

□ ORIGINAL ARTICLE □

Saengshik Administration Reduced the Side Effects of Chemotherapy in Chemotherapeutic Agent Injected Mice

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Chemotherapy is a method to treat cancer by destroying cancer cells, and the effectiveness of agents on various types of cancer cells has been confirmed experimentally and clinically. Chemotherapeutic agents cause a range of side effects, mainly affecting the fast-dividing cells of the body. In this study, we explored the alleviative effects of Saengshik on the side effects of chemotherapeutic agents, 5-fluorouracil (5-FU) and cisplatin, after single or multiple-dose administration of the agents in mice. The results showed that Saengshik had effects against decreasing spleen weight as well as reductions of RBCs, WBCs, and platelets counts. We also observed the effects of Saengshik administration against the hepatotoxicity caused by 5-FU and cisplatin, where the preventive effects of Saengshik administration on glutamic pyruvic transaminase (GPT) levels were observed. Furthermore, survival time extension was observed after Saengshik administration, where the survival rate was prolonged up to 90% in both the Saengshik plus 5-FU administered group and the Saengshik plus cisplatin administered group. In conclusion, Saengshik proved to have alleviative effects on the side-effects of anti-cancer agents. (Cancer Prev Res 12, 319-328, 2007)

Key Words: Chemotherapeutic agent, Fluorouracil, Cisplatin, Side-Effect, Saengshik

INTRODUCTION

A major advantage of chemotherapy is its ability to treat cancer, whereas surgery and radiation therapies are limited to treating cancers that are confined to a specific area. Many common chemotherapeutic agents are limited due to their side effects such as nausea and vomiting, depression of the immune system, anemia, leucopenia, hemorrhage, diarrhea and constipation, malnutrition, appetite and weight loss, hair loss, secondary neoplasms, cardiotoxicity, hepatotoxicity, nephrotoxicity, ototoxicity, and death. The drugs lack adequate specificity for tumor cells and can cause significant damage to host tissues. Also, these drugs are most toxic to the rapidly proliferating cells of the blood-forming hematopoietic system, the gastro-

intestinal tract and hair cells.^{3,4)} As a result of these toxicities, patients suffer from significant treatment complications, and the dosage of the chemotherapeutic agents must be reduced. Virtually all chemotherapeutic regimens can cause depression of the immune system, often by paralyzing the bone marrow and leading to decreases in white blood cells, red blood cells, and platelets.

Most chemotherapeutic agents and medications work by interfering with DNA synthesis or function, and each chemotherapy drug works during different phases of the cell cycle. 5-Fluorouracil (5-FU) is one of the oldest chemotherapy drugs, and works by interfering with the nucleotide components of DNA to stop DNA synthesis. 5-FU is known as a myelosuppressive cytostatic agent and more strongly affects cells with a high level of proliferating activity, including

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hematopoietic progenitor cells.⁵⁾ The platinum analogue Cisplatin (cisplatinum or Cis-diamine-dichloro-platinum; CDDP) is a platinum-based chemotherapy drug that helps in treating cancer by impairing DNA synthesis, transcription, and function, and it acts during any part of the cell cycle.

To relieve the side effects of chemotherapeutic agents, a variety of medicines have been developed, including drugs for nausea and anodynia. Recently, various biological response modifiers have been investigated for the treatment of cancer by immunotherapy, and for the relief of chemotherapy side effects. One of the hematopoietic growth factors, erythropoietin (EPO), which is FDA-approved for the treatment of renal anemia, has also been used to treat anemia caused by chemotherapy. 6,7) Myeloid growth factors [granulocyte colonystimulating factor (G-CSF) and granulocyte macrophage colonystimulation factor (GM-CSF)] enhance the functions of mature granulocytes and monocytes, thus enhancing defense mechanisms in patients receiving intensive cancer chemotherapy. 3,9) However, they can not be applied to leukemia patients, and to patients with diseases of the heart, kidney, liver, or lungs, or those with sickle cell disease. Chung et al. and Rha et al. reported side effects of GM-CSF such as fever, nausea, chest discomfort and paresthesia. 10,11)

Another means for finding relief from cancer chemotherapy side effects is complementary medicine and dietary supplements, such as vitamins, 12~15) herbs, 16~18) massage 19) and acupuncture. 20,21) Also, many experiments using oriental herbal formulations have been performed to alleviate the side effects of chemotherapeutic agents, and to enhance chemotherapy treatment. 22~26)

