

SCENAR THERAPY OF PAIN SYNDROME IN PATIENTS SUFFERING FROM OSTEOCHONDROSIS OF IV DEGREE AND DISCAL HERNIAS

Constantin Nikitin

Director of Diagnostic and Treatment Center
Russia, Tomsk

* Everybody knows how severe pathology in discal hernias can be. It is connected with serious disorders of metabolic processes and accompanied with severe symptomatology: from the pain syndrome to the inability to walk.

These disorders are difficult to treat. The orthodox treatment includes anesthesia and anti-inflammatory therapy or surgical intervention that essentially constitutes palliative measures because they do not change causes of degenerative processes.

This is not a simple task for a Scenar therapist because the metabolism cannot be restored within a specific area for a long time and should be restored in the whole organism, which is problematic in most cases.

We have selected Scenar*
therapy as a basic treatment
method because this therapy
allows us to restore and control
damaged organs and systems
subject to their biological
interrelation.

SCENAR (Self-Controlling Electro-Neuro-adaptive regulator) is intended to provide non-invasive bio-controlled electrical pulse therapy aimed at activating the body's reserve at functional and organic pathological processes.

This is a small autonomous electronic device that allows us to consider Scenar therapy as a universal regulator and adjuster of physiological processes, thanks to its features as express-diagnostics, bio feedback, and stimulation with neural-like pulses.



We treated 186 people from 24 to 68 years of age. The number of treatment courses varied from 6 to 11. The duration of a course lasted from 12 to 25 days. The duration of the whole treatment course ranged from 6 months to 2 years. Herniation of one or more intervertebral discs was evidenced by tomographic results in all cases.

At admission, a patient had typical complaints on pain in various regions of the spine, in the buttock area, in the feet, numbness in the upper and lower extremities, weakness, and hypertonia and hypertrophy of muscles. The anamnesis included numerous inflammatory processes (tonsillitis, pharyngitis, otitis, sinusitis) and significant doses of antibiotics had been applied in the treatment of such diseases since childhood.

34(~18%) patients were diagnosed with gastric ulcer and duodenal ulcer; symptoms of enterocolitis and cholecystitis were detected in 86(~46%) patients; hepatitis B was detected in 22(~12%) patients. Excess weight and impaired fat metabolism were detected in 120(~64%) patients.

During the first and subsequent sessions, we explained to our patients that their actual state of health was a result of the long-term combined influence of damaging factors of the environment where they lived and which they themselves had created, to some extent.

Their nutrition regime was analyzed in detail and necessary corrections were made.

During the course of treatment, we stimulated the skin in the spinal column projection and along the para-vertebral lines, the projection of the liver, bowels, pancreas, kidneys, adrenals, as well as the cervical-collar zone and the projection of the cranial nerves output.

The duration of a session was 25-40 minutes. We developed some peripheral devices to be connected to Scenar to improve the treatment efficacy.

These remote electrodes considerably accelerate the recovery process and make the treatment more comfortable.

Electrode No. 1. «**KONNIK's Iron**»

The combined device based on an electro-masseur with infra-red radiation. The operating surfaces are replaced with the electrodes to be connected to Scenar through a standard plug



