of all glomeruli is approximately 5000 cm2, i.e. 1/2 m. The capillaries of one glomerulus, elongated in a line, would have 25 mm long, 60 km for all glomeruli in two buds. With age the diameter of the glomeruli increases, but their number decreases. Medium length Albuminuria

, which Cottugno first noted in 1700 In some renal diseases, it still has a large diagnostic value. We regard this symptom differently than and allow ourselves to express the opinion that in cases of insufficient Urea secretions in the urine albuminuria is an important chemical compensation for blood purification. Even acute absent-minded glomerulonephritis can develop without albuminuria or with very mild albuminuria; In nephrosclerosis, albuminuria is mostly is absent or very weakly expressed, and, in any case, there is no relationship between the severity of kidney disease and the magnitude of albuminuria.

The urine of healthy people very often contains traces of protein, which are not always can be detected by ordinary reactions (Heilmeyer, 1946). In the following cases: pathological albuminuria, serum albumin and serum globulin. Origin of albuminoids in Hematogenous nephritis should be sought mainly in serum. Each albuminuria is always preceded by the presence of albumin in the extracellular fluids.

Circulatory disorders of cardiac origin (extrarenal) cause albuminuria due to congestion in the kidneys. It is believed that when hematogenous extrarenal albuminuria, plasma proteins combine with toxic substances coming from the tissues, in order to then be actively excreted in the form of toxic albumins (the phenomenon of excretion, protection of the body).

For changes in blood plasma in diabetic acidosis and in severe malignant anemia may be followed by albuminuria, in which case we We have passive transudation. When the molecular weight drops below 60 000, albuminoids appear in the urine. Bance-Jones albumoses have molecular weight of 35,000. Hemoglobin released from the blood stream, With a molecular weight of 68,000, it is equally able to pass through glomerular membranes into Bowman's capsule and appear in the urine.

In anuria, everything that the kidneys should excrete remains, of course, in the blood and in extracellular fluids. Anuria can be a consequence of insufficient renal circulation, spastic narrowing of the arterioles, and capillaries and extrarenal water loss (diarrhea, vomiting, profuse sweating). A healthy kidney is able to adapt widely to the needs of the body and maintain exactly the same content of water and soluble substances, despite the fact that they come in different quantities.

The diseased kidney loses its ability to adapt. With a strong renal insufficiency, when the specific gravity of urine does not exceed 1010, this density is approximately equal to the desalbu-mined serum. In this way, urine and blood become noticeably isotonic; In these cases, there is a flattening of the epithelium and the tubules turn into in the end, just into a passive membrane, the activity of which corresponds to diuresis in glomeruli, and the impossibility of maintain the osmotic pressure difference between the fluid in the convoluted tubules and in serum.

But when the concentration of blood plasma and urine as a whole is gradually converges, the partial concentrations of each substance still remain somewhat different. Even with severe renal failure, urine does not is simply a filtrate of blood. Diabetics have kidney failure In most cases, it is very pronounced. Hyperglycemia shows that cells and tissues are not able to fix and assimilate glucose injected into the blood.

If urea, uric acid, sodium chloride are not retained only in the blood, but also in the lymph and in the extracellular fluids, then Metabolism in the body is significantly disrupted.

The permeability of cell membranes improves if it is possible to reduce the the number of molecules of urea, uric acid, sodium chloride, phosphates and autometabolites that continue to circulate in extracellular fluids. Then the absorption of glucose by cells increases.

At the same time, they talk about tolerance, but this term is unfortunate. Yes, you can accustom the body to tolerate a harmful substance, but not the absence of of a normal nutrient. Lack of glucose in tissue and cell economy is unacceptable, because without glucose, the cell does not capable of leading a normal life. Glucose is an indispensable source cellular energy. By relieving kidney failure, you can increase glucose absorption and reduce insulin doses.

Functional nephropathy. Various labels are pasted for different diseases kidneys. According to autopsy data, when the kidneys are damaged, there is a degeneration of convoluted tubules in the distal segment, interstitial edema or leukocyte paratubular infiltrate. Rathery speaks of functional non-phropathy, Rebide de Lower - on nephrosis, Bergold-Stich on renal syndrome, G?ther (Gunter) - about miasitis myoglobinurica, By-Water - about the syndrome Krusha. This disease is also called interstitial nephritis.

After summing up the results of clinical observations and anatomical data began to classify them, and then it had to be stated that The term "extrarenal uremia" alone can be used not only to designate Krush syndrome, but also hypochlorine uremia (Blum, 1935), and renal disorders due to dehydrating diarrhea, severe vomiting (stenosis pylorus of the stomach), brain tumors; All this can be combined as a whole under the name "extrarenal uremia". But keep in mind that every time renal disease, there are always many extrarenal phenomena.

There are no isolated kidney diseases. Even a non-penetrating wound liver can cause a painful condition of the kidneys, which are affected by the metabolic disorders.

The decisive factor is always the same: it is the breakdown of proteins, proteolysis caused by mechanical, thermal, chemical shock (myolysis, hemolysis, liver injury). Each violation of the parenchyma of any organ is accompanied by an increase in the number of polypeptides in the serum.

Each cell contains enzymes (catapsin, polypeptidase, dipeptidase, and etc.); which decompose proteids into amino acids, at the same time each The cell continuously synthesizes these proteids. As in an anthill, Some cellular "ants" (enzymes) break down proteids into small ones pieces, and others restore specific cell proteids. In In growing cells, synthesis predominates, in senescent cells - proteolysis. In cell residues, the synthesis of proteids is completely impossible. Proteolysis becomes massive, and the body needs to free itself not only from protein breakdown products, but also from enzymes that reduce protein molecules.

All this army of proteolysates penetrates through the convoluted tubules into the kidneys, and Here, due to water resorption, the concentration of proteolysates becomes significantly more than in circulating blood. Hence the blockage of the convoluted tubules. Albumin secretion, considered a symptom of nephropathy, with which doctors are trying to fight is still liberation from metabolites; It is extremely beneficial for health and for later life. No one tries to fight expectoration when The bronchi and alveoli are filled with sputum. Is it necessary to be frightened when the body tries to get rid of albumin, which is often a compensation

Dermatoses

Yes independent skin diseases. The old medicine under the term "dermal arthritis" understood the relationship between the functions of the skin and the excretory bodies. The humoral idea was still alive.

Now, in spite of the solid work of Peters (1936), Gamble, (Gamble, 1954), the dermatological clinic does very little to deal with the general circulation, functions of the liver, kidneys, oxidation of tissues and cells (tissue anoxemia and decreased blood circulation). She is satisfied very modern term "allergy" and falls into a state of complete "anergy".

Dermatologists' sleep is very deep and very calm. But nevertheless It is necessary to wake up. Unfortunate patients, freed from their eczema, turn to other specialists for asthma allergies of the respiratory tract. Directors, scenery change, but Unfortunate actors - patients are left with their eczema or with their own asthma. Allergies remain!

Dermatology is very rich in reasoning. There is a lot of talk about hereditary or acquired sufferings, nervous disorders, tendencies to humoral flocculation, the formation of intra-organ and tissue deposition, about the state of chronic diathesis. But about capillaries they do not speak, although dermatoses and dermatitis are primarily vascular phenomena; do not talk about kidney failure, which is fully responsible for the humoral flow-culation; do not talk about liver disease, preventing its purifying functions, about neutralizing poisonous about the role of the liver in the disintegration of large molecules into smaller ones; do not talk about the deficit of breathing, do not determine the amount of breathing (good, medium or small); whether there is enough cellular oxidation; do not talk about accumulation of metabolites in cells. Do not deign with their attention accumulation in excess of normal and pathological metabolites, cluttering the skin capillaries, clogging and suppressing them, and disrupting the entire physiology of the skin.

Every skin disease is a secretion of metabolites from the inside out, Each skin rash is a tense desire of the body to free itself from toxic harmful factors.
Skin respiration is the first stage, the first physiological valve, continuously open to keep in perfect harmony with the kidneys and lungs, normal levels of liquid, mineral and gas composition blood, lymph and extracellular fluids.

On the day when Hebra (Nebra) established the first dermatological clinic in Vienna, more than a hundred years ago, when dermatology became a separate doctrine, when the dermatologist burned the bridges between the general medical clinic and clinic of skin diseases, when all the time was growing the number of dermatologists, dermatology was condemned to a century isolation and banishment into the world of lipsticks, rubs and powders. On the same day The truly physiological doctrine of the wholeness of the human organism was rejected.

Occupational dermatitis. Every educated chemist knows The phenomenon of supersaturated solution. A certain volume of liquid can to dissolve a certain number of molecules of the so-called solid substances, if the number of molecules to be dissolved does not exceed the possibility (capacity) of the solvent liquid. If we add to this liquid, even a negligible amount of solid, which must be dissolved, the liquid is immediately supersaturated, which from the state of growthThe ora instantly turns into biphasic condition - suspension.

In occupational dermatitis, especially in workers who have been engaged in chemical enterprises, during respiration, a certain the amount of irritating chemical substances that are deposited on the mucous membranes of the upper respiratory tract (nasal cavities, throat, trachea, large and small bronchi). After a certain time, there is a decrease in the volume of breathing, a progressive contraction oxygen supply and, as a result, a reduction in the body's capabilities burn harmful particles; leukocytes deprived of oxygen are not able to to act as phagocytes.

At the same time, for many years, there is an overload of blood, lymph and extracellular fluids with mechanically irritating particles. In glomerula of the kidneys, which are a tangle of capillaries, in the first intermediate nephritis or other form of renal disorders depending on the degree of toxicity of the inhaled chemical substances, leading to the inevitable degeneration of glomeruli.

Progressive oxygen starvation, progressive reduction the release of harmful substances through the kidneys leads to blood overload, lymph and

extra- and intracellular fluids not only retained by chemical particles, but also protein toxins formed from decomposition of dead cells. We have before us a picture of the general humoral poisoning.

A modern dermatological clinic that never takes into account composition of body fluids, revels in the terms "allergy", "anaphylaxis", "hypersensitivity". All these terms are nothing more than a shameful escape from pathological reality. Every skin irritation, Eczema, acne, furunculosis, pemphigus are caused by the accumulation of metabolites in the blood and other body fluids. If you can't remove these substance, therefore, it will not be possible to rid patients of these skin diseases.

Modern dermatology, not knowing the true pathogenesis of cutaneous diseases, remains helpless. Hydrotherapy, diet, oxygen inflow cure all skin diseases, even congenital ones.

Rheumatic diseases

Spicy articular rheumatism. Anatomically, it is characterized as fresh rheumatic infiltration. The first stage is characterized by granuloma, for which the second is scarring. It could be assumed that the causative agent acute articular rheumatism is latent in the body in the months and even years. Acute articular rheumatism or not ended, or not cured, even if its joint manifestations have disappeared. Many years after the disappearance of fever and swelling of the joints, autopsies, miliary perivascular nodules are found.

Acute rheumatism is actually a chronic disease, with an acute onset. Granulomas are located primarily in the myocardium, in the connective perivascular tissue and in vascular adventitia. Presence of granulomas It is found in vessels of all sizes. A large number of symptoms, both subjective and objective, owes its origin, after all, it is rheumatic damage to peripheral vessels.

It is known that acute and chronic articular rheumatism is accompanied by significant vascular disorders. In chronic cases, the skin often becomes thin, atrophic, transparent, in some cases, on the contrary, thickened, sometimes almost scleroderma. This is a violation peripheral circulation. In the medical literature, these vascular Disorders are considered as the result of functional diseases "trophic nerves". It is more logical after Krogh's work to consider them as capillaropathy, because these skin diseases succumb to capillary therapy with turpentine baths, as well as obliterating endoarteritis and periarteritis nodosa, which have much in common with rheumatic vascular lesions. With true rheumatic neuritis, inflammatory lesions with rheumatic granulomas in the supporting connective tissue of nerve trunks.

Chronic polyarthritis. From a social point of view, it is the most important thing from rheumatic diseases. The pathogenesis of this disease is little known, its nature is problematic. This is a common disease, and not an accumulation of locals joint diseases; It always affects many joints, so It can be assumed that in this case we have in front of us an infectious factor. In medical works, the etiology is not disclosed.

Cases beginning in acute and subacute manners with high temperature, generally proceed more or less favorably. In the following cases: with a sluggish course, without fever at the onset of the disease, the extremities are often They can be cold and wet. There is only a slight (on the 0.2-0.3 ?C) temperature increase. Swelling appears predominantly interphalangeal and metacarpophalangeal joints, then fingers and toes, and finally the joints of the wrist and ankle, and also later - the joints of the elbow and knee. Hip and shoulder joints are affected the most recent.

Inflammation begins in the synovial membrane and in the walls of the articular cavities; Intra-articular exudate is often found, at first liquid, then gelatinous. There is another form, in which intra-articular exudate is less pronounced, but all layers of the joint walls swell. Then there may be a reaction with serious disorders movement of this organ.

Joint injuries are never limited to bones and cartilage. All periarticular histological systems (connective tissue, membrane tendons, muscle elements, nerves, blood vessels) are involved, even in theBeing at a long distance, in inflammatory edema and in further deformity joints. Edema compresses various networks of capillaries, the exchange between them and extracellular fluids, dehydration occurs, usually preceding shortening.

As a result of insufficient blood supply to the muscles, muscle atrophy. This is not "arthrogenic" muscle atrophy, it is not "reflex atrophy", this is muscular capillaropathy, insufficient blood supply and lymph, hence the atrophy. Blood supply and atrophy are restored disappears. It is known that muscle atrophy goes away if the joint is completely cured. Why? Because blood circulation has been restored.

Why look for explanations for this muscle atrophy in vague hypotheses ("damage to the neurovegetative system", "neuritis of the sympathetic system" etc.), when there is an obvious, tangible factor, namely insufficiency of blood supply to the capillary network, with its consequences: anoxemia, lack of nutrition, lack of amino acids, glucose, electrolytes, enzymes, catalytic enzymes, water with normal pH. Here are simple, logical, and basic physiological truths.

Medical thought must be accurate, capable of giving explanations, consistent with applied physiology. The so-called neurovegetative symptoms: feeling cold, sweating of the limbs, pallor of the integument, paresthesias, numbness, skin diseases, atrophy and Sclerosis - all these are various manifestations of insufficient circulation in the precapillary arterioles and in capillaries. We are talking about a blockade capillary circulation, this is capillaropathy, which can be seen and observe with capillarosco-pa and treat with capillary therapy.

By reducing muscular, perineural, intraneural capillary laropathy, regulating the composition of extracellular fluids, crushing by means of balneotherapy for the deposition of toxins deposited in ligaments, tendons, improve the nutrition of periarticular tissues, achieve reverse

development rheumatic disease.
"Impaired peripheral blood circulation plays a role in the clinical picture Rheumatism is a much more important role than was thought until now." (Kahlmeter, 1949, p. 53), Nothing will be understood in the pathogenesis of rheumatism, if they do not carefully study capillaropathy, which is the main and a decisive pathogenetic factor. The results of heat and water therapy can be explained only as capillary therapy. Why use such fantastic terms such as "cytophylaxin", "action oligomineral elements", "stimulation of the neurovegetative system"?

Both acute articular rheumatism and chronic rheumatism are common disease. Involvement of the heart and circulatory system in the pathophysiological processes is by no means a rare phenomenon. In chronic Rheumatism affects the heart in more than 40% of cases. At the same time, peripheral vessels are even more involved in the pathological process, than in the case of acute rheumatism. Research by Scandinavian scientists (Faber, Berries, Jansen, Kahlmeter) it has been established that in chronic rheumatism, there is a pronounced anemia, accompanied by insufficient serum iron content.
In chronic rheumatism, as in chronic pulmonary tuberculosis, A distinction must be made between anatomical and functional restoration of functions. In this case, the goal is to restore functions, rather than the disappearance of deformationsand bones and joints on X-rays.

Treatment. Exclusively drug therapy relieves pain, but not affects the development of the disease. Physiotherapy, heat treatment is prescribed without any criticism. The choice of a resort for hydrotherapy is accidental nature, because in works on balneotherapy it is almost always there is no in-depth analysis of various balneotherapeutic impacts. Mineral or mud baths, underwater shower are prescribed according to schemes without a deep analysis of their physiological actions. In the chapter on hydrotherapy, we try to explain various balneoherapeutic and physiotherapeutic procedures.

First of all, it is necessary to eliminate the physiological deficiencies in various important functions of the body. If if there is a lack of breathing, then it is necessary to restore the volume of breathing. These are is easily achievable by applying hot chest wraps and make intramuscular injections of synthetic camphor (1-2 mg per day) until normal breathing is fully restored. Without sufficient inflow oxygen patient cannot oxidize, decompose to the molecular level neither the nutrients it is supposed to absorb, nor the metabolites, which it must decompose and excrete.

If a complete urinalysis reveals inadequate urea removal, uric acid, sodium chloride, it is necessary to establish the appropriate diet. In the urine analysis of rheumatics, you need to know the amount of excretion calcium. In hypertrophic forms of chronic rheumatism (with exostoses, with calcium deposits in the periarticular tissues) calcium is retained by the body, which is reflected in more or less a sharp decrease in the excretion of calcium in the urine; while at hypotrophic deforming rheumatism (with foci of osteoporosis) and with osteomalacia, calcium excretion increases.

