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Comparative Analysis of The Results of Bioelectrography Study in Clinical Practice

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Introduction

This study analyzes the diagnostic results obtained by Bioelectrography GDV testing of patients compared with other clinical diagnostic results - blood tests, ultrasound tests, neurophysiological tests, electrophysiological tests and others.

Currently, we are searching for areas of application of the GDV Bioelectrography in clinical practice, as a complex non-invasive diagnostic method of assessment of physiological parameters of the human body. Preliminary results obtained by us on a fairly large group of patients (542 people) showed a high percentage of clinical efficacy (92%) of the use of GDV bioelectrography in determining the tactics of complex therapeutic effects on the body, taking into account the etiopathogenetic links of disorders of the physiological functions of the body. The aforesaid explains our further studies aimed at comparative assessment of diagnostic coincidences with the complex of diagnostic results obtained by clinical methods.

The research was conducted in two variants: first - GDS Bioelectrography, then the methods of clinical diagnostics, with the subsequent comparison of results; second - patients examined with the established diagnosis and already available results of clinical diagnostics. For reliability, equal groups of 150 people each were evaluated.

Equipment and methods

GDV - parameters of fingers of both hands were measured with the help of computerized complex "GDV camera" with and without filter.

Diagnostic block of clinical studies - clinical diagnostic and immunological laboratory tests; express diagnostics of acute coronary syndrome; glycolyzed hemoglobin; C-peptide, etc. Functional diagnostics with computer analysis - electrocardiography 12 channel, daily Holter ECG monitoring, daily monitoring of blood pressure, treadmill-test, stress echocardiography, rheoencephalography, rheovasography of limb vessels, electroencephalography, spirography; neurofunctional diagnostics; laser Doppler fluometry; computer allergy diagnostics; computer neurophysiological diagnostics; bioresonance diagnostics; determination of changes in biological system of macro- and microelement homeostasis in human hair and nails, etc.

Results

Comparative analysis in the first group showed a 86% overlap of bioelectrography data with clinical trial data as a whole. In differential analysis of GDV data with and without filter (subgroups A and B) we found a large percentage of data coincidence in group "A" with the data of clinical trials (82%), and in group "B" (89%) with functional diagnostics data with computer analysis. This variant of studies also determined a clear trend towards prognosis and the earliest preclinical detectability of "pre-disease" conditions (94%). This result testifies to new possibilities of GDV Bioelectrography in targeting and building individual programs and determining the necessary list of clinical trials.

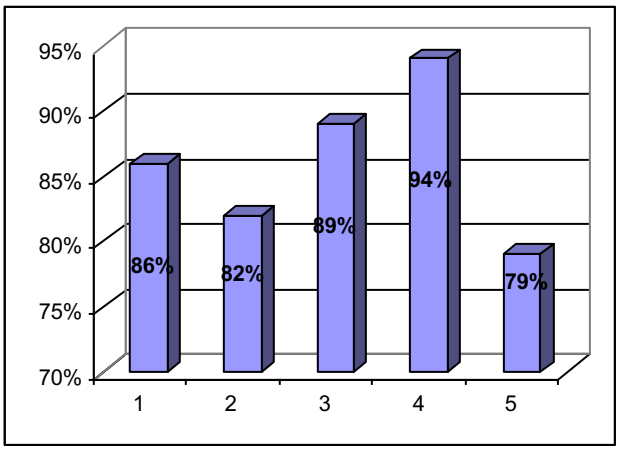
Comparative analysis in the second group also showed a high percentage (79%) of coincidences with the GDV data, but it should also be noted that the analysis of the GDV data proved to be more informative in cases of detecting "pre-disease" conditions, especially in unfiltered studies, and in general made a difference of 94%. To obtain these results, patients in this group were sent for clinical follow-up examinations, but according to the diagnostic list determined on the basis of GDV Bioelectrography.

Conclusions

Comparative analysis of the data of the GDV data showed a high percentage of coincidences with clinical diagnostic methods, in terms of forecasting and early diagnosis of preclinical conditions of "pre-disease" - it turned out to be more informative (more than twice compared with conventional methods), which opens up additional opportunities for the GDV Bioelectrography applications in preventive medicine. The cost-effectiveness, easy accessibility, non-invasive, reliable, and informative nature of the method of GDV Bioelectrography requires active introduction into medical and preventive institutions and inclusion of this method in programs of preservation of the nation's health.

Further Research

The presented results imply further mass monitoring studies to detect the conditions of "pre-disease".



1 - Coincidence of the GDV data with clinical trial data in the first group.

2 - Percentage of coincidence of the GDV data with the data of clinical trials.

3 - Percentage of coincidence of the GDV data without filter with functional diagnostics data.

4 - Preclinical detectability of "pre-disease" conditions.

5 - Coincidence of the GDV data with clinical trial data in the second group.