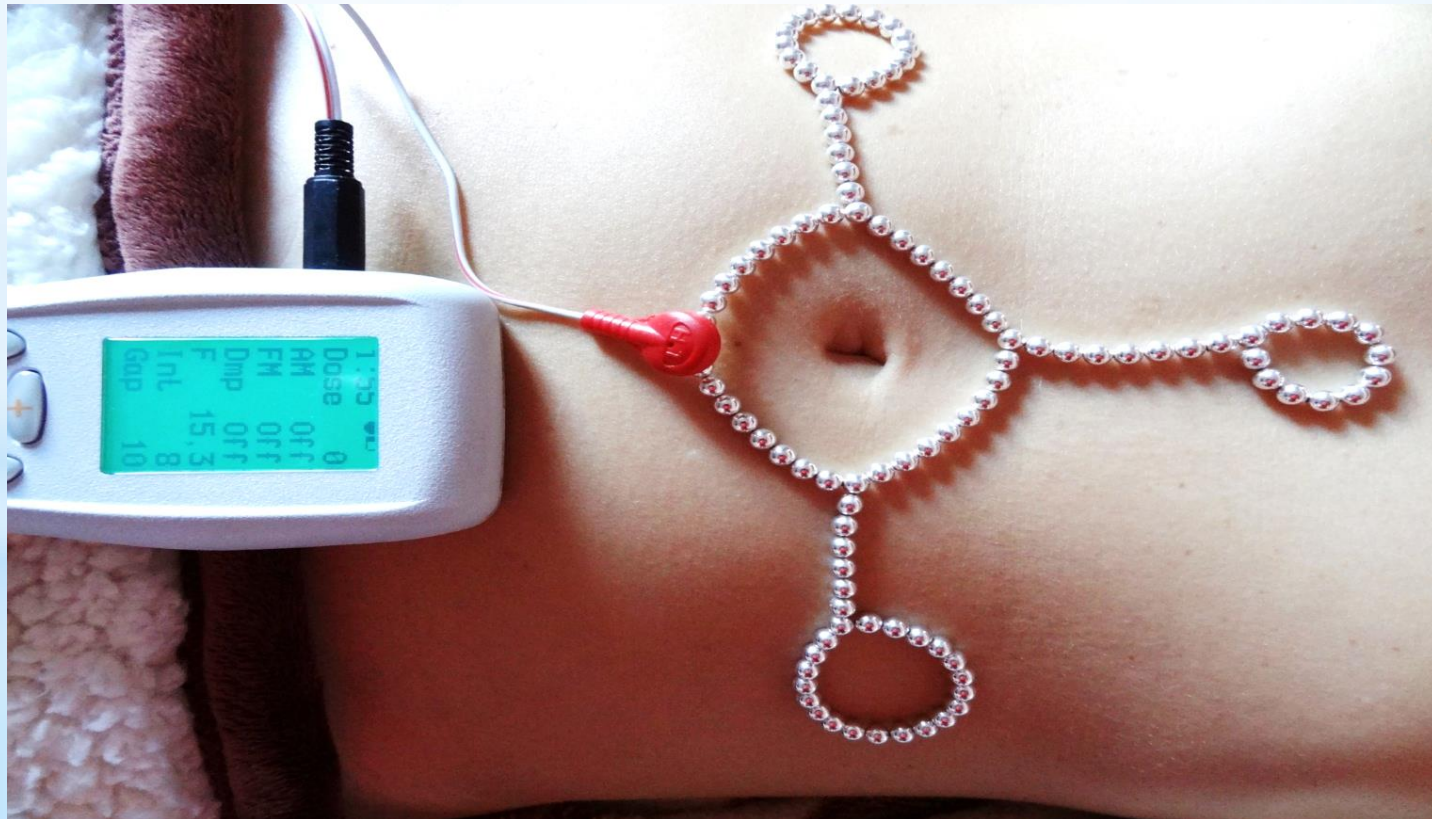
The operating principle of such a device: vibration and infra-red radiation cause non-specific activation of tissues, increase the metabolic processes rate and, as a result, improve sensitivity of tissues to Scenar stimulation. Besides, the “Iron” allows us to reveal and differentiate painful areas within the zone being treated, and to observe the moment and degree of pain removal. The device significantly improves the Scenar therapy efficacy.

Electrode No. 2

“Konnik’s Serpent” – Magnetic spheres of rare-earth elements covered with silver (9 microns); they are easily connected and form a chain of any length



They can make electrodes of any configuration.
They are connected to Scenar with a light touch, if
the iron elements are placed on the wire ends.



