

세포교정영양요법(OCNT)을 이용한 망막 열공 및 간경변증 개선 사례

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A Case of Improvement in Retinal Tear and Liver Cirrhosis Using Ortho-Cellular Nutrition Therapy (OCNT)

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ABSTRACT

Objective: Retinal detachment, the separation of the retina from the underlying retinal pigment epithelium, occurs under the influence of retinal tears, myopia, and surgery. Liver cirrhosis involves hepatic fibrosis and functional decline influenced by frequent alcohol consumption, dietary habits, and stress. Both are representative irreversible diseases, difficult to recover from once developed, making preventive measures before treatment and suppression of disease progression clinically crucial. This case report evaluated the potential clinical utility of Ortho-Cellular Nutrition Therapy (OCNT) in suppressing progression and alleviating symptoms of these conditions.

Case Report: A Korean woman in her 60s, exposed to ultraviolet radiation and environmental irritants through long-term outdoor agricultural work, presented with worsening floaters and was diagnosed with a retinal tear immediately preceding retinal detachment. While surgery was delayed, she received OCNT for approximately two months. By day 15, ocular dryness and discomfort had decreased, and an ophthalmologic examination two months later confirmed complete resolution of the tear. A Korean man in his 60s with chronic excessive alcohol consumption and stress had been diagnosed with liver cirrhosis and told that liver transplantation might be required owing to continued deterioration. After OCNT initiation, further disease progression was effectively suppressed, and stability was maintained.

Conclusion: These cases suggest that OCNT may contribute to retinal tissue stabilization and liver function protection through potent antioxidant, anti-inflammatory, and cytoprotective effects. OCNT is expected to be clinically valuable as an alternative nutritional intervention to prevent the progression of irreversible diseases and support conservative management before invasive surgery or liver transplantation.

Keywords Ortho-Cellular Nutrition Therapy (OCNT), Retinal tear, Liver cirrhosis, Retinal detachment

Introduction

Retinal detachment refers to the separation of the neurosensory retina from the underlying retinal pigment epithelium. Depending on the underlying cause, it can be classified as rhegmatogenous, tractional, or exudative (serous) retinal detachment. Retinal tears, myopia, and previous cataract surgery are among the major risk factors for this condition. In particular, increased time spent outdoors may lead to greater

exposure to sunlight and may also increase the likelihood of minor ocular trauma or increased visual demands, including prolonged eye strain or excessive visual workload, potentially contributing to the development of retinal detachment.¹

When photopsia develops or floaters worsen, a retinal tear may be present, and if left untreated, the tear may progress to retinal detachment and potentially result in blindness. Before progression to retinal detachment, a retinal tear can generally be treated with laser therapy, whereas once retinal detachment develops, surgical intervention is typically required, with the main procedures including pneumatic retinopexy, scleral buckling, and vitrectomy. However, effective treatment options other than surgical intervention are currently lacking.²

Frequent alcohol consumption, irregular dietary habits, and chronic stress may contribute to persistent hepatocellular injury and hepatic fibrosis, and progressive fibrosis may ultimately lead to liver cirrhosis severe enough to require liver transplantation.³

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As cirrhosis progresses, complications such as ascites, esophageal variceal bleeding, and hepatic encephalopathy may occur, markedly increasing the risk of mortality.⁴

In alcohol-related liver cirrhosis, complete abstinence from alcohol, the primary causative factor, can often result in marked improvement in liver function parameters and measures of fibrosis. In contrast, cirrhosis caused by viral hepatitis may be treated with medications such as antiviral agents to suppress viral replication, which may in turn contribute to regression of hepatic fibrosis and improvement in cirrhosis. However, if the disease is sufficiently severe that liver function fails to recover despite such treatment, liver transplantation may be required.⁵

Retinal tears (or retinal detachment) and liver cirrhosis are irreversible diseases from which recovery is difficult once they develop. In both conditions, preventive measures before invasive treatment and efforts to limit disease progression remain clinically important priorities, rather than achieving a complete cure.

