BICOM® bioresonance method

Use of therapy programs in dentistry
Introduction

Bioresonance is being used to test and treat patients in an increasing number of dental practices.

Just like homeopathy, acupuncture and other naturopathic methods bioresonance is a form of empirical medicine. The fundamental principles of bioresonance have been confirmed by the latest discoveries in quantum and biophysics, but have yet to be accepted by current expert opinion within mainstream medicine. All claims made regarding effects, properties and indications are based on findings and empirical values from Bicom bioresonance itself.

According to our research, dental practices where bioresonance is used report that bioresonance assists acceptance of anaesthetics, for example, so that fewer incidents occur, less anaesthetic is required and fewer attempts to anaesthetise patients fail.

Prior to surgery the patient can be stabilised with appropriate programs. After surgery swelling can frequently be prevented and, in many cases, wounds heal more quickly and the patient experiences less pain. It is also reported that fewer antibiotics need to be prescribed and fewer painkillers are required.

But bioresonance is also used in dental and orthodontic practices in the area of gnathology and for disorders of the jaw, temporomandibular joint and for problems with the jaw musculature.

Allergies are on the increase and a growing number of patients are also intolerant of dental materials, prosthetic materials and crowns, experiencing an adverse reaction. Consequently it is standard practice in dental surgeries which work with Bicom bioresonance to test materials for tolerance before using them, especially in the case of patients with multiple allergies. This also applies to anaesthetics and medicines.

If the patient is suspected of being intolerant of material which has already been incorporated in their body, this is also tested and treated appropriately. Thus it may arise, for example, that intolerance of prosthetic materials leads to inflammation and thereby to swelling, reddening and pain in the oral mucosa. Due to the swelling the prosthesis never seems to fit properly and constantly needs readjusting without this being able to solve the problem. In this situation Bicom dentists also use bioresonance to test and treat the patient.

In implantology, once the bone material has been fitted, the hope is that the wound will heal rapidly and the bone will grow quickly. Once the implant has been fitted, it is important that the wound heals well and the implant soon becomes resilient. This is another instance where bioresonance is used in Bicom practices.

Test and therapy programs are pre-installed in the Bicom device.
# Therapy programs

## Gums, oral mucosa and inflammations

<table>
<thead>
<tr>
<th>Therapy program</th>
<th>Application</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infection with pathogens (viruses, fungi, bacteria)</td>
<td>° corresponding infections of the oral mucosa</td>
</tr>
<tr>
<td>Mycosis therapy</td>
<td>° mycoses of the oral mucosa</td>
</tr>
<tr>
<td>Increasing powers of resistance</td>
<td>° to stabilise resistance in infections of the oral mucosa</td>
</tr>
<tr>
<td>Tissue processes, acute</td>
<td>° treatment of acute inflammatory processes of gums and oral mucosa</td>
</tr>
<tr>
<td>Tissue processes, chronic-</td>
<td>° as accompanying therapy with degenerative periodontosis treatment to regenerate gingival areas</td>
</tr>
<tr>
<td>Gum disease</td>
<td>° adjuvant therapy for periodontopathy progressing acutely /subacutely</td>
</tr>
<tr>
<td>Periodontosis</td>
<td>° to accompany periodontosis treatment</td>
</tr>
<tr>
<td>Sinusitis</td>
<td>° with complaints of the teeth of the upper jaw, caused by maxillary sinusitis</td>
</tr>
<tr>
<td>Cell regeneration</td>
<td>° general use for inflammation</td>
</tr>
<tr>
<td>Contamination with synthetic and heavy metals</td>
<td>° to eliminate contaminating materials materials with inflammation of the oral mucosa</td>
</tr>
<tr>
<td></td>
<td>° to detoxify the mouth-jaw-lymph area</td>
</tr>
<tr>
<td>Allergy therapy</td>
<td>° inflammation of the oral mucosa due to allergic reactions to dental materials, prosthetic materials or crowns</td>
</tr>
<tr>
<td></td>
<td>° to detoxify the mouth-jaw-lymph area following amalgam removal</td>
</tr>
</tbody>
</table>
### Pre- and post-operative treatment