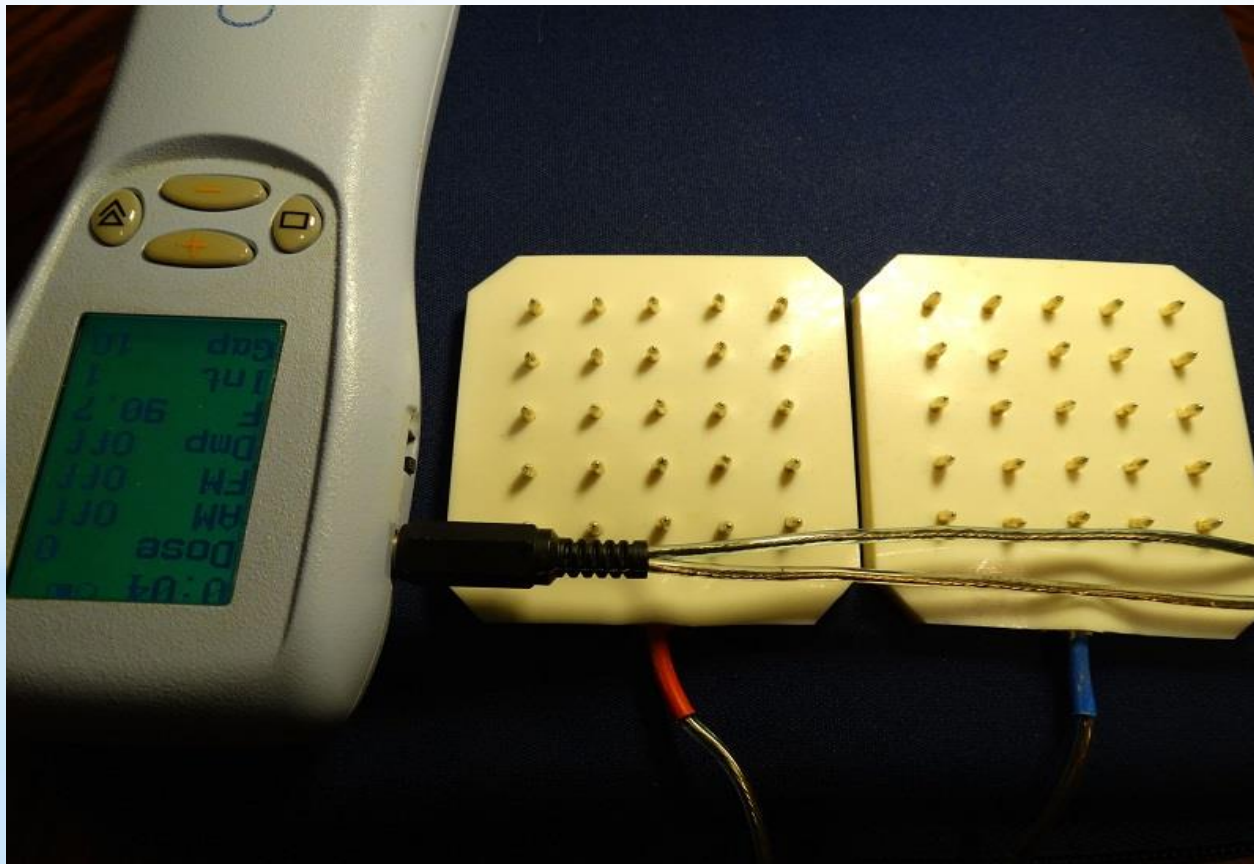
The therapeutic result of the device application: combined influence of the magnetic field and the stimulating signal of Scenar, and the facile congruency of the electrode with any surface of the body, for example, with the toes.



Electrode No. 3 – KONNIK'S Hedgehogs

The needle-point electrodes are intended as remote electrodes for any types of SCENAR devices. Their application improves SCENAR therapy efficacy due to the integral contact between each needle and the skin. This affects the impedance status and penetration quality of the SCENAR pulses. Its base is of silicone and the needles are covered with silver (9 microns).

When applying them, the contact should be close to the skin. The patient may lay on the electrodes, place them under a problem area or press them with something when placing them on the body. The pin connector on the wire end should fit into the relevant slot of SCENAR.



Besides, we applied functional loads along with SCENAR stimulation.

We obtained additional symptomatology as specific cyanosis while stimulating the muscles of the back with the remote electrodes.

View after 20 seconds of stimulation Patient B



This cyanosis:

1 – clearly defines the limits of the hemo-circulation disorder in the zone affected by osteochondrosis.