Ortho-Cellular Nutrition Therapy (OCNT) is an alternative intervention intended to facilitate the recovery of damaged tissues and the normalization of physiological functions through cellular-level nutritional balance and antioxidant mechanisms. This case report describes the potential clinical utility of OCNT based on one case in which complete resolution of a retinal tear was confirmed following OCNT administration in a patient at risk of retinal detachment before surgical intervention, and another case in which no further disease progression was observed in a patient with liver cirrhosis for whom liver transplantation had been considered necessary.

Case Study

1. Subject

One case each of retinal detachment and progressive liver cirrhosis was included.

– Patient A

- 1) Name: Lee ○○ (60 years / F)
- 2) Diagnosis: Retinal detachment
- 3) Date of onset: July 2025
- 4) Treatment period: July 2025 – September 2025
- 5) Chief complaint: Floaters
- 6) Past medical history: Underwent initial laser treatment for retinal detachment
- 7) Social history: Prolonged outdoor work and sunlight exposure due to farming; reported stress related to personal circumstances
- 8) Family history: Mother with gastric cancer; older brother with colorectal cancer
- 9) Present illness and current medications: Currently taking medications for hypertension and diabetes

– 환자 B

– Patient B

- 1) Name: Kim ○○ (60 years / M)
- 2) Diagnosis: Alcohol-related liver cirrhosis
- 3) Date of onset: 2011
- 4) Treatment period: 2020 – present
- 5) Chief complaints: Liver fatigue syndrome, halitosis

6) Past medical history: History of admission to the intensive care unit in 2020

7) Social history:

8) Family history: Father diagnosed with alcohol-related liver cirrhosis

9) Present illness and current medications: Taking a diuretic daily for the prevention of ascites, along with Ursa tablets and Godex capsules.

2. Methods

– Patient A

Cyaplex X Tablets 202 (2 tablets per dose, twice daily)
Caroplex F Granules 100 (1 sachet per dose, once daily)
Vivarol Capsules 101 (1 capsule per dose, twice daily)

The above OCNT products were taken for two months.

– Patient B

Cyaplex X Granules 101 (1 sachet per dose, twice daily)
Haepobooster Granules 101 (1 sachet per dose, once daily)

The above OCNT products have been taken continuously since 2020, and the following OCNT products were subsequently added to the regimen.

Albutathione Tablets 202 (2 tablets per dose, twice daily)
Bovitacin Lipa Tablets 202 (2 tablets per dose, twice daily)

Results

Following a diagnosis of retinal detachment, Patient A was treated with OCNT without any additional surgical intervention. Approximately one week later, ocular dryness and discomfort had decreased, and the patient reported symptomatic improvement, including a subjective sense of smoother eye movement than before treatment. These improvements became more evident by day 15. After two months of continuous OCNT administration, a final ophthalmologic assessment confirmed complete resolution of the findings indicating a risk of retinal detachment.

Patient B was diagnosed with liver cirrhosis based on a detailed examination and had a history of chronic excessive alcohol consumption and persistent stress. At presentation, liver function was markedly impaired, and the disease had advanced to the point where liver transplantation would need to be considered if further progression occurred. Following OCNT administration, however, no further progression of liver cirrhosis was observed, and the patient has remained clinically stable.

Discussion

Patient A in this case was a Korean woman in her 60s engaged in agricultural work on Jeju Island. Around 2026, she visited an ophthalmology clinic due to worsening floaters and was diagnosed with a retinal tear considered to be at imminent risk of progressing to retinal detachment. However, because she was unable to receive immediate treatment due to livelihood-related constraints, she subsequently visited a pharmacy. The patient interview revealed that the nature of her work involved continuous exposure to ultraviolet radiation, hot and dry

conditions, and environments associated with an increased risk of ocular trauma.