It is also necessary to carefully revive the peripheral circulation of the blood, it is necessary Release the diaphragm, if its movements are weak, with the help of a diet adjust the stool. Such techniques can reduce the number of metabolites, accumulated in various parts of the body and especially in the periarticular tissues.

In order to reduce pain at the first stage of treatment, it is useful once a Put leeches around the affected joints for a month, let blood flow out 3-4 hours. These small bloodlettings, thinning the blood mechanically and chemically (hirudin), revive peripheral circulation, carry out cleansing of metabolites accumulated in the lymph, in extracellular fluids and periarticular depots. This general preliminary pararheumatic Therapy is much more effective than the elimination of septic foci (amyglalitis, sinusitis, alveolar pyorrhea, salpingitis, colitis). More than a million teeth are extracted annually for this purpose. This is not bad for dentists, but hardly for the sick.

Periodic treatment with gold salts, to which "catalytic action", is impractical, because gold, introduced into the body, is excreted with great difficulty and very slowly. In addition, gold salts, unfortunately, quite often cause a by-product effects such as pruritus, erythema, nettle fever, sometimes even dermatitis, thrombopenia, leukopenia, agranulocytosis.
From a purely physiological point of view, there are basic processes that are common to the for all forms of rheumatic disease: degeneration, atrophy, proliferation. In proliferative forms, islands of tissue metaplasia. The common denominator of these anatomical substrates is dystrophy. We can say this: excessive dystrophy is proliferation, and Minor dystrophy - atrophy. The terms "dystrophy", "atrophy" are used, without delving into the physiological meaning of these concepts. Dystrophy means quantitative and qualitative malnutrition. Or some kind of The substance is not enough for normal tissue nutrition, or there is an excess of of some substance has been deposited in the articular cavity or in the periarticular-vascular tissues.

We must not forget that this dystrophy is the basis of all articular diseases, affects not only bones and cartilage, but also muscles, ligaments, tendons, synovial membranes, nerves, blood and lymphatic vessels, intermediate and extracellular fluids. X-ray reveals changes in bones and cartilage. With regard to periarticular tissues X-rays remain mute. Most clinicians who are blinded X-rays that give so-called accurate images, overlook psriarticular dystrophy and are unable to recover normal nutrition of cells and tissues.

Restoring joint eutrophy is the strategic key, with with the help of which you can open the locked door to effective treatment Rheumatic Diseases, Modern Treatment of Chronic Rheumatism.

There is no sadder history than the doctrine of arthritis and rheumatic diseases. These are a story about the complete impotence of medical thought, about complete blindness medical reason. The human machine is thought of as the sum of isolated organs that do not depend on each other, are not interconnected. Until now, the following are prescribed:

1) iodine,
2) arsenic,
3) gold salts,
4) copper salts,
5) sulfur.
6) vaccines,
7) various proteins,
8) radium emanation,
9) massage,
10) mechanotherapy,
11) heliotherapy,
12) blisters,
13) hydrotherapy,
14) surgery,
15) X-ray therapy,
16) short waves (failures),
17) sulfonamides,
18) potassium acetate,
19) lithium salts,
20) galvanization,
21) calcium gluconate,
22) orthopedic treatment,
23) thorium X,
24) hyposulphite injections,
25) magnesia injections,
26) novocaine injections,
27) histamine injections,
28) cortisone,
29) diathermy,
30) nerve cutting,
31) removal of nerve ganglia,
32) bee venom.
33) colchicine intravenously,
34) adrenaline ointment.

Since 1921, there has been a league for the fight against rheumatism in every country. In Over the past decades, a significant number of billions of works devoted to the study of rheumatism have been spent, but The number of patients with rheumatism is not decreasing.

Treatment with turpentine baths can be used in every small apartment with a bathtub. There is not a single bone disease or joints with hypercalcification or hypo-calcification, not There is ankylosis of the joints with muscle atrophy, not a single chronic Blockages of the suck(Buerger's disease), which would not succumb to turpentine baths. This thermal procedure at the patient's home can be organized in the following cases:

1) progressive deforming rheumatism,
2) persistent sciatica,
3) neuritis and polyneuritis,
4) consequences of infantile paralysis,
5) consequences of fractures, disfiguring scars,
6) intermittent claudication,
7) consequences of cerebral hemorrhage,
8) pectoral toad.

In 1929, 8% of the population of France suffered from rheumatism, in England - 14%, in the USA - 18%. It is easy to imagine the loss of working hours, a burden for state and for public insurance. This is in the hundreds millions.

Pathogenesis of chronic rheumatism. Since chronic polyarthritis is often incurable, we have to use all the available in our means at the same time, then one after another, using all new appointments; And there are so many failures and there are no disappointments (Savy, 1938). There are several dozen methods of treatment rheumatic diseases, real therapeutic inflation. Yes another such disease, which is so poorly specified as chronic rheumatism.

Treatment at random, unclear pathogenesis. Why is that? Because a person is thought of as a set of isolated organs, without connection, without synergy, without correlation. Newton introduced mechanics into physics, and physics began its triumphal march. Mechanics is the science of mass in relation to motion, time and space.

When isolated organs are studied and examined, when they want to understand pathogenesis of an individual organ, they are not engaged in biology, but in the real obituary. In case of rheumatic diseases, first of all, it is necessary to take capillary stagnation, since without it there is no monoarthritis, no monoarthrosis, no mononeuritis, no arteritis, no deformities of bones, joints, tendons, there is no muscle atrophy. Capillary congestion is found after cerebral hemorrhages, during the period of stabilization after infantile paralysis, after injuries, angina pectoris, Raynaud's disease, scleroderma, elephantiasis. Secondly, it is necessary remember about kidney failure. No significant reduction excretion of solids in the urine is neither polyarthritis nor polyneuritis, nor osteomalacia. If, after a normal eating regimen in the Within 3-4 days, urine analysis shows that the excretion of solids is 25 g instead of 43 g/l, which means that there is a delay of 18 g/l, from 24 to 27 g per day, from 720 to 810 g/l per month.

Substances retained in the body in this way (urea, urinary acid, sodium chloride, phosphates, ammonia) are deposited: in cavities joints (arthritis, periarthritis, bursitis), in endoneuria (neuritis), in the skin (dermatitis, eczema, pemphigus, sodium chloride retention in the skin), gallbladder (cholelithiasis), in the kidneys (nephrolithiasis, sand in the urine), adventitia of arterioles (hypertension), in vasa-vasorum (endoarteritis).

These fixed substances everywhere in the body shrink cells, strongly slow down blood flow and make the blood more viscous, irritate the axial nerve cylinders (neuralgia), increase pressure in the eyeballs (glaucoma), seep into the crystal (cataract). Thus, it is not There are neither polyarthritis nor polyneuritis without renal failure.

Finally, it is necessary to pay attention to insufficient breathing. With examination of hundreds of rheumatics, we were struck by the fact that a large percentage of rheumatics patients' breathing is very weakened, which in no way corresponds to their normal chest. Their spirometry gives a maximum of 2.5 liters instead of 5 liters when exhaling. This indicates imperfect combustion, relative hypoxemia in all cells, in all tissues. Isolation of metabolites decreased, the decay processes are insufficient, an accumulation of metabolites and the formation of giant molecules occurs with all the pathological consequences. So, without an increase in pulmonary respiration A cure for rheumatism is impossible.

Chronic whooping cough and pneumonopathy

Whooping cough - The disease is contagious on contact, affecting mainly children 3-5 years. A single disease gives immunity. Whooping cough for the most part does not dangerous, it becomes dangerous when it affects the chest and weakened children, when it penetrates into children's institutions (nurseries, kindergartens, hospital). The danger arises with intense convulsions, with encephalitic reactions.

Whooping cough lasts one month or more. It is sometimes complicated by spasm glottis, which can be fatal, encephalitis with convulsions, paralysis.

Classic treatment. Neometis (a type of dry vaccine similar in action on omnadin) is ineffective. Vaccination with concentrated vaccines (20-24 billion barrels) gave excellent results in the United States.

Complications: bronchopneumonia, bronchiectasis. The diagnosis is indisputable. In addition, suppositories made of opium extract can be used for therapeutic purposes and cocoa butter, streptomycin, chloralphenicol. Polymysium is used, despite its toxicity, in cases where streptomycin tolerates failure.

There is no mention of whooping cough in ancient Hippocratic medicine. In 1578 Baylon described whooping cough as quite unusual syndrome. At the same time, many works on whooping cough appeared. At the present time, Time: whooping cough is a disease that is rampant all over our planet. Whooping cough has always been considered in most cases as non-dangerous damage to the body, which does not leave consequences and most often does not give complications. But in reality, the anatomical pathological picture is not like that simple.

The pertussis virus causes massive changes, swelling of the lymphatic nodes, sometimes even continuously progressing. Whooping cough is the beginning stable or developing bronchopulmonary adenitis, which should often be considered as a tuberculosis disease. Chronic Whooping cough is also the cause of a variety of fiber neoplasms connective tissue that destroys the pulmonary alveoli and capillaries with followed by bronchiectasis leading to emphysema and bronchostenosis.

Chronic bronchitis, peribronchitis, emphysema, bronchiectasis can be to consider as remote results of old neglected whooping cough. It is possible to admit the existence of various combinations between chronic whooping cough and tuberculosis. If the diagnosis of whooping cough is undoubted, it is still necessary carefully check whether there is a primary tuberculosis complex.

One of the best pediatricians of our century, who led for 24 years Berlin Pediatric Clinic, Czerny refused to acknowledge specificity of microbial pertussis infection. He spoke in favor of the possibility of cause whooping cough with any saprophytes. He played a decisive role attributed to the central nervous system: excitable, Irritable, spasmodic children react with whooping cough to simple infection in the pharynx. Balanced children with a healthy brain and a normal psyche react even to massive microbial infection with simple pharyngitis. The mob, without hesitation, allowed the contact of the merry, balanced children with children with whooping cough. He was able to prove that cheerfulness, overflowing vitality protect against microbial invasions.

In 1925 I was able to take participation in the work of Czerny. At that time, Czerny was one of the rather modest predecessors of the school of

Speransky and hisof the few epigones, discoverers of psychosomatic medicine.

Until the discovery of the Bordeis-Zhangou bacilli in 1906 as specific causative agents of whooping cough have been described by many different microbes - causative agents of whooping cough, but these microbes could exist only in medical books, without criticism and verification, were transferred from one treatise into another. The magic formula of "Magister dixit" is too often transforms innocent microbes into extremely ferocious predators. But Let's leave the quicksand of bacteriology and return to the clinic - to the true, to the only living and eternal source of our knowledge.

The danger of infection in the catarrhal period is much greater than in the period of convulsive. In the latter case, every mother can make a diagnosis. During the catarrhal period, even the doctor himself may think about a protracted flu, about bronchitis. That is why it is so important for all children with a common runny nose, with cough without attacks should be systematically subjected to thorough auscultation, only not with the help of a phonendoscope, but with a simple wooden stethoscope, determining the sonorous wheezes and whispered voice. With such listening You can offer children to whisper instead of "33" for adults "kitty-kitty" (Rauchfuss).

In this way, a symmetrical chain of swollen vascularized lymph nodes on both sides and along the between the 3rd and 8th thoracic vertebrae.

If the change in whispered speech is very noticeable, you need to immediately isolate sick children, sanitize the focus of infection and carry out Next treatment: hot chest wraps (without mustard), hyperthermic baths.

Pathological anatomy of whooping cough. Pathological anatomy of acute whooping cough does not exist; except for infants, other children do not die from it. But there is a very rich pathological anatomy of the consequences of acute whooping cough with countless variants. Let's try to apply the Hippocrates - to extract several anatomical and pathological conclusions from the observation, well known to those pediatricians who have preserved the gift of interpret clinical phenomena well.

Often it is necessary to examine a child who has had whooping cough for 6 months or even a whole year ago. A small patient begins to cough again when the slightest cooling. Try to gently tickle his throat with a spatula or cotton. A child who has not had whooping cough reacts with emetic reflex. A child who has had whooping cough and has not yet gone away will answer another reflex, a coughing fit. Any irritation of the cavity nasopharynx, whether thermal (cooling) or mechanical (accumulation of mucus in the pharynx), will cause a coughing fit. Pediatric The literature explains this phenomenon as follows: during whooping cough A new pharyngeal arch reflex is formed, which inhibits and replaces the reflex vomiting. This new reflex may be the reason why whooping cough lasts 6-12 months.

The following explanation is more logical and plausible: during the acute phase The paravertebral lymph nodes are in a state of active hyperemia. Vascularization of blood and lymphatic capillaries is very abundant. The nodes are edematous. The pressure on the bronchi, on the trachea, on the alveoli is very great.

Nerve ramifications are subjected to the strongest excitement. Countless "relays" of the nervous network in the paravertebral circuit lymph nodes around the trachea, larynx, pharynx are overexcited, are oversaturated (nerve impulse), and every mechanical stimulus of each point in the network, like a spark in a powder magazine, causes Electric discharge is an explosion of a strong prolonged cough. In chronic phase of whooping cough, at the beginning of the sclerosing process numerous nerve fibers in and around the nodes gradually are compressed by connective tissue and become insensitive, Excitement has no effect, coughing fits disappear. This phenomenon is also known in rheumatic diseases, when after a decline in the articular swelling analgesia occurs, putting both the patient and the doctor to sleep. But Half-sclerosed lymph nodes remain in place, inexorably continuing its ever-increasing fatal effect on the lung tissue. The development of chronic whooping cough is obvious.

The clinic of the acute phase of whooping cough provides valuable indications of pathological development of the chronic phase. During the acute phase, the mucous membranes of the mouth And the pharynx can be red, swollen, in a state of active hyperemia. There is a pulsatile expansion of capillaries in their arterial and venous loops. Percussion and auscultation of the lungs performed immediately After a coughing fit, a little wet wheezing is found with a hard bronchial breathing.

The chest is dilated, the diaphragm is blocked from below, its movements are insignificant. On the screen of life appeared the first image of a small emphysema, which can begin in early childhood along with whooping cough and end in old age as an incurable disease for the frozen medical minds, and vice versa, quite amenable to improvement for doctors, possessing a dynamic mind.

At the end of whooping cough, the sputum becomes viscous and contains a lot of fibers mucus, in contrast to other acute diseases of the bronchi, in which Sputum is viscous at first and becomes more and more liquid towards the end. The consistency of this sputum, the increasing constriction of the bronchioles, Sets the stage for future asthma or bronchiectasis.

Complications of acute whooping cough (pulmonary flushes, bronchi-olithis with cyanosis, with the reduction of individual areas of the chest, with dyspnea, with tachypnea) must be treated with persistent persistence until it disappears completely even the most insignificant acoustic features. X-rays are almost always remains mute in such cases.

If you want to avoid permanent foci of bronchopneumonia, microscopic bronchiectasis, which in the second childhood will become macroscopic, never prescribe antibiotics, reduce to minimum your pharmaceutical arsenal. Apply 2-3 times a day hot chest wraps, arrange daily, and then every other day hyperthermic baths.

Bronchopneumonia is quite common after the disappearance of the acute phase of pertussis leaves islands of induration, splenization of lung tissue in the area of the volum of the lungs. Many cases of the so-called complex hylus primary affect are the remnants of pertussis bronchopneumonia.

There is never whooping cough without accompanying bronchopneumonia. With what Otherwise, it was possible to explain the presence of wet wheezing, which always Is the convulsive phase rich? If we assume that it never happens pertussis without concomitant bronchopneumonia, it must also be assumed that Large indisputable bronchopneumonia always develops on the basis of fusion countless small microscopic islands of bronchopneumoniaThe Constitutional Court foci.

The pathophysiological histology of the past should always be present in the head of the sick as a witness, as an enlightened judge. Complications acute whooping cough if they are not recognized in time, if they are not treated with scrupulous attention, if you do not notice their consequences and neglect them prepare the source of numerous diseases in later life child.

Bronchiolitis (capillary bronchitis). During auscultation, a lot of thin crackles, especially in both pulmonary bases, which do not disappear after expectoration, or after a coughing fit. White, gray and foamy. The clinical picture resembles pulmonary edema in adults. Liver enlarged. We have a congestive liver in front of us.

The prognosis for an infant is poor if not applied immediately hyperthermic bath and other procedure mentioned above. In a child cyanosis and dyspnea are observed. Influenza or measles joining the pertussis, increase the tendency to bronchiolitis.

After recovery, children should be monitored for years in order to even the slightest bronchiectasis could be noticed and prevented, or atelectasis. In this way, chronic bronchitis can be avoided, emphysema, asthma, bronchiectasis in adults.

Bronchopneumonia. Earlier than 6-7 years of age, it is very rare to to detect classical auscultatory signs. There is no dullness of sound, nor bronchial breathing. One can only note a slight difference in breathing between the right and left sides. Islands of hard breathing from that sides, where the breath is stronger, as if very close to the ear. This is enough to determine the presence of one or more foci bronchopneumonia. The number of breaths per minute increases, always there is a moderate fever.

Often one focus goes out, another appears. This is bronchopneumonia. Never use antibiotics if you want to avoid chronic diseases. By destroying one race of bacteria, you cultivate others that will get into the alveoli and bronchioles, already weakened by the first microbial attack.