2 – can be a mark for the localization of the Scenar stimulation area.

3 – allows us to control the recovery process because its absence coincides with improvement of the state and change of the symptoms.

Initial State. Patient-A



Patient - A

Areas with manifested cyanosis were treated with the second SCENAR during the stimulation

Before stimulation



After stimulation



Patient -A

View after 20 seconds of
initial stimulation

View after 20 seconds of
stimulation (after 12
treatment sessions).



The load was provided through the patient's voluntary efforts in the lumbar region.
Stimulation with Scenar in the "cobra" pose.
Diagnosis – discal hernia.



Tomogram of the spine in the area of the greatest prolapse of the intervertebral disc

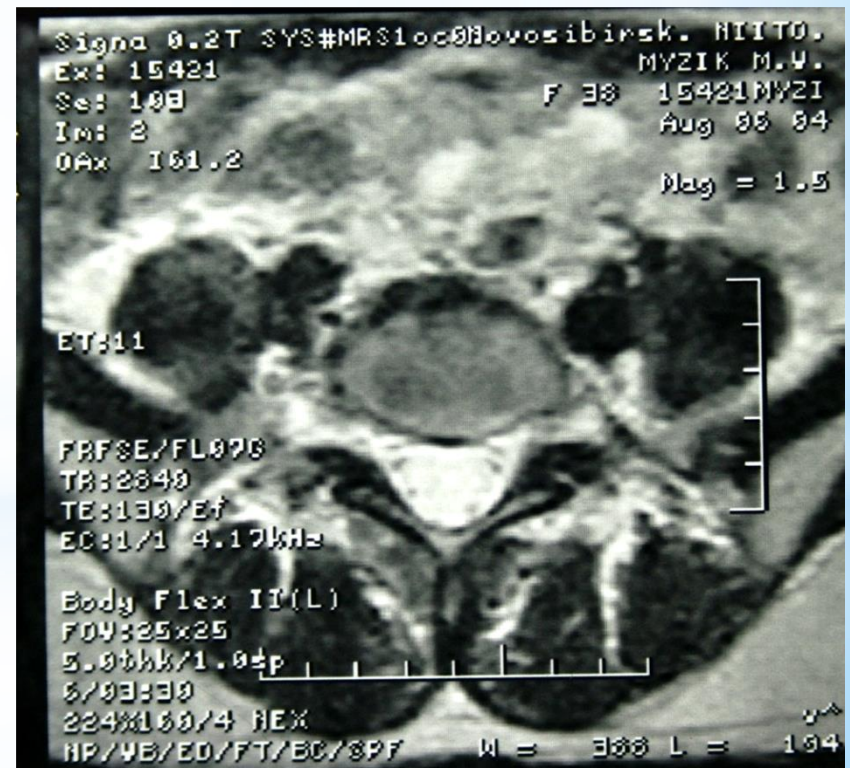
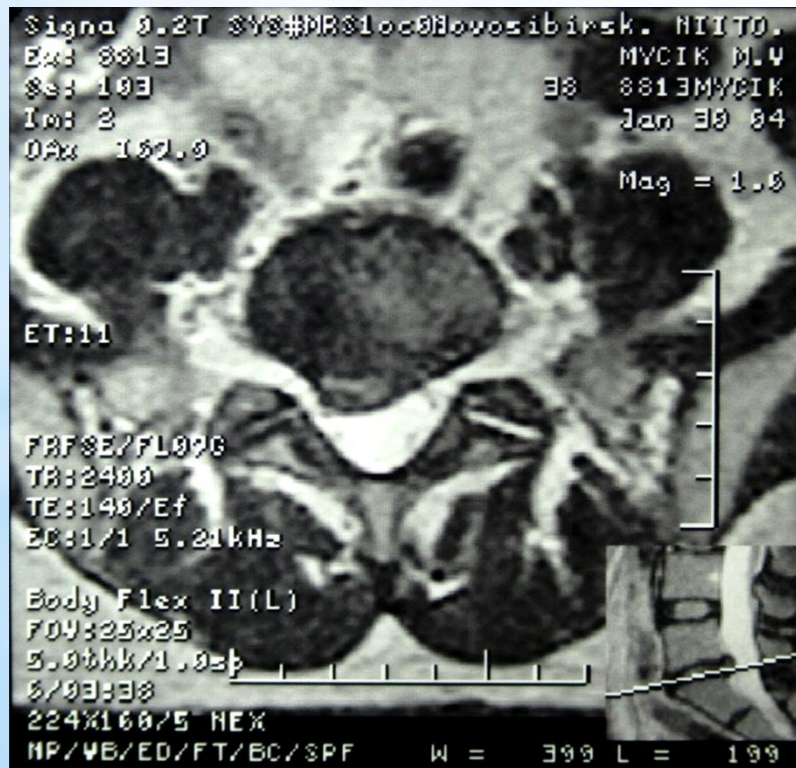
Before treatment



