Effective Management of Antral Gastritis and Duodenal ulcer in Type 2 Diabetes Patient with Ozone Therapy: A Case Report

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Abstract:

**Background:** Antral gastritis with erosions and duodenal ulcer is a prevalent gastrointestinal condition, often complicated by H. pylori infection, insulin resistance, and endocrine dysfunction. Integrative therapies combining conventional and alternative treatments are increasingly explored to manage such complex cases.

**Case Presentation:** A 60-year-old female with an eight-year history of mucus regurgitation with blood, epigastric pain, disturbed sleep, and a fear of cancer presented to Nulife Wellness Centre. She was diagnosed with antral gastritis with erosions, D1 ulcer-Forrest type III, H. pylori positive, insulin resistance, and Type 2 diabetes mellitus. Despite previous allopathic treatment for H. pylori, she continued to experience symptoms. An integrative treatment regimen including medical ozone therapy, Myers’ cocktail, vitamin C infusions, Detox IV, glutathione injections, and various supplements was initiated. After three months, significant improvements in symptoms and clinical parameters were observed, including reduced epigastric pain, better sleep, and decreased fear of cancer. Her inflammatory markers, liver enzymes, and glycemic control also showed marked improvement.

**Conclusion:** The integrative treatment approach effectively alleviated the patient’s symptoms and improved her clinical parameters, highlighting the potential benefits of combining conventional and alternative therapies in managing complex, chronic gastrointestinal conditions.

**Keywords:** Antral gastritis, Duodenal ulcer, H. pylori, Insulin resistance, Integrative therapy, Medical ozone therapy, Myers' cocktail, Vitamin C infusion, Type 2 diabetes mellitus.

Introduction

Chronic antral gastritis and duodenal ulcers are common gastrointestinal disorders that can significantly impact a patient's quality of life. Duodenal ulcer patients are known to have higher incidence of antral gastritis and duodentitis than general population. Antral gastritis involves inflammation of the stomach lining, often accompanied by erosions, leading to symptoms such as epigastric pain and mucus regurgitation. The antrum is the lower portion of the stomach, situated near the pylorus, where it connects to the duodenum. Duodenal ulcers, particularly those classified as Forrest type III, represent a stable condition characterized by lesions without signs of recent hemorrhage but still require careful management to prevent complications.

This case report presents a 60-year-old female patient with a complex medical history, including chronic antral gastritis with erosions, a duodenal ulcer, H. pylori infection, insulin resistance, and Type 2 diabetes mellitus. Despite previous allopathic treatment for H. pylori, the patient continued to experience significant symptoms such as regurgitation of mucus with blood, persistent epigastric pain, disturbed sleep, and an ongoing fear of cancer. These symptoms, coupled with her endocrine dysfunction and diabetes, posed a significant challenge for effective management.

Given the chronic nature of her gastrointestinal conditions and the additional complexities of her metabolic and endocrine disorders, a comprehensive integrative treatment approach was adopted. This included medical
ozone therapy, Myers’ cocktail, vitamin C infusions, Detox IV, glutathione injections, and a variety of supplements aimed at addressing her multifaceted health issues.

Case Presentation

Patient Profile:

A 60-year-old female with a history of regurgitation of mucus with blood for eight years, epigastric pain, disturbed sleep, and a fear of cancer, presented to Nulife Wellness Centre in Pollachi. She was diagnosed with antral gastritis with erosions, D1 ulcer-Forrest type III, H. pylori positive, insulin resistance, and endocrine dysfunction. Additionally, she has been managing Type 2 diabetes mellitus since 2018. Her vital signs at admission included a blood pressure of 140/90 mm Hg, a pulse rate of 90 beats per minute, and an oxygen saturation level of 98%. She weighed 67.4 kg.

The patient had previously undergone allopathic treatment for H. pylori infection. Apart from her diabetes, she had no significant intrinsic or extrinsic factors affecting pharmacokinetics. Her ongoing treatment included medical ozone therapy, Myers’ cocktail, low dose Vitamin C infusion, Detox IV, glutathione injection, and a variety of supplements.

Her duodenal ulcer was classified as Forrest type III, indicating a stable condition with no active bleeding. This classification guides treatment decisions and suggests a lower risk of rebleeding, allowing focus on managing underlying causes and promoting healing. The patient previously received a two-week course of allopathic treatment for H. pylori infection. She had no significant intrinsic or extrinsic factors affecting pharmacokinetics beyond her diabetes.

The patient underwent several therapies and supplementations, including low-dose Vitamin C infusion, Meyers’ Cocktail, and various forms of medical ozone therapy.

Ongoing Treatments:

Low Dose Vitamin C Infusion was administered intravenously at a dosage of 17 to 22.5 grams every 15 days. The mechanism of action involves Vitamin C acting as a pro-oxidant, generating hydrogen peroxide, which selectively kills cancer cells and supports the immune system while reducing inflammation. This therapy was intended to boost the patient’s immune response and combat cancer cells.

Meyers’ Cocktail This intravenous therapy comprises magnesium, calcium, B vitamins, and vitamin C, designed to boost immune function, increase energy levels, and aid in the recovery from illnesses. The combination of these nutrients helps in addressing nutritional deficiencies and supports overall health.

Detox IV: These therapies aim to enhance the body’s detoxification processes. Detox IV includes Chelation Sodium EDTA and Magnesium chloride, administered weekly once thereby improving hepatic function and fostering comprehensive detoxification.

Glutathione Injections: Administered weekly at a dose of 600 mg, glutathione is a powerful antioxidant that aids in detoxification and enhances skin health.

