# Oral Intake of Melatonin Hormone Could Influence the Thymus Gland for Producing the Proper Antibodies

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### Abstract

Oral intake of melatonin hormone to patients with calcified pineal gland in order to influence the thymus gland for producing the proper antibodies to destroy from the patients from the various foreign organisms.

Keywords: Melatonin Hormone; Thymus Gland; Antibodies

Previous paper [1] it was stated that the pineal gland (PG), if is not calcified exert as regulator action, with the release of the melatonin hormone, in many brain centers and especially in the thymus gland. The thymus gland is the development of the white blood cells called T cells which help to protect the human body against infection by foreign organisms by the five immunoglobulins actions [2]. However, the PG most of the time is calcified, by various external effects, and that reflects the decreased of its secretory activity as it can stated in our previous paper [1]. Thus, in our previous studies to overcome the problem of calcification we have developed an electronic device [3] in order to decalcified the PG in order to release the melatonin hormone.

To avoid to use the electronic device for decalcification of the PG, for the production of melatonin hormone, we can use melatonin which is available as a supplement, typically as an oral tablet. Once melatonin enters the blood then it absorbs from choroid plexus into cerebrospinal fluid and from there to the different brain centers as it was stated in our previous paper [1] and especially to thymus gland. The thymus gland with the development of the T cells help to protect our human body from foreign organisms by the production of the five immunoglobulins [2] which are called antibodies and which are glycoproteins molecules which are important part of our immune system and are responsible for fighting foreign organisms generally.

These antibodies [2] abbreviated as 'Ig', help to destroy foreign organisms.

These antibodies, according to [2], can also be separated into constant C and variable (V) portions. The C portions act in all or most of Ig's, while the V portions which are proteins act in particular bacteria or virus.

As we have stated in our previous paper [1] by examining each one of the Ig's it can be found that the IgA accounts for the 15% of the antibodies in the human system and only 6% is found in the blood serum and has half-life of five days and a total of four sites which are called also epitope binding sites that triggers an immune reaction [2].

The IgD is the rarest of the five Ig's making up approximately 0.2% of the serum antibodies and has two epitope-binding sites [2].

The IgE accounts for only about 0.002% of serum antibody from all Ig's and it plays a vital role in the immune response by having two binding sites and short half-life of two days. It takes part in multicellular invaders [2].

The IgG is the dominant antibody in the human body, accounting for the 85% of all Ig's and has half-life of seven to 23 days. It exists as a monomer. It was found chiefly in the blood and lymph.

It has the unique ability to cross placenta in pregnant women, allowing it to protect the unborn fetus and newborn baby.

It has also the ability to neutralizing toxins, inactivating viruses and killing bacteria. All of the above give to IgG to be prevalent in the system [2].

Finally, the IgM is the colossus of the Ig's. It exists as a group of five bound IgM monomers. It has a short half-life about five days and makes up approximately 13% - 15% of serum antibodies. It has 10 epitope-binding sites making it fierce adversary. The IgM is the most efficient type of antibody that our body produce by the age of nine months provided that the PG is not calcified and it's function regulate properly the thymus gland [2].

From the above it can be seen that among of the 5 Ig's important are the IgG and the IgM in terms of the half-life, their percentage in the plasma serum antibodies for neutralizing toxins, activating viruses, killing bacteria and their epitope-binding sites.

All these depend on the regulation of the PG to the thymus gland function. This regulation depends from the calcification of the PG which is reducing melatonin secretion. To overcome this problem of PG calcification and of using weak external magnetic fields we can use, as we have stated above, oral melatonin intake tablets which are available in professional labs.

#### Conclusion

Thus, from the above it is possible by having a Computing Tomography (CT) scan from each examining human subject we can see if their PG is calcified and then, instead of using weak magnetic fields for decalcification of their PG in order to increase their melatonin secretory activity we can use melatonin which is available as a supplement, typically as an oral tablet. In this way the thymus gland by producing the proper Ig's antibodies especially the IgM and IgG can destroy from the subjects all the various foreign organisms.

### Bibliography

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