

Case Report

세포교정영양요법(OCNT)을 이용한 근육통 및 원인 불명의 피부 증상 개선 사례

문영선

전남광주통합특별시 광산구 첨단강변로99번길 22 마트약국

A Case Report of Improvement in Muscle Pain and Unexplained Skin Symptoms Using Ortho-Cellular Nutrition Therapy (OCNT)

Youngsun Mun

Mart Pharmacy, 22, Cheomdangangbyeon-ro 99beon-gil, Gwangsan-gu, Jeonnam-Gwangju, Republic of Korea

ABSTRACT

Objective: Chronic pruritus and musculoskeletal pain significantly impair patients' quality of life. Both conditions may develop when pro-inflammatory cytokines elevated by low-grade systemic inflammation and aging lead to a persistent inflammatory state. In particular, when the cause of pruritus remains unidentified, treatment is often limited to symptomatic therapies, such as antihistamines and topical or systemic corticosteroids, which may carry a risk of adverse effects. In the present case, Ortho-Cellular Nutrition Therapy (OCNT) was administered to alleviate recurrent symptoms.

Case Report: A Korean man in his 50s presented with pruritus of unknown etiology as his chief complaint, along with back muscle pain and left shoulder pain. A dermatology clinic diagnosed a skin disorder of unknown etiology and prescribed corticosteroids and antihistamines, and he also received treatment at a Korean medicine clinic. Although these treatments were effective during the first two months, his symptoms recurred in the third month. OCNT was therefore prescribed, and one month after its initiation, his pruritus improved and his muscle pain had almost completely resolved.

Conclusion: Although this is a single case and the same OCNT regimen may not be applicable to all patients, the findings suggest that an appropriate OCNT regimen may contribute to alleviating oxidative stress and chronic inflammation by supporting the body's antioxidant and anti-inflammatory functions. Furthermore, this case highlights the potential clinical value of OCNT in improving bothersome symptoms through an appropriate combination of nutrients, rather than relying solely on conventional symptomatic treatments for symptoms of unknown etiology.

Keywords Ortho-Cellular Nutrition Therapy (OCNT), Chronic inflammation, Oxidative stress, Muscle pain, Skin disorders

Introduction

Chronic skin disorders and musculoskeletal pain can each significantly compromise patients' daily functioning and quality of life.^{1,2} In patients with chronic musculoskeletal pain, the innate immune system may exhibit exaggerated responses to

external stimuli.³ Similarly, in chronic skin disorders, low-grade systemic inflammation or aging may elevate pro-inflammatory cytokine levels, thereby contributing to the development of a chronic inflammatory state.⁴

In particular, identifying the exact etiology of skin diseases is often challenging, and treatment therefore primarily relies on symptomatic therapies, including antihistamines and topical or systemic corticosteroids. Although these medications may initially produce favorable therapeutic responses, abrupt dose reduction or discontinuation may result in a high risk of symptom recurrence. Moreover, prolonged use may lead to adverse effects, such as impairment of the skin barrier.^{5,6}

Increased oxidative stress in the body may contribute to severe pruritus of unknown etiology, while overactivation of

*Correspondence: Youngsun Mun

E-mail: mys23250@naver.com

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mast cells, a type of immune cell, may contribute to pruritus and pain.^{7,8} Recent studies have further indicated that dysregulation of the gut-skin axis, which describes the relationship between the gut microbiota and skin health, may play a role in the development of pruritus.⁹

Therefore, while conventional prescription medications may temporarily suppress symptoms, achieving sustained symptom improvement requires strategies to control chronic inflammation associated with oxidative stress and improve the body's metabolic environment. For patients with refractory conditions whose symptoms remain inadequately controlled or frequently recur despite standard treatments, Ortho-Cellular Nutrition Therapy (OCNT), which seeks to regulate metabolic processes and inflammatory factors through the administration of appropriate nutrients, may represent a potential alternative approach to addressing the underlying causes of refractory diseases from multiple perspectives.

This case report describes the application of OCNT in a patient who experienced recurrent severe pruritus in the abdominal and inguinal regions, along with back and shoulder pain, despite prior pharmacological treatment and treatment at a Korean medicine clinic. Following initiation of OCNT, the patient experienced complete resolution of pruritus and marked improvement in pain. Based on these findings, this report aims to highlight the potential clinical utility of OCNT in alleviating symptoms associated with refractory skin diseases and chronic pain.