Spasmophilia. In severe cases, ecclesiastical condition, laryngospasm even in adults. Whereas, Among the complications of whooping cough, there are purulent and serous meningitis, it could be considered as local, not general meningitis in in some limited areas of the meninges. Lumbar puncture in In the case of serous meningitis, in addition to the therapeutic effect of the A diagnostic way to distinguish serous meningitis from encephalitis. With encephalitis, the lumbar puncture value is zero; never the pressure of the cerebrospinal fluid rises.

Hemorrhages. Microscopic hemorrhages in the cerebral cortex with their effects are well known in the pediatric literature. This is - paresis, spastic paralysis (treatment: baths with increasing temperature plus capillary therapy with turpentine baths).

Piemia. In some cases, the defenses are so exhausted, that a small scratch, a small boil develops in the erysipelas, in the general furunculosis, even into cutaneous gangrene. In adults who have fallen ill furunculosis, look for signs of chronic whooping cough and you will see with which This disease can be easily stopped.

Whooping cough and tuberculosis. Coughing fitsme, repeated vomiting, depressing effects on the central nervous system so deplete the reserve of strength sick child, that the Pirquet reaction becomes negative, even if It was positive to whooping cough.

Medical literature uses the term "allergy", which means that the body is deprived of substances that could neutralize CD and their toxins. Can these substances release histiocytes and lead to in combat readiness, or is it a property of blood, lymph, intermediate connective tissue fluids? This important issue deserves in-depth discussion. In any case, it is always necessary to have in Possibility of strong circulatory and metabolic disorders, capillary stasis, partial blockage, hypoxemia, reducing the inflow of other nutrients (glucose, amino acids, mineral salts, vitamins, hormones) to the lymph nodes and bronchi.

Each tuberculous aggression is localized primarily in the bronchial glands. In the overwhelming majority of cases, satisfactory supplies blood and lymph is able to calcify, sclerosis, isolate and extinguish tuberculous foci. During whooping cough with its coughing fits connective tissue membranes surrounding those affected by tuberculosis lymph nodes can rupture from traumatic shocks. Slumbering bookmakers They can.

Pulmonary tuberculosis

To have A complete picture of modern pulmonary tuberculosis therapy - collapse therapy and the latest antibiotics, let's take a short excursion to past. 1890 Koch announces the birth of tuberculin. Tens thousands of unfortunate patients with pulmonary tuberculosis are hastily arriving in Berlin. "Healing" injections begin with massive, more than toxic doses. Enthusiasm, na?e faith in the words of the master were so great that there was neither time nor patience for becoming necessary harmless dosages.

The impatience of the sick, thirsting for a speedy recovery, caused a On the part of the doctors, there is an incomprehensible morbid zeal. The army of the sick was handed over to a crowd of "firefighters" brandishing syringes filled with supertoxic tuberculin. Both the patients and the doctors were full of enthusiasm. And in this frenzied enthusiasm, tens of thousands of patients fell prey. The doctors' hunting carriage swept by, leaving thousands of corpses in its wake, Without much reaction, no one protested!

Only with the passage of time did they begin to select a less toxic dosage tuberculin. For 25 years, many searchers have offered various tuberculin preparations. And in sanatoriums, dispensaries continued injections of tuberculin in smaller doses, less toxic, but at the same time completely useless. 25 years old... Useless and often dangerous therapy!

1907 University of Pavia, small medical clinic, poor equipped, without an X-ray room. After 20 years of reflection and observations on the use of an artificial pneumothorax unfortunate Carlo Forlanini (Forlanini) resigned himself to a bitter fate as a result of conspiracy of silence and haughty contempt on the part of their "dear ones" colleagues". And then he was surprised to notice that his pneumothorax began to be interested. His correspondence became more and more significant. Once a month, then once a week, a doctor began to appear, and From time to time, though not too often, even the professor, they They came to see the "workshop" up close, where they squeezed their lungs.

By stopping respiratory movements, they stop the development of tuberculosis lungs! In the medical community, the reputation of the Forlanini Clinic stood so low that his closest collaborators could only find with great difficulty places in provincial hospitals. Forlanini died in 1916 from asthma under the weight of the indifference of his "dear colleagues".

Meanwhile, the whole of Europe was gripped by a traumatic pandemic, like purpura malignissima, after the outbreak of World War I in August, 1914. Medicine inherited from the First World War a whole Niagara Intravenous Injection, a series of reckless precautionary vaccinations, progressive stupefaction of medical thought. Too much increased introduction of technique and specialization into medical practice limits the role of thought, reasoning and reduces the feeling of responsibility. It was time for a pneumothorax; This is from the field mechanics.

Forlanini erects a monument. In Rome, the Forlanini Institute was created, Of course, after the death of the unfortunate master. Mechanotherapy of tuberculosis of the lungs begins its triumphal march. Collapse therapy has its own acceptable positive side. On the other hand, it also has a lot of overly simplistic conclusions, unacceptable exaggerations, which stubbornly continue to exist because of inertia and routine.

If any therapeutic method remains in effect for 20 or 30 years, if in each new article it is spoken of as necessary and a completely reliable remedy, then around this method there is created an atmosphere that excludes all criticism, all attempts at revision or improvements. But methods age, they suffer from all the disadvantages of aging. It should be emphasized that in 1910 the pneumothorax, the very one that proposed by Forlanini, represented an indisputable progress. Main The idea was to create conditions conducive to the closure of caverns. Second The goal was to slow down the flow of blood and lymph. Slowing lymphatic flow should reduce the transmission of CD and toxins.

Sauerbruch and his school have shown that when the lung collapses, it is less supplied with blood. Atelectasis and blood stagnation contribute to neoplasm of connective tissue that compresses blood vessels. In relationship between the circulatory network and the connective tissue is formed vicious circle. The other lung has to perform compensatory breathing. Blood and lymph circulation increases greatly. Right The ventricle of the heart is significantly overloaded.

Even Forlanini demanded extreme caution when using pneumothorax if there is the slightest indication of insufficiency another lung. How far he was from the monstrous idea of a two-sided Pneumothorax! For Forlanini, the contraindications were: rapid development a destructive process accompanied by a severe fever; very much unsatisfactory general condition; age over 60 years; cardiac insufficiency; laryngeal tuberculosis, intestinal tuberculosis; diabetes; chronic nephritis.
To avoid excessive connective tissue formation and prevent or inhibit the development of progressive pulmonary sclerosis, Forlanini limited the maximum duration of pneumothorax to 15 to 18 months. All this has been completely forgotten by the adherents of the great Pavia teachers. By 1920-1922, pneumothorax was universally accepted and Everywhere they began to "improve" collapse therapy.

Pleural adhesions were soon found to interfere with the satisfactory compression of lung tissue. Jacobaus proposed dissection of adhesions. This technical "improvement" was adopted without critics, despite the often very unfavorable consequences (hemorrhages and even suppuration). In my opinion, too often Collapse therapy is used.

More and more, X-rays are discovering the cause of failure pneumothorax, the futility of the efforts expended to achieve closure of stubborn caverns. If the caverns are surrounded by connective tissue, which isolates peribronchial foci and bronchiectasis with solid walls, then the collapse of the caverns becomes unrealizable. Staying on along the same strictly mechanical path, Brauer and Sauerbruch proposed An extremely radical method is thoracoplasty.

If there is a method in therapy that prolongs life by several years at the cost of constant shortness of breath, continuous tachycardia, quite often combined with changes in the esophagus, aorta, heart, trachea, then this is There is thoracoplasty. If the operation is successful, the unfortunate patient prolong life, in most cases a deplorable life in a miserable, weak state.

A Further Step Forward and a Cure for Devastating Pulmonary Tuberculosis becomes ultra-radical with the help of lobectomy (amputation of the

lobe lung), then - In case of emergency, by deleting everything easy with all the fatal consequences arising from this thoracoplasty. Can we hope that someday it will be heard An authoritative voice that can stop the diligence of thoracic surgery cell, armed with its furious scalpel, which is irresistibly attracts to itself the magnet of the gaping cavern and which forgets which it prepares the future for the unfortunate patients.

Supporters of bilateral pneumothorax, dissection of adhesions, frenectomy, thoracoplasty, lobectomy forget the first and basic truth: causes the development of the cavern. Any cavern discernible on an X-ray or detected by correct auscultation, is the result of fusion thousands of microscopic caverns. With our research tools It is not possible to find a rupture of the alveolar septa between two, three, or four pulmonary alveoli. But it is these alveolar microcaverns microtunnels begin to break through in the lung tissue.

Imagine a bronchiole opening with small groups of CD-infected alveoli. Contact with CD causes an inflammatory reaction of the walls of the alveoli, accompanied by alveolar exudation and the formation of epithelial cells. Infected areas can be foci of curd micropneumonia - the source of microcavities, where the neoplasm occurs connective tissue, which isolates microcavities and scars areas with the loss of substance.

If we imagine the ulcerative process as a fusion of innumerable microfoci of cavernous pneumonia, then it will be clear how much the desire to achieve closure by scarring tens of thousands is illusory microcaverns. The same anatomical and pathological process is observed in the development of pectoral toad, with gastric ulcers, in the cavities of tuberculous kidneys. The slightest spasm of the coronary arteries causes hypoxemia or anoxemia of many myocardial fibers. Lack of oxygen causes micronecrosis of the myocardium. If micronecroses remain scattered, they can scarring with a decrease in myocardial function. Fusion of micronecroses causes myocardial infarction.

The same process is characteristic of the development of stomach ulcers or duodenum: spasms of the capillaries supplying blood mucous membranes and submucosa, cell hypoxemia, many micronecrosis. If micronecrosis is scattered, gastritis is diagnosed. With the fusion of micronecroses, there is a gastric or duodenal ulcer intestines.

That is why capillary circulation is of paramount importance for etiology, diagnosis and treatment of angina pectoris, myocardial infarction, ulcers stomach and duodenum. First of all, you need to think about capillary therapy, and all efforts should be directed to recovery capillary circulation.

The period from 1920 to 1940 was marked by the desire to introduce gold salts into the Treatment of pulmonary tuberculosis. Fortunately, the enthusiasm of the medical corporation in relation to the salts of gold has weakened, and the harm caused by these new was limited. No one has ever seen any result from a series of intravenous injections of gold salts, except for the well-known Now complications: eczema, asthma, nephropathy.

The reduction in tuberculosis mortality and morbidity has already begun 120 years ago. Koch's bacilli do not enjoy an exclusive privilege antibiotic resistance. A person adapts better to symbiosis with microbes. OstIt is an incontrovertible fact: in all countries The number of patients did not decrease. With a decrease in mortality, the average The duration of pulmonary tuberculosis turned out to be increased. Other factors also interfere with statistics: first, mass X-ray physical examinations (it is very possible that widespread radiography and especially fluoroscopy does not always give results corresponding to the pathological changes); secondly, some non-specific bronchopulmonary inflammatory processes radiographically are classified as tuberculous.

Given the wide prevalence of pulmonary tuberculosis, which causes significant social and professional damage, given the large costs of treatment and social insurance of tuberculosis patients, large disability, it would be natural to let down the time from time is the full result of our therapeutic measures with quite understandable hope to simplify treatment, reduce the duration of disease, to alleviate the burden of public expenditure without any risk to the patient.

Rest is necessary in all forms of tuberculosis in order to maximize the reduce the functional activity of the lungs. This theoretical basis collapse therapy with all its varieties. For a moment, let's forget about Koch's bacillus, on the specificity of infection, on antigens and antibodies, on the problem of immunity, about everything that clutters memory, erudition and brain automatism of every phthisiatrician (I belonged to this tribe 26 years). Instead, we will allow ourselves to consider tuberculosis the lung is like an organ dotted with countless ulcers.

Let us recall our explanation of the origin of caverns by merging sets microcaverns, let's remember surgical pathology, and we will find thousands of rules governing scar therapy. First of all, you need to organize the removal of dead particles, purulent discharge; in the language modern pathology is the elimination of metabolites (drainage); to facilitate the flow of blood, which heals with its life-giving oxygen, with its nourishing and plastic substances, regenerating wounded cells and scarring damaged tissues; Provide diseased tissues, mutilated cells, the ability to draw from plasma blood enzymes, vitamins, antibodies necessary for tissue and cellular regeneration.

Phthisiologists prefer X-ray examination to thorough auscultation. They forget that the lung is a voluminous organ, and the pictures are only a surface; do not realize that The substitution of a surface for volume is a source of distorted observations, and erroneous interpretations. Images, even tomographic ones, give only static. They do not give any idea of respiratory function. In Case histories can never be found in modern works quantitative assessment of breathing.

However, for the sake of the future patient, it is very important to be well informed regarding the dynamics of pulmonary respiration. It is necessary to note the breathing - deep, medium or superficial, general hypoxemia of the lungs or partial hypoxemia of some areas. Even extensive damage of the lung will pass in a shorter time if in healthy parts of the lungs Breathing is deep. A small injury will be a very serious danger if breathing is

shallow.

Breathing is shallow: the lung is defenseless. With deep breathing, the lung Very resistant to any thermal, microbial, mechanical, or emotional attack. With its imaginary accuracy, radiography suppressed the auscultation of the chest, it narrowed the field of vision of the doctors and has greatly reduced the quality of diagnostic and prognostic conclusions on compared to the old clinical medicine.

Children's na?e belief in X-rays is dangerous perversion of medical thought.

In order to create a sensible therapy, it is necessary first of all to understand pathological anatomy of pulmonary tuberculosis:

1) absence of blood vessels or a significant weakening of blood circulation in the some caseous cavernous foci;

2) inability of perifocal capillaries to expand (rigidity perifocal capillary endothelium).

Taking into account the pathological data, it is proposed intracavernous treatment with streptomycin, under X-ray guidance penetrate the chest cavity and inject streptomycin directly into the cavern. Very simple and very unreasonable. Yes, you can cure a local cavity - for how long?, but there is no way to cure it million small lesions of lung tissue. Hydration does not change lungs and toxic decay products of microfoci are not eliminated. Using this treatment, it is impossible to affect the secondary, non-tuberculous septicemia.

It is necessary to prescribe the following: rest, camphor intramuscularly, very in small doses - 1-2 ml; camphor dilates pulmonary capillaries - one injection of synthetic camphor per day; Hot chest wraps cells, 2 times a day (this simple treatment causes the lung to dilate capillaries and improvement of general circulation); heating pad for the liver area 2-3 once a day for an hour to mobilize blood from the blood lakes of the liver, and spleen; calcium in the only digestible form - 3-4 cups of hot sweet milk.

You have to imagine the presence of countless fistulas in the pulmonary fabrics. Fistulas should be drained by expectoration if they communicate with the bronchial tree; if the bronchioles are closed, then through resorption along the blood and lymphatic tracts. Attack closed wounds by waves of blood, as we attack calcium deposits at chronic progressive rheumatism.

The most important part of the treatment must be directed at the great mechanisms blood circulation, nutrition of the patient and its excretion: into peripheral on the heart, on the capillaries, on the stomach, on the liver, on the kidneys... And above all on the patient's psyche. If in general treatment you are serious and attentive, then in the most modest conditions, without a sanatorium, without a pneumothorax, without antibiotics you will cure many patients, inevitably sentenced to death under classical treatment, which begins with X-ray and ending in a cemetery.

Such treatment applied at home, in hundreds of cases of open tuberculosis has yielded more than encouraging results. It seems to us that In the absence of more effective means, this method deserves great attention.

Let us be allowed at the end of a small excursion into the region endocrinology, represented in each country by hundreds of endocrinologists, united by international congresses. For 50 years endocrinologists with amazing diligence erect a building bearing The name of psychosomatic medicine, in other words, a new Branch specialization. But endocrinologists do not bother to deal with it at all a small endocrine gland called a leukocyte and lymphocyte.

The leukocyte is a single-celled endocrine gland. And their number is very significantly - 6 million in the blood of a healthy person. It seems to us that this The number is more important than 7 large endocrine glands. Granular leukocytes, Starting from the promyelocyte, the myelocyte to the semi-inunuclear, have the ability to secrete an enzyme - a protease, the action of which can be Compare with the effect of pancreatic trypsin. With the accumulation of pus Leukocyte protease plays an outstanding role. This explains the fluctuation of abscesses, spread of pus in tissues, disintegration of dead tissue, absorption of pulmonary exudate. In all these phenomena, I I see the presence of peptones or amino acids as a product the proteolytic process of digestion (Fiessinger, 1945).

Noel Fiessinger proved that leukocytes can produce other enzymes: peptase, deaminase, amylase. A special place should be allotted to lipases. These latter are present in the leukocytes of the lymphocyte large and small lymphocytes, monocytes, macrophages. "Lipases can be found in free lymphocytes, as well as in the lymph glands and in the spleen. These enzymes predominate in chronic exudates, pleurisy, peritonitis and chronic tuberculous suppurations. Lipolytic lymphatic enzyme acts on Koch's bacillus, dissolving the acid-resistant wax shell. To carry out a complete bacteriolysis of the Koch's bacillus is necessary so that after the action of lipase it is possible to was to achieve an influx of polynuclear with their protease" (Fiessinger). Fiessinger tried to treat tuberculosis patients by increasing the proportion of fats in food. He did not succeed because he did not think that for facilitate the influx of polynuclear cells with their protease, it is necessary to open Access roads: capillaries.