Saengshik, a formulated health food, is basically an 'uncooked whole food' that has become popular in Korea, and is reported as being helpful to human health. The ingredients in commercial Saengshik include over 40 kinds of vegetative raw materials such as whole grains, vegetables, fruits, mushrooms, and marine plants, as well as various functional botanicals. 27,28) Commercial Saengshik products are typically manufactured by freeze-drying or low temperature drying, to avoid nutrient losses by heat treatment, and are then ground into a powder. It can be eaten by emptying an envelope of powder into water, milk, or juice, and then simply drinking it. Various reports exist about the functional effects of Saengshik. It has been shown to improve hepatotoxicity, lipid metabolism, and blood glucose, which are often causes of chronic disease. ^{28~32)} Saengshik also has health promoting effects such as for improvements of body strength, anti-obesity, and beauty. 33~35) Previously, there were many attempts to evaluate the effects of Saengshik in patients, 36,37) which indicated that Saengshik has functional effects and could prevent various diseases.

Accumulating evidence from population-based and laboratory studies supports the association between the regular consumption of fruits, vegetables, and Saengshik, and a reduced risk of certain cancers. 38~40) Also, many reports have supported that functional plant materials have interactions with chemotherapy drugs and improve immune function, 12~20,32,41).

The results of prospective studies have given insight into the possible benefits of Saengshik consumption in relation to the side effects of chemotherapeutic agents. In this study, we evaluated the alleviative effects of Saengshik on the side effects of chemotherapy, including hematotoxicity and hepatotoxicity.

MATERIALS AND METHODS

1. Preparation of the Saengshik diet

An AIN93-based diet containing 30% Saengshik was prepared by mixing with the Saengshik (Erom Co., Ltd, Korea). The Saengshik formulation is shown in Table 1. The AIN93 purified diet and 30% Saengshik diet compositions are shown in Table 2. The components of the AIN93 diet were purchased from Dyets Inc. (Bethehem, USA). Each diet provided equal energy.

Table 1. Raw materials of Saengshik

Materials	
Brown rice	Lotus root
Glutinous millet	Spinach
Sorghum	Chlorella
Prosomillet	Lentinus edodes
Soybean	Mugwort
Black sesame	Pine needle
Black rice	Laver
Barley	Brown seaweed
Kale	Sea tangle
Carrot	Yeast
Burdock	Bifidobacterium longum
Pumpkin	Fructooligosaccharide
Angelica utills	Lactoferrin
Cabbage	Rose petal extract

Table 2. Composition of experimental diet with Saengshik

Ingredient	Control diet (%)	30% Saengshik diet (%)
Casein	20	14
Corn starch	39.7	27.8
Dyetrose	13.2	9.2
Sucrose	10	7
Cellulose	5	3.5
Soybean oil	7	4.9
AIN93 mineral mixture ¹⁾	3.5	2.45
AIN93 vitamin Mixture ²⁾	1	0.7
L-cystine	0.3	0.2
Choline bitatrate	0.25	0.17
TBHQ	0.0014	0.0014
Total	100	100

1)AIN93G mineral mix. (g/kg of mix): calcium carbonate, potassium phosphate monobasic 196, potassium citrate monohydrate 70.78, sodium chloride 74.00, potassium sulfate 46.6, magnesium oxide 24, ferric citrate 6.06, zinc carbonate 1.65, manganese carbonate 0.63, copper carbonate 0.3, potassium sulfatei • 12H₂O 0.275, ammonium paramolybdate • 4H₂O 0.00795, sodium metasilicate • 9H₂O 1.45, chromium potassium sulfate · 12H₂O 0.275, ammonium vanadate 0.0066. lithium chloride 0.0174. boric acid 0.08145. sodium fluoride 0.0635, nickel carbonate 0.0318, powdered sucrose 221.026. ²⁾AIN93G vitamin mix. (g/kg of mix): nicotinic acid 3.0, Ca pantothenate 1.6, pyridoxine-HCl 0.7, thiamin-HCl 0.6, riboflavin 0.6, folic acid 0.2, biotin 0.02, vitamin B12 (0.1% in mannitol) 2.5, vitamin E (500 IU/g) 15.0, vitamin A (500,000 IU/g) 0.8, vitamin D3 (400,000 IU/g) 0.25, vitamin K1 (phylloquinone) 0.075, powdered sucrose 974.655.

