

Lifestyle, Aging And The Immune and Detoxification Systems

A Research Report

by

Dr. James Meschino, D.C., M.S., N.D.

~ **Research and Clinical Director of the RenaiSanté Institute of Integrative Medicine** ~

Studies indicate that a strong immune system is a key factor in preventing cancer and reducing susceptibility to infection by viruses, bacteria and other microorganisms. As well, the ability to effectively neutralize various toxins and other contaminants through a sound functioning detoxification system is also vital to long term survival and the expression of optimal health. In today's world we are exposed to an increasing number of pollutants and contaminants in our air, water and food, which places an increased demand upon the intestine and liver's detoxification systems. Making matters worse, studies demonstrate that our immune and detoxification systems become weaker and more sluggish as we age, increasing our susceptibility to more virulent infections (e.g., Pneumonia) and cumulative liver damage. (1,2) For these reasons, we should strive to optimize our immune and detoxification capabilities throughout our lifetime by implementing the following nutrition and supplementation practices:

The first and most obvious step is to avoid known damaging agents and carcinogens as much as possible (eg. Cigarette smoke, nitrosamines, excess alcohol etc).The second step involves following a healthy, low fat diet, rich in the phytonutrients, that enhance detoxification and immune function (fruits, vegetable, peas, beans, soy products, onions, garlic and cruciferous vegetables — broccoli, brussell sprouts, cabbage and cauliflower). (1,2)

Supplementation with antioxidant vitamins and minerals has also been shown to help maintain and rejuvenate the immune and detoxification systems as we age. (3–25) Thus, using a high potency multi-vitamin and mineral that provides 500-1000 mg of Vitamin C, 200-400I.U. of Vitamin E, 10,000 to 25,000 I.U. of Beta-Carotene, 100-200 mcg of selenium and 15-25 mg of zinc, should be considered by all adults.

Herbal Power For Immune And Detoxification Support

In addition to the preceding nutrition and supplementation considerations there are several herbal agents that exhibit incredible and unmatched ability to boost the function of the body's immune and detoxification systems. These primarily include the standardized grades of astragalus, reishi mushroom extract, milk thistle and indole-3-carbinols. A daily combination formula of these four botanicals works synergistically to boost and support the body's immune and detoxification systems (unlike Echinacea, which should not be taken daily over long periods). (26) Working together, these four herbal substances can significantly help our bodies cope with the ever-increasing load of environmental chemicals, strengthen the immune system, and help combat and reverse many of the age-related changes that weaken our immune and detoxification systems. The following is a brief description of how these four remarkable herbal supplements work to defend our health:

A. Astragalus And Reishi Mushroom Extract — *The Immune Boosters*

Astragalus, in Chinese medicine, has been studied extensively in laboratory investigations and human trials, primarily for its immune-enhancing effects. It is often prescribed for the common cold, but taken on a daily basis, can help keep the immune system functioning at more peak levels throughout the year. Specifically, **astragalus** supplementation has been shown to significantly increase the production of T- lymphocytes, which destroy harmful viruses that may otherwise cause infections. **Astragalus** also boosts immune function by stimulating the release of interferon and interleukin-2, two powerful signaling agents that enhance the effectiveness of immune cells. In fact, due to its powerful immune-stimulating

effects, interferon is now used to treat some cancers (e.g., melanoma). **Astragalus** supplementation also increases natural killer cell cytotoxicity (ability of these white blood cells to destroy developing cancer cells, viruses and other pathogens) and triggers the secretion of other immune-modifying chemicals (e.g., tumor necrosis factor) that boost the efficiency of the immune system in general. As such, many researchers have published studies showing that **astragalus** has significant anti-viral effects.

In China, **astragalus** has also been used in clinical studies with cancer patients and in patients with weakened immune system function (due to disease, chemotherapy drugs or radiation treatment) and has been shown to significantly increase the number of circulating white blood cells (WBC), in patients who previously demonstrated very low WBC counts (leukopenia). White blood cells are the principle immune system cells that defend us against infections and even cancer to certain degree. There is no doubt that astragalus is a proven immune-strengthening supplement. (27–41)

- B. Reishi Mushroom Extract** is classified as a super herb in China's Pharmacopoeia. It, too, can be taken daily to support immune function, while therapeutic doses are prescribed to reduce the side effects of chemotherapy and radiation treatment. Reishi mushrooms contain unique triterpenes and polysaccharides that are proven to increase the release of signaling agents (cytokines) that boost immune function (interleukin-1, tumor necrosis factor-alpha, interleukin-6, interferon) and increase the germ-killing activity (phagocytosis) of immune cells. In Japan, these active constituents are patented for use as immune boosters (modulators) and prescribed for patients with weakened immune systems, hepatitis and other conditions. (42–50)

Together, **astragalus** and **reishi mushroom extract** are a potent combination that can help strengthen immune function, beyond which can be achieved from a healthy diet alone. Daily supplementation of these herbs can be used to help optimize immune function throughout our lifetime.