Case Study

1. Subject

This study included one patient with muscle pain and a skin disorder.

- 1) Name: OOO (55/M)
- 2) Diagnosis: Muscle pain, skin disorder of unknown etiology
- 3) Date of onset: October 2024
- 4) Treatment period: September 2026–present

5) Chief complaints: Back muscle pain, left shoulder pain, abdominal and inguinal (groin) pruritus, insomnia

6) Past medical history: None

7) Social history: None

8) Family history: None

9) Present illness and current medications: Steroids and histamine medications prescribed by a dermatologist

2. Methods

The following OCNT regimen was prescribed.

• Oral Supplements

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

Eufaplex Alpha Stick 101 (1 sachet per dose, twice daily)

Bifido Sanyacho Liquid 001 (1 sachet once daily)

Betaplex F Fine Granules 100 (1 sachet once daily)

Sulfoplex PK Tablet 404 (4 tablets per dose, twice daily)

Jubaplex Tablet* 002 (2 tablets once daily)

Melaplex Tablet* 002 (2 tablets once daily)

* The OCNT products marked with an asterisk were prescribed for the first 10 days of treatment.

• Topical Preparations

Cyaplex Balm

Tebinasil Cream

Cyaplex Cleansing Bar

The patient was instructed to apply Tebinasil cream first, followed by Cyaplex Balm, both in the morning and evening, and to use Cyaplex Cleansing Bar while showering in the morning and evening.

Results

Following OCNT treatment, the patient's overall clinical symptoms improved markedly. Severe pruritus and stinging sensations in the abdominal and inguinal regions completely resolved, while erythema and hyperpigmentation at the affected sites were also markedly reduced (Figs. 1, 2). The patient reported that muscle pain in the back and pain in the left shoulder

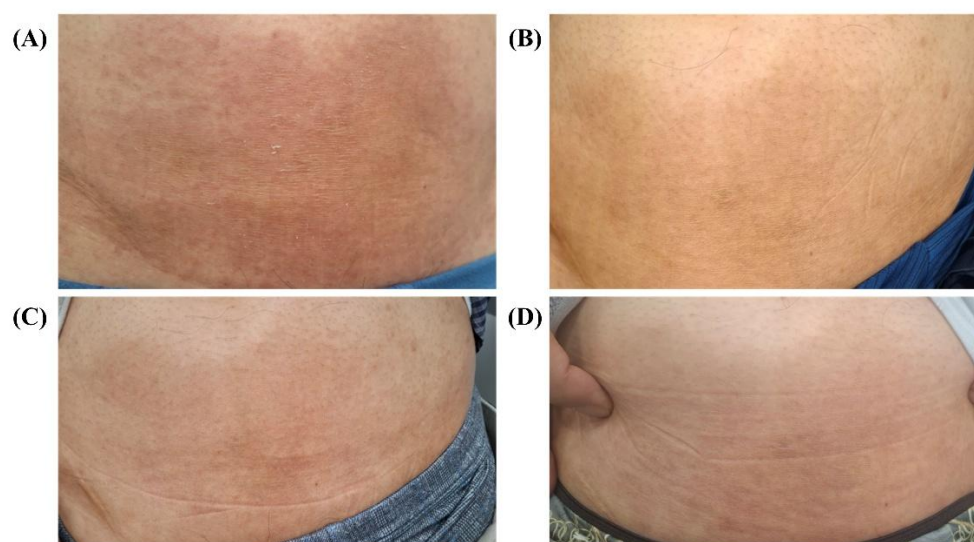


Fig. 1. Changes in the patient's lower abdominal lesion during OCNT. (A) Photograph taken at the time of the pharmacy visit. (B) Two weeks after OCNT prescription. (C) Three weeks after OCNT prescription. (D) Four weeks after OCNT prescription.

