



## Research Article

# Holographic Kinetics for a Child Suffering from Autism with Extreme Aggressive Behavioral Disorder

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### Abstract

**Introduction:** This case study offers a detailed analysis of autism and the effects of holographic kinetics in an autistic child with extreme aggressive behavioral disorder.

**Case:** The parents of David, a 7-year-old boy, suffering from extreme aggressive behavioral disorder and autism, requested holographic kinetics after conventional and alternative bio-medicines failed to relieve his symptoms. Evaluations were performed to check the status of the child's behavior and obtain a baseline status of his severe aggressive behaviors. David was diagnosed by doctors, psychologists and neurologists, with autism, and PDD-NOS, also known as, pervasive developmental disorder - not otherwise specified. All evaluations were repeated pre-post his holographic kinetics treatments, using the software autism tracker pro, the Asyra and Ondamed machines, general observations by the teachers at school and other therapists.

**Results:** This patient experienced significant long term relief from his symptoms after holographic kinetics treatments. An analysis of this patient showed 60% improvement regarding his relationship with his parents, but more importantly, we obtained 100% improvement in school and outside of his family, in both, frequency and intensity of extreme aggressive violent behavioral disorders immediately post treatments, and eight months after treatments. The parents thought they would need their son to be in a mental hospital very soon, preventing him from experiencing a normal life. After the treatments, we saw 100% improvement in his ability to interact socially with others.

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Since the HK treatments, there has been no further discussion of having David being admitted to a mental hospital.

**Conclusion:** The behavioral response of a patient with autism and extreme violent aggressive behavioral disorders, who received holographic kinetics reflected a measurable significant improvement in both frequency and intensity of extreme violent behaviors, and a sharp progressive sustainable increase in normal social behaviors, interacting with others during normal activities at school and other social environments. The positive results in this case study could have applications to other pathologies that can be positively affected by the holistic power, efficacy and efficiency of the holographic kinetics modality.

**Keywords:** Aggressive Behavioral Disorders; Asyra; Autism; ASD (Autism Spectrum Disorder); Autism Tracker Pro; Extreme violent behaviors; Holographic kinetics; Ondamed; PDD-NOS, Pervasive Developmental Disorder - Not Otherwise Specified

## Introduction

### Understanding Autism

The Diagnostic and Statistical Manual, 5<sup>th</sup> edition (DSM-5), last updated in 2013, offers an in-depth definition of Autism Spectrum Disorder (ASD) [1]. Autism has been considered a neurological disorder since the 1960s [2]. As of 2014, the CDC estimates that 1 in 68 children have autism ("CDC Press Releases") [3]. The definition provided by DSM-5 states a person with ASD may display:

- Persistent deficits in social communication and social interaction across contexts, not accounted for by general developmental delays
- Restricted, repetitive patterns of behavior
- Symptoms must be present in early childhood (but may not fully manifest until social demands exceed limited capacities)
- Symptoms together limit and impair everyday functioning

There are also subcategories that detail the different symptoms the person may display, as well as varying severity levels [1]. Many studies have been done to understand why repetitive behaviors affect autistic people in their lives. In fact, a study done by Anne V Kirby et al., mentions the DSM-5 puts unusual sensory responses and repetitive behaviors in the same sub grouping for classification of ASD, although their research says these two behaviors are conceptually distinct [4].

In fact, their studies followed 28 boys and 4 girls in different physical, social and situational contexts to see if their responses fell under these behavior types: hyperresponsive, hyporesponsive, sensory seeking and repetitive. The results found in children with autism spectrum disorder react in different ways to varying stimuli. There is no one way to treat a person with autism spectrum disorder because not all people on the spectrum exhibit every symptom. According to research, there is only one child, out of 32 children, engaged in all four types of coded behavior mentioned above [4]. When researching methods to treat or study autism, one cannot make assumptions about their symptoms because of the criteria listed in the DSM.

