

Method of Bioenergy Diagnostics of the Physical Field of the Human Body (Qigong Hand Diagnostics)

Dr. George Zdravkov, MD, DSc, Lac*

Center for Integrative Medicine, 340 W. Butterfield Rd #3, Elmhurst, IL, 60126, USA.

*Correspondence:

Dr. George Zdravkov, Center for Integrative Medicine, 340 W. Butterfield Rd #3, Elmhurst, IL, 60126, USA.

Received: 10 Feb 2023; Accepted: 26 Feb 2023; Published: 03 Mar 2023

Citation: Zdravkov G. Method of Bioenergy Diagnostics of the Physical Field of the Human Body (Qigong Hand Diagnostics). J Med - Clin Res & Rev. 2023; 7(2): 1-10.

ABSTRACT

The article represents the ability of the human skin sensitive receptors and receptors of the proprioception to detect and code the physical field around the human body. The Method of Bioenergy Diagnostics is based on the trained ability of the medical practitioner's skin to feel the physical field of the patient's body. The Method of Bioenergy Diagnostics includes the full classification of the skin sensations to the physical field of the patient's body (34 sensations); electro-neurophysiological patterns as the evidence for the skin sensations; the sensitive images of the etiological factors, acupuncture points and syndromes in the Traditional Chinese Medicine; sensitive images of the fifty diseases in the Western medicine; electro-neurophysiological patterns as the evidence for the sensitive images of the syndromes in the Traditional Chinese medicine and the diseases in the Western medicine. To build the Method of Bioenergy Diagnostics, it was used on 5,500 patients, 23 persons with extended skin sensitivity. The verification of the skin sensations to the components of the physical field of the human body and the sensitive images of the diseases in the Western medicine and syndromes in the Traditional Chinese Medicine were made by the BIOPAC System 150.

Keywords

Bioenergy Diagnostic, Skin sensations, Traditional Chinese medicine, Western medicine.

Introduction

The matter is presented as the field and substance. The substances of the human body were object of the examination with the beginning of the medicine. The exploring and examination of the field of the human body has no more of the century history. The ability of the human skin to feel the physical field of the patient for the first time was mentioned as the hand diagnostics or shou zhen by Dr. Chao Yuan Fang at his book – *General Treatise on the Origin and Symptoms of Various Diseases* (Sui Dynasty 618-581 B.C.) [1]. Never was written a book to explain how hand diagnostics was performed and not existed the textbook at the Traditional Chinese medicine. The first information of the ability of the skin to feel the field of the patient body was written by Hippocrates (460-377 B.C.), the father of the Western medicine – “It has often appeared while I have been soothing my patients, as if there was a singular property in my hands to pull and draw away from affected parts

aches and divers' impurities by laying my hand upon the place and extending my fingers toward it.” Through the centuries no one doctor did the research to explain and analyze what is the methodology and essence of the hand diagnostics (shou zhen) or bioenergy diagnostics at the Traditional Chinese medicine or Western medicine. This article is the synthesis of the 35 years research on the bioenergy diagnostics based on the extended skin sensitivity [2,3].

Materials and Methodology

For the purposes of the research were selected 23 persons (20 women and 3 men, from an age range of 25 to 45 years old) with the extended skin sensitivity. They were selected from 80 examine volunteers. All 80 persons had the medical exam to rule out the neurologic or psychiatric diseases. First their threshold of skin sensitivity was measured by the increased electric, pulse stimulation on the finger's tops. Was selected the electronic elements, which produced the electric field, magnetic field or electromagnetic waves to imitate the components of the physical field of the human body. The emission of every one electronic

element creates the specific skin sensation. The elements were hidden in the phantom of the human body, with possibility to change their position and switch on or off distantly. The persons with extended skin sensitivity were able to locate the position of the elements and which specific sensation they are producing (Tables 1 and 2).

The intensity of the EF and MF were recorded on 1 cm distance from the electronic elements with Spectran NF – 5035, AARONIA AG, Germany, www.ELEKTROSMOG.DE, same distance on which was placed the top of the second finger of the examinee person.

Table 1: Electric and magnetic fields of the electronic elements.

ELECTRONIC ELEMENTS	CALIBRATION F [Hz]	ELECTRIC FIELD [V/m]	MAGNETIC FIELD [nT]
Cap 51 F/630 V, nonelectrolyte	39900	9.28	0
Cap 51 F/630 V, nonelectrolyte	10400	9.16	0
Cap 560 nF/630 V ceramic, nonelectrolyte	908	30.24	4.46
Cap 560 nF/630 V ceramic, nonelectrolyte	6030	31.48	36.94
Cap 560 nF/630 V ceramic, nonelectrolyte	4000	70.62	56.82
Cap 560 nF/630 V ceramic, nonelectrolyte	5060	38.02	37.68
Diod GP 30G	96600	7.88	0.13
Diod GP 30G	152800	4.91	0.208
Coil with ferrite 0.43 Ω/10W	44800	66.42	1676
Coil with ferrite 0.43 Ω/10W	41800	812.4	24280
Coil with ferrite 0.43 Ω/10W	44200	23.28	630.8
Resistor 3.5 Ω/ 15 W	20000	78.32	178.9
Transistor D45H11 (PNP)	87800	118	42.12

Table 2: Electric and magnetic fields of the electronic elements, types of skin sensations, sensory nerves activity and goniometry.

