Multiple Sclerosis as a Cause of Tooth Loosening and Subsequent Loss; the Role of Glycine and N-Acetylcysteine in the Treatment and Prevention of Disease in the Elderly When Using the Method of Resonance Therapy

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ABSTRACT

It has been established that loosening of the tooth or teeth is a consequence of the local manifestation of Multiple Sclerosis (MS) in the structures of the tooth and teeth. The article discusses the process of treating loose teeth and their loss by treating multiple sclerosis with potentiated preparations of Glycine and Cysteine using the method of resonance therapy in the elderly, as well as preventive measures to prevent this pathological process. It has been established that loosening and subsequent loss of teeth is associated with degenerative and (or) inflammatory processes in tooth structures. The article shows that effective treatment of MS of the alveolar nerves, periodontium and other structures of the tooth with potentized preparations of Glycine and Cysteine leads to the restoration of a strong position of the teeth. The advantage of this method is associated with its complete atraumaticity, and therefore absolutely painlessness. Patients with loose teeth were consulted, examined by a dentist both before the start of treatment, and during and after the completion of treatment. Further, testing was carried out on the apparatus of resonance therapy - an examination of organ preparations was carried out - "alveolar nerves", "multiple sclerosis", "periodontitis", "periodontitis", "gums" and "tooth". It has been established that these seven organ preparations are tested to some extent in all patients. This means that these patients either have an inflammatory process in these tissues, or degeneration, which is caused by MS. It was these circumstances that led to the loosening of the teeth and their loss. Indeed, in the senile process, the tooth becomes thinner, especially its root, the periodontal space increases, and the gum decreases. Our task was to cure the degeneration of these organs - to bring them into such a state according to the anatomical structure, which was before the onset of senile degeneration. Every patient. In the event that the selected potency led to the emergence of a resonance, the preparations ceased to be tested and they - preparations of the tooth, alveolar nerve, multiple sclerosis, gums or other elements of the tooth were restored.

Keywords

Introduction
Loosening, loosening of teeth and their subsequent loss is usually associated with inflammatory, infectious gum diseases - periodontitis, gingivitis. They make the gums weak, cause bleeding - the tooth root is weakened and the teeth begin to hurt and move. Loosening of the teeth can also occur during childbearing, when hormonal imbalance occurs and a decrease in calcium can lead to loosening of the teeth and their loss. As a cause of loosening of teeth and their subsequent loss, it is also possible as a result of mechanical damage to the jaw [1,2]. Treatment of tooth loosening is currently associated with instrumental, traumatic methods [1-5].

Looseness, loosening of the teeth can also be with multiple sclerosis, not only widespread, but also local. Our previous work

Citation: Praznikov Viktor. Multiple Sclerosis as a Cause of Tooth Loosening and Subsequent Loss; the Role of Glycine and N-Acetylcysteine in the Treatment and Prevention of Disease in the Elderly When Using the Method of Resonance Therapy. Recent Adv Clin Trials. 2023; 3(2); 1-6.
has shown that multiple sclerosis can cause degeneration of the auditory nerve and subsequent hearing loss and the need for hearing aids. However, the treatment and cure of multiple sclerosis in these patients [6,7] eliminated the need for hearing aids. Obviously, the process of loosening and loss of teeth is also a consequence of the development of multiple sclerosis in patients and damage to the alveolar nerves, gums, tooth or teeth.

Multiple sclerosis (MS) is a chronic disease in which the myelin sheath of the nerve fibers of the brain, spinal cord, and peripheral nerves is affected [7].

A feature of the disease is the simultaneous defeat of several parts of the nervous system, which leads to the appearance of a variety of neurological symptoms in patients. The morphological basis of the disease is the formation of the so-called plaques of multiple sclerosis - foci of destruction of myelin (demyelination), white matter of the brain and spinal cord, and other structures of the nervous system.

Etiology
The cause of multiple sclerosis is not exactly known.

Mechanisms of Disease Progression
Recent studies have confirmed the mandatory participation of the immune system in the pathogenesis of multiple sclerosis. Disturbances in the immune system, as already mentioned, are associated with the peculiarities of the set of genes that control the immune response.