<table>
<thead>
<tr>
<th>Therapy program:</th>
<th>Applications:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-operative treatment</td>
<td>° prior to surgery to stabilise the patient</td>
</tr>
<tr>
<td>Post-operative treatment</td>
<td>° follow-up therapy after the operation</td>
</tr>
<tr>
<td>Lymph activation</td>
<td>° preliminary and follow-up therapy after surgery to stimulate lymphatic flow and prevent swelling</td>
</tr>
<tr>
<td>Meridian program</td>
<td>° immediately after surgery to prevent haematoma and oedema</td>
</tr>
<tr>
<td>lymph acute</td>
<td></td>
</tr>
<tr>
<td>Meridian program</td>
<td>° for pre-operative lymph treatment in the surgical area – important with tonsillectomy patients</td>
</tr>
<tr>
<td>lymph chronic</td>
<td></td>
</tr>
<tr>
<td>Increasing powers of resistance</td>
<td>° following surgery to prevent the surgical wound becoming infected</td>
</tr>
<tr>
<td>Wound healing</td>
<td>° as follow-up treatment after surgery to accelerate wound healing</td>
</tr>
<tr>
<td></td>
<td>° to stimulate wound healing with post-extraction pain</td>
</tr>
<tr>
<td>Cell regeneration</td>
<td>° for general post-operative use, especially where wound healing is delayed or impaired</td>
</tr>
<tr>
<td>Acute-inflammatory tissue processes</td>
<td>° with inflammation following surgery</td>
</tr>
<tr>
<td>Dental root disease</td>
<td>° with problems with and to stabilise root-filled teeth, e.g. following root treatment due to periapical irritation</td>
</tr>
</tbody>
</table>
## Jawbone, temporomandibular joint and muscles

<table>
<thead>
<tr>
<th>Therapy program:</th>
<th>Applications:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandibular joint correction</td>
<td>° with myoarthropathy of the temporomandibular joint</td>
</tr>
<tr>
<td></td>
<td>° as accompanying therapy for gnathological procedures or where gnathological treatment has not been sufficiently effective</td>
</tr>
<tr>
<td></td>
<td>° to treat muscular tension in patients who grind their teeth (additional service to splint treatment)</td>
</tr>
<tr>
<td></td>
<td>° to prepare for determining occlusal position following lengthy preparation work</td>
</tr>
<tr>
<td>Discopathy of the temporomandibular joint</td>
<td>° for discopathy of the temporomandibular joint</td>
</tr>
<tr>
<td>Myalgia</td>
<td>° for spasms and myalgia e.g. after holding the mouth open for a long period</td>
</tr>
<tr>
<td></td>
<td>° for patients with parafunction of the jaw</td>
</tr>
<tr>
<td>Impaired muscular coordination</td>
<td>° to treat myopathy of the masticatory muscles</td>
</tr>
<tr>
<td></td>
<td>° to improve coordination when determining occlusal position</td>
</tr>
<tr>
<td>Cell regeneration</td>
<td>° to treat residual osteitis</td>
</tr>
<tr>
<td>Acute-inflammatory tissue processes</td>
<td>° to treat residual osteitis</td>
</tr>
</tbody>
</table>
## Pain

<table>
<thead>
<tr>
<th>Therapy program:</th>
<th>Applications:</th>
</tr>
</thead>
</table>
| Ostalgia         | ° with neuralgiform pain in the toothless jaw
|                  | ° treatment of residual osteitis |
| Myalgia          | ° for spasms and myalgia of the jaw muscles  
|                  | (e.g. after holding the mouth open for a prolonged period, with patients who grind their teeth) |
| Neuralgia        | ° with neuralgiform pain, phantom pain |
| Pain in vital tooth | ° with hyperaesthesia after treatment of deep caries or open pulp  
|                  | ° with irritation due to pulpitis  
|                  | e.g. following preparation work or cementing of implant  
|                  | ° also proved effective with post-operative wound treatment |
| Convulsive pain  | ° with trigeminal neuralgia  
|                  | ° adjuvant with pulpitis |
Implantology

**Testing:**

Test implant for tolerance before implanting (e.g. titanium intolerance?)
If patients are sensitive or hyperallergic, test out anaesthetic prior to the operation

**Treatment:**

If bone material is being implanted to build up the jawbone:

**immediately before the operation:**
program: pre-operative treatment to prepare for surgery

**immediately after the operation:**
program: post-operative treatment
program: lymph activation
program: wound healing

\[\text{follow-up treatment to prevent haematoma and oedema and to accelerate wound healing}\]

**once wound has healed:**
program: elimination of scar interference as a scar interference field can impair bone growth
program: cell regeneration to accelerate bone growth
and also restorative magnetic field therapy

If teeth are being implanted:

**before the operation:**
see above

**after the operation:**
see above

**once wound has healed:**
program: elimination of scar interference as a scar field can impair the implant’s growing in process
program: cell regeneration to accelerate the implant’s growing in process and thereby enable it to become resilient more quickly
Additional application

**Anti-smoking therapy:** as smoking is the main risk factor in periodontosis
Proven program combinations

Treatment following abscess lancing

1st treatment step in this therapy session:
Basic therapy following conductivity testing

Input cup: saliva
Output cup: empty
Storage device: chip
Input: hand plate electrode
Output: modulation mat on back

2nd treatment step in this therapy session:
Stimulate wound healing program 931

Input cup: unchanged
Output cup: unchanged
Storage device: unchanged
Input: roll roller electrode over site of operation from outside
Output: unchanged

3rd treatment step in this therapy session:
To eliminate pathogens and toxins program 999

Input cup: pus on cotton wool
Output cup: unchanged
Storage device: unchanged
Input: no input electrode on patient
Output: modulation mat on back and also roll roller electrode over wound area from outside (roller electrode connected to red output cable)

Stick chip to thymus area after therapy.