Using our treatments (chest wraps, small doses of synthetic camphor), we open the pulmonary capillaries. With heating pads on liver: we mobilize blood from the liver and spleen; Almost without drugs, we increase the number of open capillaries, we increase the number of circulating leukocytes; foci of suppuration in all pneumopathies are abundant are irrigated with lipases, proteases, and our patients recover without antibiotics, without pneumothorax and other mutilating methods, because We always think about the autopharmacology of the body.

Neither in pharmacology manuals, nor in crude, mechanical collapse therapy, we do not find remedies for pneumonopathy, but we find them only in modest and effective capillary therapy.

Chapter 7
Hydrotherapy
Humoral physiopathology and hydrotherapy (hydrotherapy)

Among the substances which form the structure of a living organism, the predominant part of the It is represented by water containing minerals. For example, there is water in the brain is 77% if we take into account the brain together with the cerebral shells. The brain, together with the cerebellum without meninges, contains 82 to 90% water. Muscles contain 83% water, lungs - about 71%, the same amount of water in the heart muscle, in the liver 75%, in the spleen 77%, in the 83% of the water in the cells.

These figures express the volume of interstitial (intermediate or intermediate) water in organs (except for cells). According to the works According to Gamble and Peters, the volume of extracellular water is 15% of the total mass body of a healthy person. Intracellular water enclosed in cellular water cytoplasm is at least 50% of the human body weight.

If you dry all the colloidal substance of the corpse of a person who had life mass of 50 kg, it turns out that the dry colloidal substance is equal to 5 kg (Policard, 1944). This means that 90% of the living substance consists of fluids: blood, lymph, cerebrospinal fluid, cerebrospinal fluid, Allopathic

medicine considers the body as a sum of solid and dry organs, without thinking about the volume and composition of extra- and intracellular organs liquids. This view in no way corresponds to the physiological reality, and the main specialty of allopathic doctors is an attempt to treat isolated organs that are hardly solid. Homeopathic medicine completely ignores the presence of organs that do not Not to mention the absolute ignorance of the fluids of the human body. Allopaths and homeopaths are trained in abstract concepts of medicine, not having no physiopathological base, without any a truly guiding idea.

The living human organism is permeated by three large channels, which they branch into many tiny tubules. The first system sewers, together with its innumerable branches, is air-bearing. Windpipe, bronchi, bronchioles, alveoli of the lungs represent a single respiratory "tree", in the smallest "branches" - in the tubules of which there is a continuous movement of air, bringing oxygen and removing carbon dioxide from each cell, each tissue, each organ. At the same time, the body jealously guards the pulmonary branches, a large reserve supply of oxygen.

The second circulatory sewer includes the heart, arteries, veins, blood capillaries, lymph nodes, lymphatic trunks, and capillaries. The third branched sewer - the digestive tract - includes: mouth with saliva, formed by the three main salivary glands, esophagus, stomach, duodenum, irrigated with bile and pancreatic juices, the small intestine with its countless villi, a large intestine with powerful muscles and a rectum. AND Remember well: any dense nutrient introduced into the The digestive tract turns into a solution, into a liquid. Consequently, the organism is a system of channels and tubules in which Gas and liquids flow non-stop.

Along with the great streams of life, next to arteries and veins, next to numerous rivulets of blood and lymphatic capillaries, there are continents immersed in an ocean of extracellular fluids, these are organs: brain, lungs, heart, liver, muscular system, etc., irrigated bschvascular networks. All organs: heart, lungs, liver, spleen, kidneys, pancreas, intestines, diaphragm, genitals, bone marrow, spinal cord and brain, acoustic apparatus, organ of vision - makes up 1/3 of the human body weight.

Each quantitative and qualitative change in the composition of liquids causes painful disorders. If the composition of liquids overloaded metabolites, undergoes an additional invasion of new metabolites, then life becomes impossible.

It is known that the volume of circulating blood is 5 liters, and the lymph is 2 liters. Within an hour, he receives 100 liters of blood and 40 liters of lymph. Normal Vertical the diameter of the liver is 14 cm, the spleen is 7 cm. liver, you find its diameter 20-24 cm, and the diameter of the spleen 18-20 cm, You will have to admit that there are blood lakes in the liver and spleen retain up to 50% of the circulating blood volume with all the ensuing hence the consequences of oxidation and nutrition of all organs. At the same time It is clear that the liver and spleen undergo hyperhydration, overflow with extracellular fluids. Therefore, you are obliged to to assume (admit) serous disorders in the huge vascular portal vein network, which ensures normal blood composition everywhere, in all organs of the abdominal cavity.

Unsteady, unreliable awareness of the dominant role of liquids in the over the past decades, has been accompanied by an unacceptable neglect of the use of mineral waters. You need to go to Vichy to take a course of treatment with Vichy waters. You need to go to Vittel for course through the waters of Vit-tel, you need to go to Pres to pass the hydromineral course, etc. But the course lasts only three weeks! In In most cases, those treated take water 2-3 times a day and at the same time they use too good cuisine, too tempting food, which overloads their liver and kidneys.

The territory of France is very rich in its geological nature and gives Possibility to organize various hydromineral treatment courses for home to the sick. You need to achieve change within a few months acid-base balance (pH of the blood) by taking mineral waters. It

seems to us inconceivable to treat chronic patients without a prescription alkalizing or oxidizing waters. This is a long-term treatment; Dolgaya Cleansing of body fluids should be set and included in the framework complete general hydrotherapy. There is skin hydrotherapy and there is also hydrotherapy of internal organs.

Balneotherapy. Modern medicine is obliged to use balneotherapeutic methods, as they make it possible to improve the condition of the patient and cure the majority of chronic patients, who Pharmacotherapy cannot cure. You need to shout, cry out, repeat this the truth until the medical school deigns to verify already obtained data on the indisputable effectiveness of hydrotherapeutic procedures and not only in places designated for hydrotherapy, but also used at home in at any time of the year, in the apartment of each patient.

There is no question of creating a new specialty: balneolygia. They are already already a lot. It is only necessary to reorganize, resurrect, revive too much the conformist and comfortably ingrained consciousness of doctors. Doctors of the future, Those who have come out from under the influence of schematism and orthodoxy must win back the right to freedom of judgment.

In the future, balneotherapy should find its place in general therapy along with dietetics and drug therapy, of which the Most of them can be replaced by hydrotherapeutic methods with great the benefit of the sick and to raise the authority of the doctor. In chronic Clients are now replacing doctors as hairdressers. This is bad and for patients, and for doctors. For the treatment of chronic diseases, it is not yet There is a truly serious effective therapy. This provision will change when every doctor is able to use balneotherapy, using it at the patient's home.

Unfortunately, balneotherapy does not have the means of noisy advertising, which is used by the chemical and electrical industries. Doctors are stunned by this loud advertisement and become like their poor sick people, victims of this unhealthy propaganda. But how can you stop the flow of the river, as well as the clear principles of balneology, which represent applied and directed physiology.

Balneotherapy has not only a therapeutic effect, but also preventive. In the future, its study will be the duty of every doctor. It includes treatment with cold, heat and hyperthermia: hot chest wraps, cold warming compresses, turpentine baths, hand and foot baths, warm and hot, as well as medicinal intestinal lavage (enemas), cold and contrast showers, bladder with Using balneotherapy,

you need to know the patient's constitution well. Theories Kretschmer, Martini, numerous analyses used for assessment of the suitability of a given individual for work, for life in a certain social environment, are hardly applicable to balneotherapy, which is a general therapy for each individual. The speed of a person's reaction to physiological and psychological influences, its functional The constitution is much more important than the morphological constitution. The functional constitution determines the choice and dosage of hydrotherapeutic methods, Balneotherapy should not stand aside, it should be is intimately connected with the clinic.

Research in the field of balneotherapy would lose its value if would not be based on the study of important problems of the internal, deep medicine. Each bath, in addition to its specific effect, determined by different temperatures and the addition of different ingredients, also has a general physiological effect of primary importance.

When immersed in water, the body loses 80-85% of its mass. According to Strasburger, a man weighing 70 kg, being in water, it weighs only 3-4 kg, to this mass is added head mass (4-5 kg), therefore, the mass of a person is approximately not Thus, with long-term intake of baths, you can avoid bedsores (for example, in patients suffering from paralysis). What a joy it is for a paralyzed person to be able to with a little effort, immediately feel how his lightened legs move!

Also very important is the hydrostatic concentric pressure. In a bath with water at a neutral temperature (i.e. with a temperature of body - 35-36 ?C) the perimeter of the chest is reduced by 3-5 cm, the perimeter of the abdomen - by 2-6.5 cm. abdomen, exhalation is facilitated, especially with emphysemae, asthma, bronchitis.

Orthostatic collapse observed in a rabbit kept in upright position, does not occur in water. This is how anti-collapse effect of hot, warm and cool baths in treatment infectious diseases.

The revival of balneo- and hydrotherapy

France is the most A country rich in healing waters. Every year more and more are approved social significance of hydrotherapy. The Academy of Medicine, through its The Standing Commission took scientific control over mineral sources and makes decisions on all hydrotherapeutic issues. For hydrotherapeutic research, there is the Institute of Hydrology and climatology. In 1937, the International Congress was held in Paris on heat and climate therapy.

In Paris, Lyon, Lille, Nancy, Strasbourg, Bordeaux, Toulouse, Clermont-Ferrand, Marseille there are many departments of internal medicine hydrology. The Paris Society of Hydrotherapy and Climatology was founded in the In 1853, numerous magazines ensured the distribution of works. France ranks first in the scientific organization of climatology. More than a million patients receive climate treatment each year. Since the benefits of heat therapy have been proven, it is necessary to provide an opportunity it should be used by the entire population.

Among adults and children, chronic rheumatism has a large Distribution. According to statistics from different countries, it is more a

quarter of patients requiring hydrotherapy. To these must be added a large Number of other disease states: residual effects after bronchitis, asthma, hypertension, gynecological cases, diseases of the heart and blood vessels, consequences of cerebral hemorrhage, the consequences of wounds and, finally, blood diseases.

An old physician who devoted many years of his life to the study of action of mineral waters, will tell you that every hydrotherapy can be provided to each patient at his place of residence. This statement tested on thousands of patients.

Hydrotherapy. Despite its thousand-year existence, hydrotherapy could, with some effort of the medical organization, resume again triumphal procession. Why is it that modern medicine, recognizing the hydrotherapy, the results of which are indisputable, allows hibernation (October-May) hydrotherapeutic methods? Why do they forget about the possibility of organizing hydrotherapy for patients in October-May, who cannot travel or interrupt their activities for treatment? Prefer the line of least resistance, using the following called physiotherapy: galvanic and faradic current, ionotherapy, darsonvalization, diathermy.

In the extensive physiotherapy facility, with its diverse arc lamps, light baths, equipment for infrared rays, dry-air baths, only A small room.

Make a little more careful examination of the long string of rheumatics and you will establish poor blood supply to the skin, especially skin of the extremities (cold hands, cold feet, cold knees). With weakening of functions, it is impossible to achieve them by exercising the muscles warming. Everyone unanimously says that heat gives relief to rheumatics. It is logical to look for ways to warm these unfortunate patients. Apply short wavelengths, diathermy, light baths. The air temperature of the light The pulse quickly reaches 100-110 beats per minute. The amount of sweat excreted reaches 2 liters treatment of a patient with impeccable blood circulation and breathing, may not do any harm, but still this kind of heat regulation too rude.

Steam bathsis much more tiring than light ones. Use of diathermy and shortwave is locally limited and can always be replaced with a rubber or electric heating pad, which is much simpler and much more More economical. The heat supply by electric devices always remains clean physical, monotonous; Heat delivered by general medical is physicochemical, has a whole range of variations.

With light baths, sweating is the only result, it can be very fast and too harsh. It is usually suppressed in the first 5 minutes. balneotherapy, with hydrotherapy, the possibility of regulating temperature, concentration of substances dissolved in therapeutic baths, adapting them to each patient.

Neither medicine nor physiology are separate sciences. There is only one science of life. There are only life phenomena, the pathology of which must be explained as well as physiology.

Autopharmacology of the organism is the mass excretion of a number of substances, who are carriers of energy, freely circling in the blood and interstitial fluid used sparingly in a normal state, in pathologies, under the influence of balneotherapy, miraculously intensifying their effects and having a greater benefit than all pharmacological means.

Thermotherapy (heat therapy)

Each a change in the temperature of a skin area due to a coordinated reaction is transmitted to the symmetrical surface of the opposite side. Rule Morat-Destre says that the vessels of the skin, kidneys and heart react identical, but opposite to the vessels of the abdominal cavity. Thus, we we have the opportunity to affect some (any) points of the skin, to transmit this influence in the direct or opposite direction to the other areas or organs.

We often observe how seriously ill a patient reacts to a bath of 38 ? C. But if you start the bath with a temperature of 35-36 ? and add very slowly hot water, then even a temperature of 40-42 is very tolerated by the patient calmly. Lying down in a hot bath, a person is covered with goose skin, This is a manifestation of vasoconstriction, which entails contraction skin muscles. With a bath with an increasing temperature, traces of such a reaction are not observed, plethysmog-ramma is completely different. In cold or in In a very hot bath, first there is a contraction of blood vessels and only a few seconds or even minutes after getting used to it, or accommodation, to a given temperature, their reflex Expansion.

The use of a bath with a gradually increasing temperature does not cause initial contraction of blood vessels, and vasodilation reaches significantly greater volume than in reactive hyperemia caused by from the very beginning of immersion in a hot bath. So, we see how We have an effective and simple circulatory remedy. Thus, For example, hand baths have a particularly beneficial and tonic influence in hypertension, cardiopathies, especially in angina pectoris, with pneumonia. To achieve deep penetration heat in the treatment of panaritium, it is necessary to make hand baths, bringing water temperature up to 45-46 ?C with a total duration of 30 to 60 ?C min, especially in patients with a dense fat layer.

These baths are well tolerated and cure panaritium quickly enough. Foot baths started at a temperature of 36.5-37 ?C and brought to 40-42 ?C with the same duration as manual baths, reduce the total the amount of circulating blood per 500-700 ml due to the reflex and thermal dilation of blood and lymphatic vessels. For feverish, excited patient, it is necessary to apply a cool manual starting at 35 ?C and

bringing it up to 30 ?C to draw away heat and to calm him down.

Until the moment when we dwell in more detail on the use of heat, it is necessary to remind of two main physiological features: the process of inflammation and fever (fever). Inflammation mobilizes the body's natural defenses against the external aggression. The inflammatory process is characterized by hyperemia, the latter can be increased by heat. At first glance, the heat should be complicate acute inflammation, in fact it causes a completely different Result: it stops or prevents venous congestion in the capillaries, restores blood circulation and removes metabolites, microbes and destroyed cells into a large flow of general circulation, where a general cleansing of toxic metabolites, their breakdown into micromolecules, their mixing and excretion.

In inflamed areas, after the restoration of blood circulation, mechanical The factor will cease to act - compression of parenchymal cells overdilated venous vessels. Delivery will be restored oxygen and other nutrientsand all conditions will be created for tissue regeneration.

The physiological features of fever are described in the section on hyperthermic baths. Prof. Lampert (1952) states that Artificial hyperthermia improves nutrition and tissue growth. He Bier (1931), who wrote in his fundamental work "Hyperemia as a remedy": without deep knowledge of capillaries cannot be understood either by inflammatory processes or by fever, to some other physiological phenomenon. But if you know physiology and pathology of capillaries both intracellular and extracellular liquids, it becomes clear why the use of heat in acute and chronic diseases in conjunction with stimulants activity of capillaries, so works well in acute rheumatic and acute phlegmonous arthritis, tuberculosis, etc.

antagonism between skin vessels and abdominal vessels. If the skin vessels are contracted, the vessels of the abdominal cavity dilate, and vice versa. The exception is the kidneys. Exposed arteries on the surface of the brain react in the same way as the skin. Only unpleasant emotions stop this reaction.

To relieve tachycardia, it is necessary to slow down with the help of a reflex pulse, starting with the skin of the back of the head. Buchsbaum noted that The application of cold to the inner thigh provokes uterine contractions (Buxbawm's reflex). Applying cold to the back of the head You can stop nosebleeds.

Doctors, biologists, physiologists in many countries often ask me the following question: "Why do I still give the main role of warm and hot procedures?" As a very old balneologist, who has been using this therapy, I am happy that I can answer this question.

At the beginning of my medical career in the clinic of my teacher Prof. Erb, I he used warm baths, Scottish showers, which were given under the definite and constant pressure while maintaining mathematically the exact ratio between the duration of hot and cold showers. By the way, I note that a cold shower should never exceed the time half the duration of a hot shower with a maximum of one minute for cold and two minutes for hot water. I also used a bubble with on the area of the heart, abdomen, on the back of the head.

I spent two weeks with Pastor Kneipp in 1903 to study him a method in which 90% of cold procedures were allocated. Its results were satisfactory. In 1907 I studied for three months with Winternitz. where he himself used Scottish showers and cold chest wraps cells. These wraps that I used in his sanatorium in Nervi (Italy), were done as follows.

