

세포교정영양요법(OCNT)을 이용한 갱년기 환자 개선 사례 연구

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A Case Study on the Improvement of Menopausal Patients Using Ortho-Cellular Nutrition Therapy (OCNT)

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ABSTRACT

Objective: Report on the Improvement of Menopausal Symptoms Using Ortho-Cellular Nutrition Therapy (OCNT)

Methods: A case study of a 40-year-old Korean woman experiencing menopausal symptoms such as vaginal dryness, vaginal atrophy, dyspareunia, and frequent vaginal infections.

Results: Significant improvement in menopausal symptoms following the implementation of nutritional therapy.

Conclusion: The application of nutritional therapy in menopausal patients can be beneficial in alleviating symptoms.

Keywords Ortho-Cellular Nutrition Therapy (OCNT), menopause, vaginal dryness, vaginal atrophy, dyspareunia, vaginal infections.

Introduction

Menopause is a biological transition caused by ovarian dysfunction, characterized by the cessation of menstruation for at least 12 consecutive months or

elevated levels of follicle-stimulating hormone (FSH) above 40 IU/L in the absence of any other pathological cause.¹ Common symptoms of menopause include dyspareunia (painful intercourse), vaginal dryness, vaginal discharge, and vaginal itching. The prevalence of these four symptoms among women experiencing menopause is reported to be 31.7%. Among women with menopausal symptoms, 56.4% reported experiencing at least one of these four symptoms.²

In addition to the physical symptoms, menopause also brings about psychological, social, and sexual changes

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that can negatively impact the quality of life for menopausal women.³

Although hormone replacement therapy is commonly used for the treatment of menopause, the patient had a history of being diagnosed with stage 2 breast cancer and received radiation therapy. In most cases, breast cancer patients are prescribed tamoxifen to prevent recurrence and metastasis. The recurrence rate without tamoxifen is 46.3%, but with its use, the recurrence rate is reduced by 33.7%. However, long-term use of tamoxifen can cause various side effects such as hot flashes and vaginal bleeding. Therefore, hormone replacement therapy is not recommended for individuals with hormone-dependent tumors such as breast cancer. In this case, we aimed to explore the nutritional factors that can enhance psychological and physical well-being for a patient who had been on long-term tamoxifen therapy and discontinued it, in order to help suppress breast cancer recurrence and alleviate side effects.

Case Study

1. Subject

A case study was conducted on a patient with menopause.

- 1) Name: Jane O (Female, 48 years old)
- 2) Diagnosis: Menopause
- 3) Onset Date: January 2022
- 4) Treatment Period: January 17, 2022, to July 21, 2022
- 5) Presenting Symptoms: Vaginal dryness, vaginal atrophy, dyspareunia, frequent vaginal infections, hot flashes, night sweats
- 6) Past Medical History: Breast cancer
- 7) Social History: None
- 8) Family History: None
- 9) Current Medical History and Medication: Tamoxifen

2. Methods

First Nutritional Therapy (1 month)

Angelan (200, once a day, 2 sachets per dose)
Application of Cyaplex Balm to the vagina

Second Nutritional Therapy (1 month)

Eufaplex (101, twice a day, 1 sachet per dose)
Aqua SAC Pure (100, once a day, 1 sachet per dose)
Hemoplex (202, twice a day, 2 tablets per dose)

Third Nutritional Therapy (4 months)

Cyaplex A (101, twice a day, 1 sachet per dose)
Eufaplex (101, twice a day, 1 sachet per dose)
Aqua SAC Pure (100, once a day, 1 sachet per dose)
Hemoplex (202, twice a day, 2 tablets per dose)
After the relief of all symptoms, the patient is currently maintaining nutritional therapy with
Cyaplex A (101, twice a day, 1 sachet per dose)
Vivarol (101, twice a day, 1 sachet per dose)
These nutritional therapy methods are being continued.

Result

The patient experienced symptoms of vaginal dryness, vaginal atrophy, dyspareunia, hot flashes, vaginal discharge, and frequent vaginal infections on January 17, 2022. However, after undergoing nutritional therapy, the symptoms improved rapidly, and by July 21, 2022, all menopausal symptoms had disappeared.

Table 1. Indicators of Subjective Symptoms reported by the Patient. The severity of symptoms is rated on a scale of 1 to 10, with higher scores indicating more severe symptoms.

Symptoms	1 st Session 22.01.17	2 nd Session 22.02.18	3 rd Session 22.03.21	4 th Session 22.07.21	Remarks
Vaginal Dryness	8	2	0	0	
Vaginal Atrophy	8	0	0	0	
Dyspareunia	8	1	0	0	
Hot Flashes	8	4	2	0	
Vaginal Discharge	8	1	1	0	
Vaginal Infections	8	0	0	0	

Conclusion

In hormone-positive breast cancer patients, who account for 70% of all breast cancer cases, long-term hormone suppression therapy is prescribed and administered for 5 to 10 years. One of the commonly prescribed medications is tamoxifen, which acts as an anti-estrogen and inhibits the proliferation of cancer cells. However, long-term use of tamoxifen has been associated with reported side effects, leading to a discontinuation rate of approximately 30-40% among patients. In the present case, the patient had been taking tamoxifen for an extended period and was also experiencing symptoms of menopause, which were causing discomfort in daily life. Notably, hot flashes and vaginal issues are common side effects of tamoxifen, which led to the exclusion of hormone replacement therapy for managing menopausal symptoms. Therefore, considering the patient's medical history and current condition, the objective was to alleviate the patient's menopausal symptoms through nutritional therapy.

Danggui, an ingredient found in the recommended Angelan in the first nutritional therapy, has been reported to prevent vaginal dryness and significantly improve menopausal symptoms without causing side

effects associated with hormone replacement therapy.^{4,5} Additionally, hyaluronic acid in Cyaplex Balm has been found to be effective in treating atrophic vaginitis.⁶

The patient is currently taking tamoxifen consistently after breast cancer treatment and has been informed of the presence of endometrial thickening measuring 1cm. Therefore, in the second nutritional therapy, the patient was recommended to take Eufaplex, Hemoplex, and Aqua SAC Pure. Oleic acid found in Eufaplex has shown anti-proliferative and anti-tumor effects in clinical and preclinical studies on endometrial cancer, suggesting its potential for endometrial cancer prevention.⁷ Hemoplex, containing iron, and Aqua SAC Pure, containing calcium, were recommended for the prevention of menopausal osteoporosis.^{8,9}

In the third nutritional therapy, the patient was additionally recommended to take Cyaplex A. Initially, there was a misunderstanding regarding the component of anthocyanin in Cyaplex A, and the patient declined the recommendation. However, it was explained that plant-based estrogen present in Cyaplex A is involved in various mechanisms that not only contribute to the treatment of breast cancer but also prevent the onset of postmenopausal symptoms.¹⁰ Anthocyanin has antioxidant, anti-inflammatory, and anti-cancer properties, and it is not

associated with the occurrence of breast cancer but rather inhibits its development.¹¹

After undergoing these nutritional therapies, the patient currently experiences the complete alleviation of menopausal symptoms. This case report represents a single case and cannot be universally applied to all menopausal patients. However, it is a valuable example of symptom improvement in the patient. The report has been shared with the patient's consent.

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