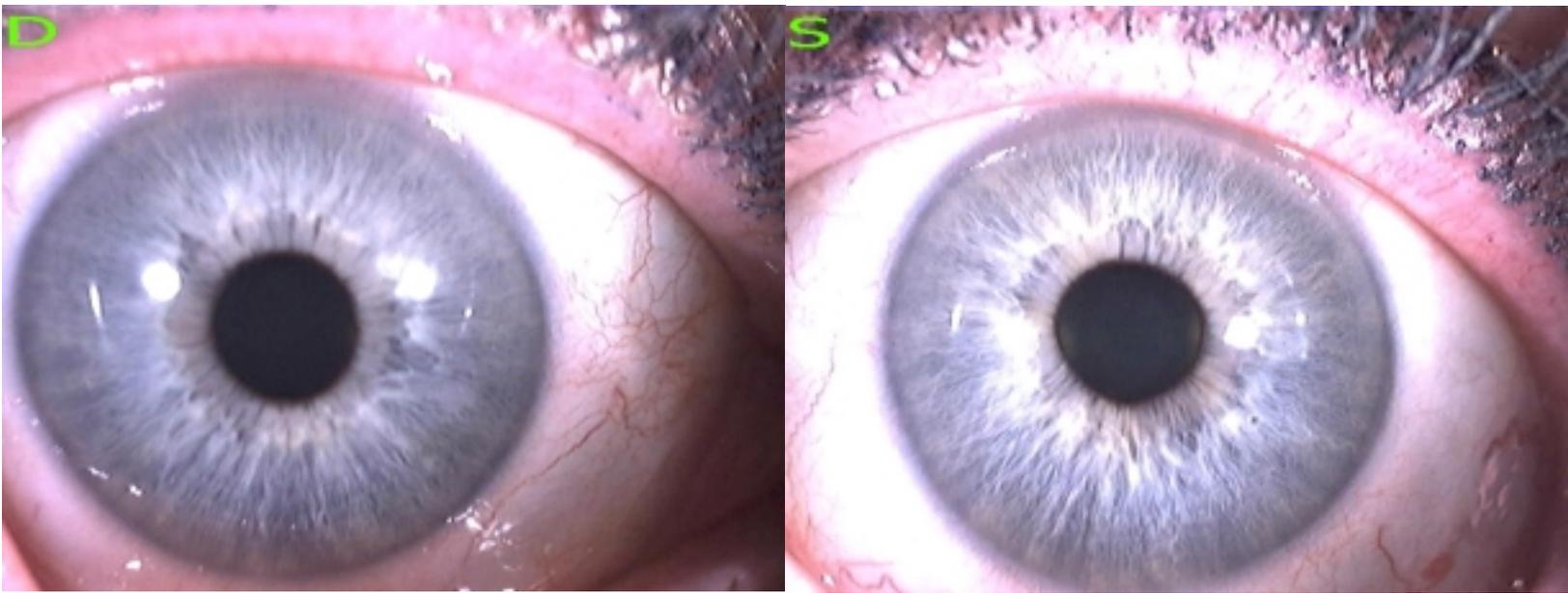


RESULTS OF THE IRIDOREFLEXOLOGIC EXAMINATION



○ Personal Data

Name : Sct
 Sex : female
 Age : 60

Numerical Data Analysis

	S	D
PARAMETERS OF THE IRIS :		
Diameter (pix) =	424	426
Area (pix)	141196	142531
PARAMETERS OF THE PUPILLARY BORDER :		
Diameter (pix)	108	110
Diameter of the pupil in relation to iris (%)	25	25
Normal for current age 21-25%	Normal	Normal
Pupil border deformation degree (normal:0%...5%)	3	5
PARAMETERS OF THE PUPIL RELATIVE TO THE IRIS :		
Distance between the pupil and iris centers (%)	7.55	3.29
Normal (lower than 5% of above) or pathology	Pathology	Normal
PARAMETERS OF THE APPROXIMATE ELLIPSE		
Ellipseness degree of the pupil (normal: 95% ... 100%)	93	94
Pupil form type	Pathology ellipse	Pathology ellipse
	Pathology	Pathology
PARAMETERS OF THE PUPILLARY MARGIN :		
Type of the form -	regular	regular
	Normal	Normal

Diagnosis

S : Frontal flatness (11:02 - 1:20) - 5.56 %

S : Frontal decentralization.

S : Oval-horizontal form of the pupil.

D : Lower temporal flatness (7:08 - 8:52) - 3.64

% D : Lower nasal protrusion (4:02 - 6:28) - 5.45

% D : Decentralization of the pupil is normal.

D : Oval-vertical form of the pupil.

Chronic colitis.

Discirculatory encephalopathy. Depression.

Blood cerebral circulation disturbance.

Circulatory cerebral disturbance with danger of ischemic variation.

Depression, blood cerebral circulation disturbance, Bronchial asthma predisposition.

PARAMETERS OF THE AUTONOMIC NERVE WREATH (ANW):

	S	D
Diameter (pix)	188	188
Perimeter (pix)	653	681
The ratio between Pupillary and Ciliary belts (%)	25.32	24.68
Normal (25..35%) or pathologic.	Normal	Spastic
Asymmetry of pupillary belt (normal: 0..5%)	12.77	2.13
	Pathology	Normal
Type of the ANW form -	lacerated	regular
	Pathology	Normal

D: Frontal and basal zones of pupillary belt are constricted.

S: Middle-temporal shift.

S: Frontal and basal zones of pupillary belt are constricted.

Functional frustration in correlation between sympathetic and parasympathetic nervous systems. (The origin should be specified?)

Overloads of the left ventricle.

Acquired colitis. (stable changes).

Metabolic disturbance, decrease of elastotonic features.

Acid-alkaline balance disturbance.

Initial vertebral osteoarthritis.

LYMPHATIC SUBTYPE.

Increased reactivity of lymphoid tissues (thymus, lymphatic nodes, tonsils, spleen, etc).

Show the worsening of toxic agents withdrawal from the organism and, as a result, congenital and acquired metabolic dysfunctions.