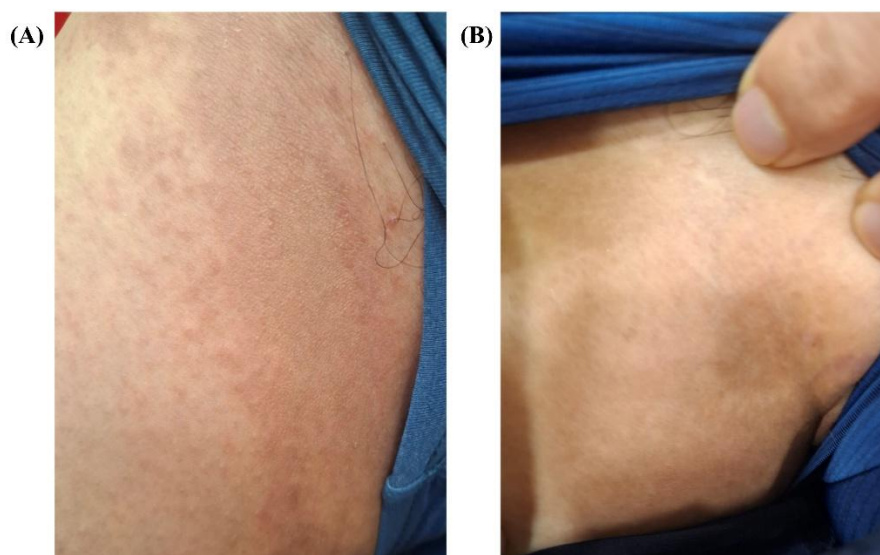


Fig. 2. Changes in the patient's inguinal (groin) lesion during OCNT. (A) Photograph taken at the time of the pharmacy visit. (B) Photograph taken four weeks after OCNT prescription.

had decreased by at least 80% compared with their previous levels, leaving approximately 20% of the original pain intensity. Furthermore, the patient reported that, unlike after prior pharmacological treatment, his symptoms had remained controlled without recurrence and that his overall quality of life had improved substantially.

Discussion

In this case, the patient presented with back muscle pain and left shoulder pain, accompanied by severe pruritus of unknown etiology affecting the abdominal and inguinal regions. The underlying cause could not be identified during dermatological evaluation, and the patient was receiving treatment at a Korean medicine clinic while taking prescribed corticosteroids and antihistamines. The patient reported that although the symptoms improved during the first two months, they recurred in the third month, with severe pruritus and chronic pain similar to those experienced before treatment. This suggests that first-line pharmacological treatment for chronic refractory skin disorders and musculoskeletal pain may provide only temporary symptom suppression without addressing the underlying causes of chronic inflammation.

Therefore, after assessing the patient's condition through a clinical interview, OCNT was prescribed to alleviate symptoms by reducing inflammatory responses and enhancing the body's antioxidant capacity. Anthocyanins contained in Cyaplex may help support overall anti-inflammatory function by inhibiting NF- κ B signaling through downregulation of the MAPK pathway and contributing to reduced expression of certain pro-inflammatory cytokines in vitro.¹⁰ Omega-3 fatty acids, one of the main components of Eufaplex Alpha, may help strengthen antioxidant defenses against reactive oxygen species by enhancing plasma antioxidant capacity and supporting the activity of glutathione peroxidase (GPx), an antioxidant enzyme.¹¹

The fermented wild plant extract contained in Bifido Sanyacho Liquid becomes enriched with various nutrients and bioactive compounds during fermentation, which may help improve the intestinal environment and support the elimination

of waste products.¹² In addition, *Bifidobacterium animalis*, a probiotic contained in Bifido Sanyacho Liquid, is known to help restore gut microbiota balance in skin diseases in which a reduction in the abundance of the genus *Bifidobacterium* has been reported.¹³ Beta-glucan contained in Betaplex is known to positively affect the gut microbiota by promoting the growth of beneficial bacteria and inhibiting the growth of harmful bacteria. Furthermore, it may help enhance immune function by contributing to the activation of immune cells such as macrophages, dendritic cells, neutrophils, and natural killer (NK) cells, promoting immune signaling, and regulating innate and adaptive immune responses.¹⁴ Additionally, methylsulfonylmethane (MSM), the main component of Sulfoflex PK Tablets, may help alleviate muscle damage, reduce muscle pain, and promote functional recovery by regulating oxidative stress and inflammation.¹⁵

Following OCNT treatment, the patient showed marked clinical improvement, reporting that itching and stinging sensations in the abdominal and inguinal regions had almost completely resolved and that back muscle pain had decreased by more than 80% compared with pretreatment levels. However, as this report is based on a single case, its findings cannot be generalized to all patients with chronic pruritus and muscle pain. Nevertheless, this case suggests that a cellular nutritional approach using OCNT may represent a potentially useful alternative for rapid symptom relief and prevention of recurrence in patients with refractory cutaneous pruritus and chronic musculoskeletal pain who had experienced repeated recurrences despite continuous pharmacological treatment. Given its potential clinical significance, This case is reported with the patient's consent.

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