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## **TREATING LACTATIONAL MASTITIS WITH SCENAR-THERAPY**

Recent years observe a certain decrease in frequency rate of lactational mastitis cases. But the disease is accompanied by a great number of purulent forms, resisting the treatment, large affected area of mammary glands and tendency to generalization. Mastitis plays a great role in infecting newly-borns in the process of lactation as well as at the contact of a new mother and a newly-born (V.N. Serov and co-authors, 1998).

A so-called pathological lactostasis plays specific role in appearance of mastitis. It is accompanied by fever (38-38.5°C), steady hardening and sickliness of mammary glands. General state doesn't change considerably. Such phenomena appear on the 2<sup>nd</sup>-6<sup>th</sup> day after the delivery.

Rather seldom mastitis develops without lactostasis stage. However, there is usually an interval of 8-20 days between lactostasis and initial manifestations of serous mastitis. So, pathological lactostasis may be considered as a latent stage of mastitis. So, it is necessary to carry on additional mastitis' precaution.

Recently SCENAR-therapy has shown high effectiveness in treating obstetric gynecological pathology.

The aim of the investigation was to evaluate the effectiveness of SCENAR-influence in treating 15 women 19-33 years old with lactostasis and initial stage of mastitis. 9 of them had a diagnose 'lactostasis', 6 of them had 'serous mastitis'. Having found a firming in the lobule or in the part of the lobule of mammary gland without any signs of inflammation, we stimulated the mammary gland of a nursing mother with SCENAR smoothly massaging the body from the periphery of the gland to the nipple along the lobules. Session lasted 10-15 minutes and after it a woman expressed her milk and fed the baby.

By the inflammation of the mammary gland lobule women had local pain, skin blushing over the hardened lobule and increased skin temperature in this zone, increase and sickliness of underarm glands, fever and intoxication symptoms.

For 10-15 minutes we stimulated patients' direct projection zone of inflammation focus as well as symmetric zone on the healthy mammary gland and segmental ring zone on the mammary gland's level. In case of increase and sickliness of underarm glands this zone was also stimulated for 3-5 minutes.

To increase effectiveness of SCENAR-therapy we also stimulated the uterus', appendages' and thoracic spine's projection zones. It should be emphasized that expressing breast milk was the obligatory condition.

After the first session women with lactostasis had considerably softened lobules and improved well-being. Lactostasis completely disappeared by all women after 2-3 sessions.

The temperature of the patients with serous mastitis came down after 1-2 SCENAR-therapy sessions, edema and blushing decreased.

5 women recovered completely after 6-8 sessions, only one woman had to undergo surgical operation.

It should be mentioned that blood indices became normal later than the clinical picture.

So, good clinical results almost at the very beginning of the SCENAR-therapy allow to recommend it for a wide clinical usage by lactostasis and serous mastitis that corresponds to the research results of other analysts (T.A. Shepeleva, 2004).

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