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EPILEPTIC SYNDROME TREATMENT

Epileptic syndrome is the state rather frequently met in the practice of urgent neurology. There are many causes of its appearance.

Nowadays, there is no united point of view about the pathogenesis of epileptic status though the long-term problem studying. According to the most popular hypothesis, some groups of neurons begin to generate pathological pulses (with high frequency and low amplitude) providing the changes of cells membrane perspicacity (membrane potential) in the various areas of brain because of weakening of obstacles influences of intermediate brain. The cells changed by this way form "epileptic center" which, in its turn, desynchronizes the activity of cellular structures in the adjoining zones and forms the state of epileptic readiness of brain. The dynamic balance of desynchronizing synchronizing pulses can be broken by various reasons: hypothermia, hypoxia, hypoglycemia, endogenous intoxications, brain mechanical damages, certain rhythmical sensor irritations (light blinking, monotonous music, TV picture), emotional factors, expressed disorders of sleep phase nature. The appearance of convulsive attacks in these conditions is explained by the constant penetrability increasing of cellular membranes in neurons and changes of various biochemical parameters which are the starting mechanism of epileptic seizure. The concrete role of membrane, humoral and neurogenic factors in this complex multicomponent patophysiological mechanism is not found out yet[1].

Scenar-THERAPY, as well as other methods of traditional medicine, is based on principles of self-control physiological processes, mobilization of its protective adaptive mechanisms [2]. The important role in homeostasis regulation when treating its various damages belongs to regulator peptides. Every peptide has the unique complex of activities. At the same time, many bioactive manifestations of each peptides coincide or are close to those ones of some other peptides. As result, the preconditions for rather smooth, continuous transition from one complex of compatible functions to another are created. Accordingly, the regulator peptides with other humoral regulators provide the realization of any compatible biological activities [3]. Proceeding from this hypothesis, the Scenar-THERAPY application provoque curiosity, especially when treating the various pathologies of nervous system. You can find the experience when treating the cerebral arachnoiditis accompanied by epysyndrome in this work.

Anamnesis: a child of 11 years, against a background of good health, for the first time in life, after psycho emotional trauma, he had the attack of generalized clinic-tonic spasms with head adversia to the left, cyanosis of nasolabial triangle. In the neurological status—nystagmus adjusting to the left, bilateral pyramidal symptoms (pyramidal insufficiency).

The urgent help by Scenar was rendered to the child for the first minutes of disease. The influence was carried out on the points of reanimation, sternum, heart, accessible places on head, neck in subcomfortable mode. Then, the child was hospitalized to make a diagnosis and to elaborate the treatment tactics.

EEG of November, 1999: brain changes of spinal genesis against a background of irritation and decreasing of bioelectric brain activity dominated in the background record. The flashes of diffuse spinal paroxysmal activity and the single epileptiform signs without precise localization were marked after making hyperventilation. The convincing asymmetry between hemispheres was not traced.

Tomogrammes of cerebral cortex—the centers of pathological density in the brain substance were not found out. The displacement of median structures was not marked. The "basal tanks" were sharply expanded (BST 15 x 30 mm).

The anticonvulsant therapy was prescribed to the child-phenobarbital(always), diacarbis, aspartames. His mother refused the prescribed treatment. Scenar -THERAPY combined with OLM was continued. Additionally, the child took the medicines with active additions (fraction 2), pathogen, multi-vitamins with minerals.

The influence was carried out twice a day in the acute period. The bald skull (craniotherapy), 3 tracks, 6 points, meridian of triple heater (the last recipe was based on the information got with the help of diagnostic Rista-epd complex), distant areas of extremities, stomach area were processed. It was carried according to the Scenar-THERAPY technology.

The first course–20 procedures. The state of the child was improved, but the attack was repeated one month later. It was single (if we compare it with the first one), proceeded much more easy, was cut off fastly and independently and the most important—the child could remember what happened to him. Since, the second course has been begun. There were no attacks. The further courses of treatment were carried out according to the complaints (ARVI, headaches, tiredness).

EEG of April, 2000. The moderate brain changes of irritative-disrhythmic character against a background of bioelectric activity level decreasing were registered in the background record. The hyperventilation loading revealed spinal paroxysmal and not numerous, irregular epileptic signs. The stable centers, the asymmetry between the hemispheres were not marked.

EEG of August, 2000. The frequent-amplitude characteristics and spatial distribution of rhythms practically corresponded to the age norm variant. Only insignificant increasing of irritative activity index was marked. The hyperventilation load revealed the individual paroxysmal signs. The positive

dynamics as paroxysm reduction in record was traced in comparison with EEG of April, 2000. Epiactivity, convincing centers, asymmetry between hemispheres were not registered.

EEG of December, 2000. The positive dynamics as paroxysm absence in record in comparison with the previous EEG was marked.

Nowadays, the not significant brain changes of irritative character were registered on EEG. Epiactivity, centers, asymmetry between hemispheres were not marked. The health state of the child was good. Catamnesis was more than one year.

LITERATURE:

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