

세포교정영양요법(OCNT)을 이용한 비정형 재생세포를 동반한 위염 사례

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A Case Report on Gastritis Accompanied by Atypical Regenerative Cells Using Ortho-Cellular Nutrition Therapy (OCNT)

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ABSTRACT

Objective: Report on the improvement of gastritis accompanied by atypical regenerative cells through Ortho-Cellular Nutrition Therapy.

Methods: A Korean male in his 50s suffering from gastritis accompanied by atypical regenerative cells.

Results: Improvement observed in gastritis accompanied by atypical regenerative cells after the implementation of the nutrition therapy.

Conclusion: Nutrition therapy can be beneficial in alleviating symptoms of gastritis accompanied by atypical regenerative cells.

Keywords Ortho-Cellular Nutrition Therapy (OCNT), Gastritis, Atypical Regenerative Cells

Introduction

Flat erosive gastritis, characterized by minor damage and inflammation of the gastric mucosa, is mainly associated with *Helicobacter pylori* infection and NSAIDs. Over time, patients with flat erosive gastritis may experience progressive changes in the gastric mucosa, leading to worsening gastritis and atrophy in some cases. Diagnosis is made through gastroscopy and tissue biopsy, with treatment focusing more on accompanying lesions than the gastritis itself.^{1,2} Typically asymptomatic, it's often discovered through endoscopy, and sometimes presents multiple erosions or ulcers without signs of atrophic changes.³ In acute gastritis, symptoms can be alleviated by discontinuing the use of drugs or alcohol if they're the cause; in chronic cases, antibiotics and metronidazole may be added.⁴

In the context of flat erosive gastritis, the term

'Regenerative atypia' refers to cellular changes observed during the healing or recovery process in response to tissue damage or inflammation. Among 461 patients with these cells, 104 (22.6%) were diagnosed with cancer, highlighting the cells' potential danger.⁵ Such atypical cells, especially those with moderate to severe dysplasia, are recognized as a precursor to gastric cancer. Researchers recommend that patients diagnosed with gastric mucosal dysplasia should be followed for at least ten years.⁶ Additionally, gastric adenocarcinoma typically develops through a sequence of inflammation-metaplasia-dysplasia-carcinoma. While low-grade dysplasia has been reported as not progressing to invasive carcinoma, progression has been observed during follow-up.⁷

In a case where atypical regenerative cells with the potential to develop into cancer were found, significant improvement was observed after implementing nutrition therapy, leading to this case report with the patient's consent.

Case

1. Subject

This study focuses on a case of flat erosive gastritis.

- 1) Name: Kang O O (M/53 years old)
- 2) Diagnosis: Flat erosive gastritis

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- 3) Date of Onset: 2023
- 4) Treatment Duration: November 8, 2023, to January 13, 2024 (approximately 3 months)
- 5) Primary Symptoms: Chronic fatigue, abdominal obesity, dull skin
- 6) Past Medical History: None
- 7) Social History: Smoking (quit after diagnosis of reflux esophagitis in 2022)
- 8) Family History: None
- 9) Current Medical History and Medications: Borderline diabetes, proteinuria, dyslipidemia, hypertension, currently taking Duocar 30/5/5

2. Methods

Cyaplex F (101, twice a day, one sachet per intake)
Eufaplex (101, twice a day, one sachet per intake)
Gastron (101, twice a day, one sachet per intake)
Bioplex (101, twice a day, one sachet per intake)
Monacol (101, twice a day, one sachet per intake)
The existing prescription of Dukaro tab 30/5/5 was adjusted to Dukarb tab 30/5.

Results

One month after starting OCNT, the patient discontinued the statin medication used for dyslipidemia. He reported a reduction in abdominal bloating and a decrease in waist size, along with a significant improvement in overall condition.

Two months later, his blood pressure lowered, and his fasting blood sugar levels in the morning decreased to around 100.

Three months later, a follow-up examination, including endoscopy, was conducted at the internal medicine department that initially diagnosed the flat erosive gastritis. The gastritis was reclassified as simple inflammation, and there was an improvement in borderline diabetes.

Discussion

The subject of this case study is a 53-year-old male who was diagnosed with flat erosive gastritis showing atypical regenerative cells, as well as borderline diabetes, proteinuria, dyslipidemia, and hypertension, three months prior at an internal medicine clinic.

The body can react to stress by causing various responses in the gastric mucosa, including damage, erosion, and ulcers. Foods such as alcohol, coffee, spices, and salted items continuously affect the gastric wall.^{8,9}

Therefore, the damage to the gastric mucosal cells was attributed to stress and diet, and since these cells have a high potential to develop into cancerous cells, OCNT

was applied instead of waiting for cancerous cells to appear.

Aronia melanocarpa juice, fed to rats with indomethacin-induced gastric mucosal damage, reduced gastric lesions. Aronia melanocarpa is rich in phenolic substances, mainly anthocyanin sub-classes, and flavonoids. Anthocyanins, soluble plant pigments present in Cyaplex F, have antioxidant, anti-inflammatory, antibacterial, liver-protective, and gastrointestinal-protective activities. Quercetin, rutin, and EGCG in Cyaplex F are also flavonoids that help protect the stomach.¹⁰

Additionally, the alginate-containing gel in Cyaplex F was found to prevent long-term exposure of wounds to gastric acid and reduce inflammatory responses in ulcers, promoting healing.¹¹

Fucoidan increases the thickness of the pyloric mucous layer in chronic gastritis patients, protecting the gastric wall and promoting healing.¹²

Alpha-linolenic acid, gamma-linolenic acid, and oleic acid in Eufaplex can reduce inflammatory responses and be beneficial in flat erosive gastritis.¹³⁻¹⁶ These components also help with dyslipidemia.¹⁷

The high-molecular-weight mucin in Gastron, which supplements the mucous protective layer of the gastrointestinal tract, plays a role in protecting the gastrointestinal tract.¹⁸

Bioplex was recommended to ease digestion. Dietary fibers in Bioplex have protective effects against specific gastrointestinal diseases, constipation, hemorrhoids, colorectal cancer, gastroesophageal reflux disease, duodenal ulcers, diverticulitis, obesity, diabetes, stroke, hypertension, and cardiovascular diseases.¹⁹

Lastly, Monacol was recommended for the subject's dyslipidemia. Monacolin K in Monacol, a key active ingredient in red yeast rice, is effective in lowering cholesterol levels.²⁰

Upon re-examination, the atypical regenerative cells had disappeared, but inflammation persisted, so it was decided to continue the regimen to care for the simple inflammation.

This case report represents a single instance, and while not universally applicable to all patients with erosive gastritis, it is reported with the patient's consent due to significant improvement following OCNT.

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