The patient put on a vest (sleeveless) soaked in cold water, over which a double flannel waistcoat with long sleeves. The patient remained in this wrap all night, in the morning he rubbed the whole body with a horsehair glove soaked in cold water. The results were very satisfactory in all patients, suffering from lung diseases, including cavernous tuberculosis. I practiced these wraps (which, by the way, become very pleasant in a minute) in military and civilian hospitals in Moscow during the Timemoat of the world war with an excellent result.

Why I Had to Radically Change Hydrotherapy procedures? Two factors led me to switch to heat therapy:

1) familiarity with blood and lymphatic capillaries, and with the structure of the skin, which allowed me to turn empirical balneotherapy into physiological balneotherapy;

2) physiological degradation (deterioration of health) of the broad masses population in the large industrial centers of Western and Eastern Europe.

Few people are aware of the biological involution of human beings mass. This demographic phenomenon can be measured, confirmed An important factor is the progressive Atmospheric pollution. More than a hundred years have passed since Charles Nicole stated a progressive increase in coal particles in the lungs corpses of people who lived in big cities. In 1896, when I was student in Moscow, its population was 700,000 inhabitants, now it In Paris at the beginning of the century there were 1.5 million inhabitants, now this figure exceeds 8 million.The

dangerous London fog is not a purely atmospheric phenomenon. Since the end of the XVIII century, the population of London has been paying dearly for industrialization of rickets in children, chronic rheumatism and chronic rheumatism bronchitis in adults. Accumulation of caustic pulmonary tissue that destroys lung tissue factory and heating smoke in large cities is also intensified by exhaust gases of cars. In

1963, in Paris, cars were daily 9 million liters of gasoline and other combustible substances are burned, after which a large amount of dioxide and carbon monoxide remains in the air, Meteorologists have calculated that the atmosphere Paris contains more than a quarter of the sewage of the entire territory of France. In Parisians breathe a mixture of air and pollutants, in which Very little oxygen remains. Add to this factor metal dust, as well as textile and coal dust, crowding is poor ventilated premises, institutions and offices.

Consider also the barbaric deforestation carried out in all countries of the world, And you will understand that in the so-called civilized countries, humanity It lives under the influence of a constant decrease in oxygen in the atmosphere. A decrease in oxygen in the air is accompanied by an increase in the proportion of carbon dioxide. These two factors provoke a decrease in the rhythm of life, reduction of energy and slowing down of biochemical reactions in the body man. Ultimately, all these influences cause a decrease in heat production in the human body. Therefore, the population of industrial centers are not able to respond by opening blood capillaries to the effect of cold hydrotherapeutic procedures.

The development of industrial technology with all the ensuing negative consequences for human health requires the use of hot procedures. Today's hydrotherapy must adapt to the changes in the energy balance of the industrialized population. The basics of physiopathology of capillaropathy require the use of thermal procedures to raise the energy balance of humanity, which has lost a sufficient influx of oxygen from the atmosphere.

Balneotherapy

Hyperthermic baths. With their help, we try to cause an increase in temperature, saving, sterilizing. We take hyperthermic baths in cases of subacute infections, e.g., to dissolve and remove accumulation of gynecological suppurations; we avoid pyramidon injections and vaccines. The effect of hyperthermic baths can always be interrupted, moderated Having made an injection, it is impossible to stop the protein reaction.

Turpentine baths. In rheumatics, in patients with neuritis, polyneuritis, with consequences of wounds, in patients with angina pectoris, obliterating endarteritis, with the consequences of infantile paralysis, with hemiplegia - turpentine baths in a concentration of 20 to 120 ml per bath (170 -200 l water) cause progressive "re-education" of small vessels, genuine vascular gymnastics. Turpentine white emulsion and yellow Turpentine solution are specially designed for patients with elevated blood pressure, with normal pressure or hypotension.

Bath with hay infusion. These are soothing baths that have remarkable property, to relieve nervous tension in patients hyperthyroidism, nervous palpitations, insomnia, chorea, sclerosis, angioedema.

Baths with walnut infusion. They are recommended for weeping skin diseases: penfigus, weeping eczema, pruritus, nettle fever and

Baths of the Rozh-Poz type are prescribed for dry skin, dry dermatitis, ichteosis, psoriasis.
Baths with alum and soda. It is recommended for varicose veins, varicose ulcers.

Hand baths. They are useful for asthma, chronic bronchitis, sinusitis, gloucoma and redocyclitis, as well as for the prevention of influenza, runny nose, tracheitis.

Foot baths. Usually prescribed for dizziness, chronic migraines, extrasystoles.

Hyperthermic Bathtubs

When Prof. Walinski began to study the effects of hyperthermic baths, he did not know the works of Krogh, Policard, Gaml, did not know the physiology of blood capillaries, the meaning of their contractions. Nearly 200 Years Ago by Jenner (Jenner), even before Pasteur, not even knowing about the existence of microbes, He saved mankind from smallpox by introducing smallpox vaccination.

Valinsky will remain one of the great founders of a very simple, very clear and effective therapy. Having studied capillary therapy for 25 years, the movement of fluids in the body, the permeability of cell membranes, we came to the conclusion that Valinsky's brilliant intuition was remarkable foresight confirmed by new discoveries histophysiology (physiology of infinitesimal phenomena).

They are always looking for some new remedy, something new in the chemical an industry very rich in promises and very poor in sustainable results. Perhaps due to the use of short hot baths (4 In Japan, there are few heart patients and cases of rheumatism. Up to earthquake of 1923 in Tokyo there were 800 bathrooms, where daily 400,000 people could take a bath for one sous.

Dr. Winsche writes in his book "Uber Warme Kultur" that The role of heat is identical to nutrition. The power supply can be partially replaced heat. Heat is a type of energy that can be used to change the body and improve its energy balance. Proteins, carbohydrates, fats deliver plastic elements for cell restoration, and heat (calories). Heat in its pure form is the same energy for the body.

It is believed that the human race appeared on the planet during the Tertiary period (about 1.5 million years ago), the Earth was then it is covered to the poles with tropical vegetation. Man lived a long time in a greenhouse atmosphere. The end of the Tertiary period was

marked by a thickening of the atmospheric vapors and showers that lasted for many months. After that, period our planet underwent significant cooling, nights became cold, glaciers appeared. Man failed adapt to the lack of heat; His skin had by then lost protection of the hair preserved by anthropoid apes.

Man adapted to new conditions only thanks to invention fire, dwelling, clothing. Since the Ice Age, we have been living in conditions of lack of heat. During periods of illness, this deficiency requires additional heat intake. Louis Pasteur was the first to discover that Contagious diseases can be cured by the use of hyperthermia. He infected chickens with anthrax bacilli and cured them with hyperthermia.

Bacteriologists and doctors have completely forgotten Pasteur's classic experiment. This experience is too modest for modern minds who are fond of more complex methods of therapy. Dr. Bircher-Benner (1909) was able to prove the significance of the potential of light energy for power and treatment of plants.

Each person has their own thermal optimum. Its need for warmth must be satisfied first of all. A man accustomed to the cold, retains only half of its energy balance.

External warming partially replaces internal warming (nutrition, oxygen supply, muscle and mental work, pleasant emotions). In well-heated rooms equipped with bathtubs and hot water, You can reduce the diet of meat, bread, fats.

Economists, statisticians, and other statesmen seem to They forgot about the existence of the second law of thermodynamics. The brain can direct and fix a certain number of calories in the a certain part of the body.

For healthy children in the summer, rubbing with cold water should be used, in winter - wiping with warm water. In an orphanage run by a doctor Devrient (1942), where this system was used, never There was not a single case of diphtheria.

The energy we call heat does not travel from the surface skin into the body, how the heat of a metal heating pad spreads. Most likely, countless reactions occur: wave-like movements between capillaries, nerves, extracellular fluids, cellular membranes - changes in physical and chemical potentials.

Circulation in blood and lymphatic vessels is revived, currents extracellular fluids become more active, plasma and cerebrospinal fluid is renewed rather, nutrient delivery and excretion garbage are greatly relieved. Artificial temperature increase, caused by hyperthermic baths, creates the accumulation of sterile heat (without microbes), increased combustion in cells and tissues, the discovery of closed capillaries, increased permeability of membranes, intensification of life processes.

There is a huge difference between sterile biochemical enhancement temperature from hyperthermic baths and increased temperature at infectious diseases.

In all infectious diseases, fever in the first phase is characterized by leukocytosis with a predominance of polynuclear cells, acidosis, protein breakdown, hyperglycemia, increased metabolism. In the second phase, there is a decreased leukocytosis with a predominance of lymphocytes, increased reserve alkalinity, glycemia reduction.

The body's reactions remain the same (innate, unconditioned, reflexes), when the body is attacked by various kinds of microbial toxins and when foreign proteins are introduced into the body (for example, when serum sickness) or some protein elements (e.g., sulfur). All the reactions that characterize the first and second phases of fever are constant and, without any doubt, must be governed, receive orders from some kind of leadership center.

In the medical literature, there is talk of "shock" (in the autonomic nervous system). system). According to Speransky's concept, changes in the reactions of the body The cerebral cortex controls: everything is mobilized, everything comes to movement. Each blood cell, each substance is included in the closed Orderly ranks of combat units. An unprecedented spectacle of general mobilization The enormous forces of the organism are played out in perfect order.

In chronic diseases, when the centers that control fever with concomitant reactions, exhausted or at least inhibited (slight rises in temperature), several hyperthermic baths, carried out on precise appointments, can cause a sharp change in the condition and open the way for a cure.

An increase in temperature always causes an acceleration of chemical reactions. Therefore, the use of hyperthermic baths always leads to acidosis. Hyperthermia supplies the body with heat at no cost to it. With an infectious disease, the body has to produce Extra heat with noticeable damagem for its energy balance.

Artificial increase in temperature caused by drug drugs or strain vaccine, is not controllable. Indeed, it is impossible to delay the temperature rise caused by injection of the mentioned drugs; if this reaction is neutralized at antipyretic, then the desired increase in temperature.

Vaccination of malaria for the treatment of progressive paralysis is accompanied by continuous muscle contractions with negative energy balance, with a sudden invasion of myoglobin into the blood. Mortality among vaccinated paralytics reach 35%. Drs. Lampert and Valinsky, who treated progressive paralysis with hyperthermic baths, did not lose none of his patients.

During an infectious disease, a temperature of 42 ?C is almost fatal verdict. The same temperature of a hyperthermal bath does not represent danger. Speaking about the problem of using hyperthermal baths, it is impossible not to mention the works of Prof. Valinsky (died in 1946), pioneer of this therapeutic method. He began to study this method in 1925 at the facultative clinic in Berlin under the direction of Prof. Goldscheider. In his dissertation, he showed how The body resists pathogenic agents by activating fever their protective forces.

By producing excess heat during an infectious disease, the body makes This is at the expense of its heat reserves.

Hyperthermic baths introduce additional sterile without wasting the body's own reserves. Heat gain from hyperthermic baths are easy to adjust and dose depending on the the patient's condition.

In 1928, Prof. Valinsky was appointed head of the hospital in Berlin (Tempelhof). For the first period from 1928 to 1937 in his institution 13,000 hyperthermic baths were carried out. First of all, they were used to treat neurolues (spinal cord dryness, progressive paralysis), always after establishing a positive Vasserman reaction in the spinal cord liquids.

The temperature of the patients was raised: the first bath to 39.5 ? C, second bath up to 41.5 ? C. Number of baths for each patient varied from 8 to 24, baths were done every 2 days. The best The results were observed in gastric crises in patients with dryness spinal cord and sexual impotence. None registered complications, nor death. In cases of multiple sclerosis, this method is sometimes brought a significant improvement. But if after 6 baths there is no improvement occurs, then the case should be qualified as incurable.

In cases of polyneuritis, 95% cure was recorded after 12-24 baths (the duration of baths, according to Valinsky, is from 2 to 3 hours). Acute cases sciatica, according to the same author, lends itself to a series of baths from 6 to 10, and chronic cases - 12-20 baths (muscle atrophy passes faster, more The best effect is obtained from the use of turpentine baths).

In cases of deforming arthritis with fever, Valinsky after several attempts, he refused to use hyperthermic baths; It did not achieve success in cases of old ankylosis either. Turpentine In the case of infectious polyarthritis, baths stop fever and reduce joint deformity. We managed to achieve extinction traumatic ankylosis of the upper terminal32-year-old; for of the lower extremity, we achieved the disappearance of ankylosis, which lasted 6 years. Ankylosis of the knee is adversely affected by the heaviness of the trunk, constantly pressing on the knee and destroying the surface of the intra-articular cartilage.

Brachiocervical neuritis is cured by turpentine baths sciatica is slower than sciatica due to constant hand movements. Valinsky achieved excellent results in salpingitis. In the second period, from From 1937 to 1946, Prof. Valinsky was engaged in the following observations. In severe cases of jaundice, he noticed that after the first 3-4 baths the volume of the liver, as well as the percentage of bilirubin in the blood, increases, after 10-12 baths, complete recovery came. Excellent results have been are also achieved in cases of pleural adhesions, as well as in cases of post-diphtheria paralysis.

Sweat and sweating. Sweat glands are part of the mechanism that regulates metabolism. Sweating is not a specific regulation like fever and inflammation. Sweating is a clinical symptom of a huge values. The role of sweat is to remove substances that accumulate in the vessels and in extracellular fluids in excessive quantities (after muscular work, after a large dose of heat, after intoxication or after excitement). Patients with impaired metabolism during hyperthermic bath (lasting one hour) is excreted with sweat more acidic substances than the kidneys within 24 hours.Fever

promotes the combustion of metabolites, and sweat excretes them. Sweat and Fever is the body's two defenses. Serious respiratory disorders (pneumothorax, pneumonia, agony) are accompanied by alkaline Then. Postoperative sweat is acidic (pH 3.0 to 6.0). In healthy individuals pH of sweat - 6.0-7.0. Degree of Sweat Acidity During Disease Crises is of paramount importance for the forecast. If the sweat is acidic - The prognosis is favorable, if the sweat is alkaline - the prognosis is extremely serious. Sticky alkaline sweat during agony indicates a very dangerous violation of the acid-base balance, cell disintegration.

When the skin, lungs, kidneys can no longer regulate acid-base balance, sweating remains the last an opportunity to eliminate harmful substances. Constant sweating represents a great relief for the circulatory organs (capillaries, arteries, heart).

Diseased skin is always full of metabolites, it fixes sodium chloride, uric acid, protein molecules. It is necessary to purify the person as a whole, Dermatology, on the other hand, treats only the skin.
Indications for the use of hyperthermic baths:

1) polyneuritis;
2) iridocyclitis;

3) poliomyelitis (infantile paralysis) in the pre-malarial period (in the The best results are given by mixed turpentine baths);
4) in septicemia, it is possible to achieve effective result even in cases where they did not work antibiotics;
5) salpingitis;
6) otitis;
7) gonorrhoeal arthritis;
8) malignant tumors (increased resistance in patients, improvement of blood composition, effective pain reduction);
9) all infectious diseases in children (scarlet fever, measles, diphtheria);
10) whooping cough;
11) post-diphtheria paralysis;
12) persistent pleural exudates;
13) tertiary syphilis of internal organs (progressive paralysis, dryness of the spinal cord).

We will be told: how dare you claim to improve the condition of the sick and even for the healing of a variety of diseases? How dare you to offer a universal method of treatment instead of various drugs means? We answer: the drama of every painful attack is conditioned by accumulation of harmful substances, harmful metabolites, which the body, when attacked, he is not able to decompose, burn, or oxidize. Artificial temperature increase decomposes toxic metabolites and converts giant molecules into molecules with a smaller molecular weight, which are more easily excreted through the kidneys, lungs, and skin.

Dead leaves are burned in gardens, garbage is burned in villages. Hyperthermic baths burn organic dust, clear paths messages - capillaries, purify extracellular and intermediate fluids. This is the secret of the therapeutic versatility of hyperthermic baths. Normal life, somatic and mental, is inconceivable without continuous, rhythmic, controlled combustion.

Non-rhythmic, delayed combustion (e.g., in myxedema), or accelerated (in Graves' disease) are the basis of each pathological deviation. Normalizing the rhythm of combustion waves, Hyperthermic baths again restore the flow of life, biochemical rest, restore proper blood circulation and satisfactory Removal of metabolites. It would also be nice to burn the dead sheets medical literature. It would be necessary to free medical thought from half-dead ideas that clutter pathology and the clinic with all sorts of trifles.

Problems of immunity, antibodies, microbiology, infection, allergies, chronic progressive deformities must be thoroughly revised.

When the importance of combustion, oxidation, capillary blood circulation, movement of extracellular fluids, renal secretions, when they turn to the treatment of the body as a whole, when they begin again examine the patient, instead of rummaging through his papers and certificates, when they will first of all try to straighten the capillary circulation, respiration, absorption and excretion processes in each individual disease, then the disease labels will lose their significance, the number of the number of drugs used will decrease simultaneously with the number of chronic patients overwhelming hospitals.
Never forget the testament of Hippocrates: "A doctor heals. Nature heals."

Contraindications for the use of hyperthermic baths:

1) a condition with increased cerebrospinal fluid pressure;
2) cerebral edema;
3) open pulmonary tuberculosis;
4) pneumonia with extensive pneumonia;
5) myocarditis;
6) myocardial infarction (after 7 weeks, turpentine baths can be started);
7) coronaritis (use only turpentine baths);
8) hypertension (only yellow turpentine baths);
9) acute phlebitis;
10) cirrhosis of the liver.