ELECTRONIC ELEMENTS	CALIBRATION F [Hz]	ELECTRIC FIELD [V/m]	MAGNETIC FIELD [nT]	TYPE OF SENSATION	SENSORY NERVES ACTIVITY Amplitude [mV] Duration [s] (channel 4)	GONIOMETRY Amplitude [deg] Duration [s] (channel 3)
Cap 51 F/630 V, nonelectrolyte	32200	3.73	0	Thermal sensation- cold type	Cold spindle amplitude – 0.18 μV; Duration – 0.25 s	Max. amplitude - 0.3 deg Duration - 0.14 s
Cap 51 F/630 V, nonelectrolyte	10400	9.16	0	Pricking sensation – Permanent type; Vibration – Single type	Max. amplitude - 140 μV	Max. amplitude - 1.5 deg Duration - 0.8 s
Cap 51 F/630 V, nonelectrolyte	39900	306.6	2.48	Pain sensation	Min. amplitude - 4.3 μV Max. amplitude - 46 μV Duration - 0.4 s	Max. amplitude – 0.48 deg Duration - 1 s
Cap 560 nF/630 V ceramic, nonelectrolyte	908	30.24	4.46	Pressing sensation	Max. amplitude - 40 μV	Max. amplitude - 0.28 deg Duration - 0.26 s
Cap 560 nF/630 V ceramic, nonelectrolyte	6030	31.48	36.94	Inductive sensation – Attractive type	Max. amplitude – 62 μV	Max. amplitude - 3.3 deg Duration- 1.62 s
Cap 560 nF/630 V ceramic, nonelectrolyte	4000	70.62	56.82	Inductive sensation – Repelling type	Max. amplitude - 140 μV	Max. amplitude - 5.2 deg Duration - 1.5 s
Cap 560 nF/630 V ceramic, nonelectrolyte	5060	38.02	37.68	Involuntary movement – Permanent type	Max. amplitude - 134 μV	Max. amplitude - 4.9 deg Duration - 4.2 s
Diod GP 30G	96600	7.88	0.13	Thermal sensation- warm type	Warm spindle amplitude – 0.66 μV; Duration – 0.42 s	Max. amplitude - 0.4 deg Duration - 0.45 s
Diod GP 30G	45030	7.36	0.128	Pricking sensation – Permanent type	Max. amplitude – 1.28 μV	Max. amplitude – 0.18 deg Duration - 0.22 s
Diod GP 30G	152800	4.91	0.208	Involuntary movement – Permanent type	Max. amplitude – 2.24 μV	Max. amplitude – 14.8 deg Duration – 3.4 s
Coil with ferrite 0.43 Ω/10W	44800	66.42	1676	Pricking sensation – Single type; Involuntary movement – Permanent type	Max. amplitude - 225 μV	Max. amplitude - 27 deg Duration - 4.8 s
Coil with ferrite 0.43 Ω/10W	41800	812.4	24280	Vibration – Permanent type	Max. amplitude – 178 μV	Max. amplitude - 1.2 deg Duration - 2.8 s

The verification of the skin sensations of the persons with the extended skin sensitivity to the electric field, magnetic field and electromagnetic waves from electronic elements was done with the measurement of their skin neurophysiology parameters – **electro skin conductivity, skin temperature, finger goniometry, and peripheral nerve activity**. The skin neurophysiology parameters were measured with BIOPACK System 150. The electro skin conductivity was measured by the Sensor TSD 203, skin temperature by Sensor TSD 202A, finger goniometry by Goniometer TSD 130E and activity of the peripheral nerve by Sensor EL 503 (superficial, transcutaneous neurography) (Photo 1).

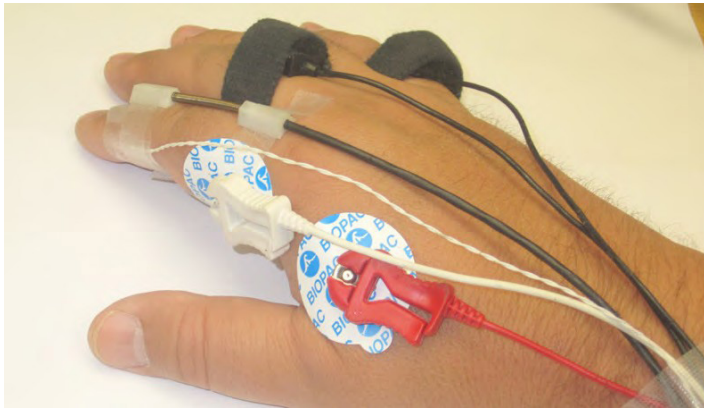


Photo 1: Position of sensors on the fingers of the right hand.

The repeated neurophysiology parameters of the skin of the person with extended skin sensitivity, to one sensation were named **the electrophysiological pattern of the sensation** (See Results).

All 34-kind sensation of the human skin to the electric field, magnetic field and electromagnetic waves were verified and their electrophysiological patterns were established.

The components of the physical field of the human body (infrared heat emission, radio thermal waves, electric field, magnetic field, acoustic waves, and triboelectricity) induce the same 34-kind sensations in the skin of the person with the extended skin sensitivity. Every one pathologic process in the human body changes the components of the physical field of the patient in a specific way and the person with extended skin sensitivity is able to feel it.

Another research was performed with 194 people, 37 had the same sensations to the same calibration of the same electronic elements (37 persons have the extended skin sensitivity). No matter, if they have or not have the sensations, the skin and sensitive peripheral nerves of the 194 examine peoples responded of the same way to the EF and MF, emitted from the same electronic elements ($p < 0.3$) [3].

To create **the sensitive images** of the 50 diseases from the Western medicine were used 5,000 patients with confirmed diagnoses through the X-ray, CT, ultrasound diagnostics and clinical laboratory (100 patients per disease). Fifty patients with confirmed

disease (for example tumor) were examined from the person with the extended skin sensitivity and all their sensations were recorded. The group of the repeated sensations from all 50 patients were named the sensitive image of the specific disease (sensitive image of the tumor). Other 50 patients first were diagnosed from the person with extended skin sensitivity (sensitive image of the tumor), and according to the sensitive image were sent for verification with the diagnostic methods of the Western medicine. Five hundred patients were used to build the sensitive images of the etiology factors and syndromes from the Traditional Chinese Medicine.

