

Comparative clinical – laboratory observations

regarding the prophylactic, stimulating and normalizing Effect of the nutrient additive MAOLO on the homeostasis in oncological patients, undergoing chemotherapy and a comparable preparation signified accordingly with the signature SGN.

The product SGN has a composition and form allowing comparative study with MAOLO.

The observation includes patients with colorectal carcinoma, lung carcinoma and mammal gland carcinoma. In the lung carcinoma, only the effect of MAOLO on the hemo-indicators was observed. Tests were run on the laboratory indicators LEUCOCYTES, THROMBOCYTES, HEMOGLOBIN. The observation was performed on the territory of Complex oncological center (COC) – RUSE-EOOD, as for the purpose, the clinical laboratory of the health center was used as well as other external laboratories. 39 (thirty nine) patients were tested for a period of four months /October, November, December 2018 and January 2019/.

The following results were reported by nosological units:

Colorectal carcinoma with applying MAOLO

11 (eleven) patients studied.

Initial dose of the intake – three times one capsule during feeding. In seven of the patients, the dose of MAOLO was increased to three times two capsules during feeding (maximal dose) due to appearance of bone marrow toxicity after chemotherapy course undergone. The studied hemo-indicators after the intake of MAOLO in maximal dose, three times two capsules, in seven of the patients were normalized or reached values that did not require the use of colony stimulating factors, transfusion of whole blood or thrombocyte mass as the chemotherapy was not delayed and proceeded within schedule.

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Colorectal carcinoma with the application of SGN

Studied 8 (eight) patients.

Dose of intake – three time two capsules during feeding. During the tracing, in one patient, SGN needed to be replaced with MAOLO in maximal dose of 3 x 2 capsules, due to registered bone marrow toxicity. After the replacement of SGN with MAOLO, the studied hemo-indicators were normalized and reached values which prevented the occurrence of complications requiring the use of colon stimulating factors, transfusion of whole blood or thrombocyte mass, as the chemotherapy was not delayed and continued within schedule. It makes an impression that in the rest 7 patients the intake of SGN in a dose of 3 x 2 capsules a day, does not essentially affect the hematopoiesis as some of the studied three rows of bone marrow hemo-indicators are below the reference values or on the level of the lower reference limits. The chemotherapy undergone was not delayed however the risk of complications remained significantly higher as a result of induced bone marrow toxicity that could necessitate interruption of the chemotherapeutic treatment.

Lung carcinoma with application of MAOLO

Studied 7 (seven) patients

Dose of intake – three times one capsule during feeding. During the observation in 5 (five) patients, after the chemotherapy undergone, a progressive bone marrow toxicity was registered and an intake of MAOLO was required in maximal dose of 3 x 2 capsules. After the correction of the dose of MAOLO and the three bone marrow rows the hemo-indicators reached values which prevented the application of colon stimulating factors, the transfusion of whole blood or thrombocyte mass and the chemotherapy continued within schedule with no delay.

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Mammal gland carcinoma with application of MAOLO

Studied 4 (four) patients

The initial dose of intake was three times a day one capsule, during feeding. During the observation in four patients, after the chemotherapy undergone, progressive bone marrow toxicity was registered and MAOLO needed to be taken in maximal dose of 3 x 2 capsules. After the increase of the dose the observed three rows of hemo-indicators reached values which allowed the performing of chemotherapy with no delay.

Mammal gland carcinoma with application of SGN

Studied 9 (nine) patients

Dose of initial intake – three times of two capsules during feeding. During the observation in five patients we had to continue instead of SGN with MAOLO in the maximal dose of 3 x 2 capsules due to persisting bone marrow toxicity after chemotherapy performed and risk of complications. The applying of MAOLO in the maximal dose of 3 x 2 capsules normalized the hemo-indicators which allowed the continuation of the chemotherapy without interruption within schedule.

In the rest four patients the intake of SGN in dose (three) times of two capsules did not essentially affect the hemopoiesis. In three of the studied patients the hemoglobin fell below the lower limit values and in one patient, except for the hemoglobin, the leucocytes were below the reference limits. The chemotherapy performed even not delayed, induced significantly a risk for complications as a result of bone marrow toxicity which SGN prevented with very low intensity.

CONCLUSIONS:

MAOLO

The comparative observation displayed that the product with the original name of MAOLO, we deem is the effective nutrient additive which, applied in cytotoxic chemotherapy, prevents the bone marrow toxicity and normalizes simultaneously and separately the observed hemo-indicators – leucocytes, thrombocytes and hemoglobin. The nutrient additive prevents the use of

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colon stimulating factors, transfusion of whole blood or thrombocyte mass aiming the treatment of the cytotoxic complications and does not allow the interruption of the planned chemotherapy. MAOLO has, besides the normalizing effect against the hemo-indicators – leucocytes, thrombocytes and hemoglobin, also economic effect by prevention of the occurrence of complications serious to the patient on behalf of the hemopoiesis and delaying the application of expensive medications for their treatment (colon stimulating factors, blood transfusion, thrombocyte extract transfusion antibiotics, etc.)

SGN

The comparative observation displays that the product SGN does not have as preventive, stimulating and normalizing effect on the hemopoiesis as the original MAOLO. The frequent need to switch from SGN to MAOLO in the follow up of the patients tested by us in view of the control of the bone marrow toxicity induced by the chemotherapy and the prevention of serious complications displays the high preventative and normalizing the hemo-indicators effectiveness of MAOLO compared to SGN.

Regardless of the identical composition and form of the product SGN, the unsatisfactory comparative clinical result of it is probably due to the use of technology for its production other than the one used in the original MAOLO.

As a conclusion, MAOLO is the more effective nutrient additive with its results proven with laboratory tests and clinical observations for prevention and control of the bone marrow toxicity induced by the cytotoxic chemotherapy and normalization simultaneously and separately of the three bone marrow rows – leucocytes, thrombocytes and hemoglobin.

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