

THE USE OF BEMER THERAPY WITH AGE-RELATED MACULAR DEGENERATION

Macular Degeneration (AMD) is found in elderly adults, begins mainly in one eye and causes progressive loss of central vision, which entails inability to see fine details, to read, or to recognize faces. Peripheral vision and the ability to navigate remain intact. AMD does not cause blindness but can impair vision to a point where tools and assistance for the blind need to be used.

According to the latest findings, AMD may be caused by over-use of certain cell structures and metabolic disturbances of the retina. Decreased capacity of the pigmented ciliary epithelium cells that are responsible for the removal of certain metabolic waste products leads to deposits of these waste products in the area where our vision is the sharpest - the "yellow spot". Vision becomes more and more limited and in later stages of the disease damage or loss of tissue in the retina is possible. This form of AMD is called the dry form; it progresses relatively slow, sometimes even stagnates and comprises 80% of macular degeneration.

The second, wet form of AMD progresses more quickly and is characterized by vision loss due to abnormal blood vessel growth in the choriocapillaries, ultimately leading to blood and protein leakage through the membrane below the macula. Bleeding, leaking, and scarring from these blood vessels eventually causes irreversible damage to the photoreceptors and rapid vision loss if left untreated.

As a rule, AMD becomes symptomatic only in its later stages through blurred or grey patches while reading, distortions, diminished visual acuity and trouble discerning colors. Both forms of AMD are painless. Early detection is possible through regular examinations of the ocular fundus, when the typical deposits and newly formed blood vessels can be discovered.

The patient's ability to read and see can be preserved through magnifying glasses, special prescription glasses, and electronic reading devices depending on the severity of the condition. Driving a car though becomes impossible most of the time.

Despite intense efforts there are virtually no therapies available for the satisfactory treatment of dry AMD, and only limited possibilities for wet AMD.

Laser therapy which cauterizes newly formed vessels (depending on their location) as well as photodynamic therapy can be used with only a small percentage of patients with wet AMD. These procedures will not be able to stop the progress of the disease totally however, and even if initially successful, the rate of its recidivism is 50% within the first year. Another procedure, rotation of the retina, is complicated and costly. There the retina is completely detached from its background and rotated so a healthy area of the retina can be fixated over the yellow spot.

Another new therapy is the "membrane differential filtration"; this process improves metabolic functions in the eye by improving the general blood flow properties (plasma viscosity, aggregation of erythrocytes, etc.). Recent studies indicate positive results for visual capacity.

BEMER-therapy can be used to improve the circulation and to give general support to the body's self-regulatory mechanisms. Through the following scientifically proven effects, BEMER therapy can lead to the improvement or stabilization of physical well-being and can contribute significantly to the complementary treatment of AMD:

- § Positive physiological effect on the condition of microcirculation, and increased utilization of oxygen in the capillary tissue
- § Positive effect on the protein biosynthesis (repair proteins)
- § Improved micro-hemodynamic conditions for the first steps of immunological processes, and thereby in indirect strengthening of the body's own defense mechanisms
- § Positive effect on the vegetative nervous system

The sum of these effects and the positive experiences in treating diabetic macro- and micro-angiopathies, as well as the success rate of membrane differential filtration suggest that BEMER therapy may have a positive effect on age-related macular degeneration.

BEMER therapy is a complex method that optimizes energy production by the individual cells (ATP) through improved circulation and increased oxygen utilization, thereby contributing to the overall regulation of the body's metabolism. It is therefore an important and essential foundation for strengthening the body's self-healing mechanisms, supporting other treatment measures in the environment of a holistic approach, and increases effectiveness of clinical treatment concepts.

User recommendations for BEMER therapy with age-related macular degeneration
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- § 2 to 3 times daily on the mat according to the basic program
- § Once per day use of the intensive applicator or the coil cushion with P4 on the temples

In some documented user studies- which are not extensive enough to draw representative conclusions- improvements in vision were recorded with long-term therapy.

Literature and studies:

Klopp, R.: *Magnetfeldtherapie: Komplementär-therapeutisch sinnvoll oder Unsinn?* Institut für Mikrozirkulation Berlin (2005)

Michels-Wakili, S., Kafka W.A.: *BEMER 3000-typisch gepulste elektromagnetische Felder niedriger Energie reduzieren Zahnarztangst* (2003)

Please note: Broad acceptance of medical products generally takes several years. We are committed by law to advise you that the effectiveness of electromagnetic fields is still being discussed controversially and has not been commonly accepted.