

세포교정영양요법(OCNT)을 이용한 협심증 개선 사례

조종빈 약사

전라남도 화순군 화순읍 자치샘로 42-2 셀메드 화순 종로약국

Improvement of symptoms in patients with angina pectoris using ortho-cellular nutrition therapy

Pharmacist, Jongbin Jo

Hwasun Jongro Pharmacy, 42-2, Jachisaem-ro, Hwasun-eup, Hwasun-gun, Jeollanam-do, Republic of Korea

ABSTRACT

Objective: Improvement of angina pectoris using OCNT

Methods: OCNT was applied to a Korean woman in her 60s who was experiencing chest pain and dizziness due to angina pectoris for about six months.

Results: After starting OCNT, symptoms of chest pain and dizziness due to angina pectoris gradually decreased, and after about six months, such symptoms no longer caused discomfort.

Conclusion: For patients with angina pectoris who experience chest pain and dizziness, OCNT can help relieve symptoms.

Keywords Ortho-Cellular Nutrition Therapy (OCNT), angina pectoris, chest pain, dizziness

Introduction

Angina pectoris is chest pain caused by transient ischemia of the myocardium, occurring when the oxygen supply from the coronary artery does not meet the oxygen demand of the myocardium, which supplies blood to the heart. Angina pectoris symptoms may occur when more than 70% of the coronary artery vessel area is narrowed. Based on its causes, angina pectoris is classified as stable angina, the leading cause of which is arteriosclerosis; unstable angina, which is caused by the formation of plaque or thrombus in atherosclerotic arteries, resulting in poor blood flow; variant angina pectoris (Variant angina), which occurs due to inadequate blood flow due to intermittent spasm of the coronary artery. Back pain squeezing the chest and pressure and tightness in the chest area are contrasting symptoms and usually last for less than 5 to 10 minutes. Strenuous exercise, overwork, low blood sugar, emotional anxiety, and exposure to cold can reduce blood circulation and trigger angina pectoris. In modern medical diagnosis, the basic tests, electrocardiogram, and echocardiography are generally representative methods, and for more accurate confirmation, a cardiac CT scan is performed. In modern medicine, treatment for angina pectoris broadly includes drug treatment, coronary artery dilatation surgery, or coronary artery stent insertion surgery, which is part of

coronary intervention procedures to widen severely stenotic blood vessels. For severe angina pectoris where coronary intervention is not possible, a surgery called coronary artery bypass grafting is performed. For drug treatment, the most effective Nitroglycerin (sublingual tablet) and β -blocker, CCB, ACEI, and ARB drugs are widely used.

Cases

1. Subject

One case of a patient with angina pectoris was studied.

- 1) Name: Ryu ○ ○ (F/63 years old)
- 2) Diagnosis: angina pectoris
- 3) Date of onset: January 2022
- 4) Treatment period: June 2, 2022 ~ December 2022
- 5) Main symptoms: Periodic chest pain, pressure, tightness, palpitations, dizziness (hemorrhage), macular disease (early stage)
- 6) Past history: None
- 7) Social history: None
- 8) Family history: None
- 9) Current medical history and medications taken: angina pectoris, arrhythmia, hyperlipidemia, gastric acid suppressants, propranolol, statin hyperlipidemic drugs, Diltiazem umbilical cord, nitroglycerin (sublingual tablet), ppi agents

2. Method

<1 month>

- Cyaplex-A GRN (101, twice a day, 1 packet each time)
Notoplex (101, twice a day, 1 packet each time)
Eufaplex (101, twice a day, 1 packet each time)
Hemoplex CAP (202, twice a day, 2 pills each time)

*Correspondence: Jongbin Jo

E-mail: jongro3720178@hanmail.net

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Aqua Pure (100, once a day, 1 packet each time)
 Cyaplex Mineral Salt (100, once a day, 1 packet each time)
 Aqua SAC Pure (100, once a day, 1 packet each time)
 Aqua Pure, Cyaplex Mineral Salt, and Aqua SAC Pure were mixed into 1 L of bottled water and consumed 500 ml in the morning and 500 ml in the afternoon.

<2 months>

It was the same as before, and additionally, Caroplex GRN (101, twice a day, 1 packet each time) was recommended.

<3 months>

It was the same as before, and additionally, Magplex CAP (202, twice a day, 2 pills each time) was recommended.