2. Animals

Four-week-old male C57/BL6 mice (Daehan biolink Co. Ltd., Korea) were normalized for 1 week and then randomly divided into each diet group. The groups constituted 10 animals each, and were treated with the therapeutic agents intraperitoneally. All the mice were housed in plastic cages with wire tops and sawdust bedding with a 12 h light-dark cycle and were allowed free access to water.

3. Experimental Design

1) Single-dose administration experiment: The groups were divided into control, 5-FU, and 5-FU+Saengshik groups. For 2 weeks the control and 5-FU groups were fed the AIN93 purified diet, while the 5-FU+Saengshik group was fed the 30% Saengshik diet. The 5-FU and 5-FU+Saengshik

groups were injected with 200 mg/kg of 5-FU intrapeneally after one week of diet administration, and the diet was then fed an additional week. The 5-FU was purchased from Sigma Chemical Co. (USA).

2) Multiple-dose administration experiment: The mice were divided into a control group, chemotherapeutic agent 5-FU group, cisplatin (Sigma) group, 5-FU+Saengshik group, and cisplatin+Saengshik group. The Saengshik was administered for 3 weeks and the 5-FU (50 mg/kg) or cisplatin (10 mg/kg) were injected 3 times at 2 day intervals, and then the Saengshik was fed one more week.

4. Hematologic examinations

Whole blood cells were collected from the hearts of the mice following cervical dislocation and stored in collection tubes containing K3EDTA (BD Vacutainer Systems. UK). The fluctuations in the hematograms were automatically counted by an automatic blood cell counter (Medonic 620 Hematology analyzer, Clinical Diagnostic Solutions, Inc, USA).

5. Serum GPT level

Hepatotoxicity was assessed by quantifying the activity of serum GPT. The measurements were performed by a spectrophotometric analysis automatic chemistry analyzer (Covas mira, Roche, Germany). The serum GPT level was measured according to the IFCC method. 42,43)

6. Survival time of mice injected with chemotherapeutic agents

The survival time was determined over 5 weeks after injecting the 5-FU or cisplatin. The 5-FU (50 mg/kg) and cisplatin (10 mg/kg) were injected into the peritoneal cavities of the mice 3 times at 2 day intervals after 3 weeks of Saengshik administration, and then the Saengshik was fed one additional

7. Statistical analysis

The data analysis was performed using SPSS version 10.0 software (SPSS, USA). All values are expressed as mean±SD, and were compared using one-way ANOVA. Values of P < 0.05 were considered significant. Post-hoc analysis of the differences in mean values for each experimental group were compared and analyzed using Duncan's method.

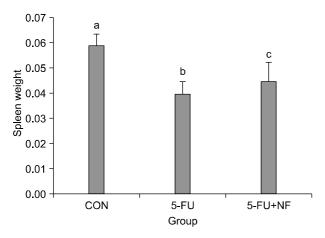
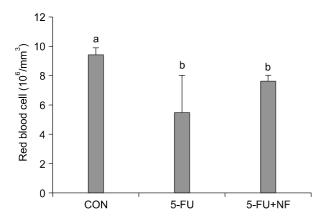
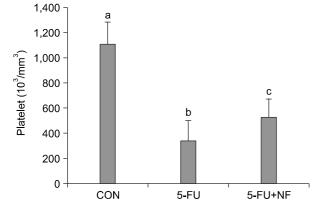


Fig. 1. Inhibitory effects of Saengshik administration on decreases of spleen weight in 5-FU administered C57/BL6 mice. The 5-FU and 5-FU+Saengshik groups were injected with 200 mg/kg of 5-FU intrapeneally after one week of diet administration, and the diet was then fed an additional week. Means with same alphabet was significantly not different (p<0.05). 5-FU: 5-fluorouracil, NF: Saengshik administration.





RESULTS AND DISCUSSION

- 1. Alleviative effects of *Saengshik* on the side effects of single-dose 5-FU administration
- 1) The inhibitory effects of *Saengshik* on decreases in spleen weight: The spleen is an organ located in the abdomen, where it functions in the destruction of old red blood cells and holds a reservoir of blood. It is regarded as one of the centers of activity for the reticuloendothelial system (part of the immune system). The size and function of the spleen is weakened during chemotherapy due to splenocyte death and spleen tissue reductions. The spleen weight was markedly reduced (about 30%) after 5-FU injection as compared to the control group, while there was a 10% reduction after 5-FU injection with *Saengshik* administration. This indicates that *Saengshik* had effects against decreasing spleen weight, one of the side effects of chemotherapeutic agents (Fig. 1).