Furthermore, there are large gender and race disparities when it comes to diagnosing children on the spectrum. The CDC states that “ASD is five times more common among boys than girls and white children are more likely to be identified as having ASD than are black or Hispanic children” [3]. A study done by John Constantino and Tony Charman PhD, found that the sex bias in autism can be chalked up to the criteria used to diagnose children [5]. This study used a Childhood Autism Spectrum Test (CAST) to find 227 high-CAST boys and 75 high-CAST girls [5]. They explained the major gender disparity in their own test subjects by the current diagnostic tools for girls which do not fit how they display symptoms. They found “the distribution of the scores of female individuals is shifted toward the nonpathologic end compared with those of male individuals” [5].

But at the same time, the cause of autism is still unknown but some researchers believe it is caused by faulty genes. Another emerging popular theory believes environmental exposure can trigger autism. It might be a combination of both. For example, one syndrome, called Fragile X syndrome, is caused by mutations in a single gene of the X chromosome (FMR1), and is associated with neurobehavioral characteristics like social deficits, withdrawal, inattention and autistic behavior. One study conducted an evaluation on 80 boys and 40 girls and found that boys who had fragile X syndrome were influenced by the effectiveness of their educational and therapeutic services, and the quality of the home environment predicted autistic behavior [6]. However, in girls with fragile X, “the FMR1 protein levels affected the girl’s behavior, in particular social withdrawal and anxious/depressed behavior”. The researchers drew the conclusion that FMR1 protein expression can be linked to dysfunctional behavior, but boys and girls are affected by this expression differently in terms of autistic symptoms and thus need specific interventions based on gender [7,8]. This shows that in boys with fragile X syndrome and diagnosed with ASD, the current treatments will affect their internal and external symptoms positively, with a combination of both, gene and environmental therapies. Girls, on the other hand, may not be receiving the same quality of care because their symptoms manifest differently than boys with fragile X syndrome and ASD.

Another study around FMR1 protein biology used a genome-wide association study to identify gene-sets “previously implicated in ASD”. The evidence showed after examining 7,387 confirmed ASD cases, there is a common structural variation shared by ASD individuals that illustrates autism exists somewhere along a continuum between mental retardation (intellectual disability) and schizophrenia (“Meta-analysis of GWAS of over 16,000 individuals with autism spectrum disorder highlights a novel locus at 10q24.32 and a significant overlap with schizophrenia”) [3]. The first DSM described autism as a form of childhood schizophrenia, so this study could have important implications on how scientists and doctors view ASD [2].

On the other hand, genetic polymorphism could contribute to the onset of ASD as well. Genetic polymorphism is when the same gene is expressed in different ways due to environmental factors. Klei et al., found that in a family with only one ASD member, the “portion of liability can be explained by additive genetic effects (narrow-sense heritability) 40% of the time”. In a family with multiple members diagnosed with ASD, narrow-sense heritability exceeds 60% [4]. Specifically, this genetic polymorphism could be coming from the sensitivity of the developing brain to external exposures such as vaccines, lead, ethyl alcohol and methyl mercury, and exposures in early pregnancy. Given how many synthetic chemicals (untested and unknown

if they are neurotoxic) children are exposed to everyday, it seems quite possible environmental factors play a large part in the onset of ASD [9].

In conclusion, autism is still largely mysterious and misunderstood. Therefore, it is important to stay humble and open minded to other views and understanding of the human mind and human behaviors in general. The ability to think outside of the “box” is what brought scientists to the forefront of human evolution, successfully breaking free from decades of unnecessary pain and suffering.

## Overview of Available Treatments and Modalities

Fortunately, there are many treatment options but their positive outcomes do not last. The general outlook of academia and science is that ASD needs to be treated by a wide variety of treatment approaches. The studies mentioned in this paper all focus on children, and that is how research has mostly gone. Some researchers believe that “curing” autism should be prioritized. However, this way of thinking about autism has been particularly vilified by adults with autism, who do not see their disease as something that needs curing. Most of the autism community and progressive scientists hope to see the focus on research that will reveal underlying mechanisms of ASD, such as the external and internal factors mentioned above that affect individuals with ASD. Also, researchers are now realizing how severe the effects of comorbid psychiatric disorders (like anxiety, depression, eating disorders or OCD) has on the quality of life of an individual with ASD. Of course, even in affluent countries, the services offered to individuals with ASD are severely lacking [10]. Once an individual with ASD is over 18, there is a decrease in offered services, such as therapy, or pharmacological interventions. Women are underdiagnosed, due to the inability of the current diagnostic model to differentiate between symptoms exhibited by girls and boys with ASD [11]. Overall, researchers have more questions than answers when it comes to identifying the best treatment plan for ASD, whether it is medicine-based or service-based.

