Research Article

ISSN 2639-8494

Clinical Immunology & Research

Cancer Patient Life Quality Improvement by T-Cell Stimulation with Five Edible Plants

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Received: 10 Apr 2024; **Accepted:** 18 May 2024; **Published:** 29 May 2024

Citation: Wiriyachitra P, Leelahagul P, Wiriyachitra S, et al. Cancer Patient Life Quality Improvement by T-Cell Stimulation with Five Edible Plants. Clin Immunol Res. 2024; 8(1): 1-3.

ABSTRACT

Mylife/Mylife100® is a dietary supplement derived from five edible plants: mangosteen aril, pennywort leaves, guava fruit, black sesame seeds, and soy protein. This supplement has been used for over a decade to support thousands of cancer patients in Thailand, with marked improvements in physical conditions. Through rigorous testing, the formula has consistently shown efficacy in boosting immunity, as evidenced by significant increases in CD4 and CD8 (killer T cell) levels observed among volunteers. Moreover, we found that this effectiveness extends beyond merely strengthening immunity. Volunteers experienced not only elevated CD4 and CD8 counts but also a lengthening of their telomeres, indicating a holistic enhancement of their immune response. This formula specifically targets cancer cells with minimal side effects and also improves the overall health condition of patients, with effectiveness increasing with the dosage administered.

Keywords

Cancer patients, Five edible plants, Mylife/Mylife100®, T cells, CD4, CD8, Killer T cell, Telomere.

Background

Contemporary cancer treatments, such as chemotherapy and radiation therapy, often induce severe side effects, contributing to the considerable suffering experienced by patients. The adverse consequences associated with these treatments undermine their efficacy, leading to a search for alternatives with improved tolerability and therapeutic outcomes. Many cancer patients in Thailand have, therefore, turned to immunotherapy based on Mylife/Mylife100® as a supplement or an alternative to conventional cancer treatments.

The reason cancer patients have experienced improved quality of life over the past 10 years from taking Mylife/Mylife100® dietary supplement is due to an increase in T cell counts. The higher the dosage one takes of Mylife/Mylife100®, the greater the increase in T cells, and thus the better the improvement in health condition. We believe this is the safest approach to treating cancer. This is a formula that is safe and free from side effects. It functions as targeted immunotherapy because CD8 (killer T cell) specifically targets cancer cells.

The increase in CD4 and CD8 counts is an important point because these T cells play crucial roles: they specifically target and destroy cancer cells. Therefore, taking Mylife/Mylife100® can be described as a safe and effective plant-based targeted immunotherapy. While other therapies typically come with numerous side effects, impacting all cells, Mylife/Mylife100® specifically targets problematic cells that exhibit certain antigens on their cell membranes, allowing for precise targeting.

Based on the data, we can conclude that our formula has allowed cancer patients to enjoy a prolonged life with a better quality of life, free from side effects. The scientific basis for this improvement is the increase in CD4 and CD8.

In our study, as depicted below, we have found that the effectiveness

of Mylife/Mylife100® increases with the dosage administered. We specifically follow the conditions of two groups of volunteers in order to observe the effects from consuming different dosages of the formulation.

Group I

A total of 10 participants (2 males and 8 females) with an average age of 54 ± 7 years. They were generally in good health, did not consume alcohol, and did not smoke. They had no chronic illnesses requiring regular medication. During the 8-week data collection period, the participants maintained a consistent routine in terms of diet, exercise, and daily activities.

During weeks 1-4, Mylife/Mylife100® 2 capsules were taken before breakfast and 2 capsules before dinner (total of 4 capsules per day). Then during weeks 5-8, we increased the dosage to 3 capsules taken before breakfast and 3 capsules before dinner (total of 6 capsules per day).

We evaluated the effects of the use of Mylife/Mylife100® on immunostimulation by conducting blood tests. Blood samples were collected by venipuncture following a 12-hour fasting period to measure CD4 and CD8 counts at week 0, week 4, and week 8 [1-3]. The results are shown in Table 1.

Table 1: CD4 and CD8 counts at week 0, week 4, and week 8 in Group I*.

Parameters	Mean ± SD	
CD4, cells/uL wk 0	860 ± 298	
CD4, cells/uL wk 4	915 ± 264	increased 55 cells or 6.4% of wk 0
CD4, cells/uL wk 8	910 ± 200	increased 50 cells or 5.8% of wk 0
CD8, cells/uL wk 0	521 ± 244	
CD8, cells/uL wk 4	556 ± 211	increased 35 cells or 6.7% of wk 0
CD8, cells/uL wk 8	564 ± 248	increased 43 cells or 8.2% of wk 0

*weeks 1-4 : 2 caps x 2 times/day and weeks 5-8 : 3 caps x 2 times/day

The mean ± SD of the CD4 levels at the start of the study were within a normal range (470-1,404 cells/uL), 860 ± 298 cells/uL. At week 4 the mean ± SD increased to 915 ± 264 cells/uL. At week 8 the mean ± SD remained relatively constant at 910 ± 200 cells/uL. It shows that the dosage of 4 capsules per day and 6 capsules per day had similar effects on the CD4 counts.