The verification of the sensitive images of the diseases from the Western medicine and syndromes from Traditional Chinese Medicine was performed by the measurement of the skin neurophysiology parameters on the persons with extended skin sensitivity – electro skin conductivity, skin temperature, finger goniometry and peripheral nerve activity. The skin neurophysiology parameters were measured with BIOPACK System 150. The repeated neurophysiology parameters of the skin of the person with extended skin sensitivity, to one disease or syndrome were named **the electrophysiological pattern**. This way was building the electrophysiological pattern of the diseases from Western medicine and syndromes from the Traditional Chinese Medicine.

Results

I. Conducted researches led to conclude that the human skin responses with the specific neurophysiological changes to the electrical field (EF), magnetic field (MF) and electromagnetic waves (EMW), no matter of have or no have sensation of the experimental person. Was distinguished **34 skin sensations to the electrical field, magnetic field and electromagnetic field:**

1. Classification of the skin sensations to the EF, MF and EMW Thermal Sensations

- Warm thermal sensations
- Cold thermal sensations

Inductive Sensations

- Repelling (involuntary movement in direction out from the electronic element surface)
- Attractive (involuntary movement to the electronic element surface)

Vibrations (repeated involuntary movement to the electronic element surface)

- Single vibrations
- Group vibrations
- Constant vibrations
- Depending on their amplitude, they can be divided into small and high amplitude vibrations
- Depending on their frequency, they can be divided into low, medium and high frequency vibrations

Involuntary movement (involuntary movement in 3D space around the electronic element)

- Single involuntary movement
- Permanent involuntary movement

- Involuntary movement with vibrations
- Involuntary movement with inductive sensations
- Involuntary movement caused by pricking sensations

Pricking Sensations

- Single pricking sensations
- Group pricking sensations
- Constant pricking sensations
- Weak pricking sensations
- Strong pricking sensations
- Pricking causing pain
- Pricking causing pressing sensation
- Pricking causing inductive sensations
- Pricking causing vibrations.
- Pricking causing involuntary movement
- Depending on their amplitude, they are divided into small, medium, and high amplitude pricking

Pressing Sensations (sensation of the pressing of the finger from all directions)

- Weak pressing sensations
- Strong pressing sensations

Pain

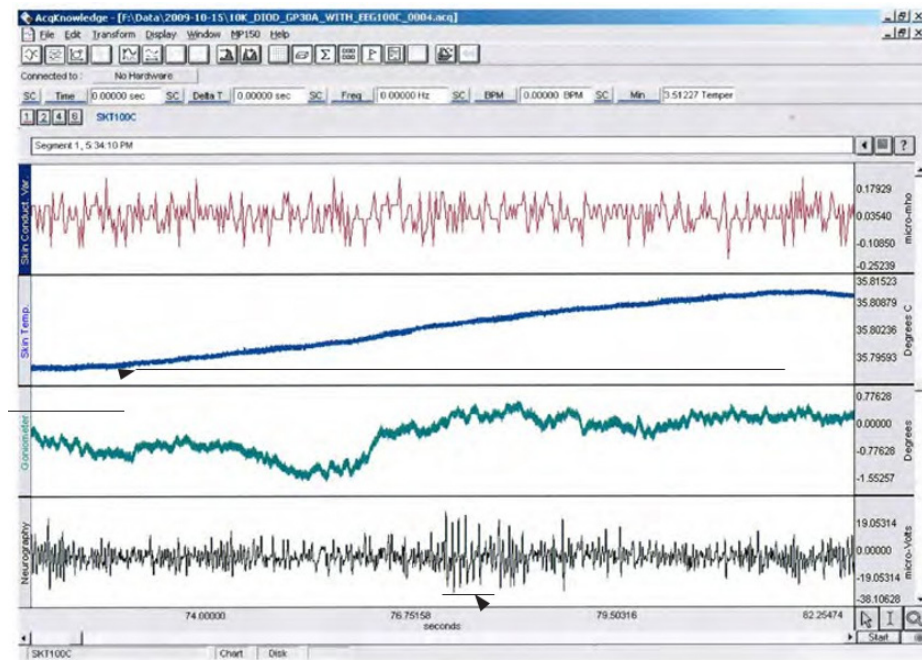
- Slight pain
- Strong pain
- Pain caused by pricking sensations
- Pain caused by pressing sensations
- Pain caused by thermal sensations

2. All kind skin sensations were verified by the specific neurophysiology changes (skin conductivity, skin temperature, finger goniometry and activity of the peripheral sensitive nerves) named **the electrophysiology pattern of the skin sensations to the electric field, magnetic field and electromagnetic waves.**

For example, will present the electrophysiological pattern of the thermal sensation – warm and cold thermal sensations (Figures 1 and 2).

To receive the electrophysiology pattern of the warm sensation, the top of the second finger of the examinee person was placed on 1 cm from the electronic element Diod GP 30G, which emitted EF - 7.88 V/m and MF - 0.13 nT. The recording 1 shows that at the moment of the increasing of the skin temperature (second channel) through the sensitive nerve (fourth channel) passes the specific group of the impulses, named the warm spindles. The warm spindle has 5-6 impulses with max. Amplitude 0.66 μ V and duration – 0.42 s. Every time when the temperature of the skin rises up are formed the warm spindles, with existed or not existed sensation of the warmth (Figure 1).

