

SCENAR – a thing from the last century

Yes, it is true, I have invented SCENAR last century! Indeed, it is a unique technology of treatment that has been serving human health and well-being for many decades already. But speaking seriously, it is quite old and for today, time of nanotechnologies, this method of treatment is rather rough. SCENAR is a method of “big stimulus”. The main criterion of the dose is absence of changes of skin impedance. Such approach of “big stimuli” is rather inaccurate and it causes adaptation in the body, which is not very beneficial for effect of treatment. Various methods of modulation, damping, frequency fluctuations and application of complicated protocols produce beneficial effect to some extent and support existence of this technology. On the other hand, all of it complicates implementation in mass use. However, for today SCENAR is the best pain-relief means.

COSMODIC

It was designed by “LET Medical” Research Lab in the beginning of our century. It was a serious step forward which could become possible due to implementation of multiple feedbacks. It was them that allowed splitting the “big stimulus” into several small ones. Transition from one small stimulus to another was now made on command of the body through the feedbacks.

COSMODIC-therapy is definitely a therapy of new level with new possibilities. As promised, COSMODIC is just a beginning...

ENS

Long ago, in 1976, I made a device called ENS-01. 7 years later it was improved and upgraded to ENS-03. Its design was as if introduced from space, even inner mounting resembled a big and complex, bulk and dense tangle, with complicated rules of mounting. High-density mounting was fantastic for those times and it was undescrivable and could not be documented properly. Even its appearance – the device was made of a solid bar of black ebonite, without any fasteners - looked like a trimmed piece of meteorite. In spite of our poor and weak component supply base, this device had unique treatment features, which modern SCENAR devices still do not have.

If one made an exact copy ENS-03, it would work. But it was impossible to make any changes in it, even shift something 1 mm to the side. As I was already a lead engineer at Radioengineering Institute, for many years I had to rush from one factory to another, in hopes of introducing it into mass production, both on behalf of the Radioengineering Institute and on behalf of Research laboratory of medical electronics which I founded.

All changes made for the device to correspond to the Unified System of Design Documentation, like SCENAR-032, SCENAR-033 actually killed all therapeutic effect. And these devices just remained as samples in my museum. We could only achieve some success in the beginning of the 1990s, at the private enterprise, where we could neglect the rules and norms of the Unified System of Design Documentation. This is how SCENAR-035 was born. It was a first serial production therapeutic device, produced by “LET Medical”, where SCENAR-technology was implemented. Today this technology still remains nearly unchanged, except for the component base. The method is good, but not as much as ENS-03.

What was left off-screen is the high density mounting with invisible aerial spurious feedbacks, the instability of components which were thought to be the reason of allegedly “bad” characteristics of ENS-03 device, but which actually provided such dramatic treatment results. Replacing them with supermodern processors with quartz crystal control led to the loss of therapeutic effect. But this is only a clue to understanding of the fine-tuning and that any tiny change would turn the device into just a toy giving small electric shocks and something else.

I have proved this in my other invention of that time, called “antiscenar”. At least this is how Alexander Revenko called it, as this device could disbalance the body within a few minutes. The point is that with the help of automatic electronic switching of the output stage, the body is being alternately affected by opposite polarity action in equal proportions. It is like turning on hot and cold water in equal proportions – it is expected to be warm, but the result we have got was rubbish and the body got very “upset”. Of course, we have never left it like this, but we designed SCENAR-033 device, which was intended to be put into production at “Priboy” plant in Taganrog. In this model it was possible to switch over the polarity manually when needed. Such approach provided big possibilities for SCENAR-033 and Dr.Revenko could prove it. “LET Medical” produced 20 test samples. But “Priboy” plant could never reiterate it in serial production. And in our next developments this technology was never implemented again, as the process of treatment required constant monitoring by the therapist during session. Devices with nearly automatic process of treatment required new, much “milder” methods of action, without provoking stress reactions, without “SCENAR-worsening” – these were methods of COSMODIC-therapy + sparse “informational” stimuli (opposite polarity).

ENS – that which is!

ENS-therapy is a logical continuation of COSMODIC-therapy in more advanced implementation. To put it simple, it is a big stimulus SCENAR + small stimuli of COSMODIC + “informational” stimuli. ENS technology is like Russian “matryoshka” dolls.

To be able to understand how the “informational” stimuli work, imagine that you are driving on a mountain road and studs of safety fence, which border the precipice, flicker when you pass by. They are all alike and soon you even stop noticing them. But then someone has painted one of the studs in a different colour. While you pass it by, you will surely react and turn your head and get distracted from the dangerous, twisted and complicated mountain road – that’s how our body is arranged and that’s how it works inside too. The same way “informational” stimuli of ENS-technology work – during action the system inserts tagged impulses and waits for response (usually it is 0.5 to 4 seconds). According to the body response it corrects the next inserts. Inside these inserts there are more sparse inserts, etc, like in Russian “matryoshka” dolls. This way, we have an informational snowball effect. As all the inserts appear only in accordance with the body feedbacks, this “snowball” is actually synthesized by the body itself. After a definite time of action, our body starts using information accumulated in the “snowball” (which has been created through the feedbacks coming exactly from pathological focus) so intensively that it can activate its every cell in order to overcome the disease.

In our old good ENS-03 failures occurred due to body response through spurious feedbacks, giving excess impulses (informational stimuli) at every burst of reaction, which finally led to such dramatic beneficial effect of treatment.

ENS-therapy based on informational stimuli allowed approaching informational space of the body even more accurately and getting resonance responses virtually from all body cells.

...This is the most interesting thing which hasn’t been asked about

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