OCNT Ortho-Cellular Nutrition Therapy

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Case Report

세포교정영양요법(OCNT)을 이용한 파킨슨병 개선 사례

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A Case Report of Improvement in Parkinson's Disease with Ortho-Cellular Nutrition Therapy (OCNT)

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ABSTRACT

Objective: Parkinson's disease is a progressive neurodegenerative disorder characterized by the loss of dopaminergic neurons in the substantia nigra, with its incidence increasing markedly with age. The disease develops through the complex interplay of genetic, aging-related, environmental, and epigenetic factors, leading to the gradual onset of motor symptoms such as bradykinesia, rigidity, tremor, and gait disturbances. Current treatments are primarily limited to symptomatic relief, highlighting the need for novel therapeutic approaches capable of slowing disease progression.

Case Report: The patient in this case report was a Korean man in his 70s who had been diagnosed with early-stage Parkinson's disease and was taking prescribed medications. The patient experienced facial rigidity and generalized muscle loss, along with anxiety regarding the incurable nature of the disease and the limitations of available treatments in slowing its progression. Accordingly, Ortho-Cellular Nutrition Therapy (OCNT) incorporating *Ginkgo biloba* extract, vitamin C, and plant-based protein was administered. Following OCNT, improvements in facial rigidity and muscle loss were observed, along with overall improvements in physical condition, including sleep, bowel movements, and facial complexion.

Conclusion: Although the findings of this single-patient case report cannot be generalized to all patients with Parkinson's disease, they suggest the potential clinical utility of OCNT in improving symptoms. Whether OCNT can slow disease progression remains to be determined.

Keywords Ortho-Cellular Nutrition Therapy (OCNT), Parkinson's disease, Dopaminergic neurons, Sarcopenia

Introduction

Parkinson's disease is primarily characterized by the loss of dopaminergic neurons in the substantia nigra. Dopamine is a neurotransmitter that plays a crucial role in regulating smooth and coordinated body movements, and the progressive loss of dopamine-producing neurons leads to various motor dysfunctions. This progressive disease has a mean age of onset of 55 years, and its incidence increases markedly with age, rising from approximately 20 cases per 100,000 people in the general population to 120 cases per 100,000 people at the age of 70.[1] Given this age-related increase in disease risk, Parkinson's disease is considered a neurodegenerative disorder that warrants particular attention in older adults.

Although the exact cause of Parkinson's disease remains unclear, approximately 15–25% of patients have identifiable monogenic mutations or a family history of the disease, while most cases develop through the interaction of aging, environmental, and epigenetic factors against a background of genetic susceptibility estimated at 16–36%.[2] Thus, in the majority of patients, Parkinson's disease is understood to arise from the combined effects of multiple factors rather than a single cause. Symptoms may include gradually progressive asymmetric bradykinesia, rigidity, tremor, and gait disturbances.[3] Although these symptoms may initially be mild, they tend to become more pronounced over time and can significantly affect patients' ability to perform daily activities.

Currently, no treatment is available to halt or reverse the progression of Parkinson's disease, and existing treatments primarily aim to alleviate symptoms. Pharmacological

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Received Oct 29, 2026; **Revised** Oct 30, 2026; **Accepted** Oct 30, 2026; **Published** Oct 30, 2026
doi: http://dx.doi.org/10.5667/OCNT.spc.186
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† This report has been translated and edited by the OCNT editor-in-chief, Prof. Beom-Jin Lee.

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treatments include levodopa-based therapies, dopamine agonists, monoamine oxidase inhibitors (MAOIs), and amantadine, while exercise therapy may also be prescribed as part of disease management. In patients with more severe symptoms, surgical interventions such as deep brain stimulation (DBS) may be considered.[4] However, Parkinson's disease is an irreversible disorder, making it clinically important to slow disease progression before further deterioration occurs. Therefore, there is growing interest in novel therapeutic approaches that can complement existing treatments and potentially slow disease progression.

This case report describes a patient diagnosed with early-stage Parkinson's disease who was anxious about future disease progression and experienced symptom improvement and an apparent slowing of disease progression following OCNT treatment. Based on these observations, this report aims to highlight the potential clinical utility of OCNT in improving symptoms associated with Parkinson's disease.

Case Study

1. Subject

This case report involved 1 patient with Parkinson's disease.

1) Name: Choi OO (70 years old/M)
2) Diagnosis: Early-stage Parkinson's disease
3) Date of onset: Estimated between 2024 and 2025
4) Treatment period: June 2026 – October 2026 (ongoing)
5) Chief complaints: Weight loss and muscle loss, Lower limb dragging during gait and occasional falls
6) Past medical history: None
7) Social history: None
8) Family history: The patient's older sister was diagnosed with Parkinson's disease in 2014 and died in 2024.
9) Present illness and current medications: Early-stage Parkinson's disease; currently taking Perkin Tab. 25-100, 0.5 tablet twice daily (morning and evening).

2. Methods

The following OCNT regimens were prescribed.

