

**Pancreatic - Gastric Aspecific Reflex (P. G. A. R.) mean - intense digital pression on VI thoracic dermatomere
(pancreas trigger points)**

Latency time (Lt) in seconds	Latency time* after preconditioning (pause of 5 sec.)	MFR in seconds (reflex duration)	dlt- fD & equilibria	EBD	Preconditioning	Diagnosis
Lt = 12 (intensity < 2cm)	Lt = 24 [Lt = 24 if intense digital pressure – negative Siniscalchi's Sign]	3 < MFR ≤ 4 (3.5 < MFR ≤ 4)* normal MFR, associated activation, outcome +; caecal and gastric reflex	4 > fD ≥ 3 (ideal value fD = 3.81) strange attractor	Normal EBD physiological function, increase of pancreas volume (Lt=2; duration=10) histangic acidosis	Type I Physiological tissue microvascular unit	Health
Lt < 12	Lt < 24 [Lt = 0 if intense digital pressure – positive Siniscalchi's Sign]	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; hyperinsulinemia- insulinresistance	Diabetes Mellitus Inherited Real Risk, Metabolic Syndrome X
9 < Lt < 12	18 ≤ Lt < 24 [Lt = 0 if intense digital pressure – positive Siniscalchi's Sign]	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	Diabetes Mellitus Inherited Real Risk in evolution
Lt ≤ 9	Lt < 18 [Lt = 0 if intense digital pressure – positive Siniscalchi's Sign]	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	Diabetes Mellitus

Table 1. Legend: MFR (Microcirculatory Functional Reserve); EBD (Endoarteriolar Blocking Device); fD (fractal Dimension); Lt (Latency time); dlt (differential latency time)