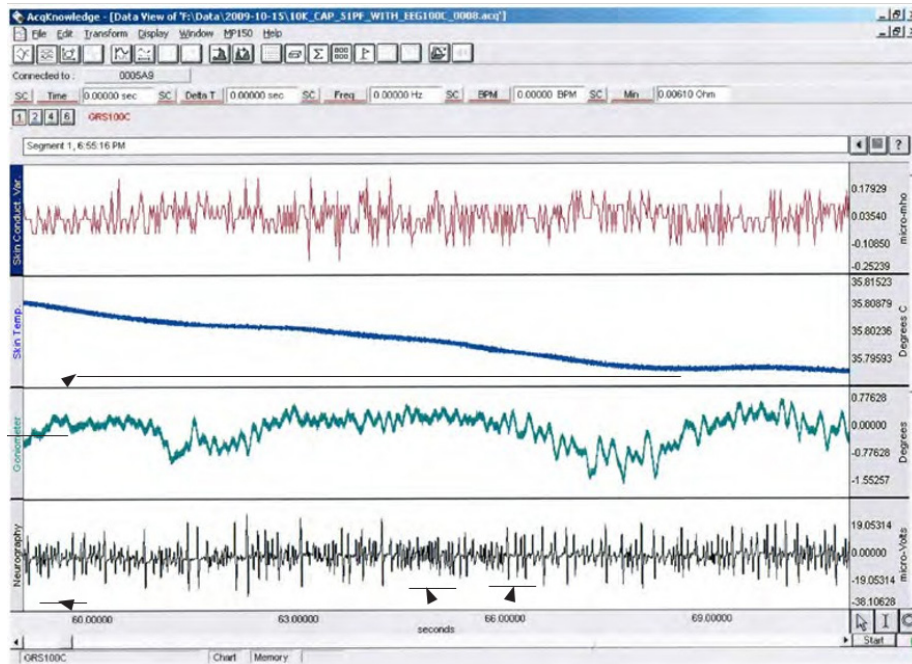
To receive the electrophysiology pattern of the cold sensation, the top of the second finger of the examinee person was placed on 1 cm from electronic element Cap 51 F/630 V, nonelectrolyte, which emitted EF - 9.28 V/m and MF - 0 nT. The recording 2 shows that at the moment of the decreasing of the skin temperature (second channel) through the sensitive nerve (fourth channel) passes the specific group of the impulses, named the cold spindle. The cold



Increase in skin temperature with a sense of warmth

Warmth spindle

Figures 1: Electrophysiological pattern of warm thermal sensations. Warm spindle.



Decrease in skin temperature with a sense of cold

Cold spindles

Figure 2: Electrophysiological patterns of cold type thermal sensations. Cold spindle.

spindle is the group of the 5-7 impulses with amplitude – 0.18 μV ; Duration – 0.25 s. Every time when the temperature of the skin decreases is formed the cold spindle, with existed or not existed sensation of the cold (Figure 2).

To receive the electrophysiology pattern of the pain sensation, the top of the second finger of the examine person was placed on 1 cm from the electronic element Transistor D45H11 (PNP), which emitted EF – 118 V/m and MF - 42.12 nT. At the Figure 3 can be seen that at the moment before to be felt the pain, it is formed one high amplitude impulse, which is followed from decreased to absent activity of the sensitive nerve (fourth channel). The feeling of the pain from the examine person continues at the period of the absent activity in the sensitive nerve, when the maximal amplitude of the impulses is 0.95 μV and duration of the pain sensation is 1.78 s. at the same moment the skin temperature decrease (second channel). At the third channel can be seen very small movement of the second finger (goniometry at the third channel) with forming of the group of the impulses with higher amplitude at the same moment in the sensitive nerve (fourth channel) and consequent period of significantly decreasing of the amplitude of the impulses – period of the pain. All these changes form the electrophysiology pattern of the pain sensation to the EF and MF. The reaction of the skin to applied EF and MF and activity of the peripheral sensitive nerve is same in the all examine persons, no matter if they feel of not fell the pain (Figure 3).

To receive the electrophysiology pattern of the pricking sensation

– permanent type, the top of the second finger of the examine person was placed on 1 cm from the electronic element **Diod GP 30G**, which emitted EF - 7.36 V/m and MF - 0.128 nT, calibration - 45030 Hz. At the Figure 4 can be seen that at the moment of the decreasing of the skin temperature (second channel) through the sensitive nerve (fourth channel) permanently are passing the impulses – the period when the examine persons fell the permanent pricking sensation. The impulses are with max. Amplitude 1.28 μV . Every time when the skin of examine person was exposed to the EF and MF from the electronic element Diod GP 30G, was recorded the same changes at the skin temperature, goniometric changes and peripheral sensitive nerve activity, with existed or not existed sensation of the pricking sensation (Figure 4).

To receive the electrophysiology pattern of the involuntary movement vibration – permanent type, the top of the second finger of the examine person was placed on 1 cm from the electronic element **Coil with ferrite 0.43 Ω /10W**, which emitted EF - 812.4 V/m and MF - 24280 nT, calibration - 41800 Hz. At the Figure 5 can be seen that at the moment of the increasing of the skin temperature (second channel) through the sensitive nerve (fourth channel) are passing the single impulses with maximal amplitude - 178 μV . After every big single impulse has the involuntary movement – vibration movement at the second finger, which were recorded at the third channel. The vibrations were with maximal amplitude 1.2 deg. and maximal duration 2.8 s. Every time when the skin of examine person was exposed to the EF and MF from the electronic element Coil with ferrite 0.43 Ω /10W, was recorded