## Holographic Kinetics

Holographic Kinetics (HK) is an advanced holistic healing technique founded by Steve Richards over forty years ago to attempt to understand how universal laws work [12]. The HK practitioner understands the power of the subtle bodies in the creation and removal of internal created realities within their own separate dimensions of time, which creates imbalances and/or “dis-eases”. The HK practitioner is able to correct imbalances in the body and mind of the patient.

Just as there is an above, there is a below-Just as there is an internal invisible world, there is an external visible world-and there is always the point zero of the observer (man’s conscious choice) that is positioned between the two - all imbalances occur in the invisible first and transmute into the visible as an effect of the imbalance. Visible effects can include anxiety, depression, suicidal, PTSD, Bi Polar, ADD, ADHD, stress, fear, anger, guilt, sexual problems, self-punishment, etc. Holographic kinetics will assist a client in accessing the causes of these imbalances so they bring those imbalances back into balance.

Holographic kinetics subscribes to the idea that nothing ever occurs by chance; every single action or effect has an underlying cause. Kinetic energy is free-flowing and constant energy, until captured, and then it takes on a form as it flows through to the holographic, cellular level, on all dimensions within us and around us. It can become

trapped as potential energy, as we create balances and imbalances. The principle of cause and effect is a widely respected universal law.

When using holographic kinetics, it is possible to assist the life force of the patient in accessing internal hyperspace, where all things become omnipresent, omnipotent and omniscient within their own separate dimensions of reality. The holographic kinetics practitioner becomes an assistant to the life force of the patient by correcting the invisible original cause of the visible effect affecting the patient at the moment of the treatment. The difference between the other treatments and this modality is the permanent improvement and positive outcomes you achieve as a practitioner, for the patient.

During a session, the patient is lying down, usually on a massage table, supine with his/her eyes closed and the right arm elevated at an approximately 70 degree angle up. The practitioner holds the wrist and establishes a kinetic communication between the practitioner and the life force within the patient with simple polar questions. The HK practitioner then proceeds with skills to guide the session through a rigorous complicated series of specific questions and charts. Following the protocol, the practitioner gets closer to the truth of the real cause of the effect related to the issue that is affecting the patient the most. The Autistic HK protocol is the same and can be replicated, but, in each case, the practitioner will encounter different variables. Even though not all HK practitioners can achieve this result, as it takes time to be properly trained and acquire these skills, there is a team of advanced HK practitioners in Australia and the US who have achieved the same effectiveness using this protocol and other protocols such as drug addiction and more.

### Case Study: David

Four treatments have been successfully administered to alleviate David's symptoms. It improved his psychological disorders by more than 60% with his parents and 100% in school and other social activities outside the family, over an 8 months period. On all accounts, the intensity, frequency and the nature of David's dysfunctional behaviors were greatly decreased once Dr. Antoine Chevalier approached the negative effects of his extreme behaviors with the holistic power of holographic kinetics developed by Steve Richards.

David, according to multiple psychologists and doctors, was on the autism spectrum but they were unable to diagnose him due to other extreme violent behaviors that were not part of the spectrum. The pediatrician thought he might have PDD-NOS or pervasive developmental disorder-not otherwise specified. The neurologist said Will's EEG showed an abnormality that could not be classified, but appeared to show a similar pattern of epilepsy. David also saw a homeopathic doctor using Asyra machine. She was able to use David's DNA energy to test exactly what was wrong with him. He had full blown Lyme and Bartonella, both which are known to cause rage. The tests indicated a plethora of issues, ranging from toxic overload due to vaccines, some issues with brain function/nervous system, vitamin deficiency, the Lyme, Babesia, (also called Nuttallia, which is an Apicomplexan parasite that infects red blood cells causing a disease known as babesiosis), adrenal gland problems and so many more. She said his case was very different from most of her cases. Babesiosis is the specific disease that causes increased rage. She urged the parents to buy an ONDAMED machine to treat him, which was used daily, targeting his illnesses using frequencies. The frequencies kill the Lyme spirochetes or other bacteria, etc. Using the ONDAMED's pulse bio feedback, it determined what programs Will needed in

conjunction with the recommendations from the homeopathic doctor following monthly tests. This protocol has been applied for 5-6 months, with initial improvement followed by extreme violence. When this approach, successful for other patients, did not work and continued heightening Will's problems, the parents contacted Dr. Antoine Chevalier for holographic kinetics treatments.