The most widespread is the autoimmune theory of multiple sclerosis. To date, multiple sclerosis cannot yet be considered a completely primary autoimmune disease. The occurrence of multiple sclerosis is associated with a random individual combination of adverse endogenous and exogenous risk factors. First of all, endogenous factors include a complex of HLA class II gene loci and, possibly, genes encoding TNF-α, which determine the genetic failure of immunoregulation. Among the external factors may be important: the area of residence in childhood, nutritional habits, the frequency of viral and bacterial infections, etc.

In an organism that has a genetically determined failure of the regulatory systems of immunity, the activation of the immune system occurs - by trauma, a stressful situation. In this case, the antigen of nonspecific provoking factors, for example, a viral infection - stimulated macrophages and activated T-helpers are fixed on the endothelial cells of the blood-brain barrier (BBB). Cytokines secreted by fixed cells express on the surface of the BBB the major histocompatibility complex class I and II antigens (for antigen presentation), as well as cell adhesion molecules.

In the process of aging, degeneration of various organs occurs. Exceptionally often, such degeneration is associated with the process of demyelination of the nerves that control this function. Such neurological degeneration can be local - in one nerve, or it can be multiple - in two or more nerves, up to a very significant number of nerve formations. Thus, cardiac arrhythmia in the elderly is often associated with the process of degeneration of the vagus nerve due to demyelination.

Strengthening a loose molar is used when adding calcium to the diet. However, when the tooth is loose and crushed, it is removed and an artificial tooth is implanted in its place. In case of loosening of the lower teeth after their diagnosis, drug treatment or splinting is prescribed if the lower front teeth are very loose and may fall out [1,2]. When the gums become inflamed, the teeth can become loose and fall out. If gingivitis is left untreated, periodontitis appears, the necks of the teeth are exposed and loosening of the teeth occurs in all directions.

In this work, the treatment of loosening of the teeth was carried out by the method of resonance therapy. From a technical point of view, resonance is a phenomenon of the response of an oscillatory system to an external influence. When the periods of action and the response of the system coincide, a resonance occurs - a sharp increase in the amplitude of the considered oscillations.

Resonance was discovered by Galeleo Galelei in 1604 [8]. The resonance can be most clearly described as follows. A platoon of soldiers approaches a wooden bridge and the officer gives the command to go out of step because if a platoon of soldiers crosses the wooden bridge in step, the bridge may collapse from resonance. The vibrations of the bridge will coincide with the vibrations of the marching soldiers, a resonance will arise, from which the bridge will collapse.

In this article, the role of the bridge is "played" by the disease, and the role of marching soldiers is "performed" by the healing effect. The commander of the soldiers did not want the bridge to collapse due to possible resonance. The doctor, by contrast, absolutely needs a resonance to destroy the disease.

Resonance methods for studying matter have found wide application in physics, chemistry, biology, and medicine. For example, Nuclear Magnetic Resonance (NMR).

At the end of the 20th century, magnetic resonance imaging (MRI) was developed on the basis of NMR. It is used to obtain images of the human brain, heart, and digestive tract organs. For the development of MRI in 2003, the American biophysicist Paul Lauterbur and his English colleague Peter Monsfield were awarded the Nobel Prize in Physiology or Medicine.

In 1975, the German physician Frank Morell came to the quite logical conclusion that if a disease of the organs of the human body is inevitably accompanied by disturbances in their frequency rhythm, then the essence of treatment should be to suppress the “unhealthy” fluctuations that have arisen and restore normal ones. The vegetative resonance test - VRT, originally proposed in 1991 by the German scientist G. Schimmel [9], allows one-point examination. Testing only one biologically active point makes it possible to assess the state of not only all organs and systems, but...
A device for resonance therapy based on a computer was created, which included both diagnostic and therapeutic parts. In a modern device for resonance therapy there is a large selector with diagnostic (they are also therapeutic) markers, information copies of diseases, which are called "nosodes" when it comes to the disease and "organ preparations" - information copies of healthy organs when the doctor deals with normal, not pathological organs or their parts. "Nosodes" are used for the identification and treatment of diseases, and "organ preparations" for testing perfectly healthy organs or parts of them. Nosodes are electronic markers about a disease and "organ preparations" - information markers about a healthy organ or its part, recorded on a specific medium.