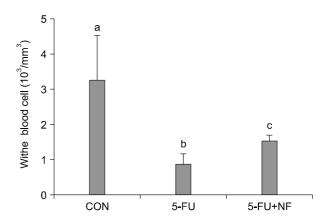


Fig. 2. Results of hematological examinations in *Saengshik* administered C57/BL6 mice. The 5-FU and 5-FU+*Saengshik* groups were injected with 200mg/kg of 5-FU intrapeneally after one week of diet administration, and the diet was then fed an additional week. Collected whole blood cells were automatically counted by an automatic blood cell counter. Means with same alphabet was significantly not different (p<0.05). 5-FU: 5-fluorouracil, NF: *Saengshik* administration.

2) Inhibitory effects of Saengshik on decreases in blood cell counts: Fig. 2 shows the results of the red blood cell (RBC), white blood cell (WBC), and platelet (PLTs) counts in the peripheral blood of the heart. While the total peripheral RBC, WBC, and PLT numbers clearly decreased in the 5-FU administered mice, the effects were inhibited after Saengshik administration. Decreases in RBCs (37%), WBCs (72%), and PLTs (83%) were shown after 5-FU injection. It was verified by the colony forming assay that 5-FU reduced the whole blood cell counts and damaged the hematopoietic stem/progenitor cells (data not shown). However, the RBCs were increased 34% in the 5-FU+Saengshik group as compared to the group treated with 5-FU only. The WBCs and PLTs were increased 12% and 57%, respectively (Fig. 2). Based on the above results, Saengshik administration proved to have a protective effect on hematopoietic cell damage.

3) Improvements in serum GPT levels by Saengshik administration: The serum level of glutamic pyruvic transaminase (GPT) is a cytosolic marker reflecting hepatocellular necrosis, as GPT enzymes are released into the blood after cell membrane damage. Chemotharapeutic agents are reported to cause severe hepatotoxicity, and damage fast- dividing normal

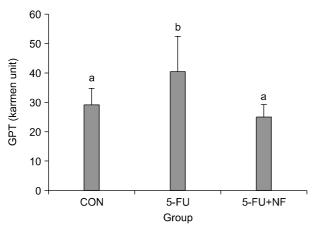


Fig. 3. Preventive effects of Saengshik administration on serum GPT levels in 5-FU administered C57/BL6 mice. The 5-FU and 5-FU+Saengshik groups were injected with 200 mg/kg of 5-FU intrapeneally after one week of diet administration, and the diet was then fed an additional week. Whole blood cells were collected from the heart of the mice and serum were separated by centrifugation. GPT levels measurements were performed by a spectrophotometric analysis automatic chemistry analyzer. Means with same alphabet was significantly not different (p<0.05).

5-FU: 5-fluorouracil, NF: Saengshik administration.

cells. Compared with the control group, the serum GPT level was reduced in the Saengshik group, while the level was significantly increased in the 5-FU and cisplatin injected groups. GPT was decreased approximately 38% in the Saengshik group as compared to the 5-FU treatment group (Fig. 3). Therefore, Saengshik administration proved to have an anti-hepatotoxicity effect.

- 2. Alleviative effects of Saengshik on the side effects of multiple-dose 5-FU or cisplatin administration
- 1) The inhibitory effects of *Saengshik* on decreases in spleen weight: Usually chemotherapy is treated repeatedly and in combination, so we examined the multipledose administration of the two kinds of chemotherapeutic agents. 5-FU or cisplatin were treated 3 times at 2 day intervals. The triple administration of 5-FU or cisplatin brought 57% and 63% reductions in spleen weight, respectively, as compared to the control group (Fig. 4). The repeated treatment of 5-FU showed a 57% reduction, as compared to a 30% reduction during short-term administration. This indicates that the multiple-dose administration of the chemotherapeutic drugs brought continuous severe damage to the mice. The Saengshik administered group showed an inhibitory effect for spleen weight reduction. Saengshik administration in the 5-FU group

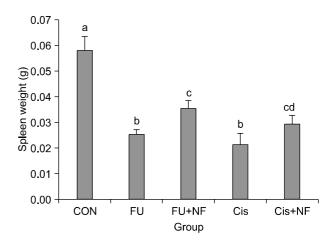


Fig. 4. Inhibitory effects of Saengshik administration on spleen weight in C57/BL6 mice. The Saengshik was administered for 3 weeks and the 5-FU (50 mg/kg) or cisplatin (10 mg/kg) was injected 3 times at 2 day intervals, and then the Saengshik was fed one more week. Means with same alphabet was significantly not different (p<0.05).

