

세포교정영양요법(OCNT)을 이용한 대상포진 후 신경통 개선 사례

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Improvement of Symptoms in Patients with Postherpetic Neuralgia Using Ortho-Cellular Nutrition Therapy

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ABSTRACT

Objective: To improve patients' postherpetic neuralgia (PHN) symptoms using Ortho-Cellular Nutrition Therapy (OCNT).

Methods: A Korean woman in her forties suffering from neuralgia due to herpes zoster was treated with OCNT for approximately six months.

Results: After initiating OCNT, the patient gradually experienced reduced neuralgia symptoms in the chest, flank, and back areas. Approximately six months later, she no longer felt discomfort from these symptoms.

Conclusion: OCNT can be beneficial in alleviating symptoms of neuralgia in patients suffering from PHN.

Keywords Ortho-Cellular Nutrition Therapy (OCNT), herpes zoster, neuralgia, insomnia

INTRODUCTION

Postherpetic neuralgia (PHN) is a chronic pain condition that persists or recurs in areas where a herpes zoster rash once appeared, even after the skin has recovered.

The virus that is dormant in nerve ganglia can reactivate due to weakened immunity or aging, leading to herpes zoster. Despite improvements in skin lesions, pain can persist or recur in the affected areas.

PHN occurs when the virus invades nerve tissue, causing lasting pain if the damaged nerves fail to recover. The likelihood of developing PHN increases with age; about 60% of herpes zoster patients in their sixties and approximately 75% in their seventies experience PHN. The risk is higher if the initial skin lesions are severe, or the initial pain is intense.

PHN is less common in herpes zoster cases affecting the jaw, neck, sacrum, or lumbar regions, moderate in thoracic cases, and highest in cases involving the brachial plexus (arm nerves) or trigeminal nerve areas.

The duration of PHN can range from several weeks to years and, in some cases, decades. Symptoms include stabbing pain,

tingling sensations, stiff muscle discomfort and abnormal sensations like crawling bugs (paresthesia). Mild pressure like hair contact (allodynia) may also occur pain. Alongside pain, patients often experience depression, psychological difficulties, and general life disruptions.

CASE STUDY

1. Subject

One patient with herpes zoster was studied.

- 1) Name: Moon OO (F/48 years old)
- 2) Diagnosis: Herpes zoster
- 3) Onset date: January 2019
- 4) Treatment duration: August 3, 2019 to January 2020
- 5) Main symptoms: Severe pain in the chest, flank, and back, insomnia, depression
- 6) Medical history: Peripheral T-cell autologous hematopoietic stem cell transplantation in 2009
- 7) Social history: None
- 8) Family history: None
- 9) Current condition and medications: Migraine, hypotension, taking gabapentin 100mg (three times a day) due to PHN, NSAIDs

2. Methods

<First to Fourth Months>

- Cyaplex A granule (101, twice daily, one sachet per dose)
Eufaplex Stick (101, twice daily, one sachet per dose)
Tmplex (010, once daily, one sachet per dose)

<Fifth to Sixth Months>

- Cyaplex A granule (101, twice daily, one sachet per dose)

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Eufaplex Stick (101, twice daily, one sachet per dose)

Gabapentin and pain medications were discontinued, and a strict diet (excluding flour, dairy, and processed oils) was maintained for about six months alongside OCNT.

RESULTS

Six months prior to starting Ortho-Cellular Nutrition Therapy (OCNT), the patient experienced severe fatigue and reduced immunity, leading to the development of herpes zoster affecting the right side of her chest, flank, and back. The patient was initially treated with antiviral medications by a dermatologist, and the skin rash and redness appeared to improve. However, one month later, the patient began experiencing severe knife-stabbing pain, and despite receiving pain management treatments, the pain intensified over time with no alternative treatments was found. After six months of unresolved pain management, OCNT was initiated. This patient, with a history of peripheral T-cell autologous hematopoietic stem cell transplantation performed ten years earlier, was in a state of severe psychological withdrawal due to the intense symptoms of PHN, which had significantly reduced her quality of life. Upon adopting OCNT, she ceased her dependency on prescribed pain medications. Despite experiencing severe withdrawal reactions initially, she faithfully continued OCNT, which led to significant improvement.

One month after starting OCNT, the patient saw improvements in migraines and constipation. Two months into the treatment, there was a gradual improvement in her chest, back, and flank pain, as well as insomnia, migraine, and constipation. By the fifth month, her symptoms of insomnia, migraine, and constipation had entirely resolved, and by the sixth month, her pain had fully subsided.

DISCUSSION

PHN is the most common long-term complication of the varicella-zoster virus (VZV) reactivation.^{1,2} PHN is characterized by thin, scalding pain that persists over three months after a herpes zoster outbreak in a unilateral segmented skin pattern.³ Common risk factors for PHN include increased age and decreased immunity, predominantly affecting the elderly and those with weakened immune systems.² The most successful treatments for PHN involve a multidisciplinary approach⁴; thus,

the intention behind using OCNT was to boost the patient's immune system, improve blood circulation, and alleviate symptoms that affect daily activities.

Intake of Aronia extract through Cyaplex A can help expand blood vessels and prevent endothelial damage caused by reactive oxygen species (ROS), potentially aiding patients with vascular diseases. Moreover, studies suggest that regulating immunity and stimulating antioxidant effects are additional benefits.^{5,6} Omega-3 fatty acids, found in Eufaplex, reportedly promote the generation and activation of brain neurons, with intake linked to effective relief in migraine symptom.⁷ Zinc contained in Tmplex is essential for appropriate immune system function and cell division; intravenous zinc has been reported to aid in treating PHN patients.⁸

Therefore, PHN patients' intake of Aronia extract and Omega-3 could enhance immune function and control migraines. Additionally, zinc supplementation can help alleviate chest, back, and flank pain.

This case study represents a single instance and cannot be universally applied to all patients. However, the OCNT approach has likely helped alleviate PHN symptoms and daily discomforts such as migraines and constipation. This report is reported with the patient's consent.

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Table 1. Degree of Symptoms Experienced by the Patient During OCNT Treatment Symptom severity is rated from 1 to 5, with higher scores indicating greater discomfort.

Symptom/Month	One month	Two months	Three months	Four months	Five months	Six months
Chest, Back, and Flank Pain	5	4	3	1	1	0
Insomnia	5	2	1	1	0	0
Migraine	3	1	0	0	0	0
Constipation	3	2	1	1	0	0

0: No symptoms; 1: Symptoms are mild and hardly affect daily life; 2: Symptoms are more pronounced, requiring some adjustment in daily activities; 3: Symptoms significantly affect daily life, causing difficulty in performing some activities; 4: Symptoms greatly hinder activity during daily life; 5: Symptoms cause discomfort and severe stress in daily life.

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