Each test drug exerts a wave effect on the patient. It is necessary to restore the spectral (frequency) harmony in the patient.

Original test preparations (unlike their informational copies) are material objects, i.e. specific substances with their own atomic and molecular structure.

**Resonance of Destruction**

**Diagnosis Using Destruction Resonance**

In the activity of a doctor applying bioresonance therapy, a process takes place using modern technologies. First, a diagnosis is made. To do this, the nosode of the alleged disease is displayed on the computer screen connected to the device for bioresonance therapy and it is tested in the patient. If the nosode is "not tested", then there is no resonance and the arrow on the computer screen does not fall down in the middle of the screen. Therefore, the patient does not have the disease that is displayed by the nosode. In the same case, if the nosode is being tested, there is a resonance between the patient and the test drug - the arrow on the computer screen falls and indicates that the patient has the disease, the name of which is the nosode. This is a diagnostic resonance, but not a therapeutic one. This is how resonance diagnostics is carried out in bioresonance therapy.

**Treatment Using Destruction Resonance**

To treat a detected disease, the doctor must destroy either the tumor or the infectious process with the help of resonance, and for this it is necessary to potentiate the nosode detected in the patient, i.e. to find that potency of the nosode that will cause resonance with the pathological process in the patient and destroy the disease, in other words, therapeutic resonance is needed. To do this, find that potency of the nosode (usually high), which leads to the fact that when testing this nosode in a patient, the fall of the arrow stops. Such a potency of the nosode leads to a resonant destruction of the structures of the disease. In other words, the informational content of the nosode in a certain potency is used for the resonant destruction of the structure of the disease, namely the treatment of the disease found. The doctor writes the informational content of the potentiated nosode on a sugar grain and the patient takes this sugar grain and is thus treated, i.e. there is a resonant destruction of the structure of the disease.

Since 2016, materials have been published on the use of high potency drugs for treatment [11-21]. It was found that drugs of high and ultra-high potencies do not cause any side effects, including toxic effects on sick and healthy people. But high potency preparations proved to be extremely effective in the treatment of severe and extremely severe diseases such as cancer, infectious diseases, including HIV, stones and cysts in organs [10-20]. In particular, metastatic forms of oncology are effectively treated. So, resonance medicine includes resonance diagnostics and resonance therapy. The treatment of patients in which the destruction of the structure of the disease occurs, for example, oncology, is called "destruction resonance".

**Resonance of Creation**

Since 2016, materials have been published on the use of the second direction of therapeutic resonance - the "resonance of creation" [10-20]. Resonance can not only destroy, for example, diseases, but also create lost biological structures. This made it possible to treat degenerative diseases.

We could not find in the scientific literature the idea that resonance can be not only a "resonance of destruction", but also a "resonance of creation". This is obviously due to the fact that it is not easy to imagine how the coincidence of frequencies leads to a response that is not destructive, but creative. In this article, we have presented illustrations of how resonance can be not only destructive, but also constructive, in particular for the treatment of degenerative disease. During the treatment with the help of resonance of destruction, the nosodes of diseases were used, from which preparations were prepared in high potencies. This principle has not been effective for the treatment of degenerative diseases. The creation and formation of the principle of "resonance of creation" became possible only as a result of the fact that not nosodes, but oranopreparations were used for treatment. Without organ preparations in high potencies, it is impossible to imagine the use of this principle.

This article presents materials related to the treatment of degenerative diseases and, in particular, degeneration of the alveolar nerve, periodontium and teeth. This means that treatment is nothing but the process of restoring organs or organ systems that have undergone changes as a result of diseases or as a result of the senile degenerative process.