C. Milk Thistle And Indole-3-Carbinols — *The Super-Detoxifiers*

Milk Thistle is unique in the world of herbal medicine due to its flavonoid known as silymarin, which has a proven ability to protect the liver from many environmental toxins, contaminants and microorganisms. It's so effective that milk thistle is used as a treatment to repair liver damage caused by drug-toxicity (e.g., acetaminophen, alcohol, phenothiazines, butyrphenones), acute and chronic viral hepatitis and cirrhosis. (51,52)

In the body, the liver is the primary filtration and detoxification center, representing about 75% of all detoxification reactions. In the modern world, our liver is exposed each day to copious amounts of pesticides, herbicides, food additives, artificial sweeteners, bacteria, end products of metabolism, and possibly medicinal drugs and/or alcohol. Every minute of our lives, 2 quarts of blood pass through the liver where highly specialized cells destroy any bacteria and detoxify potentially damaging substances that may otherwise threaten our health. However, with repeated daily exposure to various food and environmental chemicals, and the aging process itself, liver cells can become damaged and less efficient, resulting in a decreased capacity to perform these vital functions. Once compromised, we become increasingly susceptible to chronic illnesses, reduced immune functioning and toxic overload conditions. (2) This is why **milk thistle** should be considered for daily use. The silymarin content of **milk thistle** is known to protect liver cells from many types of environmental toxins, drugs and alcohol. It enhances detoxification by increasing liver glutathione levels (an essential element for detoxification and optimal immune function) and has been shown to repair liver cells that have been damaged by various toxins, drugs and infections. (e.g., hepatitis) (53–62)

- D.** Working in conjunction with milk thistle, **indole-3-carbinols** (the active constituents found in cruciferous vegetables) are also known to boost the body's detoxification system by stimulating both the Phase I and Phases II detoxification enzyme systems. In fact, individuals who consume generous amounts of foods containing **indole-3-carbinols** have been shown to have superior liver detoxification function and a marked reduction in cancer risk over their lifetime. Numerous animal studies also demonstrate that **indole-3-carbinols** significantly enhance detoxification and exert important anti-cancer effects. (63 –77)

Thus, beyond a healthy diet and antioxidant support, daily supplementation with these four herbal agents can be used to boost and support our immune and detoxification systems throughout our lifetime, and this translates into improved well being and better protection against a number of degenerative diseases.

Speak to your practitioner about how the *Immuno-Detox Prime* (Nutra Therapeutics) supplement or similar product may benefit you.