- First OCNT (June 2026 – July 2026)
  Resplex Alpha Capsules 101 (1 capsule twice daily)
  Sacoplex 100 (1 sachet once daily)

- Second OCNT (July 2026 – September 2026)
  Resplex Alpha Capsules 101 (1 capsule twice daily)
  Sacoplex 100 (1 sachet once daily)
  Viva Senior Power Liquid 100 (1 sachet once daily)

- Third OCNT (September 2026 – Present)
  Resplex Alpha Capsules 202 (2 capsules twice daily)
  Sacoplex 100 (1 sachet once daily)
  Viva Senior Power Liquid 100 (1 sachet once daily)

Results

The patient underwent OCNT for approximately three months. When he subsequently revisited the pharmacy, he exhibited a brighter facial expression, reduced overall facial gauntness, and improved facial rigidity, and he no longer appeared ill. He also reported that he had not experienced any lower limb dragging or falls while walking during the OCNT period. In addition, he stated that he was eating well and reported satisfactory sleep and bowel habits. He also reported frequently receiving comments from people around him that his overall physical condition and complexion appeared to have improved, suggesting an overall favorable clinical course. Currently, he is working to improve his physical fitness by walking for one hour each morning and taking short walks in the afternoon.

Discussion

Around 2024, the patient underwent medical examinations, including MRI and CT scans, at a primary care facility (internal medicine clinic), but no significant abnormalities were identified. A follow-up examination one year later also revealed no abnormal findings. Subsequently, the patient experienced an unexplained fall while walking. After learning from his older sister that there was a family history of Parkinson's disease, he was advised to undergo further evaluation at a tertiary medical institution (university hospital). In February 2026, the patient underwent a neurological evaluation at the tertiary medical institution, where the medical team reviewed his family history and diagnosed him with early-stage Parkinson's disease. He subsequently began pharmacological treatment in March 2026.

At the time of his visit to the pharmacy, he exhibited marked loss of facial fullness, facial pallor, and a darkened complexion. In addition, he began experiencing anxiety due to facial rigidity, reduced food intake, and a perceived progressive loss of muscle mass. He also reported feeling devastated after his attending physician explained that there was no cure for Parkinson's disease and that treatment was primarily aimed at slowing disease progression. Although the patient was initially reluctant to undergo OCNT, he eventually agreed to receive the therapy after being persuaded by those around him and subsequently initiated OCNT as prescribed.

Ginkgo biloba extract is known for its beneficial effects on blood circulation and has been recognized as a functional ingredient in South Korea. In an animal model of Parkinson's disease induced by 6-hydroxydopamine (6-OHDA), oral administration of *Ginkgo biloba* extract improved gait performance in a dose-dependent manner and preserved dopamine (DA) concentrations in the ipsilateral striatum. Additionally, dopamine turnover, measured by the DOPAC/DA ratio, remained unchanged and was maintained within the normal range. Furthermore, *Ginkgo biloba* extract attenuated the loss of tyrosine hydroxylase (TH)-positive dopaminergic neurons, suggesting potentially favorable effects on neuronal survival.[5]

Furthermore, levodopa, an active ingredient in Perkin tablets taken by the patient, is converted into dopamine in the brain to compensate for dopamine deficiency in patients with Parkinson's disease. Although levodopa is effective in alleviating symptoms, experimental studies have raised concerns about its potential neurotoxicity. Autoxidation of levodopa or its metabolites may generate reactive oxygen species and free radicals that can damage dopaminergic neurons. *Ginkgo biloba* extract may help protect dopaminergic neurons against levodopa-associated oxidative damage by directly scavenging free radicals, inhibiting peroxidase activity, and reducing mitochondrial dysfunction and cell death.[6]

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Additionally, vitamin C contained in Resplex Alpha Capsules is a well-established antioxidant that has been studied for its potential neuroprotective effects and its ability to potentially enhance the bioavailability of levodopa and reduce its adverse effects.[7] Therefore, Resplex Alpha Capsules were prescribed to provide vitamin C to the patient.

Sacoplex contains various plant-based proteins. Patients with Parkinson's disease who consumed a plant-based diet exhibited significantly lower total scores on the Unified Parkinson's Disease Rating Scale (UPDRS), better motor performance, and more favorable disease stages compared with a control group following an omnivorous diet. Compared with animal-based proteins, plant-based proteins may result in less competition between amino acids and levodopa during absorption, thereby improving levodopa absorption, while dietary fiber may help alleviate constipation by promoting intestinal motility. Furthermore, plant-based proteins may enhance the bioavailability of levodopa, while phytochemicals may help reduce oxidative stress and inflammatory responses that damage neurons in the brain. Together, these effects may contribute to improving motor function and alleviating symptoms in patients with Parkinson's disease.[8]

Serum zinc levels have been reported to be significantly lower in patients with Parkinson's disease. Zinc plays an important role in regulating oxidative stress and antioxidant enzyme activity and is known to be essential for maintaining the structural integrity of parkin, a protein associated with Parkinson's disease.[9] Furthermore, vitamin D may help mitigate symptom worsening in Parkinson's disease through multiple mechanisms, including reducing reactive oxygen species and inflammation in the brain, protecting dopaminergic neurons, regulating intracellular calcium levels, and maintaining motor coordination and balance. These components were provided through Viva Senior Power Liquid.

Although this case report is limited to a single patient, limiting the generalizability of its findings, it is considered to have clinical significance, as a simple OCNT regimen was associated with an apparent slowing of Parkinson's disease progression and stabilization of the patient's psychological state over a three-month period. Therefore, this case is reported with the patient's consent.

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