Medical Ozone Therapy and its Method of Administration:

Major Autohemotherapy (MAHT) was administered weekly once. In this procedure, blood is drawn, mixed with ozone, and then reinfused into the patient. Ozone induces the release of growth factors that promote the regeneration of damaged tissues.

Rectal Insufflation: Ozone gas is administered rectally to facilitate absorption through the intestinal wall, thereby promoting hepatic flushing initially given daily for 21 days and then monthly once.

The mechanism of action for ozone therapy involves ozone gas (O3) which modulates the immune system by stimulating the production of cytokines and enhancing the oxidative stress response, which helps in the destruction of pathogens and cancer cells. The effects of ozone on macrophages, T cells, B cells, NK cells, and dendritic cells can be used in the treatment of infectious diseases, autoimmune disorders, and cancer immunotherapy.
Supplements:

Milk Liv: For liver support.

Chrompic (chromium picolinate): For blood sugar regulation.

Dia Care: For diabetes management.

Gastric Aid: For gastric symptom management.

Betaine HCL: To enhance digestion by increasing stomach acid.

Clinical Laboratory Test Results:

The following table presents the laboratory test results before and after the treatment:

<table>
<thead>
<tr>
<th>Test Parameter</th>
<th>Pre-Therapy</th>
<th>Post-Therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td>CRP (mg/L)</td>
<td>3.6</td>
<td>2.7</td>
</tr>
<tr>
<td>Ferritin (ng/mL)</td>
<td>285.1</td>
<td>97.4</td>
</tr>
<tr>
<td>D-Dimer (ng/mL)</td>
<td>465</td>
<td>419</td>
</tr>
<tr>
<td>Blood sugar Fasting (mg/dL)</td>
<td>187.1</td>
<td>134.8</td>
</tr>
<tr>
<td>Blood sugar PP (mg/dL)</td>
<td>191.4</td>
<td>140.6</td>
</tr>
<tr>
<td>HbA1C (%)</td>
<td>7.9</td>
<td>6.8</td>
</tr>
<tr>
<td>Cortisol AM (µg/dL)</td>
<td>10.03</td>
<td>11.22</td>
</tr>
<tr>
<td>25 OHD (ng/mL)</td>
<td>19.1</td>
<td>37.1</td>
</tr>
<tr>
<td>SGOT (U/L)</td>
<td>124.10</td>
<td>57.24</td>
</tr>
<tr>
<td>SGPT (U/L)</td>
<td>109.50</td>
<td>68.35</td>
</tr>
<tr>
<td>GGT (U/L)</td>
<td>114</td>
<td>64.6</td>
</tr>
<tr>
<td>Insulin PP (µIU/mL)</td>
<td>157.40</td>
<td>96.05</td>
</tr>
</tbody>
</table>

After three months of treatment, the patient showed significant improvement in her symptoms and clinical parameters. The regurgitation, epigastric pain, and disturbed sleep improved considerably, leading to a reduction in her fear of cancer. Her inflammatory markers, liver enzymes, blood glucose levels, and insulin resistance showed marked improvement. The treatment plan now focuses on monthly follow-ups to monitor and maintain her progress. Lab results confirmed reduced inflammation and better metabolic control, reflecting the positive response to therapy.

Discussion

The patient's case demonstrates significant improvements in her symptoms and clinical parameters following a combination of alternative therapies, including medical ozone therapy, Myers' cocktail, and various supplementations. The integrative approach effectively addressed her chronic epigastric pain, disturbed sleep, and fear of cancer, alongside improvements in inflammatory markers and glycemic control. However, limitations include the absence of a control group to compare the efficacy of the treatments and the potential placebo effect. Additionally, the long-term effects and safety of some alternative therapies remain under-researched, necessitating cautious interpretation and further studies. Regular follow-ups are essential to monitor her ongoing progress and manage any potential adverse effects.
Conclusion

In conclusion, the integrative treatment approach at Nulife Wellness Centre, which included medical ozone therapy, Myers' cocktail, vitamin C infusions, and targeted supplements, resulted in remarkable improvements for the patient. Her symptoms of epigastric pain, sleep disturbances, and fear of cancer significantly diminished, and her clinical parameters, including inflammatory and glycemic markers, showed substantial enhancement. This case underscores the potential effectiveness of combining conventional and alternative therapies in managing complex, chronic health conditions, leading to a holistic improvement in the patient's well-being.

List of Abbreviations:

CRP: C-Reactive Protein
Blood sugar PP (mg/dL): Postprandial Blood Glucose
HbA1C (%): Glycated Hemoglobin
Cortisol AM (µg/dL): Morning Cortisol
25 OHD (ng/mL): 25-Hydroxyvitamin D
SGOT (U/L): Serum Glutamic-Oxaloacetic Transaminase (Aspartate Aminotransferase, AST)
SGPT (U/L): Serum Glutamic-Pyruvic Transaminase (Alanine Aminotransferase, ALT)
GGT (U/L): Gamma-Glutamyl Transferase
Insulin PP (µIU/mL): Postprandial Insulin

Declaration:

All activities performed on the subject in this case report were conducted in accordance with Good Clinical Practice (GCP) guidelines and under the supervision of a qualified physician. The therapeutic interventions, including Medical Ozone therapy, Myers' cocktail, vitamin C infusions, and the administration of natural supplements, were carried out with the informed consent of the patient and under the direct guidance of Dr. Arul Kandaswamy at Nulife wellness centre. The patient's treatment plan and subsequent follow-ups adhered strictly to ethical standards and clinical protocols to ensure patient safety and the validity of the observed outcomes.

References