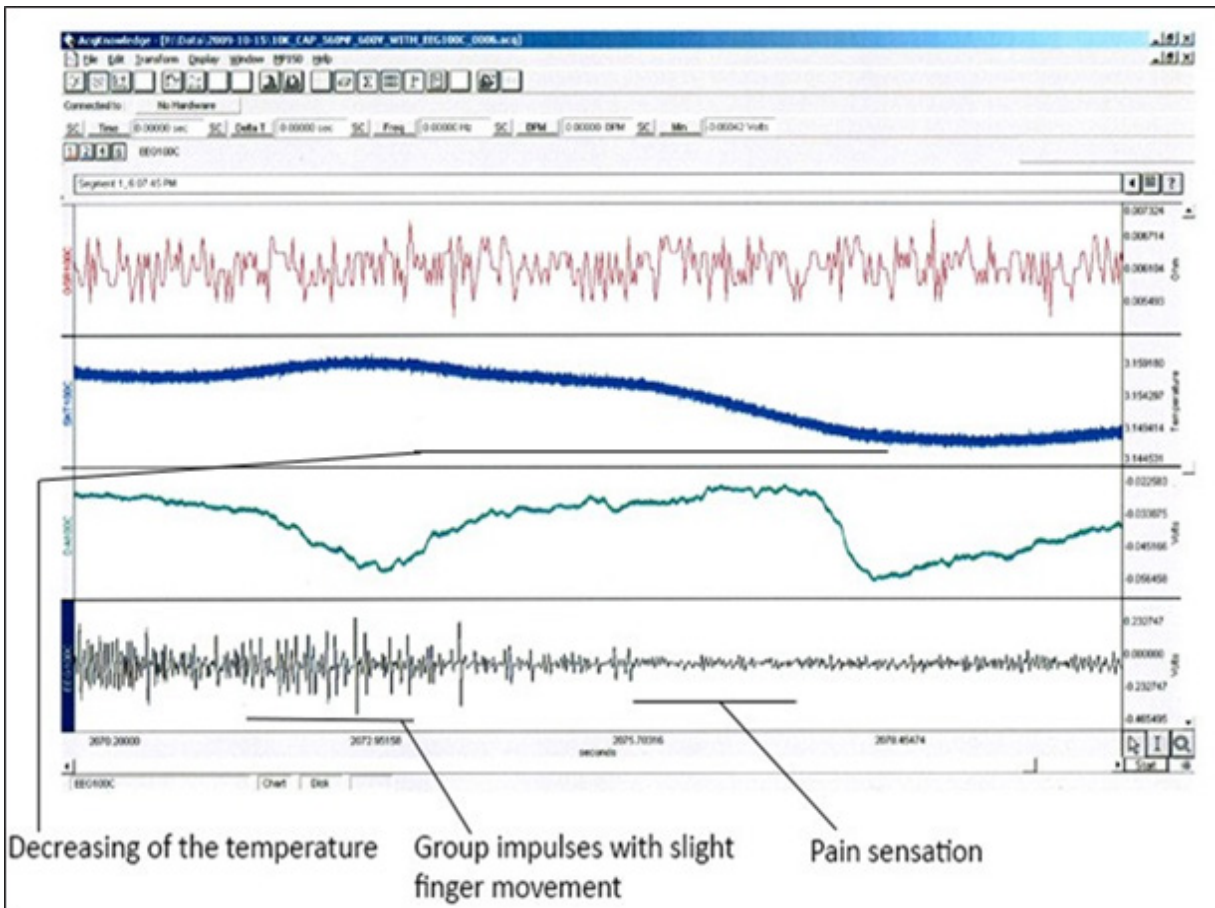


Figure 3: Electrophysiology pattern of the pain.

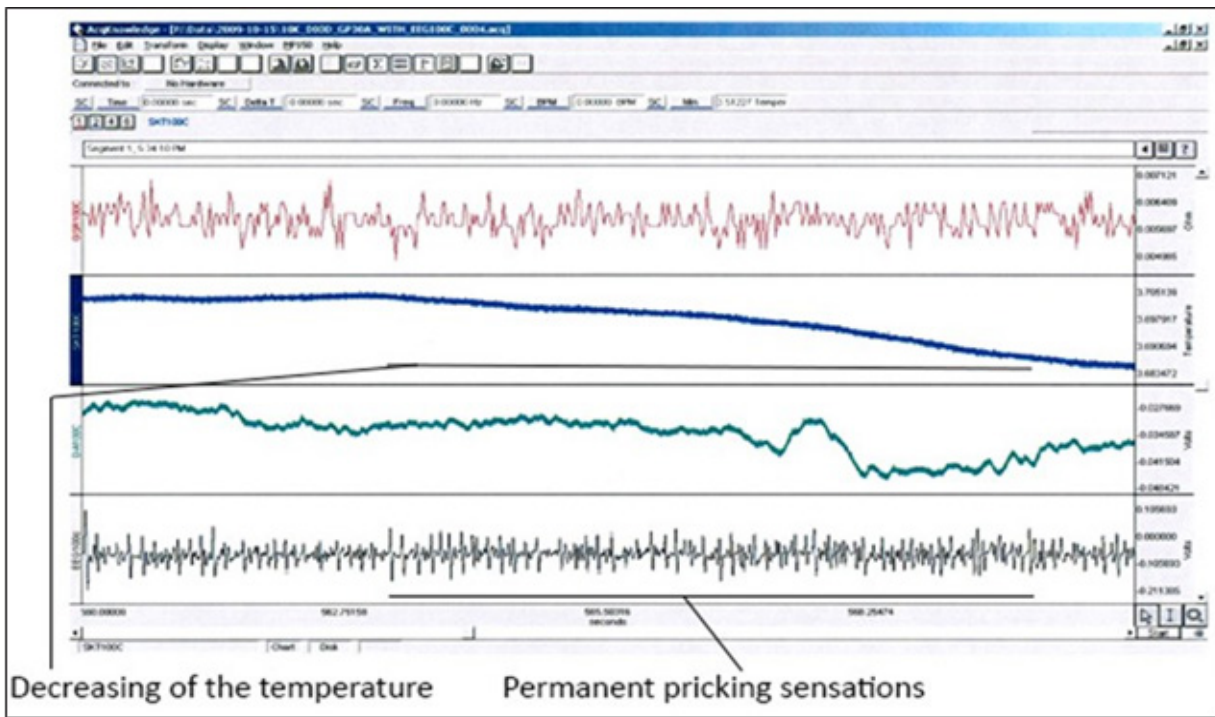


Figure 4: Electrophysiology pattern of the permanent pricking sensations.