References

1. Reavley, N. The New Encyclopedia of Vitamins, Minerals, Supplements and Herbs. Evans, M. and Company, Inc. – Publishers, 1998: Immunity: 422-429, Older People: 454-464
2. Pizzorno, J. Total Wellness. Prima Publishing, 1996: Strengthening Your Immune System: 29-86; Decreasing Toxicity: 87-162
3. Bodgen, J.D., et al. Daily micronutrient supplements enhance delayed hypersensitivity-skin test responses in older people. *Am J Clin Nutr.*, 1994 Sep, 60:3, 437-47
4. Chandra, R.K. Effect of vitamin and trace element supplementation on immune responses and infection in elderly subjects. *Lancet.* 1992; Nov 7, 340:8828, 1124-7
5. Bendich, A. Physiological role of antioxidants in the immune system. *J Dairy Sci.* 1993 Sep, 76:9, 2789-2794
6. Penn, N.D., et al. The effect of dietary supplementation with vitamins A, C and E on cell-mediated immune function in elderly long-stay patients; a randomized controlled trial. *Age Ageing*, 1991; May 20: 3 (169-74)
7. Arrieta, A.C., et al. Vitamin A levels in children with measles in Long Beach, California. *J Pediatr.* 1992; July, 121:1 (75-8)
8. Glaxiou, P., Mackerras, D. Vitamin A supplementation in infectious diseases. *Br Med J* 1993; 306: 366-370
9. Hughes, D.A., et al. The effect of beta-carotene supplementation on the immune function of blood monocytes from healthy male nonsmokers. *J Lab Clin Med*, 1997; Mar 129:3 (309-17)
10. Pfitzenmeyer, P, et al. Vitamin B6 and vitamin C status in elderly patients with infections during hospitalization. *Ann Nutr Metab.* 1997; 41: 6 (344-52)
11. Hunt, C, et al. The clinical effects of vitamin C supplementation in elderly hospitalized patients with acute respiratory infections. *Int J Vitam Nutr Res.*, 1994; 64: 3 (212-219)
12. Heuser, G., Vojdani, A. Enhancement of natural killer cell activity and T and B cell function by buffered vitamin C in patients exposed to toxic chemicals; the role of protein kinase-C. *Immunopharmacol Immunotoxicol*, 1997; Aug, 19:3 (291-312)
13. Hemilia, H. Vitamin C supplementation and common cold symptoms: problems with inaccurate reviews. *Nutrition*, 1996; Nov 12: 11-12 (804-809)
14. Meydani, S.N., et al. Vitamin E supplementation and in vivo immune response in healthy elderly subjects. A randomized controlled trial. *JAMA*, 1997; May 277: 17 (1380-1386)
15. Rall, I.C., Meydani, S.N. Vitamin B6 and immune competence. *Nutr Rev*, 1993; Aug, 51: 8 (217-225)
16. Fata, F.T., et al. Impaired antibody responses to pneumococcal polysaccharide in elderly patients with low serum vitamin B12 levels. *Am Intern Med*, 1996; Feb. 124:3 (299-304)
17. Báez-Saldaña, A, et al. Biotin deficiency induces changes in subpopulations of spleen lymphocytes in mice. *Am J Clin Nutr* 1998; 67: 431-7
18. Komar, V.I.. The use of pantothenic acid preparations in treating patients with viral hepatitis A. *Ter Arkh*, 1991; 63:11 (35-60)
19. Cakman, I, et al. Zinc supplementation reconstitutes the production of interferon-alpha by leukocytes from elderly persons. *J Interferon Cytokine Res*, 1997; Aug, 17: 8 (469-72)
20. Bogden, J.D., et al. *J Am Coll Nutr*, 1990; Jun 9:3 (214-25)
21. Fortes, C., et al: The effect of zinc and vitamin A supplementation on immune response in an older population *J Am Geriatr Soc*, 1998; Jan, 46:1 (19-26)