In practice, most often after a disease, for example, inflammation or as a result of the senile process, the level of health of the organ drops until it is destroyed. Such an organ requires restoration (rehabilitation). The resonance of creation makes it possible to restore an organ or part of it. There are various organ preparations in the selectors of hardware and software complexes for bioresonance therapy. For the restoration and rehabilitation of organs, we used organ preparations, mainly of high potencies. They were made in exactly the same way as high potency nosodes.

**Treatment of multiple sclerosis (MS)**

Treatment for multiple sclerosis depends on the nature of the disease. With a relapsing course of the disease, it is necessary to
treat exacerbations, prevent exacerbations, slow down the transition to the stage of secondary progression, as well as symptomatic treatment of depression, pain symptoms, urinary disorders, chronic fatigue syndrome, etc. In the secondary progressive type of multiple sclerosis, in addition to symptomatic treatment, the goal is to slow down the progression illness. With primary progressive multiple sclerosis, symptomatic treatment is prescribed.

**Treatment of MS by the resonance of creation**

After testing, resonance diagnostics of the nosode and organ preparations, treatment is carried out using the resonance method of creating MS. Corresponding preparations are prepared from the tested organopreparation. They are recorded on sugar grains in the potency that is necessary for treatment and resonant treatment of patients is carried out [4].

**The Results of the Treatment of Multiple Sclerosis**

The beginning of work with patients suffering from multiple sclerosis was due to the fact that the diagnosis of MS is confirmed. Patients addressed doctors mainly in the elderly and senile age with a relapsing remitting variant of the course of the disease and its various clinical manifestations [10-20].

The most frequent general complaint of patients was dissatisfaction with sleep, which did not allow them to restore their strength, despite the fact that their nightly sleep was 9-10 hours. In addition to sleep, these patients also needed daytime sleep, both before 11-12 pm and after 2-3 pm. After 10-20 days of treatment (in some cases more), patients began to report that they had reduced nighttime sleep, and the need for daytime sleep gradually decreased. An equally important report from the patients was that they reported improved walking. Those patients who used sticks as a tool that allowed them to walk more confidently and insures them against falling began to gradually abandon the use of sticks when walking. These changes do not happen quickly. In other words, their walking "became freer and freer" and the duration of walking therefore increased without signs of fatigue, and dizziness became less.

An equally important sign of improvement in the condition of patients was that the patients testified to an improvement in vision. Prior to the start of treatment, the vast majority of patients noted a sharp and rapid drop in visual acuity, as a result of which they hardly had to pick up new glasses every 3-4 months. Since the beginning of the treatment, the visual acuity of our patients has improved significantly, which they brought to the attention of the attending physician.

In the course of treatment, a Vegetative Resonance Test was regularly performed in patients. He testified that the nosode of multiple sclerosis was tested less and less, the organ preparations of the "myelin sheath", the nerve itself and the organ preparation were tested less and less, i.e. patients were cured. An equally important aspect in the treatment of MS is the diagnosis in patients, and subsequently the treatment of scars, adhesions and contractures. The most resistant formations in the process of MS treatment are the oculomotor nerves. While in the process of therapy, patients increase the volume of motor activity, complaints of unsteadiness of walking remain, although they become smaller. Testing of the oculomotor nerve organ preparation indicates that its myelination increases and, in general, it is tested less and less. Patients were treated until the test parameters became normal and there were no complaints from patients with whom they applied for the treatment of multiple sclerosis. In other words, Multiple sclerosis is extremely effectively treated (cured) by resonance medicine methods [4]. Thus, the materials of this review article meet the three principles of evidence-based medicine - scientific character (resonance - scientific non-direction), efficiency and safety.

**Use of Glycine and N-acetylcysteine for the Treatment of Multiple Sclerosis**

In this paper, we report an effective method for treating the process of loosening, loosening of the tooth or teeth, and thus MS, with Glycine and N-Acetylcysteine (more precisely, Glycine and Cysteine). Glycine and N-Acetylcysteine are amino acids. Glycine and cysteine produce Glutathione, an exceptionally strong antioxidant system that reverses aging and oxidative stress. With age, the amount of Glutathione decreases. This is why Glycine and Acetylcysteine are used instead of Glutathione in various studies [21,22]. As a result of taking these drugs in old animals, the stock of Glutathione increased by 259%. At the same time, mitochondria that process fats reduce fat processing with age, and in those middle-aged patients who received Glycine and Acetylcysteine, mitochondria processed fats in mitochondria better by 78%. In young people who were given Glycine and Cysteine, no changes occurred [21,22].