The works of A.D. Speransky showed that the development of diseases depends on the disorders of the cerebral cortex and midbrain. Intoxication, infection, degeneration can occur only if if the regulation of nervous activity is disturbed. Every violation local circulation, each painful change in any organ is immediately transmitted to the nerve center. After the exhaustion of the nerve centers The second stage of the disease begins, to which you can glue diagnostic label.

If the nerve centers in the cerebral cortex and mesencephalon are awake, if they are not exhausted, they respond to the danger signal quickly and vigorously, and restore normal functional balance. In infectious diseased, according to Speransky (1930), microbes are only starters, starting devices; when the control of the nerve centers is in order, The patient recovers. If the nerve centers are exhausted, then the disease it drags on for a long time; if the centers are completely inhibited, then the patient dies.

It seems to me that Speransky's fascinating concept can be supplemented the following considerations. It is not the label of such and such a disease that determines the patient's future, and the patient's condition at the time of microbial or other disease-causing attack. The outcome of any disease is decided by a satisfactory the state of respiration, blood circulation and excretion of metabolic products.

We must never forget that the nerve centers are the supreme advice biological control - must be supplied through the capillaries with blood good composition, sufficient oxygen and completely are free from harmful metabolic products. Do not forget about interconnections, however, one should stick to the main line and not get lost in the little things. If we assimilate these considerations, then the universal The importance of hyperthermic and turpentine baths.

Turpentine baths

CELL- functional unit of the organism - must ensure its to breathe, to eat, to get rid of garbage. This threefold role is performed by the blood, which through the capillary network is associated with every cell of the body. The importance of the circulatory system capillaries are enormous. As soon as some organ is not enough, supply of blood or lose blood altogether (slowing down the flow of blood or stagnation), its activity against infection will weaken sharply. In the fight against infection, capillaries are the main protector (oxidation, phagocytosis, removal of toxins).

Old age can be defined as the drying out of the body due to gradual closure of capillaries, the appearance of dried cell islets and slowing down life processes. A huge advantage turpentine baths consists in their effect on the capillary network in the as a whole: in the strengthening of its activity and, consequently, in the increase in life potential of each cell. And this is achieved by physiological treatment, not medicines.

These indications alone are sufficient to understand the second field of influence of these Namely, the effect on the main function of tissues. It is especially important to note that baths give good results in the treatment of those diseases, that do not respond to modern drug therapy or treatment which it achieves only a temporary and deceptive effect. These The diseases are as follows:

- general or local arteritis, angina pectoris and arteritis of the lower limbs;
- sciatica, neuritis and polyneuritis;
- Deforming arthrosis and rheumatism;
- Consequences of poliomyelitis and unilateral paralysis, disease Bekhterev, the consequences of myocardial infarction;
- high blood pressure;
- consequences of various injuries (accidents, consequences of military wounds);
- postoperative scars and adhesions.

Turpentine baths, which we use, step by step, opening closed ones capillaries, restore the blood supply to the dried islets in the tissues, provide oxygen flow and drainage to remove metabolites - and the life of tissues and cells is restored. Any chronic disease is premature aging. Any real cure must be be accompanied by rejuvenation. We should and we could die at 100 years old, while remaining relatively young and active.

Turpentine baths are a harmless means of combating aging, as well as with disease. More than 200 patients over 75 years old are living witnesses in Paris of the effectiveness of this treatment. Along with their rheumatic diseases, they lost the stigma old age. The period of heat and water therapy is short: 3-4 months. In winter, most hydropathic facilities are closed. Concentration of active ingredients in warm sources remains always constant. Turpentine baths, on the contrary, Can be used all year round. The concentration of active substances can be change, gradually increase. This is genuine gymnastics for capillaries and re-education of the circulatory system.

In the following, we will deal with two types of liquid: emulsion and solution, which have their own special dosage. For the emulsion There are 18 gradations, for the dosage of the solution 10 gradations. In addition, Mixed baths from a combination of emulsion and solution can be given. For There are 12 gradations of mixed baths, therefore, a total of 40 gradations. Concentration for emulsionand starts with 20 ml diluted in 170-200 l of water in the bath, and reaches 100-120 ml of emulsion per bath. Shared baths with white emulsion, given the number of open capillaries and the number (but not rapidity) of capillary and precapillary systoles, cause moderate rise in blood pressure.

White emulsion and yellow solution have their own indicators. The first performs capillary gymnastics, stimulating skin capillaries and All organs, therefore, act on the general condition. It increases the blood pressure. The other by increasing internal combustion and dilation of capillaries helps to dissolve pathological deposits in the articular cavities, in periarticular tissues, in the walls of blood vessels, in the tendons, in the lens (cataract).

This bath lowers blood pressure. Both are in the highest degrees have an analgesic effect. Both forms of turpentine baths, The action of which complements each other, allows you to adapt the treatment to the each individual case and change it at any time.

This treatment is available to every doctor. It can be used also at home, and when done accurately, it requires only a limited Doctor's observations.

Turpentine baths carried out with good effect in Parisian hospitals are now prescribed by many doctors in Paris. They are accepted French Ministry of Health. Baths should be started at 36 ? C, After 5-10 minutes, reach 39 ?, slowly adding hot water. After three baths, the water temperature is gradually increased to 40 ? starting from the 12th minutes; After the fifth bath, the water temperature is kept at 41

for the last 4 minutes ? and from the 12th bath the water temperature is brought to 42 ?, always making sure that the patient's stay in water at 41 or 42 ? did not exceed 4 minutes.

hypertrophic deforming rheumatism, calcium deposition in the ligaments and in the tendons. With the consequences of cerebral hemorrhage, with myelopathy The yellow solution washes out the remnants of dead cells around the surviving ones neurons, releases the compression of neurons by metabolites and creates favorable conditions for the revival of the latter. In chronic myelopathy with muscle atrophy (for example, some types of spinal tendon), With an increase in blood pressure, you need to start with a series of yellow baths, of course, with a diet poor in salt and proteins; when the maximum pressure reaches 160 mm Hg, white water begins to be added to the yellow solution emulsion (15 - 20 -25 -30 ml, up to 60 ml, white emulsion to 60 ml yellow solution). Mixed baths can be given even at maximum blood pressure 180, including one yellow according to the formula given for hypertension.

In the case of renal hypertension or hypertension, accompanied by urine excretion with a lack of urea (below 10 - 12 g/l), uric acid (less than 0.40 g/l), sodium chloride (less than 7 g/l), you can achieve very good results by prescribing, firstly, a salt-free and protein-poor diet with proteins and, secondly, giving every 3 day bath with 60 ml of yellow solution with a water temperature in the bath of 30-40 ?C, lasting 15 -16 -17 - 18 -20 minutes.

The only method of curing this horrible, incurable by others methods of illness foris included in the use of hyperthermic baths, every 2 days with a water temperature of 37 ?C, constantly reaching 41-42-43 ?C; after the bath, the patient, wrapped in several blankets and drunk with hot drinks profusely for 45 minutes, then he, well covered 2 hours resting in bed. In this way, they strive to cause artificial temperature increase by 0.8 - 1 - 2 - 3 ?C. Results are often striking.

In cases of the consequences of infantile paralysis, almost always accompanied by decrease in blood pressure and tachycardia, pulse is regulated by adonis, and to improve the functioning of the kidneys and liver, it is taken baths with white emulsion 20-25-30-40, up to 90-100 ml (reaction "goosebumps", tingling as if with an electric current, should not last 45 min). Starting from 38 ?C, the second bath - 38.5 ?C, the third - 36 ?C, continue with a water temperature of 39?C, duration 15 minutes. Muscle recovery is achieved for several months and is almost normal blood supply to atrophied parts of the body.

It is pointless to expect an improvement in obliterating endarteritis from the use of various medications and injections, because the disease is still continues to progress and spread to the entire body. Do not There is isolated arthritis of the lower extremities only. If patiently measure the skin temperature not only of the foot and lower leg, but also hands and forearms, it will always be very low. For arteritis Without high blood pressure, white baths are prescribed if arterial pressure above 180 mm - yellow baths; at a pressure of 170 - 190 mm - mixed baths.

It is customary to X-ray the joints affected by the deforming rheumatism in order to summarize the destruction caused by the disease. picture of bone changes. But at the same time, they forget that there are not only bones, but also cartilage, synovial fluid, ligaments, tendons, fascia, muscles, nerves, blood and lymphatic vessels, and the skin around joints, i.e. 11 components; In addition, you need to remember that Intra-articular fluid is in constant contact with extracellular fluids. If you improve at least 8 of these 11 components parts, significant results will be achieved.

It is easy to understand that by creating a natural skin-musculocutaneous-nervous tread, it is possible to achieve a much more realistic and much more better joint function than with arthrodesis and arthroplasty. Baths in combination with an appropriate regimen and treatment of a person as a whole, the regulation of breathing, blood circulation, excretion in the in most cases (80%) help restore calcification in osteoporosis, and in cases of exostosis - normalization of calcium metabolism. In case of hypocalcification (osteomalacia), the dose of calcium is brought to normal, in case of hypercalcifications - dissolve excess calcium, because only through capillaries, only through increased blood supply, it is possible to create normal joint mobility.

There are more than seventy medicines for the treatment of rheumatism. Their The number indicates how ineffective they are, but all are looking for new drugs that act only locally on the joint do not think about need to treat the body as a whole, do not take into account that The disease is a complex of humoral disorders in total human body.

Why do people forget how the bones grow in a breastfed baby? How BreastsThe child receives the reserve material necessary for education bones? From milk, through the villi of the intestines into the blood. Hence it is clear Why it is necessary to give milk to the patient with osteomalacia. For a patient with deforming arthritis, which is almost never accompanied by increase in blood pressure, only white baths are prescribed.

In angina pectoris without an increase in blood pressure - white baths, with high blood pressure - yellow baths, after normalization of pressure - mixed baths. This modest balneotherapy used in angina pectoris, without exception, gives more than satisfactory results, and the attacks stop for a very long time. Thus, Patients are given baths after 3-4 weeks of usual preliminary treatment.

After a myocardial infarction, 6 weeks after recovery, you can start with 10 mixed baths, continue with white baths, including one yellow bath after every 2 white or mixed baths, if blood pressure above 170-180 mm.In

cases of sciatica or cervicobrachial neuritis, if the blood pressure is not above 150 mm, it is necessary to start with daily white baths, including after each 2 white baths one yellow (60 ml, 39-40 ?, 16 min). For the treatment of post-traumatic ankylosis, the consequences of war wounds are prescribed mixed baths, if the blood pressure is 150-180 mm, if it is below 150 mm, then they start with white baths; mobilization is achieved even in cases where When ankylosis lasts 30 years!

In case of adnexitis, it is necessary to start with mixed baths at 39 ? C; after a series of 6-8 baths - short hyperthermic baths from 37 to 42 ? for 15 minutes, with yellow solution. With thrombosis of the temporal artery or central artery retina of the eye, yellow baths with 60 ml should be used at water temperature of 37-42? for 16-17 minutes. results verified by ophthalmologists.

The mechanism of action of the bathtubs is always the same: opening closed capillaries, the influx of oxygen, glucose and other nutrients, improvement of venous blood flow, removal of metabolites, sequential Getting rid of harmful metabolic products. In arteritis - Opening of the vasa-vasorum of the arteries, in myocardial infarction - opening vasa-vasorum of the coronary arteries.

In myelopathy, neuritis, sciatica - improvement of blood flow in the capillaries, nourishing the nerves; improvement of the conditions for the movement of cerebrospinal fluid, from its inception in the arachnoid plexus to its mouth, which consists of from many lymphatic capillaries; Improved traffic conditions fluid contained in neurilemma; Improved circulation conditions fluids through the blood-brain barrier.

In deforming rheumatism, the restoration of exchange between synovial fluid and blood, improved nutrition (oxygen, electrolytes, etc.) and better excretion of metabolites through lymphatic vessels.

Thanks to a layer of castor oil, lye, and olein covering the entire The surface of the water in the bathtub, the loss of animal heat is greatly reduced. There is an accumulation of heat, accelerated combustion of pathogenic substances in blood, lymph, in extracellular fluids.

Deposits of metabolites in articular cavities, in periarticular tissues, In perineuria, they begin to dissolve. The capillaries expand strongly, so The same as with mud baths. But there is a big difference: prand mud only the venous loops of the capillaries are dilated, while the arterial loops are dilated The hinges remain in a narrowed state for a long time. Therefore, patients feel severe fatigue. In yellow turpentine baths, turpentine oil stimulates the activity of arterial capillary loops.

Therapeutic effect:
a) resorption of sediments, dissolution of sediments, giant molecules;
b) general artificial elevation of the body, and non-local, partial, which observed when exposed to ultraviolet waves or diathermy;
c) sweating and excretion of sodium chloride and urea through the skin. After baths, there is no rapid breathing and tachycardia.

The white emulsion does not cause any heat retention, the patient feels "goosebumps", capillaries (arterial and venous loops) open and rhythmically contract (vascular gymnastics). Blood pressure increases, breathing deepens, oxygen flow increases, Combustion increases. The rigidity of muscles and ligaments decreases.

"Yellow" and "White" turpentine has primary analgesic properties. In sciatica, anesthesia is achieved after 14 - 18 baths (in persons of strong physique can take baths daily). With cervical - Shoulder neuritis improves after 24 to 30 baths. With consequences of poliomyelitis, the muscles are strengthened, the ability to walk Without orthopedic devices, it recovers in 18 months. With consequences of military injuries and various accidents of ankylosis is cured in 3-4 months, functional insufficiency disappears much more It is easier than in rheumatics, where the disease develops for 10-30 years.

Mixed baths. Thanks to the different combinations of 2 liquids (white and yellow) create a wide field of activity for the adaptation of bathtubs according to the condition of each patient. With these baths, it turns out Another effect: the release of amino acids into the blood through the opening capillaries that were previously closed.

In the breakdown of blood serum clots from white and red blood Under the influence of platelets, former prisoners in the closed but now opened capillaries of amino acids and among them histamine, the properties of which are well known. Unfortunately, injections Histamine and gastamin ointment do not give a long-term result. The physiological formation of histamine, controlled by many mechanisms of autoregulation, is accompanied by a long-term and ultimately decisive analgesia. To avoid excess histamine during treatment It is always necessary to take care of sufficient renal drainage.

In addition to the analgesic effect, the endogenous open capillaries of the skin, histamine acts as a dilator on the other closed capillaries of the muscular system, on the vaso-vasorum of the arteries extremities (in arthritis), enters the arteries of various organs, going deeper and deeper into the organs of the abdominal and thoracic cavities, into the head and spinal cord, up to the endothelial barrier, into the blood, lymph, cerebrospinal fluid. Finally, we have restoration of normal blood flow, normal blood supply, normal oxidation, normal physiological and mental state, in a word, the health of the whole organism as a whole.

The use of turpentine baths for rheumatic diseases. Pathological anatomical changes in the joints almost always manifestfifth an act of development of a disease of humoral origin. In order to to understand the processes of joint deformation, it is impossible to study

individual anatomical parts of the body, in this way the problem will never be solved rheumatism.

In hypertrophic forms, the elements of bone and cartilage for many years circulate in the fluid that nourishes the joints, in the lymphatic vessels, in the blood vessels and in extracellular fluids. This is the same principle, which is observed annually in the Nile Delta, where the river deposits algae on the flooded shores.
Atrophic forms of deforming rheumatism owe their Increased secretion of articular tissue elements: losses calcium causes osteoporosis. This is the same process that is observed when the waves of the ocean tear out and destroy parts of the surface of the rocks.

In hypertrophic forms, an increased inflow always prevails calcium; in atrophic - calcium loss. But always, with both forms, the mineral part of the bone composition (calcium) before deposition in the is in the blood. Calcium circulates in the blood before is fixed in the joint and in the bone, and before it is eliminated from the organism. The percentage of calcium in the blood does not mean anything, because electrolytes very quickly pass from the blood to the lymph, and from the lymph to the extracellular fluids. The problem of rheumatism is a problem of equilibrium in the humoral composition, humoral eurhythmia and harmony.

The rate of sedimentation of red blood cells is not reliable diagnostic indicator, it depends on the number of molecules circulating in the blood. During pregnancy, during resorption hematomas, postoperative scars, after burns, rapid sedimentation is always enlarged without any infectious or microbial process.

It is impossible to improve or cure rheumatic diseases without restoring humoral harmony in the blood, lymph and extracellular liquids. Therefore, it is necessary: first, to open a large locked door for renal secretions; secondly, to carefully percussion and auscultate the lungs. You need to look for not small scars or spots. You need to know what kind of breathing: deep, medium or shallow. Deep

or scanty breathing can only be assessed by auscultation the patient in a sitting or standing position. If breathing is insufficient, then the oxygen inflow decreases, the combustion of metabolites is incomplete and A cure for rheumatism cannot be achieved because large molecules do not oxidize, do not break down and clog the fluid phase of the body.

Fortunately, the white emulsion opens closed pulmonary capillaries. To speed up their opening, it is often useful to make a series of intramuscular injections of synthetic camphor (campho-rhodaus - 10% aqueous solution camphoronsodium sulfate or camphor salts, i.e. camphor sulfate with piperazine) - 1-2 ml of 18-24 injections, one per day. Without a heating pad The liver can neither be cured nor cured by any chronic disease.