22. Sazawal, S., et al. Efficacy of zinc supplementation in reducing the incidence and prevalence of acute diarrhea – a community-based, double-blind, controlled trial. *Am J Clin Nutr*, 1997; Aug, 66:2 (413-8)
23. Folkers, K., et al. The activity of coenzyme Q10 and vitamin B6 for immune responses. *Biochem Biophys Res Commun*, 1993; May 28, 193: 1 (88-92)
24. Lesourd, B.M. Nutrition and immunity in the elderly: modification of immune responses with nutritional treatments. *Am J Clin Nutr*, 1997; Aug 66:2 (4785-4845)
25. Fata, F.T., et al. Impaired antibody responses to pneumococcal polysaccharide in elderly patients with low serum vitamin B12 levels. *Ann Intern Med*, 1996; Feb 124:3 (299-304)
26. German Federal Minister of Justice. German Commission E for human medicine monograph. *Bundes-Anzeiger (German Federal Gazette)*, no. 162, dated 29-08-1992
27. Foster, S., Chongxi, Y. *Herbal Emissaries. Bringing Chinese herbs to the west.* Rochester, Ven-nont: Healinc, Arts Press; 1992: 356
28. Zhao, K.S., et al. Enhancement of the immune response in mice by *Astragalus membranaceus* extracts. *Immunopharmacology*. 1990; 20 (3): 225-233
29. Sun, Y., et al. Preliminary observations on the effects of the Chinese medicinal herbs *Astragalus membranaceus* and *Ligustrum lucidum* on lymphocyte blastogenic responses. *Journal of Biol Resp Modif*. 1983; 2: 227-237
30. Sun, Y., et al. Effect of Fu-zheng therapy in the management of malignant disease. *Chinese Med. Journal*. 1981; 61: 97-101
31. Chevallier, A. *The Encyclopedia of Medicinal Plants.* Westmount, Quebec: Readers Digest; 1996 (336)
32. Weng, X.S. Treatment of leucopenia with pure *astragalus* preparation – an analysis of 115 leucopenic cases (Chinese). *Chung-kuo Chung his i Chieh Ho Tsa Chih*, 1995; 15 (8); 462-4
33. Jin, R., et al. Effects of shi-ka-ron and Chinese herbs in mice treated with anti-tumor agent mitomycin C [Chinese]. *Chung-kuo Chung his i Chieh Ho Tsa Chih*. 1995; 15 (2): 101-3
34. Sugiera, H, et al. Effects of exercise in the growing stage in mice and of *Astragalus membranaceus* on immune functions [Japanese]. *Nippon Eiseigaku Zasshi – Japanese Journal of hygiene*, 1993; 47 (6): 1021-31
35. Yang, Y.Z., et al. Effect of *Astragalus membranaceus* on natural killer cell activity and induction of a- and g-interferon in patients with coxsackie B viral myocarditis. *Chinese Medical Journal*. 1990; 103 (4): 304-307
36. Hou, Y.D., et al. Effect of radix *Astragali seu Hedysari* on the interferon system. *Chinese Medical Journal*, 1981; 94: 35-40
37. Khoo, K.S., Ang, P.T. Extract of *astragalus membranaceus* and *ligustrum lucidum* does not prevent cyclophosphamide-induced myelosuppression. *Singapore Medical Journal*. 1995; 36(4): 387-90
38. Yang, Y.Z., et al. Effect of *Astragalus membranaceus* injecta on Coxsackie B-2 virus infected rat beating heart cell culture. *Chinese Medical Journal*. 1987; 100: 595
39. Hou, Y.D., et al. Study on the biological active ingredients of *Astragalus membranaceus*. *Chinese Journal Modern Development of Traditional Medicine*. 1984; 4: 420
40. Zhang, X.Q., et al. Studies of *Astragalus membranaceus* on antiinfluenza virus activity, interferon induction and immunostimulation in mice. *Chinese Journal of Microbiology and Immunology*. 1984 j4:92
41. Research Group of Common Cold and Bronchitis IoVCAoMS. Investigation into *Astragalus membranaceus* II. A research on some of its mechanism of reinforcing the Qi (vital energy.) *Journal of Traditional Chinese Medicine*. 1980; 3: 67
42. *Herbs To The Rescue.* *Nutrition News*; 11/30/1992; V.XVIN.11; p.4
43. Lin, J, et al. Radical scavenger and antihepatotoxic activity of *Ganoderma formosanum*, *Ganoderma lucidum* and *Ganoderma neo-japonicum*. *J Ethnopharm* 47: 33-41, 1995
44. Reishi Mushroom: Hepatoprotective properties. *Quarterly Review of Natural Medicine*; 12/31/1995; p.297-298
45. Sahley, Billie, J. Reishi Mushroom, Healing Herb of the Future. *MMRC Health Educator Reports*; 01/31/1997; p.1-2
46. Jones, Kenneth. Reishi (*Ganoderma*): Longevity Herb of the Orient; Part 2. *Townsend Letters for Doctors & Patients*; 11/30/1992; N.112; p.1008-1012
47. Wang, S.Y., et al. The anti-tumor effect of *Ganoderma lucidum* is mediated by cytokines released from activated macrophages and T lymphocytes. *Int J Cancer*, 1997 Mar 17; 70(6): 699-705
48. Chen, W.C., et al. Effects of *Ganoderma lucidum* and krestin on cellular immunocompetence in gamma-ray-irradiated mice. *Am J Chin Med* 1995; 23 (1): 71-80
49. Lee, J.M., et al. Inhibition of lipid peroxidation and oxidative DNA damage by *Ganoderma lucidum*. *Phytother Res* 2001 May; 15 (3): 245-9
50. Lai, N.S., et al. Prevention of autoantibody formation and prolonged survival in New Zealand Black/New Zealand White F1 mice with an ancient Chinese herb, *Ganoderma tsugae*. *Lupus* 2001; 10 (7): 461-5
51. Tyler, V.E. *Herbs of Choice. The Therapeutic Use of Phytomedicinals.* Binghampton, N,Y. Pharmaceutical Products press; 1994: 209

