

## 세포교정영양요법(OCNT)을 이용한 변비 및 식욕부진 개선 사례

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### A Case Report on the Improvement of Constipation and Anorexia Using Ortho-Cellular Nutrition Therapy (OCNT)

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#### ABSTRACT

**Objective:** Constipation is a frequently occurring yet underdiagnosed symptom in cancer patients. In particular, cancer cachexia, anorexia, and the use of narcotic analgesics directly contribute to the development of constipation by impairing gastrointestinal motility, which in turn may lead to a vicious cycle of worsening nutritional status and reduced treatment tolerability. This case report describes the application of Ortho-Cellular Nutrition Therapy (OCNT) in a patient who was deemed inoperable due to multiple compounding factors, resulting in an improvement in overall physical condition.

**Case Report:** This case report presents the application of OCNT in an 85-year-old Korean female patient who was deemed ineligible for surgery after being diagnosed with breast cancer, due to physical deterioration associated with anorexia and chronic constipation. Following the intervention, the resolution of constipation symptoms and improvement in nutrient absorption efficiency led to weight recovery, ultimately enabling the patient to regain sufficient physical fitness to receive surgical clearance from the treating hospital.

**Conclusion:** This case suggests that OCNT may serve as an effective adjunct therapy capable of contributing to preoperative condition optimization (pre-habilitation) in cancer patients through constipation management and improvement of nutritional status.

**Keywords** Ortho-Cellular Nutrition Therapy (OCNT), Constipation, Anorexia, Breast cancer

#### Introduction

Constipation refers to a spectrum of symptoms, including hard stools, excessive straining, infrequent bowel movements, bloating, and abdominal pain. Chronic constipation commonly results from dietary factors, lifestyle factors, or primary disturbances in bowel function, such as impaired colonic propulsion or defecatory dysfunction.<sup>1</sup>

If constipation persists, complications such as hemorrhoids and anal fissures may develop, and in severe cases, it can lead to secondary conditions including exacerbation of cardiovascular disease or intestinal obstruction, thereby increasing the risk of mortality. Constipation may be alleviated through dietary modification, adequate fluid intake, and abdominal massage;

however, if these measures prove insufficient, medical interventions such as laxative use, enemas, or surgery may be required. Constipation is among the most frequently occurring problems in cancer patients, yet despite its high prevalence, it is often underdiagnosed due to the absence of validated diagnostic criteria and a widely accepted definition applicable to this population.<sup>2</sup>

In cancer patients, contributing factors to constipation may include tumor type, narcotic analgesics, other medications, strictures or fibrosis arising from surgery or radiation therapy, anorexia, decreased food and fluid intake, and cancer cachexia. When left untreated in cancer patients, constipation can precipitate complications such as reduced appetite, worsening nutritional status, impaired absorption of oral medications, rectal rupture, anal fissures and hemorrhoids, intestinal obstruction, and bowel perforation. In addition, chronic constipation may diminish the tolerability and efficacy of chemotherapy, thereby interfering with cancer treatment.<sup>3</sup> Furthermore, regardless of its underlying cause, anorexia can result in substantial weight loss in elderly patients, with sequelae including muscle wasting, debility, depression, heightened susceptibility to disease-related complications, and impaired immune function.<sup>4,5</sup>

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This case report presents the application of Ortho-Cellular Nutrition Therapy (OCNT) in a Korean female patient diagnosed with breast cancer whose physical condition had deteriorated to a degree that precluded surgical intervention and who presented with constipation and anorexia. The improvement of both constipation and anorexia achieved through this intervention suggests that OCNT may constitute a clinically meaningful adjunct therapy for patients awaiting breast cancer surgery. The present findings are reported with the informed consent of the patient.

## Case Study

### 1. Subject

A single case of a patient presenting with constipation and anorexia was included.

- 1) Name: Lee OO (85 years old / F)
- 2) Diagnosis: Constipation, Anorexia
- 3) Date of onset: March 4, 2026
- 4) Treatment period: March 4, 2026 – March 19, 2026
- 5) Chief complaint: Constipation, Anorexia
- 6) Past medical history: Breast cancer
- 7) Social history: None
- 8) Family history: Breast cancer (breast cancer in offspring)
- 9) Present illness and current medications: Breast cancer; Megestrol (appetite stimulant)

### 2. Methods

The OCNT prescribed to the patient is detailed in Table 1 below.

