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# First experiences with the QRS whole-body magnetic field therapy in the case of 25 discopathy patients

On the treatment of pains in the muscle and skeleton region, whole-body magnetic field therapy measures become more and more important. The good efficiency of pulsating magnetic fields for such diseases is known since the seventies where there is worked with two different field characteristics. Firstly, pulsating low-frequent magnetic fields are mainly used in the healing of bone fractures. Secondly, very weak pulsating low-frequent magnetic fields – in particular, in case of rheumatic diseases and wearing appearances – can reduce the complaints.

As ascertained through literature studies, the Quantron Resonance System can be used: for strengthening the cardiovascular system and improving the blood circulation; for improving the respiratory chain, the metabolism and the digestive system; in case of rheumatic and climacteric complaints; in case of stress, nervousness, exhaustion and sleep disturbances; for improving the regeneration ability; for reducing the pain before and after surgical operations; for preventing after bleedings and inflammations after dental extractions; for supporting the wound healing; and in case of neuralgias and depressions.

In total, there can be started from the fact that QRS applications can be useful today for the following orthopedically relevant cases:

1 Improvement of bone healing

2 Positive effect in case of osteoporosis

3 Reduction of joint pains

4 Positive influence on rheumatic diseases

5 Stabilization of backbone instabilities due to backaches

6 Favorable influence in case of Morbus Bechterew

At the Orthopedic Clinic of the Edith-Stein-Fachklinik in Bad Bergzabern, from December 4, 2000 to April 6, 2001, the QRS quantron resonance system of the Prof. Dr. Fischer AG was included into the rehabilitation treatment measures in the case of 25 discopathy patients. These patients were 19 men and 6 women in an age between 31 and 71 years. At that, patients with discopathy were chosen consciously because this clinical picture has a particular importance within the rehabilitation. For example, patients without a surgical operation in case of a prolapse of intervertebral disks as well as patients after an operation were treated. Essentially, the discopathies were in the region of the lumbar column where the segments L2, L3, L4 and L5 were affected once, the segments L3, L4, L5 and S1 twice, the segments L4/L5/L1 once, the segment L4/L5 eleven times and L5/S1 nine times. In addition, there was a prolapse at cervical spine vertebra 6 and 7.

In eight patient cases, a surgical operation had already become necessary. In three cases of them, a so-called postnucleotomy syndrome was present.

At the beginning of the QRS treatment, 16 patients took analgetic drugs (in particular, NSAR). All 25 observed and treated patients had pains in the region of the backbone that extended to a time period of two months up to 30 years.

Using the ten-value pain scale, the patients had the following complaints:

Pain scale 2  1 patient
Pain scale 4  5 patients
Pain scale 5  7 patients
Pain scale 6  5 patients
Pain scale 7  1 patient
Pain scale 8  3 patients
Pain scale 9  1 patient
Pain scale 10  2 patients

As a rule, the treatment was performed twice per day – in the morning and in the evening – with a load level between 5 and 10 in the morning and between 2 and 5 in the afternoon. Beside the mat treatment, the cushion treatment was also applied; in particular, if the complaint symptoms did not improve after a week.

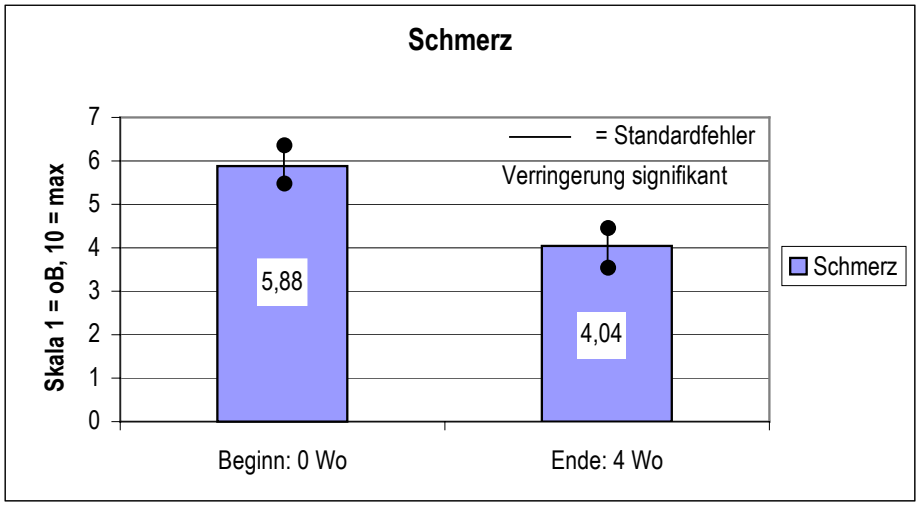
The evaluation of the results was realized using a specific record with respect to the therapy where the still existing pains, the general contentment and the still needed drugs were evaluated. Moreover, the patients could express their opinion whether they agree to be treated once again.

On the final examination, there was found out that – with only a few exceptions – the complaints had reduced clearly:

Pain scale 2  5 patients
Pain scale 3  6 patients
Pain scale 4  6 patients
Pain scale 5  5 patients
Pain scale 6  1 patients
Pain scale 8  1 patient
Pain scale 10  1 patient

In the case of one patient, there was no improvement despite mat and cushion treatment.

**Figure 1** shows the summarizing comparison of the pain intensities before and after the QRS therapy in the case of these patients. Under the QRS therapy, the average values of the pain intensity decrease from 5.9 to 4.04.




1 – Pain
2 – Scale 1 = NAD, 10 = max
3 – Standard error
4 – Significant reduction
5 – 5.88
6 – 4.04
7 – Pain
8 – Start : 0 weeks
9 – End: 4 weeks

On the question regarding the contentness (scale values 1 to 10), four patients referred to 1, five patients to 2, five patients to 3, three patients to 4, three patients to 5, one patient to 7, two patients to 10, one patient had no more complaints at all and one patient was not satisfied.

The patients where also inquired whether they agree to be treated once again using the QRS method and how they assess the application and the therapy feeling. 17 patients voted with Yes, 8 patients with No.

In total, according to our first experiences, there can be started from the fact that the Quantron Resonance System is a very important mosaic piece on the therapy of chronic diseases in the muscle/skeleton region. Here, a device is available that, with respect to its handling and application, meets the requirements of an up-to-date therapy device. The application to the patient is very easy and the use guidance of the QRS control device is clear so that the patient is able to operate the device. In total, we could achieve an alleviation on a quantitatively small case material of chronic backbone patients where we consciously did this without any further electric therapy methods during the QRS treatment.