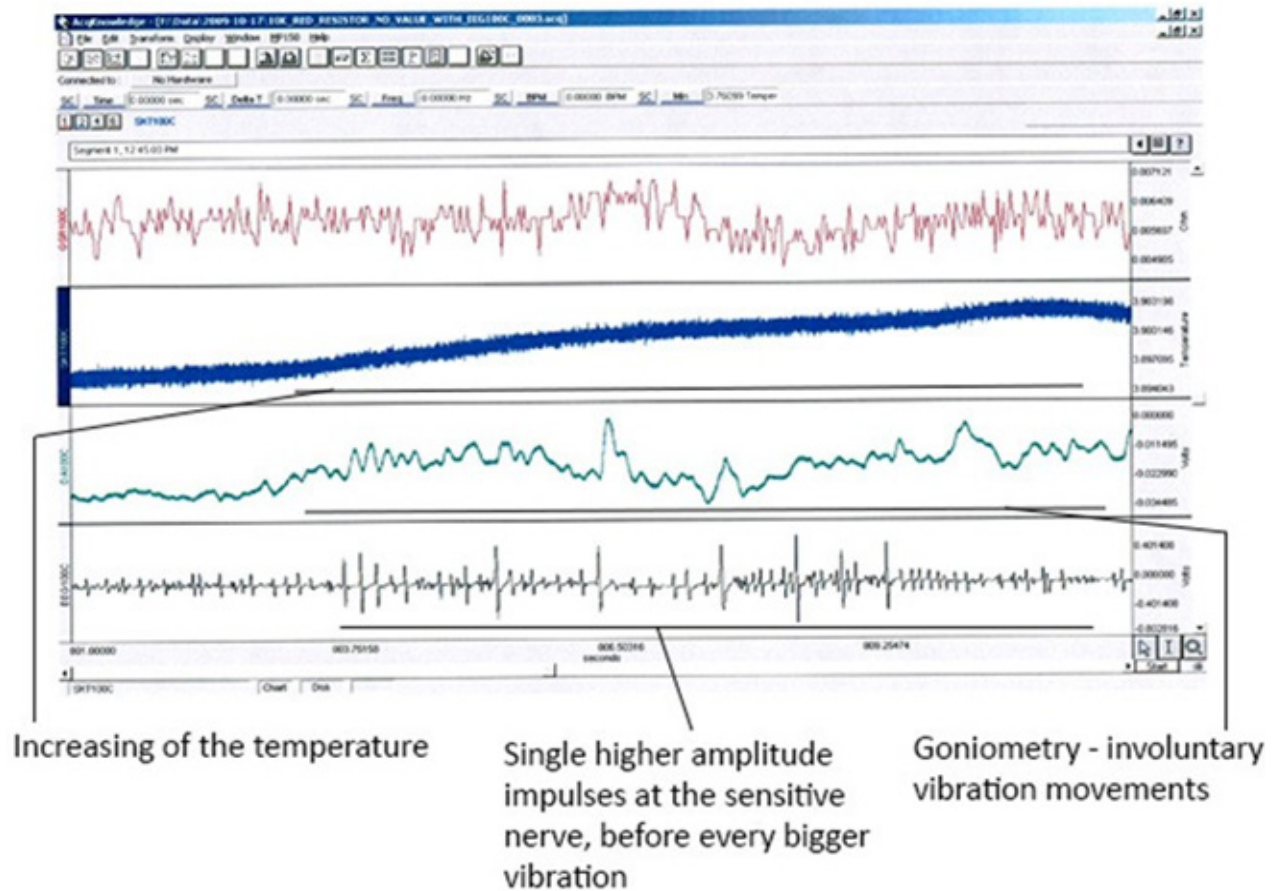


Figure 5: Electrophysiology pattern of the vibrations.

the same changes at the skin temperature, goniometric changes and peripheral sensitive nerve activity, with existed or not existed sensation of the vibration.

3. The fact that small number of the examine peoples have sensations to the EF and MF, but their skin and sensitive nerve respond at same way in all of the examine peoples can be explained with the filtration of the information from the peripheral sensitive nerve at the level of the sensitive nucleus of the thalamus (ventral posterolateral nucleus and intralaminar nucleuses of the thalamus). This way the sensitive information is not reach the somatosensorial analyzer at the brain cortex. The persons which have sensations to the EF, MF and EMW were named as **the persons with the extended skin sensitivity**. They have **decreased the threshold of the sensitive nucleus of the thalamus**. **This is the normal neurophysiology ability of the human brain**. The initiated neurophysiology term extended skin sensitivity has to be distinguished from the extra sensorial perception, where is speaking of some unknown for the science ways for receiving of the information.

II. Through the research were created the 50 **sensitive images of the most frequent diseases from Western medicine and etiology factors and syndromes of the Traditional Chinese medicine (TCM)**. All sensitive images of the diseases and syndromes

were verified by the specific neurophysiology changes (skin conductivity, skin temperature, finger goniometry and activity of the peripheral sensitive nerves) named **the electrophysiology pattern of the diseases and syndromes**.

For example, will present the sensitive image and electrophysiological pattern of the myocardial infarction (Western medicine) of heart impediment – zhen xin tong (Traditional Chinese medicine).

