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Clinical Neurogenetics of Syndrome Z and Scientific Evidence-Based Clinical Evaluation.

The neurologics and psychiatric diseases are intertwined, and are characterized by nonlinear pathophysiological dynamics, genetics, epigenetics, with high heterogeneity in biological changes and st. Brain disorders are influencers in the mental network. As a Belief that a superspecialist (brain factor) can influence the mental issue, causing a fear, or an irrational belief that the mind is an impossible maze. The "In vivo" and "post-mortem" studies show deficits of connections of biological networks, in several neurological pathophysiology, such as gene expression studies, polymorphisms, and developments of functional neuroimages, which can significantly alter a neurological state, in relation to reality. So the clinical reality, loses skill and strength and is no longer addressed, by the absence of causal link to human physiology, where Evidence-Based Medicine, can not individualize a pathological state clinically as the neurological state of Relapse in use substance , which is a real chance of treatment for those who genetic for this. Multiple pathophysiological mechanisms are not being integrated into the medical clinic and do not present "insights".

Preoccupying only with biostatistical correlations, limited metrics to extract clinical information do not allow observations in practice - genomics, epigenomics, transcriptomics, proteomics, metabolomics, lipidomics - incorporated in the theoretical and computational structure of systems biology. A real proof is non-observation of Z Syndrome, subtle family neurological disease that prevents family relationships, and hypodopaminergic state. Current studies without actual clinical reproductivity, are neglecting that the desire of a human being , can be affected by epigenetic molecules, in choosing to continue the use of a substance, one that a family quarrel for the reason of family asynchrony, also produce gene changes , and will be born more children with avicity to family fights and use of substances for not presenting neuro genetic clinic in this branches of addictions and Z Syndrome.

Keywords: Neuro genetic , Clinical signals, Syndrome Z, Sincrone Familiar, Addiction

Biography:

Prof. Karen, Medicine, Master in health of the elderly, volunteer preceptor for 7 years at the Faculty of Medicine of Marilia(FAMEMA-Brazil), active Vascular and Endovascular Surgeon, member of the Interventional Radiology Service of Marília (SIRVAN-BRAZIL), specialist in Psychiatry of addiction and relapse of use neuro genetic substance at Faculdade Gaúcha-Brazil, Student of Psychoanalysis at the Paraná Society of Psychoanalysis ,Hyperbaric Physician, Creator therapeutic community specialization in Relapse Use Substance neuro genetic (CT AURORA BOREALIS-Brazil), descriptor of Sindrome Z, Sindrome Zoé and Use Substance Pathologic, Developer of Dialectic Medicine and a Stakehold Z Brazil Addiction. Doctor graduated from the University of Marília.