<4~6 months>

The same as before

<7 months>

Cyaplex-A CAP (202, twice a day, 2 pills each time)
 Eufaplex CAP (303, twice a day, 3 pills each time)
 Caroplex GRN (101, twice a day, 1 packet each time)
 Sulfoplex PK (303, twice a day, 3 pills each time)
 Notoplex (101, twice a day, 1 packet each time)
 Collaplex (101, twice a day, 1 packet each time)
 Magplex CAP (202, twice a day, 2 pills each time)

As shown above, OCNT was maintained for about a year, after which the dose was reduced to once a day and maintained.

Results

The present case patient was 160 cm tall, 50 kg in weight, and had a slender build. He frequently felt symptoms of chest tightness while working as a member of a table tennis club. During a regular health checkup, he was diagnosed with angina pectoris due to heart abnormalities and began taking prescribed medication. Afterward, during additional treatment, the number of prescribed medicines increased due to symptoms of hyperlipidemia and hyperacidity. As time went by, he became reluctant to take prescribed medications, so he received an OCNT consultation.

After one month of taking OCNT, dizziness improved, and under the patient's careful judgment, gastric acid inhibitor (PPI) and hyperlipidemic drugs were discontinued. After two months

of taking OCNT, angina pectoris and arrhythmia drugs were gradually reduced, and OCNT was performed by adding Magplex.

After six months of taking the medication, all prescribed medications were discontinued. The patient did not experience chest pain, tightness, or palpitations despite long-term exercise and continues exercising for his health (Table 1).

Discussion

Angina pectoris is a condition in which the coronary arteries are very narrowed by atherosclerotic plaques and do not receive adequate blood supply, that is, ischemia of the heart muscle. Therefore, this study aimed to help patients improve blood circulation and reduce symptoms that cause discomfort in daily life through OCNT.

Consuming aronia extract through Cyaplex-A can help patients with vascular disease by dilating blood vessels and preventing damage to the vascular endothelium caused by ROS.¹ Additionally, the linolenic acid contained in Eufaplex has been reported to regulate blood cholesterol, and in fact, animals that consumed linolenic acid were found to have a low risk of diseases such as arteriosclerosis.² It has been reported that the magnesium contained in Magplex has the function of dilating coronary arteries and helping relieve chest pain in patients with angina pectoris.³ Therefore, intake of aronia extract and linoleic acid may help relax blood vessels in patients with angina pectoris and improve blood circulation, and magnesium supplementation may help relieve chest pain.

A clinical study showed that the Panax ginseng contained in Notoplex prevents blood clots and helps relieve symptoms in patients with ischemic brain disease.⁴ Additionally, folic acid contained in Hemoplex is important for the normal development of red blood cells and can help transport oxygen.⁵ From this perspective, for patients with angina pectoris who feel dizziness due to insufficient blood supply to the brain, Panax ginseng and folic acid can help relieve symptoms.

In addition, the patient was experiencing discomfort in daily life due to dry eyes, and there was a report that the beta-carotene contained in Caroplex helped transport water molecules and maintain the function of corneal endothelial cells.⁶ Therefore, supplying beta-carotene can help relieve

Table 1. The degree of symptoms perceived by the patient during OCNT. A higher score indicates higher discomfort perceived by the patient.

Symptoms/Months	1 month	2 months	3 months	4~6 months	7 months later
Dizziness	4	1	0	0	0
Chest pain	3	2	1	0	0
Palpitations	3	2	1	0	0
Heartburn	3	2	1	0	0
Dry eyes	3	2	1	1	1
Elbow pain	4	2	2	1	1

0: No symptoms; 1: Symptoms are mild and have little effect on daily life; 2: Symptoms are more pronounced but require some adaptation to daily life; 3: Symptoms significantly affect daily life and make it difficult to perform some activities; 4: Great difficulty performing activities of daily living; 5: Feeling uncomfortable in daily life and the resulting stress is severe

patients' dry eye symptoms.

The patient enjoyed playing table tennis but experienced elbow pain after long periods of activity. Supplying the MSM ingredient in Sulfoplex PK for such patients can help relieve symptoms. This is because intake of MSM delays degenerative arthritis, builds bones, and participates in connective tissue formation.⁷

This single case study may not be universally applied to all patients. However, in addition to relieving the symptoms of patients with angina pectoris, OCNT may have helped alleviate symptoms that cause discomfort in daily life, such as dry eyes and joint pain. This case study is reported with the patient's consent.

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