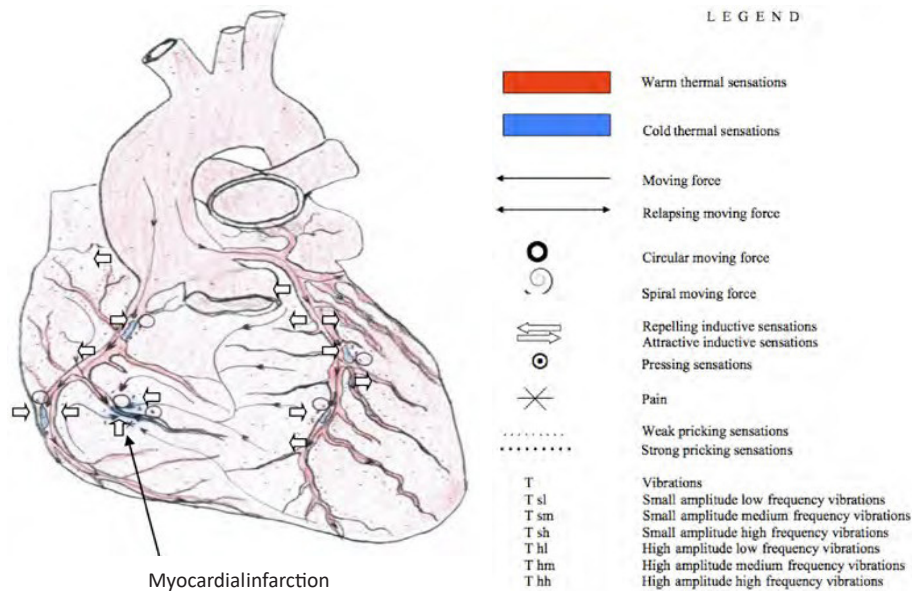
The Heart Impediment pattern in the Traditional Chinese medicine is result of insufficiency of Yang Qi leading to inadequate warming and propulsion of the blood or obstruction of the heart vessels by static blood forming when internal phlegm turbidity disturbs blood flow. The symptoms are dull pain and oppression in the heart area (insufficient Yang Qi or obstruction of the vessels by phlegm stasis); in severe attack gripping heart pain; green-blue or purple facial complexion; cold limbs; fainting; palpitation; shortness of breath; fine pulse (in Western medicine – angina pectoris, myocardial infarction). In MBD, tactile sensory characteristics of the myocardial infarction or heart impediment pattern include cold thermal sensations; attractive inductive sensations; strong pressing, strong single, and group pricking sensations, and dull or pricking pain over affected areas and vessels of the heart; high amplitude medium or high frequency vibrations over the heart. Moving forces with velocities

higher than 3-4 m/sec are formed from every point of the patient's body to the heart; and spiral moving forces are formed over the narrowed or blocked heart vessels (Figures 6 and 7).

Every time when the fingertips of the person with extended sensitivity are placed over the patient's chest, where is the projection of the myocardial infarction were recorded the same electrophysiological pattern.

1. The sensitive images are the brain perception to the EF, MF and EMW in the physical field of the patients with specific pathological processes.
2. The electrophysiology pattern of the diseases from the Western medicine and syndromes from TCM verified the correctness of their sensitive images.

This is one of the biggest research projects for the verification of the brain perceptions to the EF, MF and EMW stimulation of the human skin [2,3].



Figures 6: Sensory image of myocardial infarction or heart impediment – zhen xin tong.

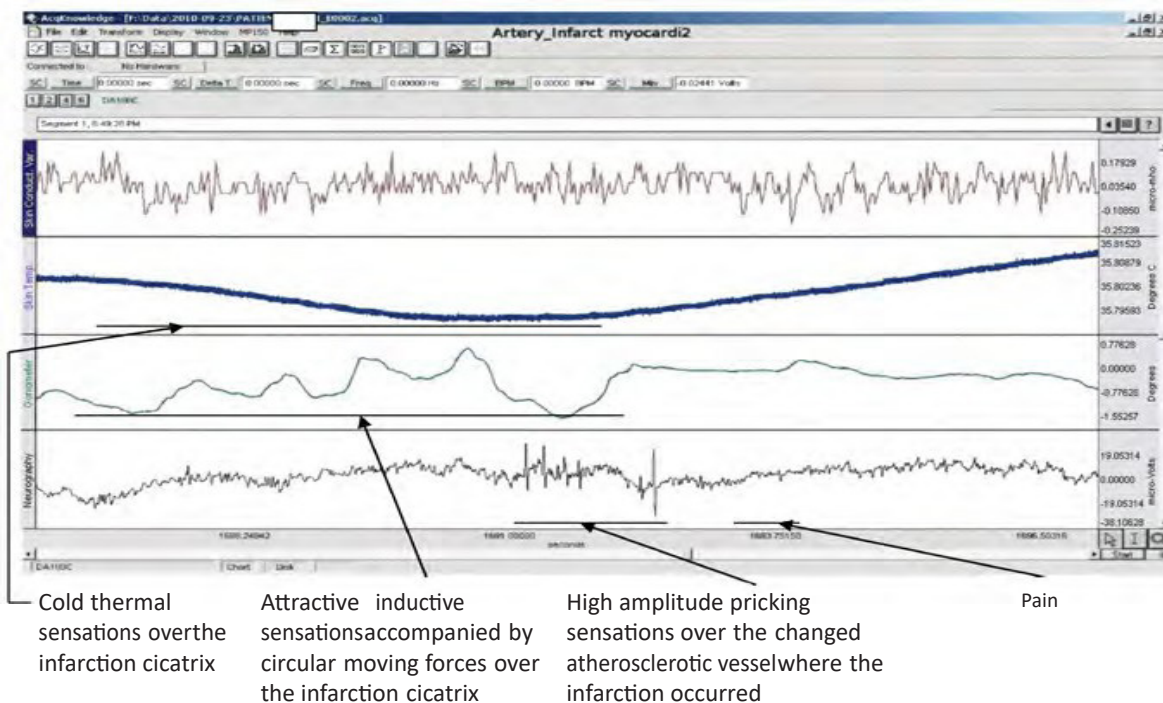


Figure 7: Electrophysiological pattern of myocardial infarction or heart impediment – zhen xin tong.