**Table 1. OCNT Prescribed to the Patient**

Perscription	Dose
<b>Bioplex F Granule</b>	101
<b>Macalplex Granule</b>	101
<b>Sarcoplex*</b>	100
<b>Viva Senior Power Liquid*</b>	100
<b>Saltea Aqua Lemon*</b>	1 일 1 회

\* The above OCNT was instructed to be taken after meals or as a meal replacement.

\*\* 101: Twice daily, 1 sachet/capsule per dose, taken in the morning and evening; 100: Once daily, 1 sachet/capsule per dose, taken in the morning

## Results

The patient in this case initiated OCNT with the aim of resolving constipation and anorexia to improve physical fitness in preparation for breast cancer surgery. A one-month supply was prescribed at the initial visit. At the follow-up visit fifteen days later, the patient reported resolution of constipation and restoration of regular bowel movements. In addition, weight loss had ceased, facial fullness had returned, and the patient reported a marked recovery of appetite, accompanied by nocturnal awakening due to hunger. Furthermore, the hospital where the breast cancer diagnosis was established confirmed that the patient's physical condition had improved to a level permitting surgical intervention, and surgery is now planned.

## Discussion

This case involved an 85-year-old Korean female patient diagnosed with breast cancer. Although surgical treatment was indicated, the patient was experiencing severe constipation and anorexia with ongoing weight loss, rendering her physical condition insufficient to tolerate surgical intervention. Her constipation was refractory to enema administration, and her anorexia had reached a degree of severity requiring the prescription of an appetite stimulant.

Bioplex and Macalplex were therefore prescribed to improve constipation. Bioplex contains the formulated components Multi-Fiber F and Postzyme F, which are rich in prebiotics, probiotics, and dietary fiber. Fructooligosaccharides, in particular, are prebiotics with substantial potential for constipation improvement. They increase the population of Bifidobacterium species, which inhibit the proliferation of harmful bacteria by maintaining an acidic intestinal environment,<sup>6</sup> and can improve bowel movement frequency, stool consistency, and overall constipation symptoms.<sup>7,8</sup> Dietary fiber further contributes to enhanced intestinal peristalsis and increased defecation frequency, thereby benefiting constipation management.<sup>9,10</sup>

The magnesium in Macalplex is absorbed and retained within the intestinal lumen, promoting osmotic activity and thereby contributing to increased luminal water retention. This action can soften stool and augment stool volume, while also providing mechanical stimulation to the intestinal wall to enhance bowel motility.<sup>11</sup> Notably, the magnesium in Macalplex is sourced from seawater and exhibits superior solubility and tolerability relative to other magnesium sources.<sup>12</sup>

Sarcoplex, Viva Senior Power Liquid, and Saltea Aqua Lemon were prescribed to promote appetite and increase energy intake. Sarcoplex contains a complex plant-based protein extracted from peas, pumpkin, quinoa, and rice. Although concerns exist that increased protein intake may exacerbate appetite suppression, increased protein intake does not appear to exert a significant adverse effect on appetite and may contribute to the mitigation of age-related conditions, including impaired maintenance of muscle mass, sarcopenia, frailty, osteoporosis, and reduced immune response.<sup>5</sup> Given that zinc influences taste perception and appetite, Viva Senior, which contains zinc, was prescribed with the aim of improving appetite.<sup>13</sup>

Lastly, Saltea Aqua Lemon was prescribed. Its lemon concentrate content was expected to stimulate appetite, while the concurrent supplementation of calcium from Saltea Aqua Lemon and vitamin D from Viva Senior was intended to contribute to the management of malnutrition-related osteoporosis.<sup>14</sup> Additionally, taurine was included for its beneficial effects on the cardiovascular system, with the aim of supporting the patient's physical condition before the forthcoming breast cancer surgery.<sup>15</sup>

This case describes the concurrent application of OCNT to optimize the physical condition of a patient who was unable to proceed with cancer surgery following a confirmed breast cancer diagnosis due to impaired gastrointestinal function and progressive weight loss. Following the implementation of OCNT, chronic constipation symptoms improved, body weight increased meaningfully through the activation of metabolic function, and the patient was able to attain a physical condition appropriate for surgery. These findings may suggest the

effectiveness of OCNT as an adjunct therapy that may help prevent treatment delays and support preoperative prognostic management in cancer patients.

This case report has inherent limitations as a single-patient study and is not readily generalizable. Nonetheless, it is considered to highlight the importance of appropriate OCNT prescription not only in cancer patients but also in patients presenting with general constipation. This case is therefore reported with the informed consent of the patient.

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