



Physiologic Insulin Resensitization (PIR)

The adjunct technique known as Physician-Directed Physiologic Insulin Resensitization (PIR), which has many patents and a patent application pending, is intended to treat the underlying causes of metabolic diseases including diabetes. PIR offers a revolutionary tool for doctors to precisely deliver insulin as a hormone in a way that accomplishes the intended advantages while also avoiding the most common adverse effect: increasing insulin resistance. Such insulin resistance results from impaired glucose metabolism, which sets off a chronic inflammatory state that destroys macro and micro-vascular beds and causes organ failure and gradual tissue destruction. The answer is PIR.

PIR is an intravenous infusion regimen created to more closely replicate the body's method of maintaining optimal glucose metabolism by bio-imitating the hormone production of insulin. PIR is innovative in that it has the special capacity to give insulin as a "hormone communicator" to better allow an optimized metabolism as opposed to normally providing insulin as medicine to only suppress symptoms, which generally causes major negative effects. PIR may increase insulin receptor activation and lower insulin resistance by administering insulin in a way that bio-imitates healthy physiology. This attacks the underlying source of this illness process, which is dysfunctional glucose metabolism.

Adenosine triphosphate, generally known as ATP, is a chemical that transports energy inside cells. By increasing insulin sensitivity at the level of the insulin receptor, glucose may more easily enter cells. The protocol is created to repair and regenerate the body's cells, first in peripheral areas and then, through repeated treatment sessions, progressing to the organs. This aids the body in returning naturally to its more normal physiologic state by increasing cellular energy and decreasing inflammatory mediators. The problems of diabetes and other metabolic illnesses have not only been stabilized by this treatment but in many cases, they have even been reversed, as a result of the reduction of inflammatory mediators and increased energy reserves for cellular activity.

An FDA-approved portable external pump is used to provide fast-acting insulin precisely intravenously as part of the physician-directed PIR therapy. The patient receives modest, targeted doses of oral glucose (taken as a dextrose beverage) together with the insulin hormone to help the digestive system and its function in the metabolic process.

The restoration, repair, and regeneration of tissue have been demonstrated by PIR, however metabolic impairment remains a chronic illness. The benefits of this method frequently deteriorate over time if a patient discontinues maintenance treatments.