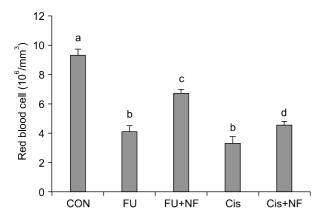
5-FU: 5-fluorouracil, Cis: cisplatin, NF: Saengshik administration.

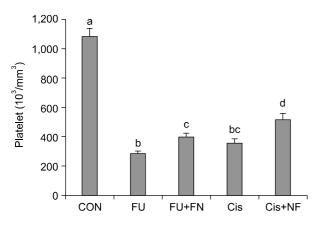
resulted in a 40% increase in spleen weight, and Saengshik administration in the cisplatin group resulted in a 38% increase; while at 2 weeks of Saengshik feeding there was only a 10% increase in spleen weight in Fig. 1. This indicates that the long-term administration of Saengshik had a much greater effect on the side effects of chemotherapy than the short feeding.

2) Inhibitory effects of Saengshik on decreases in blood cell counts: We also explored the effects of Saengshik on blood cell counts. For the RBCs, the 5-FU and cisplatin groups had 57% and 53% reductions, respectively. The reduction numbers for the WBCs were 73% in the 5-FU group and 58% in the cisplatin group, and the platelet number reductions were 75% and 68%, respectively. This data also indicates that more severe damage was brought on by the multiple-dose administration of the chemotherapeutic agents. On the other hand, Saengshik administration prevented the reductions in blood cell counts caused by 5-FU and cisplatin. The RBC numbers were maintained 53% and 20% in the 5-FU and cisplatin groups, respectively. The WBC numbers were maintained 43% and 42%, respectively, and the platelet

numbers were maintained 42% and 47%, respectively (Fig. 5). These results indicate that the long-term administration of Saengshik had better affects on the side-effects of the chemotherapeutic drugs than short-term administration, suggesting that continuous intake of Saengshik alleviated the side effects of chemotherapy.

- 3) Improvements in serum GPT levels by Saengshik administration: We investigated the effects of Saengshik administration against the hepatotoxicity caused by 5-FU and cisplatin. The preventive effects of the multiple administration of Saengshik on GPT were observed (Fig. 6).
- 4) Improvements in survival rate by Saengshik administration: Continuous chemotherapy brings numerous side-effects, as stated above, and can ultimately cause death. Recently, Ohe Y et al. reported that chemotherapy in cancer patients has the risk of treatment-related death. 46,47) We observed survival time over 5 weeks, following the injection of 5-FU 3 times intraperitoneally and the administration of Saengshik. The survival times of the mice were prolonged after Saengshik administration. The 5-FU or cisplatin only administered groups had 40% and 70% survival rates, respectively,





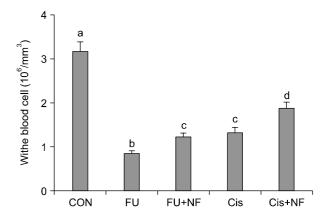


Fig. 5. Results of hematological examinations after Saengshik feeding in 5-FU or cis treated C57/BI6 mice. The Saengshik was administered for 3 weeks and the 5-FU (50 mg/kg) or cisplatin (10 mg/kg) was injected 3 times at 2 day intervals, and then the Saengshik was fed one more week. Collected whole blood cells were automatically counted by an automatic blood cell counter. Means with same alphabet was significantly not different (p<0.05).

5-FU: 5-fluorouracil, Cis: cisplatin, NF: Saengshik administration.