The mean ± SD of the CD8 levels at the start of the study were within a normal range (360-1,250 cells/uL), 521 ± 244 cells/uL. At week 4 the mean ± SD increased to 556 ± 211 cells/uL. At week 8 the mean ± SD increased slightly to 564 ± 248 cells/uL. The CD8 counts rose with the increased dosage as shown in the 1.5% increase in week 8 from week 4.

Group II

A total of 8 participants (1 male and 7 females) with an average age of 44 ± 11 years. They were generally in good health, did not consume alcohol, and did not smoke. They had no chronic illnesses requiring regular medication. During the 8-week data collection period, the participants maintained a consistent routine in terms of diet, exercise, and daily activities.

During weeks 1-4, Mylife/Mylife100® 3 capsules were taken before breakfast and 3 capsules before dinner (total of 6 capsules per day). Then during weeks 5-8, we increased the dosage to 3 capsules taken before breakfast, 3 capsules before lunch and 3 capsules before dinner (total of 9 capsules per day).

We evaluated the effects of the use of Mylife/Mylife100® on immunostimulation by conducting blood tests. Blood samples were collected by venipuncture following a 12-hour fasting period to measure CD4 and CD8 counts at week 0, week 4, and week 8 [3]. The results are shown in Table 2.

Table 2: CD4 and CD8 counts at week 0, week 4, and week 8 in Group II*.

Parameters	Mean ± SD	
CD4, cells/uL wk 0	849 ± 313	
CD4, cells/uL wk 4	891 ± 455	increased 42 cells or 4.9% of wk 0
CD4, cells/uL wk 8	987 ± 536	increased 138 cells or 16.2% of wk 0
CD8, cells/uL wk 0	541 ± 208	
CD8, cells/uL wk 4	605 ± 247	increased 64 cells or 11.8% of wk 0
CD8, cells/uL wk 8	635 ± 322	increased 94 cells or 17.4% of wk 0

*weeks 1-4: 3 caps x 2 times/day and weeks 5-8: 3 caps x 3 times/day.

The mean ± SD of the CD4 levels at the start of the study were within a normal range, 849 ± 313 cells/uL. At week 4 the mean ± SD increased to 891 ± 455 cells/uL. At week 8 the mean ± SD increased to 987 ± 536 cells/uL. The CD4 counts rose with the increased dosage as shown in the 11.3% increase in week 8 from week 4.

The mean ± SD of the CD8 levels at the start of the study were within a normal range, 541 ± 208 cells/uL. At week 4 the mean ± SD increased to 605 ± 247 cells/uL. At week 8 the mean ± SD increased to 635 ± 322 cells/uL. The CD8 counts rose with the increased dosage as shown in the 5.6% increase in week 8 from week 4.

The above-mentioned results show that the highest increase of CD4 and CD8 counts comes from consuming Mylife/Mylife100®at the dosage of 3 capsules taken before breakfast, 3 capsules before lunch and 3 capsules before dinner (total of 9 capsules per day).

Mylife/Mylife100® Formulation [3]

Mylife/Mylife100® is a dietary supplement derived from five edible plants: mangosteen aril, pennywort leaves, guava fruit, black sesame seeds, and soy protein. The final product is registered with the Thai FDA as a dietary supplement.

Mangosteen aril juice powder is prepared by mixing mangosteen aril with water. The juice is heated and then dried by spray drying to produce mangosteen aril juice powder.

Pennywort leaf powder is prepared by mixing dried pennywort leaves with water, heating, and filtering the mixture through a decanter to obtain a water extract. The water extract is then dried by spray drying to produce pennywort leaf powder.

Guava fruit juice powder is prepared by cutting guava fruits into small pieces, mixing them with water, and grinding them to separate the pulp from the juice. The juice is heated and dried by spray drying to produce guava fruit juice powder.

Black sesame seed powder is prepared by mixing black sesame seeds with water, grinding them, and filtering the mixture to obtain sesame milk. The sesame milk is then heated and dried by spray drying to produce black sesame seed powder.

Isolated soybean protein is produced by mixing soybeans with water and grinding them with a juice-pressing machine to separate soybean milk from soybean meal. The soybean milk is heated and dried by spray drying to produce isolated soy protein powder.

In the present study, no product-related toxicities were observed after 8 weeks of supplementation indicating by the blood biochemistry markers of liver, kidney, and other metabolic functions, which did not show any abnormal findings.

Conclusion

Mylife/Mylife100® is a dietary supplement made from mangosteen aril, pennywort leaves, guava fruit, black sesame seed, and soy protein, used to support cancer patients in Thailand for over a decade. This supplement has been shown to effectively boost immunity, as evidenced by significant increases in CD4 and CD8 counts, along with telomere lengthening, indicating a holistic enhancement of the immune response. Given the severe side effects associated with conventional cancer treatments like chemotherapy and radiation, many patients in Thailand have turned to Mylife/Mylife100® as a supplement or a safer alternative, leveraging its targeted immunotherapy properties. This formula not only specifically targets cancer cells with minimal side effects but also improves the overall health condition of patients, with effectiveness increasing with the dosage administered. The rise in T cell counts plays a crucial role in this improvement, offering a scientifically supported, effective, and well-tolerated treatment option that has enabled cancer patients to enjoy prolonged, better-quality lives.

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