If the breathing volume is weak, if the retraction of the axillary line is determined and the base of the lungs, it is necessary to do hot wraps for a month chest. If children have very red cheeks (a sign of chronic whooping cough), it is necessary to do hot chest wraps for 5 weeks before the start of baths. Chest wraps should be continued on days that do not occupied by baths, for several months of heatWow balneotherapy.

If the skin is granulated, if there are nettle fever, eczema, traces of furunculosis, it is necessary to For several weeks, take baths with an infusion of walnut leaves avoiding skin irritation by applying hot wraps at the same time chest. You can start turpentine baths only when the skin will become smooth, lively and beautiful.

Nosology turpentine baths

1	Arteritis	Arterial pressure above 140 mm Hg	Yellow baths
		Arterial pressure not exceeding 140 mm Hg	White baths
2	Hemiplegia (after cerebral hemorrhage)		Yellow baths every two days
3	Hypertension		Yellow baths
4	Glaucoma, retinitis		Yellow baths
5	Diabetes mellitus		Yellow baths

6	Myocardial infarction (after-effects)	Arterial pressure above 150 mm Hg	Yellow baths
		Arterial pressure below 150 mm Hg	White baths
7	Sciatica	With normal or elevated blood pressure	White baths
		With lowered blood pressure (first 10 days every other day, then every 3?4 days)	Yellow baths
8	Bone fractures	With ankylosis	Yellow baths
		With muscle atrophy	White baths
9	Mastoiditis	Yellow baths	Yellow baths
10	Thrush (infancy)	If body weight does not exceed 10 kg	Yellow baths, 25ml
		If body weight is between 10 and 20 kg	Yellow baths, 30ml
		If body weight is 30?40 kg	Yellow baths, 40ml
11	Muscular atrophy (progressive)	Series of yellow baths (10?12), then mixed baths	Yellow (10-12) when mixed baths
12	Rejuvenation (elderly)	With low blood pressure	White baths
		With arterial pressure above 140 mm Hg (when BP decreases to 130 mm Hg: 2 white baths after one yellow bath; on days without baths: hot chest wraps)	Yellow baths
13	Poliomyelitis (after-effects)	White baths	White baths
14	Rheumatism	Progressive, hypertrophic form (with exostoses)	Yellow baths
		Deforming with osteoporosis	White baths
15	Rickets, osteomalacia		White baths
16	Salpingitis, adnexitis		Yellow baths
17	Spondyloarthrosis; osteodystrophy (Paget?s disease)		Yellow baths

18	Thrombosis of the central retinal artery		Yellow baths

If the doctor would like to add injections to our hydrotherapeutic treatment, antibiotics, hormones, ultrasound, it is necessary to stop taking it immediately baths. We demand a deep respect for the wisdom of the body. We reject In such cases, we remove any medical bargaining from ourselves responsibility.

A Happy Encounter:
The Essence of Turpentine and the Turpentine Bath

In June 1960. I have been invited to several conferences in Geneva and Lausanne. Among the doctors who were present at my reports, a happy accident gave I have the opportunity to meet a famous surgeon, a member of the Academy of Surgery in Paris, a member of the Medical Academy of France Jentzer (1928). I was lucky enough to receive it from him book entitled:

"Biological Treatment of Infections". How surprised I was to read and re-reading this wonderful work!
For the first time in my long professional life, I met a great surgeon, who sought all means to minimize and limit surgical interventions.
For the first time in the vast medical literature, I found a job as a foreman who was not satisfied with the narrowness of surgical technique, which undertook a thorough search in the pharmacology and experimental medicine and tested his experiments not only on laboratory animals, but primarily on himself.
And how great was my amazement when I found in his work an in-depth the study of the action of various essences, and among them the study of therapeutic value of the essence of turpentine and li-pids, which are included in the are the main part of our common balneotherapy.

In the excellent work of Prof. Jentzer there is not only an account of his results obtained on a large number of patients, he also has a merit in the collection of rich literature describing the use of turpentine essence for the treatment of numerous painful states.
I would like to draw the attention of the medical world to this wonderful work full of biological wisdom. Here are a few quotes.
"Intracavitary surgery," writes Jenzer, "should, as opportunity to be avoided in infections and should be considered as a last resort." I agree a thousand times! They operate too much. "From the very beginning I began to treat each local infection as a general disease"...
This idea confirms our earlier one, namely, that there is no local disease, even panaritium is a common disease.

And now let me present a few data collected in the book Prof. Jentzer, on the value of the essence of turpentine and on the therapeutic results obtained on patients in different countries. Calvello proved that the solution of turpentine essence when washing hands has the same as solution of sulema disinfectant, without possessing side inconveniences.

Hall claims that the evaporation of turpentine essence inhibits development of Koch's bacilli on agar-agar; Klingmuller introduced subcutaneously or intramuscularly 1-2 times 0.2 g of turpentine in a 20% solution olive oil. In his opinion, these injections in some cases pyemia, septicemia, erysipelas have a specific bactericidal effect.

From the report of G.H. Turner, it can be concluded that the essence of turpentine It is an excellent hemostatic agent. The same Klingm?ler, Using the same injections of turpentine, I achieved good results in chronic furunculosis, acne and abscesses of large sweat glands.

Meyer tested the Klingm?ler method on 70 patients. He did in buttock, an injection of a 20% solution of turpentine with peanut oil and repeated injections every 4 days. He received favorable resultsyou are at the treatment of dermatoses, chronic furunculosis, severe frostbite (restoration of blood circulation) and in some cases of varicose veins ulcers on the lower extremities.
Prof. Jenzer managed to create two drugs - "temazalin" and "lipodeterpenol", which can have a beneficial effect in any septicemia - phlegmon, septic wounds, carbuncles, Siberian ulcers, rectal fistulas, purulent pleurisy and many others infectious diseases.

When, having read Krogh's seminal work on life, capillaries, we began to search for means of influencing them, on their inertness, when we found in white emulsion the ability to revive capillaries, and in a yellow solution - a way to dissolve harmful metabolites, fixed in tissues and wandering in blood plasma, we did not yet know other advantages of turpentine essence. Thanks to the search of Prof.

Jenzer, we are happy to state the advantage of the action of turpentine baths in comparison with other balneological means.

However, despite our appreciation and admiration for the work of Prof. Jenzer, we are compelled to emphasize our disagreement with some concepts of the famous scientist. Thus, Prof. Jentzer takes it this way called inventions of modern medicine. I agree with the improvement in areas of anesthesia and surgical technique. But in the field of general medicine forced to demand radical changes.

When will cardiologists begin to be interested in a complete urine test, which gives more accurate information than blood tests when they agree with the need to increase the supply of oxygen to myocardial fibrils, when recognize the deleterious effects of agglomeration of harmful metabolites, retained in the blood and lymph due to renal failure, they will be forced to completely revise their diagnosis and therapy.

When neurologists understand the great importance of hypoxemia, insufficiency, disorders of peripheral circulation, affecting the normal brain functions, with peripheral nerves, they will replace low-value useless medicines with a dietary regimen and adequate balneotherapy.

When ophthalmologists review and think through the intimate correlations between eyeball and brain, when they assume that the nutrition of the eye of the apple is connected with the circulatory and lymphatic irrigation systems of the brain, their therapy will become more effective and extensive.

When will dermatologists understand that skin diseases are an expression of influence of the pathological composition of the blood, that the blood "pushes out" harmful metabolites in the skin, in the dermis; when psychiatrists begin to study everything deviations of physiological functions, when they are engaged in the elimination of physiological disorders (respiration, circulation, elimination), more half of their patients will be completely cured.

When pediatricians will demand a reduction in the number of preventive vaccinations; when rheumatologists suspend their intra-articular injections; when angiologists stop using arteriography, which sometimes completely destroys blood vessels due to penetration dense substances that are difficult to eliminate; when they stop unacceptable abuse of antibiotics; when the prescriptions of narrow specialists will be monitored by a general medicine doctor; when together In order to systematically wage an open war with local pwill seek the organic consent of all bodies, tissues and cells, then we will be able to share the euphoria of our large friend of Prof. Jenzer, and we will exclaim with him: Long live Modern medicine! Long live the integral medicine of the holistic man!

Chapter 8
Therapy
Diagnosis

The reader has already I formed, of course, a broad idea of our therapy. He will understand that our treatment is aimed at the patient rather than at illness; that it is more anxious to correct deficient functions than to heal the numerous symptoms of which he complains patient; that it is based primarily on a thorough and complete examination of the body and tries more to eliminate the disorder balance than its consequences.

The drug therapy we use is limited to a few simple medicines, the properties of which have long been well known and The action of which is supported by non-medicinal medical means: dietary regimen, baths, chest wraps, a heating pad on the liver area. This is how we act in practice.

The patient enters the doctor's office, and the very first contact gives us precious information about its general condition, its viability and even about his illness. Skin color, eye expression, and coloration are noted of the lips, nails (acrocyanosis), dry or wet hands (dyshyde-rose). We We start with an outpatient medical card: name, age, profession, height, weight, number of children, if it is a woman.

Then we ask the patient what he is complaining about now, not allowing to go into details; we ask how he sleeps (the number of hours, quality of sleep), what is his appetite, his digestion, his stool (as often as etc.), his urine (weight, amount per day, etc.); whether they are neat or abundant whether there are any clots.

We begin the examination of the patient: a complete and systematic examination gives more information than a survey because it is objective and allows for accurate monitor the development of the disease. As for the past, either illness left consequences or traces and you must find them, or such There are no traces left, and then we are not interested in it at the moment.

Of all the little ailments we found during the examination, a pathophysiological "portrait" of the patient will be compiled, summarizing our an opinion about his condition and suggesting treatment. You have to mentally "see" each of the functions of his patient, each of his organs, to detect violations there, as well as to have an idea of the mental state of the patient.

If the patient brings an X-ray or laboratory tests, well, if you get to know them after you have already finished your inspection and made your own opinion, only to confirm or cancel your diagnosis. The tools you should use are very simple: phonendoscope, a wooden stethoscope (which reduces incidental noises and does not distort the timbre of the listened noises at all), a device for measuring blood pressure, a hammer for the study of reflex reactions, the ribbon-shaped centimeter, your ears, your eyes, your hands, and your medical logic.

The pulse of a sitting patient is examined, then a standing patient. Number deviation pulse beats in a sitting and standing person indicates a reaction myocardial adaptability to stress. If the difference between 2 digits no more than 8, myocardial adaptability is

satisfactory. Notice also the nature of the pulse: acute (renal), jumping (hypertonic), round (aortic), tense or easily compressible. Are your hands wet (urinary or circulatory disorders), cold and cyanotic (acrocyanosis) or swollen (venous disorders, edema).

Zatthe patient sits with his back to the doctor, putting his hands on his knees, with his shoulders lowered. Tap the spinous processes of the cervical vertebrae, dorsal, lumbar. If the tapping is painful or leaves erythema, it is necessary to think about decalcification of the spinal column. Then with the handle The hammer is passed over the skin of the patient's back and the skin response (white or red line, simple or urticarial dermographism) will indicate reactivity of the capillary system to capillary atony or their increased excitability.

The nature of the skin: whether it is dry (dehydrated), oily, infiltrated, alive? Tapping (percussion) of the lungs: dullness in the interscapular space makes you think about a rush of blood to the lymph nodes; sonorous breathing - about bronchiectasis, about cavities, about emphysema of the lungs and about pneumothorax.

Auscultation of the lungs: the patient breathes freely, hands on the knees, mouth open. Carefully auscultate the tops of the lungs, axial lines, grounds. Look there for more conventional pulmonary, bronchial, pleural signs to determine the volume of normal breathing, which is very is often insufficient and causes much suffering.

Mark on the card whether it is deep, medium or weak breathing, which it: vesicular, bronchial, amphora, discontinuous, whether exhalation is long. Then invite the patient to whisper to say: "kitty-kitty-kitty", auscultating it and symmetrically comparing the timbre of this whispering on both sides of the spine; amphoric timbre - think of microcavity, of microbronchiectasis; In this way, you can detect microscopic bronchiectasis, invisible to X-rays.

A large cavity can be felt already during auscultation, the cavity medium-sized - with the help of auscultation and whispering, a small cavity - Only with the help of "kitty-kitty". Bronchial breathing at restricted area means compression of lung tissue (bronchial "kis-kis" and disease without fever), a neoplasm of the connective tissue, which captured the lobes of the lung. Small sonorous wheezes indicate bronchostenosis; wide resonance - on swollen lymph nodes; if they symmetrical - these are the consequences of whooping cough, if unilateral - this is consequences of specific inflammation of the lobe of the lung.

Then invite the patient to pronounce in a low, slow half-whisper: one, two, three. In auscultation, depending on the resonance, think about local connective tissue scar (a consequence of peribronchitis, bronchopneumonia) or complete infiltration of connective tissue, with which successive hypoxemia becomes the basis for the most various diseases. If such a conventional auscultation leaves you with the slightest uncertainty, offer your patient to change position: Put it on your stomach, on your right and left sides to unload one or the other another area of the lung, and auscultate, compare.

This complete exploration of the lungs will introduce you to one of the four great functions of the body - by breathing, disorders of which always cause consequences that go beyond the limits of local significance, because entail a violation of the blood composition. Then ask the patient, all sitting on a stool, lean forward and hit him on the right and left sides with the back of the hand. If it causes pain or at least an unpleasant sensation - think about hyperemia of the renal pelvis on side of the pain.

Then The patient rises and you examine his palate and throat. Pale The palate indicates prolonged respiratory failure. Narrowing of the palatal capillaries is a reflection of the narrowing of the pulmonary capillaries. Difficulty breathing in a pink larynx indicates, on the contrary, Recent origin of insufficiency. Dilated small veins on soft palate, on the uvula, on the temples of the soft palate correspond to stagnation in the venous system, enlarged liver, enlarged spleen, and hemorrhoids. Then think of malaria.

Then examine the breathing of the apices of the lungs in the sub- and supraclavicular cavities and when the patient holds his breath, listen to the heart murmurs on the tops, coming from the aorta and pulmonary artery. Emphasis on the second aortic tone makes you look for hypertension or kidney failure, accent pulmonary artery indicates a decrease in the respiratory surface.

Palpate the exit points of the supra- and subophthalmic nerves, which indicate the condition of the frontal and maxillary sinuses. If at the same time the patient feels At least a little pain, this is sinusitis. Comparing sensitivity to touch of the finger of the subclavian cavities (between the attachment of the legs sternocleidomicular nipple muscle) can often be found on the right (upper laryngeal nerve) impaired vesicular breathing and irritation of the biliary blister, and on the left - irritation in the important duodenopancreatic area.

Examine the sensitivity of the heart on both sides with the pressure of a finger sternum. If the sensitivity of the "aortic points" is increased, think about aortitis or angina pectoris. Then measure the dullness of the heart with a simple tapping (we remind you that the result of the relative cardiac dullness corresponds to lung overload) and measure the diameter of the aorta (aortic arch) and the middle diameter of the heart (enlargement of the heart left or right).

Then - hepatic dullness. The liver very often increases in volume with the following mechanical consequences: reduced mobility diaphragm, compression of the right pulmonary base; venous congestion gantry system; stagnation of blood in the blood lakes of the liver and spleen, which is a great loss for the entire circulatory system, including number and small circle, which in turn prevents movement diaphragms; venous congestion in internal organs, decreased work heart.
Then proceed to the examination of the patient's joints in a standing position - shoulder, elbow, hands - to detect signs of neuritis and

joint mobility disorders. Then the patient tenses his muscles and determine their strength.

Abdominal examination: gently palpate the abdomen and a pit in the epigastrium. If you palpate the abdomen very carefully, it is easy to detect gastrospasm, pyloritis, duodenitis, cholecystitis, spasmodic colitis, megacolon, intra-abdominal tumors. Palpate both iliacs areas to detect a defensive reaction and pain in the abdominal wall.

At the McBurney point, as well as on the left, try to feel the cord, descending obliquely from the sides to the bladder - the ureter. If he dilated and sensitive, this indicates inflammation of the upper urinary tract ways, sand in the urine. This will be an accurate indication for cleansing the urinary tract paths. Then percussion the large intestine, marking areas of dullness, bloating, flatulence. In the epigastric fossa, feel the pulsation abdominal aorta.

In addition to these generally accepted methods,During the examination of the patient, attention is paid to ascites, peritonitis, intracavitary tumors, hemorrhoids, diseases genitals. Examine and compare the temperature of the feet, legs, thighs (arteritis-phlebitis), find a pulse in your legs, check for ankle swelling Examine the joints of the lower extremities, then Check the Las?ue sign, reflexes.

After this general examination, you should have a complete impression of the and his illness should be clear to you. You have to finish examination of the patient with a complete urine analysis and, if possible, blood test (number of leukocytes, leukocyte formula, sugar in the platelets, and erythrocyte sedimentation rate).

Finally, there is a detailed survey about the patient's life, work, and worries, which often provides clues to the diagnosis. It remains to systematize features found by their relative importance. What is the starting point period? Are these respiratory disorders that caused hypoxemia of various tissues, or peripheral circulatory disorders, or accumulation metabolites in extracellular fluids, or blockage of excretory pathways (biliary, digestive, renal, cutaneous).