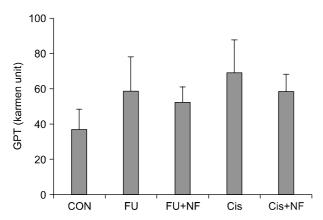


Fig. 6. Preventive effects of Saengshik administration on serum GPT levels in 5-FU administered C57/BL6 mice. The Saengshik was administered for 3 weeks and the 5-FU (50 mg/kg) or cisplatin (10 mg/kg) was injected 3 times at 2 day intervals, and then the Saengshik was fed one more week. Whole blood cells were collected from the heart of the mice and serum were separated by centrifugation. GPT levels measurements were performed by a spectrophotometric analysis automatic chemistry analyzer. Values shown represent the Mean±SD. 5-FU: 5-fluorouracil, Cis:cisplatin, NF: Saengshik administration.

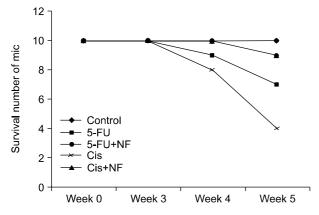


Fig. 7. Improvement of survival rate in Saengshik administered C57/BL6 mice. Survival time was observed over 5 weeks, following the injection of 5-FU 3 times intraperitoneally and the administration of Saengshik. 5-FU: 5-fluorouracil, Cis:cisplatin, NF: Saengshik administration.

for the survival time over 5 weeks. However, the survival rate was prolonged to 90% in both the Saengshik + 5-FU group and the Saengshik + cisplatin group (Fig. 7).

Many reports have supported that functional plant materials have interactions with chemotherapy drugs. Modified forms of vitamin A and vitamin C were reported to work synergistically with chemotherapy, and appear to increase the effectiveness of chemotherapy. $^{12\sim14)}$ Furthermore, the combination of several

Table 3. Nutrients contents in Saengshik

Nutrients	Contents
Energy (kcal/100 g)	392.6
Moisture (%)	1.9
Carbohydrate (%)	80.9
Protein (%)	11.4
Fat (%)	2.6
Na (mg/100 g)	176.5
Fe (mg/100 g)	3.54
Zn (mg/100 g)	7.83
Ca (mg/100 g)	600
Vitamin A (ugRE/100 g)	368.7
Vitamin B1 (mg/100 g)	1.8
Vitamin B2 (mg/100 g)	0.4
Vitamin B6 (mg/100 g)	0.4
Vitamin C (mg/100 g)	43.5
Vitamin D3 (mg/100 g)	21.6
Vitamin E (mg/100 g)	5.1
Folic acid (mg/100 g)	1.9
Niacin (mg/100 g)	9.9

vitamins protected against chemotherapy-induced heart damage without interfering with the action of the chemotherapy. 15) In studies of chemotherapy-induced mouth sores, many researchers have confirmed the potential for vitamin E to help people with chemotherapy-induced mouth sores. 48~50) Studies on glutathione have found that glutathione may decrease some of the adverse effects of chemotherapy and radiation. 41,511 And dietary glutathione intake from fruits and raw vegetables has been associated with protection against some forms of cancer. 51,52) Marco K et al. also found certain polysaccharides to be helpful for the cytotoxicity of chemotherapeutic agents. 53)

Saengshik includes a variety of grains, vegetables, fruits, mushrooms, and sea plants, and has diverse nutrients, as shown in Table 3. It is whole, and contains a variety of nutrient-dense plants with phytochemicals and complexes only found in natural foods. It is considered that the various functional plant materials in Saengshik may have a relief effect on the side effects of chemotherapy.

Cancer patients receiving chemotherapy undergo loss of appetite and malnutrition, and declines in body strength are a result. When blood cells are affected by anticancer drugs, patients are more likely to develop infections, may bruise or bleed easily, and may have less energy. So in cancer patients receiving chemotherapy, appetite promotion, body weight maintenance, and the prevention of immune system weakness and infection are quite important.54)

Park SH et al. and Lee YJ et al. reported that *Saengshik* improved nutritition status.^{34,35)} In addition, Park JY et al. reported that *Saengshik* exhibited superior activity for improving mesenteric lymph node immune function in nutritionally unbalanced rats.³²⁾ It is suggested that the nutrients of *Saengshik* are also helpful for alleviating the side-effects of chemotherapy. In conclusion, *Saengshik* had a relief effect on the side-effects of cancer chemotherapeutic agents, including hematotoxicity, hepatotoxicity, and death rates in mice.

