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Short Communication

Organ Restoration

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Abstract

The main problem with organ transplantation is organ rejection. This problem can be solved by returning the original, but repaired, organ after a period of time (and properly "connecting" it). Restoring damaged organs in an artificially created "habitat" can help solve both the problems of transplantology itself, including ethical ones, and the methods of treating them in the human body. Such research is possible without any ethical violations – we simply need to expand the pool of donor organs, not limiting them to healthy ones, but also using "repaired" ones. However, it is also necessary to improve immune system control, since in an artificial "habitat" environment, even if it manifests locally, it is not necessarily consistent with the body's response as a whole. For a proper overall response, it is necessary to understand the interaction of the general nervous system with the local ones that ensure the organ's autonomy.

Keywords: diseased organs; temporary artificial organs; external treatment of organs; expansion of the list of donor organs; additional control of the immune system; control of the neural connections of the organ with the external environment; natural and artificial

Introduction

Modern science is in an intensive stage of development. Therefore, all of science, not just medicine, is highly fragmented and has many "blank spots." Consequently, at the intersections of individual phenomenologies-fragments of a General, as yet uncreated Phenomenology—there are many outright contradictions. And the conservatism of modern science is determined, in many ways, not so much by its desire to preserve discovered Local Invariants and help patients, but by adhering to the rules of their treatment. As an analyst with extensive experimental experience, and no longer young, I have experienced firsthand, as they say, how fragmentation of medicine hinders the discovery of effective treatment methods. This is why Translational Medicine, aimed at both restoring lost connections and finding new ones between practical medicine and fundamental biological research, is particularly important. In other words, a new fragmentation of medicine is needed, one that takes into account the achievements of related disciplines [1-8]. But Science in general, and Medicine in particular, cannot be advanced by a purely organizational method. A scientific Analysis of Basic Principles is required, based on which one can correctly consider the fundamentally New. And for this purpose, not purely bureaucratic leadership is needed, but a Scientific Head, who possesses the Basic Principles and is endowed with the powers of a Scientific Director. While the Scientific officialdom is mired, as I have already noted, in clannishness and its protégés – «outstanding scientists», received all their honors and titles clannishly. In this regard, the future of science is in Open Access, which is OPEN for a wide circle of the scientific community, not divided by clan barriers, but thanks to scientific expertise and protected from the outright nonsense that now fills the Internet. And the expansion of treatment methods is possible precisely thanks to widely read publications in the open access. After all, in the works of narrow clan medical conferences, the main indicator of the "effectiveness" of treatment is still MORTALITY. That is, even when repairing equipment, the indicator is the QUALITY OF THE DEVICE'S OPERATION after repair, its increased precision, and not whether it will explode or not. So, it turns out that for now the attitude towards patients is actually worse than towards faulty equipment.

Problems of Transplantology and the Way to Solve Them.

"Oh, it's hard work - to drag a hippopotamus out of a swamp!" And to solve the Problem, it is necessary, as Lenin wrote, "to find the main link." Therefore, to begin with, let us try to impartially consider the Problems of Transplantology from a clean slate.

And the problems of Transplantology are associated with the limitation of research objects, both for ethical reasons - the removal of only some organs from some donors, and for financial reasons - the difficulty of guaranteed preservation of donor organs. And although they strive to conduct precision research with this limited "material", I know from personal experience that the guarantee of success is not very high even when using NANO-technologies.

As a consequence of the limited experimental material and many, noted by me in the previously mentioned articles, unsolved purely scientific problems in Transplantology.

So: "The head controls the body." But in practice, when an organ is ill, the main problem is looked for only in the organ itself or in its nutrition, but not in the organ's "habitat" environment. Whereas the fact that we feel pain in an organ directly indicates that at least the nervous system of the organ is directly connected even to the head. So, the wise professor Shabalov literally felt the disease in the child's gall bladder in 15 minutes (which other doctors could not find for six months) and prescribed the Elementary Diet, which put the child back on his feet in 3 months. So., he adjusted both the organ's nutrition, its "habitat" environment, and thus transplantation was not required at all. The fact that the wise Shabalov solved the most difficult triune problem "in one fell swoop" (there is also the problem of the organ's border-skin) is beyond the power of far from many doctors. But if the organ's "habitat" environment were well studied, then many patients would receive corrective pills as standard and would live peacefully with normally functioning organs.

Of course, there are also cases of local organ disorders associated with disruption of the vital activity of organ cells. Again, if not only "frozen" healthy organs were widely studied, but also the organs themselves, it would be possible to find a way to correct the process of dying and reviving the cells of a given organ, right up to the problem of aging of organs and the body as a whole.

Now pathologists deal exclusively with diseased organs and mainly with internal, vital ones: heart, brain, lungs, kidneys, liver. Whereas expanded studies of not only vital, but faulty organs and their restoration would allow not only to expand the base for transplantation, but also to find ways to cure them inside the patient or outside - in artificially created conditions. Only it is necessary to note the peculiarity of the Brain organ. It itself does not have, not counting the periphery, pain receptors, but FORMS PAIN both from any receptors and in itself. Moreover, not only, even rather not so much on general mechanical or chemical effects specifically on the brain, but also CONSCIOUSLY. And this SICK STATE of the Brain is CONSCIOUSLY relieved, say, by relaxing music (or provoked by cacophony). So, the advertised Brain-Head transplantation does not take into account the fact that the Brain not only must be physically healthy, but also when moving, outside the body, must continue to remain CONSCIOUS!