Treatment, as we have already said, should be aimed at the person in the as a whole, taking into account his strengths, his possibilities and his complaints. First of all, it is necessary to strive to restore four main functions body: respiration, blood circulation, excretion, metabolism; In other words, to return to the body its means of defense against a variety of enemies, which they take advantage of the weakening of its resistance to cause disease. We We attach great diagnostic importance to a complete examination of urine - a true "renal stethoscope" of the body's general metabolism. Next, we Let's explain in more detail the importance of a complete urine test.

Urine test.

1. Specific gravity. With an average diet (bread, meat, potatoes, butter, milk, dough products) and medium activity specific gravity of urine ranges from 1018 to 1022. With a specific gravity of 1018 and the amount of urine 1500 ml of solids is usually between 37 and 43 g/l, i.e. 53 g in day. With a specific gravity of 1022 and a urine amount of 1200 ml, 45 g/l of solids, 54 g per day.

A specific gravity of more than 1023 means possible irritation of the convoluted tubules of the kidneys, as well as ureters, bladder and urethra. If the specific gravity of urine reaches 1027-1030 With an increased amount of urine, you need to think about diabetes. If the specific The weight when measured with a urometer remains 1000-1010 for a long time, you can put The diagnosis is nephrosclerosis.

2. Presence of protein. The amount of urea is 23-25 g/l, uric acid is 1 g, ammonia 1 g/l indicates increased metabolism.

If the patient eats meat, fish, cheese, and if at the same time the volume of urine in The course of the day remains normal (1200-1500 ml), and the amount of protein remains enlarged, you need to think about the developing pulmonary cavernous tuberculosis (an increase in urea occurs from the massive destruction of cytoplasm of alveolar cells) or thyrotoxicosis (thyroxine - secretion thyroid gland injected into the bloodstream acts as bellows, causing faster and more intensive combustion of cytoplasmic albumins in all cells of the body, up to malignant tumors). Of course, There may also be a combination of developing tuberculosis with renal tuberculosis Not Donestaticity. In this case, there is also a decrease in excretion sodium chloride (4-6 g/l).

3. Calcium excretion. Normal - 180 mg/l. If it is reduced (100 mg/l), then we need to think: in adults - about chronic hypertrophic rheumatism, ankylosing spondylitis, Pag?s disease, scleroderma. If there is a excess calcium in the urine, you need to think: in adults - osteomalacia, o chronic hypotrophic rheumatism (osteoporosis), in children - about late rickets.

In these forms, the excretion of calcium is 300-600 mg/l Calcium can clog the urinary tubules and cause stones to form or sediments in the form of sand. If you realize what a multitude information and clarifications is given by a correctly understood urine test, then you have the right to consider it a "renal stethoscope", much more perfect method than cystoscopy.

Rational therapy

Lack of all pathophysiological experiments consists in the rapidity of the course of painful phenomena caused in experimental laboratory animals by operating or chemical shock. In human pathology, the usual development of painful disorders require several weeks for acute illnesses and several months or even years for chronic diseases.

Any acceleration of reactions in laboratory experiments leads to false ideas about the process. If only it were possible for some laboratory a way to turn a grain into a plant in a few minutes, then a little it would be possible to find out about the growth of the plant. Any artificial acceleration is destructive process. When they fly through pathological landscapes, there is neither the time necessary for observation, nor the sharpness visual perception, which would help to catch too fast changes.
Principles of rational therapy.

I. If there is a connection and innumerable synergies between all cells and by all bodies, it is na?e to give the rights of citizenship to any local medicine, medicine aimed at an isolated organ. No local diseases, even panaritium is not a local disease.

II. A clinic cannot exist without complete physiology. And the full Physiology is incomprehensible if it is not given the right role and the right place, which it deserves:

1) in the life and function of capillaries,
2) in the role of diaphragm,
3) in extracellular and intracellular fluids,
4) in latent renal failure,
5) in widespread hypoxemia,
6) in skin functions.

There is no such disease to which it would be possible to apply effective treatment, without taking into account all the previously received cognition.

III. In a living organism there is an enormous reserve force, which Clinical therapy should release by removing all obstacles interfering with the functions of respiration, nutrition and excretion. Na?e and dangerous try to cure with medications alone. The ideal of a true clinical therapy should be more and more reduced pharmacodynamic arsenal and the replacement of drugs with simple measures.

It is necessary to give heat or cold in a timely manner, depending on the need, stimulating the activity of capillaries, releasing the blocked diaphragm, stimulating not with crude medicines, but with an appropriate regimen and diet renal activity, studying and taking into account the physiology of the skin.

You can't buy health in a pharmacy. It is necessary to support the body, to help it in its efforts to adapt to the environment, to atmospheric, food, emotional factors. The premorbid state of the organism is decided by the possibility of attacks by infectious diseases.

For example. Four people caught a cold or were exposed to a number of excesses in nutrition. The first has croupous pneumonia: he had too much prothrombin in the liver or too many platelets in the blood. The second has catarrhal pneumonia: he has had it for too long The mucous membranes of the nose, pharynx, legs were inflamed for too long remained cold, the liver was cluttered. The third excited his autonomic nervous system and portal circulation by excessive food, alcohol, sexual excesses, too hot or too much cold drink: he fell ill with cholelithiasis. The fourth in childhoodirritable parents or teachers were too excited: he fell ill with meningitis, encephalitis or pulmonary tuberculosis.

Pharmaceutical bacchanalia. Doctors are bombarded with countless new antibiotics, anticoagulants, antihypertensives, advertisements chemical industry. Doctors must, in order to preserve their intellectual balance, to demand a vacation for several months, to free yourself from pharmacological flooding and surgical storms.

We completely forget the proverb: "the slower you go, the farther you go" and that's it we are more involved in the flow that rushes faster than sound.

You need to stop, catch your breath, think about the situation of modern therapy. What does the result of unheard-of progress look like? Reduction of infectious diseases? That's good. Ability to cure severe infections, incurable before the era of antibiotics? That's good. Penetration surgical scalpel to previously unreachable areas? That's good. But, on the other hand, there is an increase in the number of diseases of degeneration, the number of hypertensive, cardiovascular, mental patients, malignant tumors. Has the social insurance budget decreased? Not at all. Haven't allergic diseases increased a hundredfold? Is it Has the number of malignant tumors decreased? Not at all.

Have you ever experienced a flu pandemic that struck in 8 months? 80% of Europe's population? Was there so much observed before the era of antibiotics? cases of ultrachronic, ultrapersistent, latent pneumonia, No fever, no cough, no phlegm, taking out most of the population out of order? Bronchiolitis (capillary bronchitis) has become a walking coin, Because chest X-rays have been replaced by correct auscultation, now everyone is in a hurry and everyone has no time.

How many unfortunate patients with their obvious illness run away from one specialist to another, because they are almost never subjected to full inspection. Documents and certificates are studied, but not examined a patient who has to appeal for salvation to psychoanalysts and healers.

Isn't it striking to see the frightening number of cases of otitis media in children who Do they repeat paracentosis? There are often cases when The eardrum is pierced 5, 8 and even 10 times. In fact, Is there a truly scientific pharmacology? Outstanding pharmacologist Prof. Munk (1951) in his fundamental work develops A few thoughts that deserve in-depth discussion.

It defends the advantage of old-school appointments in the first place. Munch claims that the forced need to choose medicines, in advance fabricated by the chemical industry, with their strict dosage, makes the modern doctor a slave to the idea imposed by chemists. He believes that experiments on laboratory animals are incomplete. Theories and hypotheses about action of new drugs are too imperfect. Specialization medicines has expanded so much that the unfortunate medical practitioners in the they are lost.

When evaluating a new drug, one should not lose sight of the ability to to natural self-healing. Medicine exists thousands of years, patients were treated in a variety of ways and very often fantastic medicines. Some of these patients perfectly overcame both the disease and the treatment, often wrong to the point of absurdity. If The doctor does not is able to assess the body's defenses, he will not be able to determine the meaning of the medications prescribed to them.

Back (1956) in his interesting book Principles of Pathophysiology emphasizes the importance of autopharmacology of the body. Mechanical Look on the Universe makes us forget the concept of natural healing and creates a desire to find a way to artificially, violently and rapid recovery, which often leads to relapses. Medicinal polyprogmazy suppresses an acute disease and too often, create chronic diseases. Chronic patients, having reached despair, They turn to herbalists, healers.

Every therapeutic action must be based on a flawless logic. It is always necessary to outline a constructive treatment plan. Never It is necessary to chase too fast and effective results. Have to accurately assess and take into account the body's defenses. It is always necessary be attentive to the increase in body temperature. Instead of schematic treatment, for example: pneumonia - penicillin, pulmonary tuberculosis - streptomycin and pneumothorax, myocardial infarction - Strophanthin, hypertension - drugs that lower blood pressure blood, we must first of all remember that the object of our treatment is not a frozen mass, but a constantly changing and developing living organism.

True therapy, biotherapy, improves above all by modest, but effective efforts to increase the energy respiration, blood circulation, excretion of metabolites, digestibility food. There is no acceptable therapy (except in emergency cases) without preliminary restoration of energy balance. With a good energy balance, the amount of drugs will be reduced, the doses of reduced, the cure will not be so striking, but it will be more perfect and will not be accompanied by any complications.

At the beginning of this century, the ever-changing hypotheses of experimental medicine banished from medical education the art of observing clinical picture, correctly assess the patient's condition; Laboratory Research is increasingly dominating diagnoses, stories diseases are studied better than the patient himself. How many healthy people overcrowded sanatoriums on the basis of X-rays, in which only the primary affect could be detected. How many healthy people was declared syphilitic only on the basis of a positive reaction Wassermann in the first years after the discovery of this serological reaction!

How many healthy, but tired people fell into despair from bad decoded electrocardiogram. Such an electrocardiographic angina pectoris disappeared after a few days of physical and moral peace. A wise, deep diagnosis based on the examination of a person In general, it no longer exists. Engaged in the study of new drugs, Hospital assistants do not have time for attentive observation of patients. In the correct assessment of the latest "acquisitions" experimental pharmacology is the last word defining their dignity, belongs to the clinic. But it takes time to accurately analysis and distinction between autopharmacology and simply pharmacology.

Instead of dealing with patients in detail, they deal with syndromes, allergies, endocrinological disorders, functional Insufficientelectrocardiograms, vitamin fasting, etc. You need to train yourself again and again to take into account pain, cough, vomiting, jaundice, boils, eczema, rashes not as an alarm of the patient organ, and as a living archive - the language of the whole organism.

Narrow specialists can be considered auxiliary experts, who are able to explain to the general practitioner the state of individual organs, but incapable of forming a complete and definite judgment. Huge the ability of the body to defeat diseases and morphological changes are always easy to identify if you take the trouble to think it over as a whole normal physiology and pathology.

What not to do:

1) intravenous injections,
2) arteriography,
3) electroshock,
4) use antibiotics in mild to moderately severe cases, for excluding an urgent need,
5) probe the veins to the right ventricle of the heart.

Do not start any treatment:

1) without being aware of the respiratory volume (thorough auscultation lungs plus aus-cultivation in whispered speech);

2) without auscultation of the heart with a record in the medical history about the nature of the second tone on the aorta and pulmonary artery;

3) without measuring the vertical size of the liver and spleen;

4) without a complete urine analysis, taking into account the monthly excretion of urea, sodium chloride, phosphates, ammonium, calcium, erythrocytes, cylinders, renal cells (calciuria provides more valuable information than calcemia; The azotemic index is less important than the data on the amount of monthly urea secretions in the urine);

5) not freeing himself from the na?e belief in the importance of X-rays;

6) without palpation at the McBurney point, which should be performed very gently, without much pressure, then it will be easy to find that the right the ureter is noticeably dilated or thickened. In this way, you can avoid unnecessary further studies of the cecum area and easily establish disease of the renal pelvis (renal colic, stones, various nephropathy and hydronephrosis);

7) exclusively trusting the readings of the electrocardiograph (an electrocardiogram gives the same picture not only in serious heart disorders, but in some cases in healthy people, for example, after severe physical fatigue, after a severe flu, tiresome mental work and other tensions); Era electrocardiographic and vectorcardiographic methods research, certainly interesting, but very often ineffective, which has dominated the cardiology scene for so many years, - ended, and with it our speculative discussions" (preface by Soulier (Soulie) to the book "Vascular Pathology" by Marceau Serveille (M. Serveille, 1952));

8) without studying the pulse and its nature (renal, hepatic, aortic, pulmonary, influenza), pulsation rate, number of breaths (cyanosis of the lips and nails will better show you the state of blood circulation than electrocardiogram; determining the completeness of diaphragm movements is much more is more important than an ECG);

9) based on blood cholesterol indicators (cholesterol is injected, give fatty food to rabbits, herbivores and make ultra-dogmaticConclusions about the metabolism of man - omnivorous animal, think about it again);

10) without comparing the temperature of each patient's arms and legs and the mark difference (try with your hand, which should be warm, or measure the external temperature of the extremities with a skin thermometer; So you It is better to find out the presence of vascular disorders than by oscilloscope).

A complete urinalysis detects substances retained in the extracellular liquids, with the same accuracy as a spectroscope explains the encrypted message hidden in the ray. Without a spectroscope: astrophysics and astrochemistry would be impossible. Without a complete urine analysis, it is impossible to determine a painful state, rational treatment is impossible.

Therapy should avoid too rapid destructive reactions. Never, with rare exceptions, should you use antipyretics funds. Fever is almost always life-saving. Fast Lowering the fever reduces the body's defenses.

This correctly applied method allows the doctor to examine each patient as he was examined in the old clinic of the early XX century, since then The only difference is that now we can rely on modern physiology, enriched by the works of Krogh, Peters, Gamble, disposing of the huge therapeutic possibilities of balneotherapy, diet therapy and device-free thermotherapy. Why has it been medical for a hundred years now? The corporation experiences the greatest joy every time they open A new drug? And why is every honest doctor now frightened when The post brings countless avenues of unbridled chemical industry?

Because at the beginning of our century, each new remedy was the result of careful observations of the patient by the clinic. The creators of medicines were unselfish, they did not use material benefits from their discoveries. Now the chemical industry organized obscene advertising to impose on doctors every day, almost every hour, new drugs and new methods, and this advertisement even medical literature is overwhelmed.

Our therapy. The demarcation line between modern therapy and ours It is characterized by the following foundations.

1. Modern antibiotic therapy preys on microbes and At the same time, he cultivates "resistant" microbes and mycoses.

We try to activate energy reserves of the human body, using a very A limited number of medications, maxim?-mo avoiding toxic and oppressive, which eliminate unpleasant sensations, but reduce energy reserves.

Hyperthermic baths cope with almost all infectious diseases. Hot chest wraps cure everything pneumonopathy, including pulmonary tuberculosis, in a shorter time than antibiotics, which we occasionally prescribe in very cautious doses with in large intervals.

2. Modern therapy is aimed only at the dense part of the organ, neglecting the humoral part of organs and tissues. We are completely busy to penetrate into the composition of the extracellular fluids of each patient, trying to straighten out their acid-base and mineral equilibrium and by means of diet and local and general hydrotherapy, by means ofIn this case, there is a lot purpose of mineral waters, the normal distribution of these liquids in the various body cavities.

3. Modern therapy is divided into 30 specialized doctrines. Our therapy is holistic. A person needs to be treated as a whole.

A narrow specialist remains and will remain an expert. We ask him board and its control, but only a clinician with a broad outlook remains a judge.

4. Modern therapy neglects the capillaries that are in charge of the deep blood supply to organs and tissues in which 80% of blood circulates. Our capillary therapy with therapeutic baths, varying appropriately their dosage, improves the condition or completely cures deforming rheumatism, arteritis, spondylosis, traumatic ankylosis, persistent sciatica, the consequences of myocardial infarction, progressive muscular atrophy, angina pectoris, myelopathy, consequences of cerebral hemorrhage, glaucoma.

5. In the field of neurology, the diagnosis reaches almost mathematical accuracy. But the therapy used remains illusory. Our Therapy opens up wonderful opportunities for the treatment of paralysis and consequences poliomyelitis. We restore the oxygen supply to neurons, their blood supply, free the nervous system from toxic metabolites periodic use of leeches, diet and physiological hydrotherapy.

6. In the field of dermatology, modern therapy uses local treatment ointments, emulsions and X-ray irradiation. We are trying to increase the oxygen supply to the blood for the detoxification of extracellular fluids by improving liver function and especially excretory function abilities of the kidneys, using hydrotherapy (baths with walnut leaves) walnut baths, baths with bicarbonate of soda, baths of the Rosh Pose type at home patient).

7. Modern therapy tries to treat leukemia decrease in the number of leukocytes by toxic drugs, neglecting the need to free the body from dead cells. According to our believe that the heaviness of leukemia comes from the huge accumulation of the dead leukocytes, which clog capillaries, causing small bionecrosis. The decomposition of leukocyte corpses is accompanied by the appearance of protein toxins - the true cause of the fatal outcome of leukemia.

Protein intoxication, capillary occlusion by cell products decay is the main factor. Instead of killing live white blood cells, we We try to remove dead leukocytes from the body.