### Permanent Behavioral Positive Outcomes

For the last 3-4 years prior to November 2016, when Will received his first holographic kinetics session, his almost daily intense behaviors could make him perceived as a "possessed" child, overtaken with uncontrollable rage. His senses were mixed up. He could not stand the feel of water. He would scream for no apparent reason with sudden outbursts of uncontrollable and extreme anger. His face would turn crimson, particularly his ears. He literally tried, on multiple occasions to kill his parents. He has taken scissors, rakes, shovels, knives, trying to hurt his mother and father as violently as he possibly could. He has said to his mother things like, "I am going to kill you. I am going to blow you up". He would frequently break furniture, doors and walls, put pins in the pillows of his parents, ripped jewelry apart. He would typically push heavy furniture or throws smaller items with intent to destroy and hurt. His strength increases exponentially to the point that his parents could barely restrain him. He would become a completely different person. The parents have sustained black eyes, bruises all over, bite marks, scratches up and down their arms, making them bleed from scratches. He would show great fear of public places, and would run to the car when he sees someone he is fearful of. At school, he would get aggressive and physically abusive to other children and teachers. The teachers and other therapists mentioned to the parents the need to have David being treated in a mental hospital as soon as possible.

After the four holographic kinetics sessions, Will has become a kind, sweet and loving 7 year old boy. He now compliments his mother on a nice meal she made, or hard work in the garden. He loves to help mow the lawn (old fashioned mower), do heavy work, rake, etc. He plays independently with other children at school and with the neighbors. He loves helping out in so many ways. He loves and appreciates nature and animals. He is smart as a whip. He has an uncanny ability to recall the smallest of details, especially from books he's read or things he learned at school. He is showing now a great sense of humor and loves to be silly. He is laughing multiple times a day. Being an athletic boy, he now loves to ride his bike. He is now naturally excited and curious and has turned into a natural leader. We have been observing so many kids gravitating towards him and wanting to be his friend.

Besides the 1-2 severe outbursts a month, we noted excellent behavior with sustained positive outcomes. The anger is almost completely gone. He is a lot happier, much improved self-esteem, and much more independent. These are big sustained changes that we really hadn't seen last like this before, eight months after the first holographic kinetics session up to now.

The pre intervention and post intervention reduction in aggressiveness and behavioral disorders was assessed by Dr. Antoine Chevalier using the Asyra and Ondamed machines, also by the homeopathic doctor using the same machines, the mother using the software autism tracker pro, the teachers at school and other therapists that David has seen for years. They were able to monitor and observe a dramatic change in David's behavior. The most powerful testimonials we

collected, were from the teachers at school. During parent teacher meetings, they were observing how David was improving progressively. After every HK session David received, the teachers observed a 20-30 % improvement in his behavior. There were 3 weeks in between the four HK treatments. The most dramatic event is when, 5 months after the first HK session, during a teacher parent meeting, they were no further discussions on whether or not David should be admitted to a mental hospital.

## Conclusion

According to the software autism tracker pro, the Asyra machine, the Ondamed machine, David's teachers, parents, therapists, David's severe behavioral disorders have 100% improved at school and in other social activities outside of his parents, over a eight month period until now, in frequency, intensity and changed the nature itself of his dysfunctional behaviors. Five months after the first session, David's behavior had improved so dramatically that there was no further discussion of whether or not he should be admitted to a mental hospital. This is a significant finding and it deserves more time and resources over a large sample to determine, in greater details, the holistic power, efficacy and efficiency of holographic kinetics in providing genuine, long term relief for children suffering from mental illnesses such as autism and more. Further investigation is warranted with a much-larger focus group to confirm these results and to assess their duration.

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