And one more thing. Not all vital organs are listed in many textbooks. For example, the list above "modestly forgot" to mention the pancreas (which is responsible for many deaths) and the digestive tract in general (apparently, they were embarrassed). But Alain Delon, before his death, didn't hesitate to voice what's well known to the elderly: "Everything hurts." Transplantology can't replace everything. But with the described comprehensive approach, as a triune task, it directly addresses the problems of aging.

Regenerative Immunity.

Between the General and Local problems of organ health, there's another, borderline aspect that concerns more than just transplantology. This is immunity, which often leads to the rejection of even a healthy organ. Mikhail Bulgakov's genius in his novel "Heart of a Dog" saw another problem in transplantology.

But let's not indulge in mysticism, taking it literally, that the head didn't "recognize" the foreign organ, or, conversely, as in Bulgakov, the head submitted to the Heart of a Dog.

Instead, let's ask the more practical question: "WHY didn't the body "recognize" the foreign organ?" At the same time, we need to trust our senses more, as the very idea of transplanting pig organs into humans gives us a headache. After all, such "crazy" transplants, even after genetically modifying pig organs, have never produced reliable, long-term positive results. And beyond the General Problems noted above, a specific aspect arises: the TUNING of Immunity, which applies to any disease and any treatment. Although correct, CONSCIOUS treatment can itself be considered an EXPANSION of Immunity.

The word "Regenerative" in Medicine is unambiguously interpreted as "Restorative," which is fundamentally different from the scientific and technical term "pre-generative, transitioning to Generation." Hence, Medicine's wanderings in the dark, having trapped itself in a loose and even false understanding of Immunity.

If we return to the true understanding of Regeneration in Medicine (for better understanding, it can be characterized by the everyday word "Provocative"), the problems of Immunology become obvious.

To this end, I will give a few ELEMENTARY examples from systems engineering. Any control system has a Feedback Loop, which adjusts the Transmission Ratio (magnitude) of the Control Signal. Moreover, even ELEMENTS such as transistors are covered by Feedback to ensure NORMAL Operation (and, as shown in my work, to correct errors in Semiconductor Device Theory). So, even in a single microcircuit, there are many Feedback Loops. But it's better to consider this using the example of the General (Global) Feedback of the entire Control Device, since in addition to eliminating ELEMENTARY errors, it is also used to select the "Target Guidance" mode. Thus, as we know from Zeno's paradox, Achilles "never" catches up with the tortoise. Similarly, a set Goal cannot be achieved unless one strives to approach it with some lead. For this purpose, the Regenerative Mode of Operation is widely used, which allows for some controlled, damped oscillations. In such a controlled (well-tuned) Mode, intentional oscillatory deviation of the control signal is permitted, which significantly increases the speed of the Control System without reverting to a purely generative mode.

So, the Immune System is the same Feedback that should restore the Control System of a specific organ when it is disrupted. But its uncontrolled transition to a purely generative Mode leads to the breakdown of both the technical component or the machine as a whole, and the specific organ or organism as a whole (even to the point of complete destruction, as in a flutter).

Nervous "autonomy" of organs.

Internal organs are controlled largely unconsciously (except by yogis) by the autonomic nervous system, which is naturally disrupted (severed) during surgery, but detailed restoration (perfect "closure") of which is not performed in transplantation.

Therefore, both during restoration of an extracted organ in an external artificial environment and during its subsequent "replacement," it is necessary to strive to maximally preserve the functionality of parts of the autonomic nervous system, both the organ itself and its environment in the body.

This area, of course, requires separate, detailed study. However, examples of conscious control of partially disrupted nervous systems in external organs demonstrate that there is no taboo, such as "nerve cells do not regenerate." Without special yoga, through willpower and long, intense training, it is well known that the function of the arms and legs can be almost completely restored. Severed nerve endings don't actually regenerate, but a new "bouquet" of them grows, which we connect with the oncoming ones by force of will. However, controlling external organs also requires a regenerating nervous system and conscious assistance. For example, with a stroke and arm paralysis, a simple effort of will can cause a "breakdown" – starting to move a leg instead of an arm. So, if you prevent arm atrophy with electrical stimulation for three and a half months, then, eventually, the bundle of nerve endings in the arm will connect itself to the nerve endings transmitting the control signal from the head. So, it is possible and necessary to expand the use of electrical stimulation in the treatment of internal organs and their external restoration. It is only important to do this with basic technical skill. Otherwise, you can end up damaging the entire autonomic nervous system. So, when I was invited for a consultation at the Brain Institute named after Bekhterev, where pseudo-specialists tried to treat the retina with direct currents, then, having discovered ELEMENTARY errors in their measurements, I not only refused to mathematically analyze their noise tracks, but also told the electronics engineers: "If they are asking, make

them a device with the required output current values on the indicators, but so that there is not a single microampere at the device's output."

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