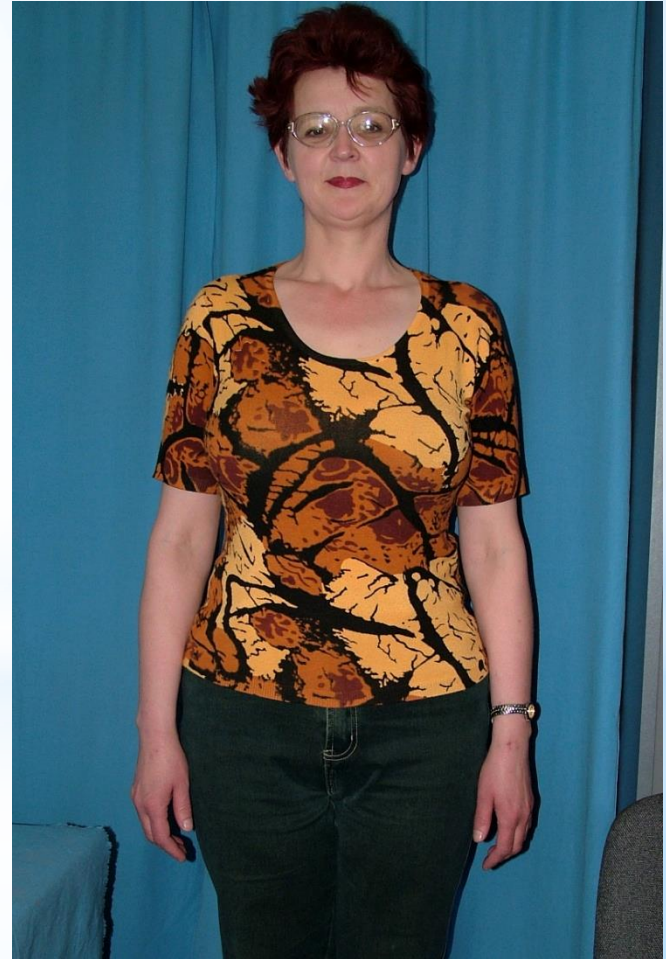
After treatment



* Tomogram of the cross section of the spine in the plane of L5-S1 disc before and after treatment



View of the patient before and after treatment



The stable positive result - removal of pain, improvement in the general state of health, efficiency restoration was obtained in 129(~69%) patients (catamnesis: from 2 up to 9 years). The tomographic examination evidenced removal of discal hernias, restoration of the damaged fibrous rings and decrease in the osteochondrosis manifestations in 96 patients.

19 of 57 remaining patients had no pain after the first session and did not continue treatment; we have no further information about them. 38 patients did not want to change anything in their lives. The temporary improvement - removal of pain was achieved after two courses of treatment. Now they continue to visit us two-three times a year when the painful symptoms appear. In other words, positive changes were observed in these patients, but we can not consider this a treatment.

So, the treatment of osteochondrosis of IV degree with the formation of a discal hernia, requires complex stimulation and depends not only on the doctor's qualifications and the right method of treatment selected, but also the courage, determination and understanding of the patient. Scenar therapy can be considered as a sufficiently adequate treatment method for similar disorders.

We should add that SCENAR therapy allows us to achieve excellent results in treatment of other serious diseases.