52. Blumenthal, M., et al. *The Complete German Commission E Monographs*. Austin, Texas: American Botanical Council; 1998: 685
53. Hikino, H., Kiso, Y. Natural products for liver diseases. *Economic and Medicinal Plant Research*. 1988; 2: 39-72
54. Campos, R., et al. Silybin dihemisuccinate protects against glutathione depletion and lipid peroxidation induced by acetaminophen in rat liver. *Planta Medica*. 1989; 55: 417-9
55. Hruby, C. Silibinin in the treatment of deathcap fungus poisoning. *Forum*. 1984; 6: 23-6
56. Faulstich, H., et al. Silybin inhibition of amatoxin uptake in the perfused rat liver. *Arzneimittelforschung*. 1980;30(1): 452-4
57. Tuchweber, B, et al. Prevention of silybin of phalloidin-induced acute hepatotoxicity. *Toxicology and Applied Pharmacology*. 1979; 51: 265-75
58. Salami, H.A., Sarna, S. Effect of silymarin on chemical, functional and morphological alterations of the liver. *Scandinavian Journal of Gastroenterology*. 1982; 17: 517-21
59. Palasciano, G., et al. The effect of silymarin on plasma levels of malondialdehyde in patients receiving long-term treatment with psychotropic drugs. *Current Therapeutic research*. 1994; 55 (5): 537-45
60. Buzzelli, G., et al. A pilot study on the liver protective effect of silybinphosphatidylcholine complex (IdB10106) in chronic active hepatitis. *International Journal of Clinical Pharmacology Therapy Toxicology*. 1993; 31 (9): 456-60
61. Lirussi, F., Okolicsanyi, L. Cytoprotection in the nineties: Experience with ursodeoxycholic acid and silymarin in chronic liver disease. *Acta Physiologica Hungarica*. 1992; 80 (1-4): 363-7
62. Ferenci, P., et al. Randomized controlled trial of silymarin treatment in patients with cirrhosis of the liver. *Journal of Hepatology*. 1989, 9: 105-13
63. Bogaards, J.J.P., et al. Consumption of Brussels sprouts results in elevated (-class glutathione-S-transferase levels in human blood plasma. *Carcinogenesis* 15: 1073-75, 1994
64. Wortelboer, H.M., et al. Acid reaction products of indole-3-carbinol and their effects on cytochrome P450 and Phase II enzymes in rat and monkey hepatocytes. *Biochem Pharmacol* 43; 1439-47, 1993
65. Beecher, C.W.W. Cancer preventive properties of varieties of Brassica oleracea: A review. *Am J Clin Nutr* 59 (suppl): 1166S-70S, 1994
66. Jellinck, P., et al. (1994) Distinct forms of hepatic androgen 6 beta-hydroxylase induced in the rat by indole-3-carbinol and pregnenolone carbonitrile. *Journal of Steroid Biochemistry & Molecular Biology*. 51(3-4): 219-25
67. Osborne, M.P., et al. (1993) Increase in the extent of estradiol 16 alpha-hydroxylation in human breast tissue: A potential biomarker of breast cancer risk. *J Natl Cancer Inst*, 85: 1917-20
68. Newfield, L., et al. (1993) Estrogen metabolism and human papillomavirus-induced tumors of the larynx: chemoprophylaxis with indole-3-carbinol. *Anticancer Research*. 13 (2): 337-41
69. Ahertzer, H.G., et al. (1996) Molecular modeling parameters predict antioxidant efficacy of 3-indolyl compounds. *Archives of Toxicology*. 70 (12): 830-4
70. Loub, W.E., et al. (1975) Aryl hydrocarbon hydroxylase induction in rat tissues by naturally occurring indoles of cruciferous plants. *J Natl Cancer Inst*, 54: 985-988
71. McDanell, R., et al. (1987) Differential induction of mixed-function oxidase (MFO) activity in rat liver and intestine by diets containing processed cabbage. *Food Chem. Toxicol*. 25: 363-368
72. Hendrich, S., and Bjeldanes, L.F. (1983) Effects of dietary cabbage, Brussels sprouts, system in mouse liver. *Food chem. Toxicol*. 21: 479-486
73. Boone, C.W., et al. (1990) Identification of candidate cancer chemopreventive agents and their evaluation in animal models and human clinical trials: a review. *Cancer Res*. 50: 2-9
74. Shertzer, H.G. (1983) Protection by indole-3-carbinol against covalent binding of benzo(a)pyrene metabolites to mouse liver by DNA and proteins. *Food Chem. Toxicol*. 21: 31-35
75. Stoewsand, G.S., et al. (1988) Protective effects of dietary Brussels sprouts against mammary carcinogenesis in Sprague-Dawley rats. *Cancer Lett*. 39: 199-207
76. Bradfield, C.A. and Bjeldanes, L.F. (1984) Effect of dietary indole-3-carbinol on intestinal and hepatic monooxygenase, glutathione-S-transferase and epoxide hydrolase activities in rat. *Food Chem Toxicol*. 22: 977-982
77. Bradlow, H.L., et al. (1994) Long-term responses of women to indole-3-carbinol or a high fiber diet. *Cancer Epidemiology, Biomarkers & Prevention*. 3 (7): 591-5

Please Note: Above Reference links were accessible when the article was published. However, respective third-party sites may change the structure and content of their websites at any time, we are unable to guarantee that our links will always be up to date. We apologize for the inconvenience.