

Lythiasic Constitution

Gall-Bladder - Gastric Aspecific Reflex (Ab. G. A. R.) mean-intense digital pinching of the skin projection of the gall bladder (gall bladder trigger points)

Latency time (Lt) in seconds	Latency time after preconditioning (pause of 5 sec.)	MFR in seconds	fD & equilibria	EBD	Preconditioning	Intensity	Diagnosis
Lt = 8	Lt = 16	3 < MFR < 4 normal MFR, associated activation, outcome +	fD ≥ 3 (ideal value fD=3.81) strange attractor	Normal EBD physiological function	Type I Physiological tissue microvascular unit	Intensity < 2cm	Health
Lt = 8	Lt < 16	MFR = 4 compromised MFR, dissociated activation, outcome ±	2 < fD < 3 limit cycle	Normal, slightly modified EBD function, small number of pathological EBD	Type II A Intermediate tissue microvascular unit	Intensity ≥ 2cm	Lythiasic Constitution
Lt < 8	Lt ≤ 15	4 < MFR ≤ 5 growing compromised MFR, dissociated activation, outcome ±	1 < fD ≤ 2 limit cycle	Modified EBD function, increasing number of pathological EBD	Type II B Intermediate tissue microvascular unit	Intensity ≥ 2cm	Lythiasic inherited real risk
Lt ≈ 3 - 4	Lt < 6-8	4 < MFR ≤ 5 growing compromised MFR, dissociated activation, outcome ±	1 < fD ≤ 2 limit cycle	Modified EBD function, increasing number of pathological EBD	Type II C Intermediate tissue microvascular unit	Intensity ≥ 2cm	Lythiasic Reflex Gall Bladder stones in cholecyst (even clinically silent)
Lt < 3	Lt < 6	MFR > 5 absent MFR, dissociated activation, outcome -	fD = 1 fix point	Normal EBD function pathological, large number of pathological EBD	Type III Pathological tissue microvascular unit	Intensity ≥ 2cm	Cholelythiasis Lythiasic Reflex

Table 1. Legend: MFR (Microcirculatory Functional Reserve); EBD (Endoarteriolar Blocking Device); CAD (Coronary Artery Disease); fD (fractal Dimension); Lt (Latency time)