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Aim

Comparative analysis of SCENAR therapy and common methods of treatment of patients with cardiological disease at different stages of medical help – emergency, hospital and ambulatory care therapy.

Material and Methods

SCENAR therapy was provided by physicians, working in emergency room, ambulatory care and hospitals, using unified methodics and instructions. SCENAR 97.4, SCENAR 97.5, TENS SCENAR Devices were used.

Priorities for SCENAR treatment were: hypertonic disease with no effect from medication treatment and encephalopathy; hypertonic and hypotonic crises; acute myocardial infarction (2-3 days after hospitalization); patients with post infarction stenocardia; neurocirculatorial distonia in adults and children.

Patients were subjected to clinical, instrumental and biochemical examinations, special examinations for the activity of peroxide oxidation of lipids (POL) and for the condition of antioxidant system (AOS) of plasma and erythrocytes.

In most of the cases SCENAR treatment was combined with medications. In 40-60% of the cases monotherapy with SCENAR was provided.

The analysis of the results proved the high effectiveness and safety of SCENAR therapy in cardiology diseases. All of the physicians, who took part in the clinical examinations, noted the safety of this method of treatment.

SCENAR treatment and common methods were compared in clinical and biochemical characteristics.