The number of mitochondria. The process of renewal of mitochondria is called Metaphagy. It turned out that in elderly patients who took Glycine and Acetylcysteine, the rate of metaphagy increased and approached how it is carried out in young cells. Further. Markers of chronic inflammation are interleukins - signal molecules that create immune cells. They send signals to each other in order to cause inflammation or vice versa to reduce inflammation. There are pro-inflammatory cytokines, such as interleukin 6 or c-reactive protein. But there are also anti-inflammatory cytokines - interleukin 10. When old patients took Glycine and Acetylcysteine for 16 weeks, inflammation decreased by 78 percent, while C-reactive protein fell by 41 percent, i.e. decreased inflammation. The level of anti-inflammatory interleukin 10 increased by 59% [21,22]. In young people who were given Glycine and Cysteine did not lead to any changes.
Insulin resistance and insulin levels. After 16 weeks of taking Glycine and Acetylcysteine by elderly patients, the HOMA's index, i.e. Insulin resistance scores fell by 64 percent and insulin levels dropped by 65 percent.

Endothelial dysfunction is an indicator of aging. Endothelium - cells that cover the vessels and the endothelium is important for the regulation of blood pressure, the supply of blood depends on these cells, whether atherosclerotic plaques will form or blood clots will form. It turned out that in those elderly patients who took Glycine and Acetylcysteine, the function of endothelial cells improved. In young people who were given Glycine and Cysteine, no changes occurred. The next factor is damage to the genetic material. In the group of elderly patients who took Glycine and Acetylcysteine, there were significantly fewer markers of damage to the genetic material.

Stem cells are cells that do not differentiate. Stem cells begin to multiply when there is damage. In older patients who took Glycine and Acetylcysteine, the number of stem cells increased [21,22]. Young people who were given Glycine and Cysteine did not experience any changes. The number of senescent cells that do not die and poison the life of other cells. In elderly patients taking Acetylcysteine and Glycine, the number of senescent cells was significantly less. In young people who were given Glycine and Cysteine, no changes occurred. Elderly people taking Glycine and Acetylcysteine have increased working capacity, walking speed, increased muscle mass. In young people who were given Glycine and Acetylcysteine, no changes occurred. The number of free radicals in old people taking Glycine and Acetylcysteine has become less.

High doses of drugs do not cause side effects and thus contraindications. Thus, Glycine and Acetylcysteine eliminate multiple defects of aging, restore muscle strength and cognitive abilities in the elderly. During the 20 years of studying Glycine and Acetylcysteine, the maintenance of mitochondrial health was evaluated. When mitochondria produce energy, they produce waste products called free radicals that can damage cells, membranes, lipids, proteins and DNA. The most common antioxidant used by cells to neutralize toxic free radicals is Glutathione. Older people have much lower Glutathione levels than younger people, and levels of oxidative stress and mitochondrial defects are correspondingly much higher. Glycine and Acetylcysteine eliminate Glutathione deficiency, reduce oxidative stress and fully restore mitochondrial function in the elderly. The antioxidant effect of cysteine is associated with the presence of a nucleophilic thiol SH group, which is easily.

We clearly understand that the above technique is extremely relevant, especially for the elderly, who, with age, most often experience loosening, loosening of teeth, followed by their loss. The condition of these teeth is of great importance. In the event that by this time the tooth (or teeth) has been largely destroyed, the question arises of the advisability of conservatively restoring the strength of the teeth, stopping their loosening. The process of stopping the loosening, loosening of the tooth or teeth during

Treatment of loosening of molars in MS using Glycine and Cysteine by resonance therapy

There are known methods for restoring bone tissue in dentistry using bone chip plasty (Curie), as well as other methods of dental implantology [1-5]. These methods are based on plastic surgical methods that are traumatic for patients. In contrast to these traumatic methods, we used a conservative method - resonance therapy. Since the cause of loosening of the tooth or teeth is multiple sclerosis, it must be treated. Our previous work has already shown effective treatment of MS with a potent drug (nosode) “multiple sclerosis” [6-7]. In this work, we used Glycine and Cysteine for the treatment of MS.