Therapy can be repeated 3 times at brief intervals, however basic therapy should only be used once a week.
Proven program combinations

Pain following extraction

1st treatment step in this therapy session:
Basic therapy following conductivity testing

Input cup: wound secretion
Output cup: empty
Storage device: chip
Input: hand plate electrode
Output: modulation mat on back

2nd treatment step in this therapy session:
Neuralgia program 911
Ostalgia program 650
Stimulate wound healing program 931
(enter all programs separating with a comma)

Input cup: unchanged
Output cup: empty
Storage device: unchanged
Input: small flexible electrode over painful area from outside
Output: modulation mat on back

Stick chip beneath angle of mandible.
**Proven program combinations**

**Pain following grinding trauma**

Program 998

therapy time 4-8 minutes
(pre-set therapy time 3 minutes; press start button again once program has run)

**Input cup:** saliva

**Output cup:** empty

**Storage device:** empty

**Input:** hand plate electrode on opposite hand

**Output:** modulation mat on back; goldfinger on tooth area (connected with red cable)

In most cases 4-8 minutes therapy time is sufficient to treat the patient.
Proven program combinations

Inflammation of the gums

Basic therapy following conductivity testing
Lymph activation  program 930
Gum disease  program 511
(enter all programs separating with a comma)

Input cup: saliva, earwax, nasal secretion
Output cup: Bicom minerals
Storage device: chip
Input: hand plate electrode, goldfinger in the mucobuccal fold
Output: modulation mat on back

Apply 4-6 drops of Bicom minerals on the tongue several times a day;
stick chip to thymus area.

In acute cases repeat therapy very 2-3 days, otherwise treat once a week
Proven program combinations

Accompanying periodontosis treatment

1st treatment step in this therapy session:
Basic therapy following conductivity testing

Input cup: saliva
Output cup: empty
Storage device: chip
Input: hand plate electrode
Output: modulation mat on back

2nd treatment step in this therapy session:
Tissue processes program 923
Toxin elimination program 970
Accompanying periodontosis treatment program 542
(enter all programs separating with a comma)

Input cup: unchanged
Output cup: unchanged
Storage device: unchanged
Input: stroke gum with goldfinger electrode
Output: modulation mat on back

Repeat treatment at weekly intervals.

Stick chip to thymus area.
Proven program combinations

Pre- and post-operative treatment

e.g. with wisdom tooth operations, extractions, osteotomy of the jaw, curettage of periodontal pockets

Pre-operative treatment (on day of operation):

Basic therapy following conductivity testing

Pre-operative treatment

program 951

Input cup: saliva
Output cup: empty
Storage device: empty
Input: hand plate electrode
Output: modulation mat on back

Post-operative treatment

Post-operative treatment

program 920
Lymph activation
program 930
Activate wound healing
program 931
(enter all programs separating with a comma)

Input cup: depending on surgery: e.g. tooth, pocket secretion, concretion, cyst belly, pus, blood, etc.
Output cup: empty
Storage device: chip
Input: roll roller electrode over site of operation from outside
Output: modulation mat on back

Stick chip two finger widths below the navel.
Toothache

1st treatment step in this therapy session:
Basic therapy
Pain in the vital tooth
(enter all programs separating with a comma)

- Input cup: saliva
- Output cup: Bicom drops and Bicom oil
- Storage device: empty
- Input: roll roller electrode over painful area from outside or appropriate small flexible electrode on painful area
- Output: modulation mat on back

2nd treatment step in this therapy session:
Neuralgia
possibly program for dental root disease
(enter all programs separating with a comma)

- Input cup: unchanged
- Output cup: unchanged
- Storage device: empty
- Input: unchanged
- Output: unchanged

In acute cases take 4-6 drops of Bicom minerals hourly and rub Bicom oil into painful area.
Test programs

- to test incorporated materials if a material is suspected of not being tolerated
- to test materials before they are used. Particularly important with patients with multiple allergies and with complete cleansing
- to test pathogens which have attacked the oral mucosa
- to test the best tolerated medications (anaesthetics, etc.)
- to test whether there is residual ostitis in the toothless jaw area. (An implant should not be used in this situation. Risk: implant rejection)
- to test whether teeth are making the patient’s body ill