



ROLE OF SYSTEMIC INSTALLATION RESPONSE THERAPY (SIRT) IN SEVERE PARKINSONISM: A CASE REPORT

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ABSTRACT

Parkinson's disease (PD) is a neuro degenerative disorder characterized by motor and nonmotor symptoms that significantly impact quality of life. In advanced stages, conventional treatments often provide limited relief, necessitating the exploration of alternative therapeutic strategies. Systemic Installation Response Therapy (SIRT) is a novel approach designed to enhance neurological function and symptom management in severe neurological disorders. However, its application in Parkinson's disease, particularly in severe cases, remains underreported. Our patient had previously been on optimized pharmacological therapy, including high-dose levodopa and dopamine agonists, with limited symptom control. SIRT was introduced as an adjunctive therapy to assess its impact on the patient's motor and non-motor symptoms. The therapy involved a structured protocol of systemic installations designed to focus on central nervous system function, with a specific module to enhance dopamine signaling pathways and supporting neuroplasticity. Our case suggests that Systemic Installation Response Therapy may provide therapeutic benefits in managing severe Parkinson's disease symptoms, particularly for patients who have not responded well to traditional pharmacologic interventions. While further studies are necessary to substantiate these findings, SIRT may represent a promising adjunctive therapy for severe Parkinsonism, warranting further investigation into its mechanisms and long-term efficacy.

KEYWORDS

Systemic Installation Response Therapy (SIRT), Integrated Interface System

INTRODUCTION

Parkinson's disease (PD) is a neurodegenerative disorder that impacts both motor and nonmotor systems. The progression of Parkinson's Disease is often assessed with the Hoehn and Yahr grading system, where grade 4 indicates severe disability. In advanced Parkinson's Disease, patients typically experience significant rigidity, bradykinesia, and dependency on caregivers, and treatment options become increasingly limited.

With limited response and numerous side effects of medication prescribed for Parkinson's disease, various behavioral and non pharmacological interventions are being tried, one such innovation is SIRT. An innovative therapeutic approach of Systemic Installation Response Therapy (SIRT) is applied in a patient with advanced Parkinsonism.

Systemic Installation Response Therapy (SIRT)

Systemic Installation Response Therapy (SIRT) is an emerging non-conventional therapy that aims to target systemic responses through an unexplained Integrated Emergence System perceived and thought to influence neurodegeneration. By modulating cellular resilience and neuroplasticity, SIRT may offer measurable relief, although its exact mechanisms in Parkinson's disease remain speculative. The therapy was administered with a focus on improving both the motor and psychological symptoms associated with an advanced Parkinson's disease patient.

Case Report

A 48-year-old male with advanced Parkinsonism (Hoehn and Yahr grade 4), presented with the following symptoms:

- Motor symptoms: Severe rigidity, bradykinesia, postural instability, and tremor, which rendered him wheelchair-dependent

and entirely dependent on caregiver assistance.

- Non-motor symptoms: Significant depressive symptoms and apathy, impacting his mental well-being and quality of life.

Given the limited response to conventional treatments (medical), the patient consented to trial SIRT both as an augmentive and adjunctive therapeutic approach.

At the outset, SIRT includes evaluation of the patient which is done to find out the problems or triggering factors causing active degeneration of disease. Then the causes for active degeneration are identified and these are rectified by SIRT. All these were implemented in this particular case and systemic installation was done and responses were validated on the same day. A set of responses is collected from an individual with multiple evaluations done in the consultation during which all the micromuscular changes, behavioural changes and thought processes- everything gets calibrated. All the factors, which are enhancing the degenerating or regenerating process and respectively suppressing or increasing the production of dopamine secretion are identified and addressed at best by giving installations. The same mental and physiological triggers are stimulated to validate that the originally identified sub-optimal micro muscular changes, behavioural changes and thought processes are replaced with optimal responses.

Treatment

Post-SIRT, the patient exhibited clinically significant improvements:

- Mood and psychological state: There was a marked improvement in mood stability and reduction in depressive symptoms, as reported by both the patient and his family.
- Motor function: The patient, previously wheelchair-bound, regained the ability to walk without support. This represented a

substantial improvement in mobility and daily functionality, enhancing his independence and quality of life. These outcomes suggest that SIRT may positively impact both physical and psychological symptoms in patients with advanced Parkinsonism, warranting further exploration.

DISCUSSION

This case highlights the potential of SIRT as a therapeutic option in severe Parkinsonism, particularly for those who do not respond much to conventional therapies. While the precise mechanisms remains unknown, the therapy's impact on mood and motor function may involve neuroprotective, neurotransmitter or anti-inflammatory pathways. The potential mechanisms stipulated in SIRT is promotion of neuroplasticity or a positive influence on cellular resilience to counteract neurodegenerative processes. However, these effects are unconfirmed and need further investigation.

Science behind Systemic Installation Response Therapy

Systemic Installation Response Therapy (SIRT) is a targeted systemic response through unexplained Integrated Emergence System which is the master control of all the response of human biomechanics that combines the principles of psychology, linguistics, and innate capability development, aiming to influence cognitive and behavioral patterns through language and communication techniques.

Parkinson's disease is characterized by a loss of dopamine-producing neurons in the brain, particularly affecting motor function and coordination. SIRT may contribute to motor function improvement through neuroplasticity, the brain's ability to reorganize itself by forming new neural connections. While it doesn't restore dopamine-producing cells, practicing mental exercises and positive reinforcement could, in theory, help strengthen existing motor pathways, providing modest measurable relief.

Hypothesis

The improvement of the patient's behaviour on all these components like rigidity, bradykinesia, movement disorders and dependencies evidently improved. To conclude SIRT can be used both as an augmentive and adjunctive therapy to include all these four components in addition to the medical management done to the patient. This could be a gateway for future research.



Fig.1

Fig. 2

Consent Taken from the Patient for the Photo

Limitations

1. Lack of large-scale data: As a single-case study, these findings cannot be generalized. Further research involving larger, controlled studies is necessary to assess SIRT's efficacy and safety in a broader patient population.
2. Absence of radiological evidence: Improvement was documented through clinical observations and subjective reports but was not confirmed through neuroimaging or other biomarkers, which limits the ability to verify any structural or neurochemical changes due to SIRT.
3. Unknown mechanisms: The biological basis for SIRT's impact on PD remains speculative. Research is needed to clarify how this therapy may influence neurodegeneration and symptom expression in PD.
4. Long-Term efficacy and sustainability: The durability of the observed benefits is unknown. Long-term follow-up of this patient and additional cases will be essential to determine whether SIRT offers lasting improvements in advanced Parkinsonism.

CONCLUSION

This case suggests that Systemic Installation Response Therapy (SIRT) may hold unlimited promise for improving quality of life in patients with advanced Parkinsonism, particularly when standard treatments are insufficient. The observed improvements in mood, behaviour and motor function indicate potential clinical benefit. This

case report has given us a lot of avenues in the field of research of Parkinson's disease thus, to further validate we are extending this case report with a series of case studies of 30 Parkinson's patients validating them at different time frames with different parameters.

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