Patients who came to us were consulted, examined by a dentist both before the start of treatment, and during and after the completion of treatment. For our work, we left only those patients in whom, on external examination, the loose tooth or teeth were completely preserved, white, and there were no defects in the structure of the tooth or teeth. Testing was carried out on a resonance therapy apparatus - an examination of organ preparations was carried out - "multiple sclerosis", "upper and lower alveolar nerves", "periodontium", "periodontitis". Gum and tooth. It has been established that these seven organ preparations are tested to some extent in all patients. This means that these patients either have an inflammatory process in these tissues, or manifestations of multiple sclerosis, senile degeneration. It was these circumstances that led to the loosening of the teeth and their loss. Indeed, in the senile process, degeneration of the alveolar nerves occurs, the tooth becomes thinner, especially its root, the periodontal space increases, and the gum decreases. Our task was to cure multiple sclerosis and degeneration of organs - to bring them into such a state according to the anatomical structure that was before the onset of senile degeneration, namely, to make the gum that strengthens the tooth strong and sufficiently voluminous. In addition, in cases where an inflammatory reaction has taken place, cure inflammation and remove their degeneration due to inflammation, cure tooth thinning. We selected the potency of these drugs, namely Glycine and Cysteine, in relation to Multiple Sclerosis and tested drugs on the device, in particular, alveolar nerves in the selected potency for each patient. In the case when the selected potency led to the emergence of resonance, the nosode "Multiple sclerosis" ceased to be tested, as well as preparations of the tooth, gum or periodontium, multiple sclerosis, alveolar nerves with this potency were used in the treatment process. The doctor charged the sugar grains that the patient took with the selected drug "Multiple Sclerosis". In the first two weeks after the start of treatment, patients do not chew food with loose teeth during meals or chew soft food instead of hard food on the side of the loose tooth or teeth. Starting from the third week after the start of treatment, when tooth-loosening decreases, patients more and more chew hard food on the side of the already less loose tooth or teeth while eating. So the treatment process continued until the patient reported that the tooth (or teeth) had ceased to stagger, loosen. This method of treatment is nothing but the resonance of creation. The dentist examines such a patient and confirms that the tooth (or teeth) is normally strengthened and does not wobble, the gum around the tooth is strong and of normal volume.
treatment does not occur quickly and requires at least four weeks or more.

**Prevention of Tooth Loosening by Resonance Therapy**

To prevent loosening of teeth and their subsequent loss, regular testing of organ preparations "multiple sclerosis", "alveolar nerves", "periodontitis", "gum", and "teeth" is carried out in patients on a device for bioresonance therapy. In the event that the teeth do not stagger, do not loosen, but these organ preparations are tested, preventive treatment of these positions is carried out. The doctor selects the necessary potency of the multiple sclerosis nosode, charges them with sugar grains, which the patient takes until these organ preparations are no longer tested. Such preventive work is increasing in frequency due to the increase in the age of the patient.

**Conclusion**

It has been established that loosening of the tooth or teeth is a consequence of local multiple sclerosis (MS) in the structures of the tooth, teeth. The article discusses the process of treating loose teeth and their loss in the treatment of MS with potentiated preparations of Glycine and Cysteine using the method of resonance therapy in the elderly, as well as preventive measures to prevent this pathological process. It has been established that loosening and subsequent loss of teeth is associated with degenerative and (or) inflammatory processes of the periodontium. The article shows that effective treatment of MS of the alveolar nerves, periodontium and other structures of the tooth with potentized preparations of Glycine and Cysteine leads to the restoration of a strong position of the teeth. The advantage of this method is associated with its complete atraumaticity, and therefore absolutely painlessness.

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