Intraocular oxidative stress may induce premature liquefaction and structural contraction of the vitreous gel, which provides structural support within the eye. These changes may exert abnormal traction on the retina while simultaneously promoting oxidative damage to retinal tissue, thereby contributing to the pathophysiological processes underlying the development of retinal tears.^{6,7} The anthocyanins in Cyaplex X may help protect the retinal pigment epithelium and retinal ganglion cells from oxidative stress-induced damage by suppressing oxidative stress and exerting anti-apoptotic effects.⁸

Beta-carotene, lycopene, lutein, and astaxanthin, the carotenoids contained in Caroplex F, are all known to be potent antioxidants. In retinal detachment, increased production of reactive oxygen species and elevated oxidative stress have been reported to contribute to photoreceptor death. Therefore, their antioxidant effects may help modulate oxidative stress and thereby mitigate photoreceptor damage associated with retinal detachment.⁹

The retina is rich in polyunsaturated fatty acids, which serve as major structural components and are particularly susceptible to peroxidation.¹⁰ The polyunsaturated fatty acids contained in Vivarol may support the survival of retinal photoreceptor cells and suppress cell death, promote cellular repair signaling through their conversion to the neuroprotective mediator neuroprotectin D1 (NPD1), and contribute to reducing photo-oxidative stress and inflammatory responses in the retina. In addition, they may play a beneficial role in maintaining retinal microstructural integrity by alleviating retinal damage and inhibiting activation of retinal glial cells.¹¹

Approximately one week after initiating this OCNT regimen, the patient experienced symptomatic improvement, including reduced ocular dryness and foreign body sensation as well as smoother eye movements. At an ophthalmologic follow-up two months later, the medical team clinically confirmed complete resolution of the retinal tear.

Next, Patient B was diagnosed with liver cirrhosis around 2011 in the context of personal stress and chronic excessive alcohol consumption. Despite the diagnosis, the patient was unable to maintain complete abstinence from alcohol, and the disease continued to progress. The patient reported that the attending physician had explained that approximately 30% of the liver had undergone cirrhotic change. The patient was also informed that liver transplantation might become necessary if the condition deteriorated further. Accordingly, OCNT was prescribed to help limit further disease progression.

The anthocyanins in Cyaplex X may help alleviate oxidative stress and reduce the expression of pro-inflammatory cytokines, including TNF- α and IL-1, through potent antioxidant activity. They may also inhibit excessive activation of hepatic stellate cells (HSCs) by blocking the TGF- β /Smad signaling pathway involved in cellular growth and differentiation, thereby helping to prevent excessive expression of α -SMA and accumulation of collagen I. Through these mechanisms, anthocyanins may contribute to limiting the progression of liver cirrhosis and preserving liver function.¹²

Glycine, which is abundant in Haepobooster, may help directly suppress the release of pro-inflammatory and profibrotic

cytokines by inhibiting the activation of Kupffer cells, the resident immune cells of the liver. It may also reduce oxidative stress by enhancing antioxidant defense mechanisms. Furthermore, glycine may contribute to hepatocyte protection and the preservation of regenerative capacity while mitigating chronic alcohol-induced liver injury and inflammation.¹³

Lastly, the albumin contained in Albutathione Tablets may help maintain osmotic pressure, suppress systemic inflammatory mediators associated with worsening liver cirrhosis, reduce reactive oxygen species, bind directly to endotoxins and limit their entry into the systemic circulation, and stabilize endothelial and immune function, thereby potentially contributing to the management of liver cirrhosis.¹⁴ Following administration of this OCNT regimen, the patient has remained clinically stable without further progression of liver cirrhosis.

This case report involved only a single patient for each condition, which limits the generalizability of the same OCNT regimen to other patients experiencing similar symptoms or discomfort. Nevertheless, these cases are considered clinically meaningful in that they suggest the potential for complete resolution of disease-related findings and suppression of further disease progression in conditions generally regarded as irreversible. Accordingly, we report these cases with the patients' consent.

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