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Case Report

AHCC® in Sjögren's Disease: One Bold Therapeutic Hypothesis

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Abstract

The authors report a case of one old female patient with Sjögren´s Syndrome, correlating the clinical course with nine females suffering from the same clinical condition. All effectively responded to AHCC® supplement use. In the light of this experience, its routine application is proposed, within the context of a bold hypothesis concerning Sjögren's Syndrome.

Keywords: *AHCC® in Sjögren's Syndrome; AHCC® Immune Supplement; Sjögren's Syndrome; Women in Sjögren's Syndrome; Primary Sjögren Syndrome; Outcome Measures; Review*

Introduction

Sjögren's Syndrome is the prototypic disease related with mucosal dryness, and in correlated diseases, such as Idiopathic Sicca Syndrome, Drug-induced Sicca Syndrome, Sarcoidosis, Granulomatosis with Polyangeitis, Chronic Hepatitis C.

Case Report

84 years old female patient, in bad clinical state, presenting severe malnutrition, continuously advancing in the last eight months, including weight loss, depression, insomnia, slow intestinal transit, no appetite, dry eyes, dry mouth, swallowing difficulty, weakness, and difficulty to move around. Previously a feeding gastrostomy was performed, to administer enteral nutrition, without improvement. At our initial visit to her home, in another city (November 2012), she was prostrated, with evident signs of malnutrition, and strong halitosis, complaining of weakness, malaise, no appetite, fatigue, bad digestion and depression. According to her daughter it started, eight months before. At her physical examination was observed a frail woman, with depressed intercostal spaces, almost absent subcutaneous tissue, prominent bones, exaggerated skin folds, as well as dry and atrophic tongue. She was unable to stand without help. Weight was 36 kg, height 160 cm and BMI 14.06 kg/m^2. Sjögren´s Syndrome was suspected and confirmed by complementary tests.

Her relatives, as well as the physicians who previously took care of her, were openly pessimistic, since all prescribed treatments so far had failed, including enteral nutrition by gastrostomy.

Biochemical tests and salivary scintigraphy were consistent with the hypothesis of Sjögren´s Syndrome, along with concomitant hypothyroidism. Treatment since November 2012 focused all her clinical requirements, plus AHCC® (Active Hexose Correlated Compound®)

one gram 3 times a day. Her evolution was smooth and highly rewarding. In less than one month she had clinical improvement with production tears, and tongue humidity. Gradually she regained food taste, mood improvement, less fatigue, and capacity for short walks inside her home (no more inability to stand). In April 2013 her weight was 50 kg (BMI of 19.5), and in June 2014 her weight reached 55 kg (BMI 21.5). The cascade of favorable clinical events was sparked after the AHCC® use. At present, 89 years old, she's well without Sjögren's Syndrome symptoms, continuing the AHCC® use.

