Noskova L. Thyroid gland treatment.

When you have very difficult cases (the patients, for whom the previous therapy turned out to be ineffective), you realize those possibilities, which SCENAR-therapy gives. In this article we will give the example of prolonged treatment of the patient with thyrotoxicosis of mean severity (diagnosed for the first time), with diffuse-nodular goiter of the III degree, cerebral- endocrinous ophthalmopathy. The patient with this diagnosis was discharged from city clinical hospital at the end of 1995. Blood indices, general urine analysis, ECG indices, fluorography of the thorax, skull – are within the norm (without pathology).

The results of thyroid gland USI - volume position, right lobe is decreased (22, 3 cm^3), left lobe is increased (19, 4 cm^3), gland echogenicity – usual, the structure is diffuse-heterogeneous.

In the right lobe in the middle segment – hypoechoic node 6x6, 7 the circuit is not clear. In the left lobe in the middle segment there are two hypoechoic nodes: 6x5 with clear circuit, homogeneous, and 15x8, heterogeneous. Biopsy of the right and left lobes helped to make diagnosis: colloid goiter.

There was consultation with oculist: VOD=0.1, VOS=0.1, with correction – 2.0, D=0.5; 0.5; intraocular pressure OD=19.0, OS=17.5 with insignificant dynamics, both eyes are quiet**,** the mobility up is limited. Eye-ground - disk of optic nerve is of pink colour, with clear circuits, the position and dimensions of the vessels are normal.

The diagnosis of oculist: myopia of weak stage, endocrinous ophthalmopathy, the 1^{st} degree. Recommendations of oculist – 15 procedures of dexamethasone (in the form of injections under the eye). The diagnosis was proved by professor during consultation: endocrinous ophthalmopathy of the both eyes, edematous form of dyopia.

The patient was recommended: anti-inflammatory therapy, prednisolone (tablets), dexamethasone (drops), periodically under the eye.

The patient was discharged from the hospital for out-patient treatment and preparation for operation. Taking into consideration the type of the goiter, the operation is shown at achievement of euthyroid condition and ophthalmopathy stabilization. Before SCENAR-therapy there was a course of glucorticosteroids in tablets, and also the treatment by merkozodil (20 milligrams a day), anaprilin, dexamethasone under the eye, prednisolone (30 mg), panangin, verospiron.

The patient was recommended to be observed by endocrinologist and oculist; mercozolil: 2 tablets every other day with control of leucocytes of the blood (once in 7-10 days), adrenoceptor antagonists, depending on heart rate, (anaprolon 20mg 3 times a day), diuretics 2-3 times a week on the background of medicines with potassium (panangin – 1 tablet 3 times a day); pednisolon – 30 mg with constant dose decrease till 5 mg every 10 days, dexamethasone drops. The patient was oriented on the operation. Pre-operation preparation was to begin at the end of March, the operation – at the beginning of April.

And in December of 1995 SCENAR-therapy course was started. Taking into account the complication on eyes, the courses of SCENAR-therapy were alternated by the therapy of “CHAKRA” device. From the previous recommendation only merkozolil was left. The first course of SCENAR-therapy – 15 procedures, influence in projection of thyroid gland. The device often switched off. The work was conducted till this effect disappeared. In the process of work the influence of the liver, adnexa and lumbosacral areas was carried out. After it there were 10 procedures by “CHAKRA”device. The second course of SCENAR-therapy was made under control of reflex-diagnostic complex “Rista-EPD”. The area of adnexa on the right part, Pirogov’s ring and meridian of the heart were treated (every day). In a day adnexa area and backbone (bottom-up) were treated.

After the first course of SCENAR-therapy clinical picture of thyrotoxicosis (protruding eyes, irritability, tachycardia, hyperhidrosis) disappeared, the mood improved, the sleep normalized. Positive dynamics kept during the following procedures. At the beginning of April control USI was made (in the brackets you can see the previous indices): the right lobe – the

width 22-23 mm (24), the thickness 21-22 mm (28); the left lobe – the width 22 (25), the thickness 22-23 (23). Echostructure of both lobes is diffusely heterogeneous (didn't change).

In the right lobe the node wasn't found., in the left lobe 2 hypoechoic formations are found, their dimensions 5,1x4,8 (6x5)and 5,7x3,6 (15x9). Corresponding diagnosis – diffuse enlargement of thyroid gland of the 2nd degree, nodular hypoechoic formations in the left lobe of the thyroid gland.

So, the efforts of SCENAR-therapy on this stage led to decrease of the degree of the disease, removal of hypoechoic formations in the right lobe and their decrease in the left one. Taking into consideration the state of the patient and therapy dynamics, the solution not to carry out operation was made.