

New possibilities for the treatment of eye diseases

Dr. Ljudmila Vukosavljević, MD, Belgrade, Serbia

I am glad to share some of my experiences and delight with BICOM devices. From day to day, working on this device, made me understand how great its capabilities are and how interesting and creative it is for working with patients.

I would like to present to you two most interesting cases I had with patients who had eye diseases, in my practice.

AMD (Age-Related Macular Degeneration) exudative is the leading cause of irreversible severe visual impairment for people after 50 years of age. Many therapies, including multivitamin supplements, are used as a treatment. In recent years, after a whole series of study researches, anti-VEGF are very carefully introduced (Vascular endothelial growth factor inhibitors). Recent anti-VEGF therapies require frequent repetition of applications, with an uncertain recovery of visual acuity, as not all patients respond to anti-VEGF therapy. There is a need to include additional therapies that could improve treatment of an exudative AMD. Real goal when treating AMD is prevention of the development of CNV.

AMD is today the leading cause of severe, irreversible loss of vision after 50 years of age. It appears in two basic forms: dry and damp. In 70 % of patients, the AMD exudative form is present on both eyes, and the standard approach is to treat the eye that sees better.

Risk factors: genetic load, obesity, high blood pressure, elevated cholesterol ...

Case: Patient R.S. 70 years old, came to me for BICOM review by the bioresonance method in early July of 2018, after her ophthalmologist examination. The patient was upset about the state of health and the diagnosis of AMD exudative. She lost sight in her left eye, and she sees 40 % with correction on the right eye at the time of reporting. Since she does not live in Belgrade, from the moment when the diagnosis was set until her arrival, the sight on her right eye dropped rapidly from 60 % to 40 %. The ophthalmologist in Belgrade proposed anti-VEGF therapy.

The patient has a history of genetic load, high blood pressure, high cholesterol, obesity, fat liver ... In July, diagnostics was performed and the first BICOM bioresonance treatment. There are loads in Wood and Water from 5 elements, meridians Liver, GB, Bl, scarring (a patient suffered head injury, a fall caused by dizziness-four sutures), parasite load ... There is a need for psychophysical stabilization of the patient, who is on therapy for high blood pressure. In addition, she is also on a therapy with medications Seroxat and Rivotril.

Five therapies were treated with bioresonance method due to the inability of the patient to come more often.

The **first therapy** was done with a basic program according to Riffle H impuls with a large flexible applicator on solar plexus; second channel: scars (skin/organs), honey cup Wood ampule from 5 element. After that, Rescue from Bach flowers was performed on program 192 (A). A nutrition correction was introduced and she was given advice on the hygiene and diet regimen that this patient honoured all the time with the occasional correction. After one month, the patient came for her first anti-VEGF treatment.

After that, **second BRT therapy** was performed. The programs were used: 915.2, second channel stress, honey cup Rescue from Bach flowers, 10046 second channel toxin elimination, 900.1 program.

A couple of days after second BRT therapy, the patient reports that she sees blurred images on her left eye (doctors at the first examination have identified a loss of vision in this eye and no longer dealt with it).

So far, the patient has received 4 anti-VEGF therapies. BRT therapy was performed on the day after the intervention. All anti-VEGF patient treatments were administered well, except for the third. Thereafter, she had a large increase in blood pressure. During this period, the patient did not receive BRT therapies for a longer period of time, due to my absence. I state this because I think BICOM bioresonance therapy gives exceptional support to patients regardless of the diagnosis we are talking about. We do not always have to cure patients, it is sometimes convenient to give patients support through the frequencies so that they can get through certain states.

I also used the program Sabine Rauch-solar plexus (the chakra programs of Dr. Rauch showed excellent results in my work with patients no matter what diagnosis they had).

The patient had a disbalance of her third, fourth and fifth chakra. After the therapy for the third chakra, heart and throat chakras were also stabilized.

For the stabilization of the liver I used prog. 3063.0 large, flexible applicator on the liver and adhesive applicator on the acupuncture point Liv 3. Also, the programs 3017.0 (Rescue, second channel) were used, 3013.0, 561.0, 562.0 (the second channel support intestines and ampule Darmaufbau (improve intestinal flora) in honey cup). For the last two programs I used a large flexible applicator on the stomach and adhesive applicator on acupuncture point LI4.

5 BRT therapy were done at a 9-month interval. Throughout the diagnosis and therapy I used EAP Finder every time. I ended each therapy with EAP Finder by activating EAP points on her hands and legs (20 points which are the starting or ending points of the acupuncture and Voll channels) as well as the Shen-men point on both ears. Although EAP Finder does not send the therapy, pressing the acupuncture points gives the effect of stronger acupressure and has proved to be very useful in my everyday practice.

The result of the past treatments: The patient uses 2/3 of the visual field on her left eye (recognizes objects and colors, her vision is blurred). On the right eye, vision is increased from 40 % to 50 % with correction of the glasses, and the gap between anti-VEGF applications has increased.