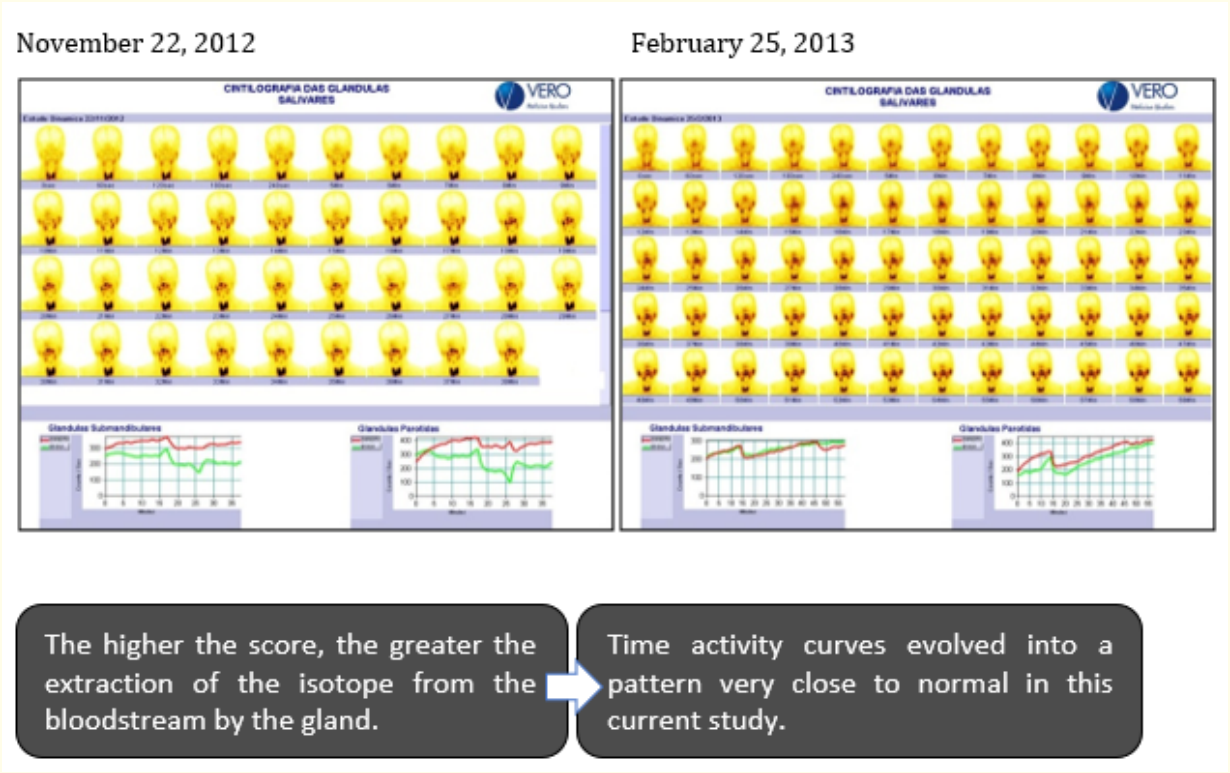

Figure 1

Additional series

In the meantime, nine more female patients were diagnosed with Sjögren´s Syndrome and submitted to the same protocol. All of them positively responded to the AHCC®, without illness evidence. Given the younger age bracket, these patients in pre and perimenopausal period had one more complaint in common, namely severe vaginal dryness, beyond the usual pattern of women with sexual hormonal deficiency. All of them showed dry eyes, dry tongue, difficulty to swallow, slow intestinal transit, mental depression, and insomnia. They invariably classified their lives as miserable, unhappy, stripped of hope and optimism. The profile was reversed and continues favorable till the moment.

One of these patients, SMWL, 67 years old with Sjögren's Syndrome, is sustaining her clinical improvement, and disappearance of symptoms in three years of treatment with the AHCC® supplement. Her scintigraphy images are shown below.

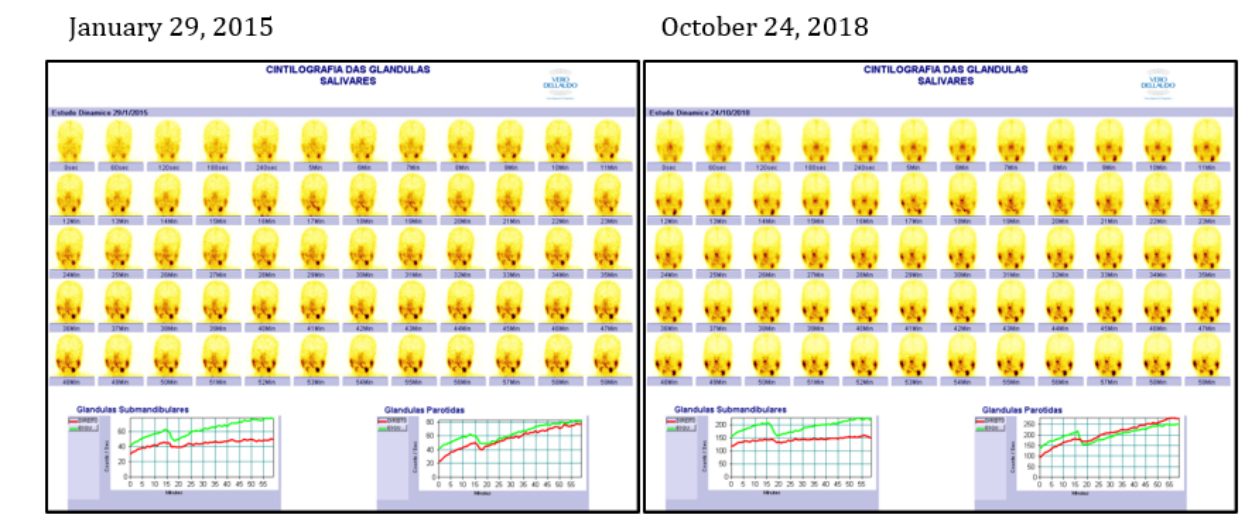

Figure 2

Discussion

Clinical manifestations, like dry eye and dry mouth symptoms are each reported by up 30% of persons more than 65 years of age, particularly in women.

Sjögren's Syndrome is the prototypic disease related with mucosal dryness, and in correlated diseases, such as Idiopathic Sicca Syndrome, Drug-induced Sicca Syndrome, Sarcoidosis, Granulomatosis with Polyangeitis, Chronic Hepatitis C.

These situations offer problematic evolutionary course with poor response, inconclusive or contradictory results in treatments when using drugs to rheumatic diseases.

Conclusion

Ten female patients with Sjögren's disease were treated with AHCC®. All presented sustained positive response, with disappearance of their complaints, restoring their quality of life (QOL).

AHCC® is a non-absorbable phytotherapeutic agent. Similarly, to inulin and FOS, it can act as a prebiotic; however in parallel it exerts a distinguished pleiotropic, singular array of actions. AHCC® has polysaccharides (alpha-glucans, beta-glucans and activated hemicellulose), glycoproteins, and amino acids. Particularly rich in alpha-glucans (important nutrients), it boasts an active component of acetylated alpha-glucans that possess attributed capacity to enhance the immune system. Alpha-glucans are low molecular weight (under 5000 Daltons) structures and increase the efficiency of nutrient assimilation and utilization by the GI tract, as well as by cells of the immune system, strengthening immune defense. Much more is absorbed and used than eliminated [1-10].

According to the reported clinical experience, one daring question arises: Is AHCC® supplement endowed with specificities for Sjögren's Syndrome treatment?

Further studies seem warranted.

Ethical Approval

This study received approval of the Ethic Committee of Fatima's Faculty/Caxias do Sul/RS- Brazil.

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