Analysis

1. The changes of the electrophysiologic parameters as the skin conductivity, temperature, involuntary muscle contraction and skin nerve activity show that **the human skin receptors are sensitive to the very small EF and MF**. The fact that small number of the examinee people have sensations to the EF and MF, but their skin and sensitive nerve respond the same way in all of the examinee individuals can be explained with **the filtration of the information from the peripheral sensitive nerve at the level of the sensitive nucleus of the thalamus (ventral posterolateral nucleus and intralaminar nuclei of the thalamus)**. This way the sensitive information is not reach the somatosensory analyzer at the brain cortex. The different kind sensations can be induced from one electronic element with different calibration. The maximal intensity of the sensation is not induced with the maximal working regime of the elements. There is the specific frequency of the element calibration to induce the specific sensation with the specific changes in the electrophysiology condition of the skin and peripheral sensitive nerve.

The EF can induce more the thermal sensations – warm and cold, pricking sensation, pressing sensation and less the involuntary movement as vibration – single type.

The MF is able more to induce the involuntary movement – single and permanent type, vibration – permanent type, inductive sensation – repelling type and less pricking sensation – single type.

The EF and MF together, in balancing proportion, are able to induce the involuntary movement – single and permanent type, inductive sensation – attractive and repelling type, vibration – permanent type and pain.

The electric field activates:

- The receptors of warm and receptors of cold - free nerve endings type A δ and type C to induce the thermal sensation – warm and cold.
- The Meissner's corpuscles, Iggo domes complex, Merkel's discs and free nerve endings to induce the pricking sensation – permanent type.
- The Pacinian corpuscles, Merkel's discs, Ruffini's nerve endings and free nerve endings to induce the pressing sensation.
- The Free nerve endings type A β , A γ and C to induce the pain sensation. • The Pacinian corpuscles, Meissner's corpuscles, Iggo domes complex, Merkel's discs and free nerve endings to induce the vibration sensation – single type.

The magnetic field activates:

The muscle spindles, Golgi tendon receptors, Ruffini's nerve endings, Pacinian corpuscles and free nerve endings to induce the involuntary movements – single and permanent type, vibration – permanent type, inductive sensation – repelling type, pricking sensation – single type.

The analysis of the experimental result shows **the electric field more influence the specialized skin receptors for temperature, touching, pressing, vibration and pain, whereas the magnetic**

field influences more the receptors of the proprioception for the pose and movement. This is why is not found the specific receptor for the magnetic field at the skin and still existing the opinion that the skin and human body is not sensitive to the magnetic field.

The human skin is able to react with the specific electrophysiologic changes to the electric field and magnetic field – electrophysiology patterns of sensation to the EF and MF. The electrophysiology change can be detected in every one person, no matter if he has or has no sensations. The electrophysiology patterns of the sensations show how the specialized receptors in the skin and receptors of proprioception transformed the stimulus of the EF and MF in the specific groups of the impulses, to be translate to the central nervous system. The warm and cold spindles show how the skin receptors for warm and cold code the temperature information to be delivered through the sensitive nerves to the brain.

- **The electric field more influence the specialized skin receptors for temperature, touching, pressing, vibration and pain, whereas the magnetic field influences more the receptors of the proprioception.**
- **The receptors for magnetic field are the free nerve endings, receptors of proprioception and receptors for touch.**

2. The research on the creating of the sensitive images of the diseases from the Western medicine and syndromes from the TCM, with their verified electrophysiology patterns, explain how the persons with extended skin sensitivity performed the bioenergetic diagnostics.

3. The Methodic of the bioenergetic diagnostics places the Western and Traditional Chinese medicine on the same energy level. No different meaning of the diagnoses as the diabetes mellitus or heat in the 3 jiao or myocardial infarct and heart impediment. Their sensitive images and electrophysiology patterns are the same. This is creating **the bridge between Western medicine and Traditional Chinese medicine**. The Field medicine will unify the medicine.

4. Potential of the Method of Bioenergy Diagnostics:

- **Fast orientation in main medical problem and safe for the patients, not necessary the advance preparation of the patient for the examination**
- **Determination not only the localization of the pathological process, but also its size, shape and spatial location**
- **Determination of the entry point of the infectious or toxic agents and trace its spread in the body**
- **Particularly useful for early functional diagnostics: for identifying disease months or years prior to the formation of the structural changes in a tissue or organ**
- **MBD allow to determine the location and the extent of the pathological process, the type of tissue that is affected- muscle, nerve, bone, connective, or another, and nature of tissue changes (unstructured and structured processes)**
- **MBD allow to distinguish the basis syndromes in the TCM, localization of the most important acupuncture points for the concrete cases**

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- **MBD allow to determine the effectiveness of the treatment administered from Western and Eastern treatment methods**
 - **MBD is the missing entity that connects and explains the link between the Eastern and Western medicine**

5. MBD can be base for creating of the new kind, bionic, diagnostics apparatus. The electronic skin, as the prototype of the skin with extended sensitivity and artificial intellect are able to lead to invention of the new diagnostic devices with application not only in the medicine.

Achievement

- New neurophysiology term – extended skin sensitivity
- Perception for the Electric and Magnetic fields – receptors for the magnetic field, receptor for electric field. Electrophysiological patterns of the perceptions.
- Classification of the skin sensations to the electric and magnetic field

- Sensitive images and electrophysiology patterns of the 50 diseases of the Western medicine and syndromes of the Traditional Chinese medicine.
- New diagnostic method by screening of the physical field of the patient's body, as the part of the first physical exam in the Western and East medicines.

References

1. Johnson JA. Chinese Medical Qigong Therapy. The International Institute of Medical Qigong. USA. 2002.
2. Zdravkov GD. Qigong Hand Diagnostics. The Method of Bioenergetic Diagnostics Based on Extended Skin Sensitivity USA. 2018.
3. Zdravkov GD. Decoding of the Skin Sensations to the Low Intensive Electric and Magnetic Fields. Journal of Bioscience & Biomedical Engineering. 2021; 2.