Uveitis is the inflammation of the middle eye shell (uvei). It can develop suddenly with redness of the eye and pain. Necessary examination of ophthalmologists, possible association with the disease of other organs. It has chronic flow, it's prone to recurrences and can lead to significant functional damage of the organs of vision. Uveitis is responsible for 10 % of blindness in the world. Treatment: corticosteroids, non-steroidal antiinflammatory drugs. In severe forms it is necessary to use systemic drugs (corticosteroids, immunosuppressants, cytostatics...).

Rosacea is a disorder of blood vessels and sebaceous glands of the face, characterized by erythema, teleangiectasis and red flashes, and inflammatory papulopustulous acne-like eruption. Precise etiology unclear. Diagnosis is based on a clinical picture. Therapy: local and systemic antibiotics, retinoids.

Parapsoriasis seem like an uneven rash. Changes can be pink, red, brown, yellowish ... They usually appear on the chest and stomach, although they can also occur on the hands and feet. They are usually round or oval, of different sizes. Parapsoriasis is more common in men, middle age. Treatment is carried out with broad spectrum of antibiotics in combination with corticosteroids or PUVA (photochemotherapy, psolaren-UVA) treatment. Locally, corticosteroid fats are applied...

Case: Patient Z.K., 60 years old comes to me for a bioresonance BICOM review. The patient has been on the treatment of uveitis and glaucoma since 2011. Th: SOL.Glaumol 0.5 %, Sol.Maxidex, Sol.Indocollyre or sol.Uniclofen, Brufen drag. Treated with systematic and local antiglaucoma therapy (I.v. Manitol, Diamox, Cosopt).

In June 2016, after the complete study the etiology of recidivant uveitis was not determined. Since 2013, it was continuously under the local cortico Th, with a reduction in dose whenever inflammation allowed, but without a complete break.

In April 2017, cataract surgery was performed on OD. In October 2017, th Alphagan caps for OD were transmitted due to allergy. The planned cataract operation on the OS is postponed for January and then in May 2018.

He has rosacea and conjunctivitis for 15 years. Th: Tobradex ophthalmic ointment, Soolanttra Cream, Avene antirougers, Dactacorn cream. Parapsoriasis in the last couple of years is controlled by Elocem cream following a dermatologist's advice.

Test: The patient was tested using biotensor, EAP Finder, electroacupuncture and kinesiologically.

Finding: By using electroacupuncture test I have received very low values of almost all points, especially on the channels Li, MB, Si, LR, St. Changes on the skin were also the most pronounced in the regions where the mentioned meridians are passing. Burden with Candida.

Bachblütentest: Rescue, 13 Gorse, 16.Honey suckle, 24.Pine, 35.White chesnut.

Treatment course: Patient was introduced nutrition correction, based on biotensor testing 10.10.2018. Programs used during treatment: Riffel baseline once a month based on EAP findings and tests on program 998. During the first month, 2 therapies were done and the next month 3 other. Programs used during treatments: 700.3, 915.2, 331.1, 3017.0, 10046, 3013.0, 561.0, 562.0, 3063.0, 381.1, 3036.0, 691.0, second chakra Sabina Rauch.

Second channel from the device test: support intestines, toxin elimination, scar (skin/organs), glaucoma, candida, rosequarts, and from the ampoule Metal and Fire from the set of 5 elements, then Rescue, 13, 16, 24, 35 from Bach, as well as the Darmaufbau ampoule (improve intestinal flora). After each therapy, the patient was treated with an EAP Finder. The entire duration of treatment patient honoured his diet that was corrected if needed. The patient also used Liv 52.

After 2 months of treatment with the bioresonance method (5 therapies), the patient is visibly rejuvenated by 10 years!!! Eye pressure is, for the first time, under 20 on both eyes, uveitis calm, there are no changes on his skin. The patient is cheerful, energetic, his environment is surprised by the positive change!

The patient wishes to continue with the therapy. In the next 3 months, we did another 5 therapies. His condition is stable. All laboratory findings are perfect, the uveitis is calm ... The patient is free of symptoms. He wants to continue with the therapies once a month, because he feels great.

Conclusion

During the treatment with the BICOM, the patient regularly visited ophthalmologists and dermatologists. He was given advice regarding hygienic-dietary regime, staying in nature, increased water intake, positive attitude towards life...

During the therapy, I was very much guided by the idea of balancing meridians, 5 elements and providing support to the eliminatory organs. There were many burdens, but the focus was always on the key load for that day. On patient's condition and him entering this disease, stress played a big role, but was not perceived for years by the patient as such. Unloading organism at the psychophysical level, we have obtained results that confirm that BICOM has incredible possibilities in the treatment of many diseases. In some cases it leads to an improvement of the state of the organism, and in some cases, when we may not expect it, to cure.