EVALUATION OF A STROKE PATIENT USING BIOPLASM NLS DIAGNOSIS SCANNER

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ABSTRACT
Bioplasm 3D NLS diagnostics is the use of low infra red signals of extremely low intensity via the brain to create energetically cell patterns in the body. This allows us to target areas of pathology that might be early or late in their stage of development. This work has examined the novel use of Bioplasm 3D NLS diagnostics in evaluation of an ischaemic stroke patient. The methods involved placing the headphones of the Bioplasm 3D NLS scanner on the patient while seating comfortably on a chair. The patient had to seat quietly with no arms or legs crossed. The patient is not allowed to eat 2 hours prior to scanning and no metals are allowed on the patient during the scanning. The observational scan takes about 30 minutes to complete. The case report involved a 47 year old man with a 6 month history of stroke. We evaluated the effects of the stroke by using the 3D NLS scanner. Classical Symptoms included paralysed left side with marked facial drooping, weak arms and limbs and observed slurred speech. Mood changes were observed as low with occasional smiles. From the scans clearly marked areas of low perfusions to the brains, kidney and to the heart. A classical case in stroke patient depicts that there is always a degree of renal impairment attached to it. We conclude that Bioplasm 3D NLS scanner could be employed effectively in the evaluation of stroke patients. The routine monitoring allows for clinicians to judge the level of treatment and how effective the treatment is, on a case by case basis. This in effect allows for getting the best out of clinicians by strict protocols that allows for in-depth monitoring and evaluations of stroke patients while minimising the cost burden on the patient. A lot of work still needs to be done with the 3D NLS scanner as this can potentially be usefully in early diagnosis of patients before a stroke and routine monitoring of cardiovascular patients.

KEYWORDS: Bioplasm, stroke, scanner, patient, cardiovascular and symptoms.

Introduction
This study was aimed at evaluating effectiveness of NLS diagnosis in diagnosing of a stroke patient. Cerebrovascular disease is one of the leading causes of death in the UK with stroke estimated as the fourth single largest cause of death in the UK. It is estimated that 85% of all strokes are ischaemic and 15% haemorrhagic (Luengo-fernandez R et al; 2013). In the US alone 795000 patients have stroke each year. Stroke patients in the UK incur about £8.9 billion yearly with 5% of the total UK NHS costs (Mozzafarian, 2016).

It is becoming clear that the primary stroke prevention strategies are not working with the cost of stroke patient reaching a climax (saka et al; 2008). An effective strategy that minimises cost allowing for monitoring patients at risk can be utilised; Bioplasm NLS diagnosis can be an effective tool in ensuring that patients are monitored routinely. It uses torsion fields and quantum–entropic logic theory in analysis of biological objects.

In Moscow, experiments have been going on that suggests that spectral entropic analysis method is comparable to angiography which basically has been used for early detection of patients with vascular pathology (Nesterov. V, 2013).

Methodology
A case report. A 48 year old man with ischaemic stroke as confirmed by doctor's report characterised by blurred vision, sudden weakness on the left side of the body, dizziness and memory loss. On close examination his left leg and left arm was weak. There was no bleed to the brain. This device works by sending low infra-red signals of extremely low intensity to the brain via unique designed headphones. The patient was seated on a chair with no crossed legs or arms. The NLS scan was ran for 30 minutes and results were evaluated. Every cell has a unique frequency marker attached to it. These frequencies are too low that normally a white noise is sent to elevate the signals. These enhanced signals are now detectable. The database in the software program has all the unique frequencies of diseases and cells in the body. By comparative methods we can eventually find the source of the problem.

Figure 1 Arteries of the cerebrum: viewed from above in the patient under study.

Figure 2. Arteries of brain: view from below

Figure 3. Vessels of the anterior heart wall
Discussion of Results

MRI scan has been used as the primary tool for diagnosis of stroke patients as a result of diffusion weighted imaging (DWI) (Smith, G, 2014). The central focus here is minimising costs to regular scans given to the patients. With this, we find that there is poor routine check up as to stroke patients worldwide. The use of Bioplasm NLS diagnosis allows for routine monitoring that is cheap and effective in evaluation of vascular pathology (Kataeva G. V et al; 2007).

CT scans are used in monitoring infarcted cerebral tissues within 24 hours of presentation, but due to the inability of the eye to see the contract of the infarcted cerebral tissue it then becomes a waiting game to visualise the extent of damages caused. Bioplasm NLS diagnosis can be used early on in the event to evaluate the extent of organ damage caused. It should be noted that renal function impairment should not be neglected as these could give rise to further complications during treatment (Paraskevas KI et al; 2009). Figure 9 shows the arterial walls of the kidney vessels compromised.

Figure 1 and 2, depict a clear presentation of a stroke patient with clearly marked arteriosclerosis in various regions of the brain. In this case with an energetic representation of 6 as representation of the black squares.

Vessels of the anterior and posterior walls of the aorta are also filled with plaques. This can be visualised with a representation of Figures 5 and 6 which represents a chronic condition. Entropy analysis of the acupuncture scan (Figure 8a) of the right foot concluded myocardiodystrophia which represents damages to the cardiac muscles (Figure 8b). Entropy analysis of the transverse section of the aorta confirms atherosclerosis with an etalon value of 0.077.

Conclusion

Bioplasm NLS diagnosis imaging can be used as an adjunct in the early evaluation of stroke and routine monitoring to ensure that these blood markers are treated early and effectively. The low costing of these medical devices allows for more use in routine checks thereby reducing high cost bills to these patients and a better quality of life. It is recommended that more work be carried out using other patients for more robust result and confirmation.

References