CONCLUSION

The aim of this investigation was to evaluate the preventive effects of *Saengshik* on the side-effects of chemotherapeutic agents. To induce the side effects, 5-FU or cisplatin were administered, and the hematotoxicity and hepatotoxic effects were explored. The *Saengshik* administration showed a relief effect for the side effects of 5-fluorouracil (5-FU) and cisplatin in mice, by preventing decrease of spleen weight and numbers of blood cells. Also, the preventive effect administration of *Saengshik* on GPT was observed, and survival time was prolonged after 5-FU or cisplatin injection with *Saengshik* feeding. These data suggest that *Saengshik* may prove to be helpful in cancer patients receiving chemotherapy, by alleviating the side-effects of anti-cancer agents.

REFERENCES

- 1) Sitzia J, Huggins L. Side effects of cyclophosphamide, methot-rexate, and 5-fluorouracil (CMF) chemotherapy for breast cancer. *Cancer Pract* 6, 13-21, 1998.
- Daniel, J. Crawford. Myelotoxicity From Chemotherapy. Semin Oncol 33, 74-85, 2006.
- 3) Skeel RT, Ganz PA. Systematic assessment of the patient with cancer and long-term medical complications of treatment. Handbook of cancer chemotherapy. Philadelpia, Lippincott Williams & Wilkinsk, pp 34-35, 1999.
- 4) Brian P. Sorrentino. Gene therapy to protect haematopoietic cells from cytotoxic cancer drugs. *Nature Reviews Cancer* 2, 431-441, 2002.
- Cheng T, Rodrigues N, Shen H, Yang Y, Dombkowski D, Sykes M, Scadden DT. Hematopoietic stem cell quiescence maintained by p21 cip1/waf1. Science 287, 1804-1808, 2000.
- Purabi Reang, Madhur Gupta, Kamlesh Kohli. Biological response modifiers in cancer. MedGenMed 8, 33, 2006.
- 7) Ludwig H, Fritz E, Leitgeb C, Pecherstorfer M, Samonigg H, Schuster J. Prediction of response to erythropoietin treatment

- in chronic anaemia of cancer. Blood 84, 1056-1063, 1994.
- 8) Gerhartz HH, Engellhard M, Meusers P, Brittinger G, Wilmanns W, Schlimok G, Mueller, P Huhn D, Musch R, Siegert W. Randomized double blind, placebo controlled, Phase III study of recombinant human GM-CSF as adjuvant to induction treatment of high grade malignant non- Hodgkin's lymphoma. *Blood* 82, 2329-2339, 1993.
- Lieschke GJ, Burgess AW. Granulocyte CSF and GM-CSF9I. N Engl J Med 327, 28-35, 1992.
- 10) Chung SC, Lyu CJ, Oh SH, Yang CH, Kim KY. Effect of Recombinant Human Granulocyte Colony-stimulating Factor (rhG-CSF) and Recombinant Human Granulocyte Macrophage Colony-Stimulating Factor (rhGM-CSF) in Children with Acute Leukemia Receiving Chemotherapy according to Bone MarrowCellularity. Korean J Pediat Hematol Oncol 2, 281-289, 1995.
- 11) Rha SY, Roh JK, Lee KH, Chung HC, Lee, JI, Cho JY, Lee HR, Yoo NC, Kim JH, Huh DS, Choi JH, Lim HY, Hahn JS, Kim BS. A phase II clinical trial of recombinant human granulocyte macrophage colony stimulating factor (rhGM-CSF, LBD-005) in cancer patients with chemotherapy induced myelosuppression; dose-response effect of rhGM-CSF. The Journal of KCRA 27, 490-503, 1995.
- 12) Sacks PG, Harris D, Chou T-C. Modulation of growth and proliferation in squamous cell carcinoma by retinoic acid: A rationale for combination therapy with chemotherapeutic agents. *Int J Cancer* 61, 409-415, 1995.
- 13) Taper HS et al. Non-toxic potentiation of cancer chemotherapy by combined C and K3 vitamin pre-treatment. *Int J Cancer* 40, 575-579, 1987.
- 14) Kurbacher CM, Wagner U, Kolster B, Andreotti PE, Krebs D, Bruckner HW. Ascorbic acid (vitamin C) improves the antineoplastic activity of doxorubicin, cisplatin, and paclitaxel in human breast carcinoma cells in vitro. Cancer Letters 103-119, 1996.
- Wagdi P, Fluri M, Aeschbacher B, Fikrle A, Meier B. Cardioprotection in patients undergoing chemo- and/or radiotherapy for neoplastic disease. *Jpn Heart J* 37, 353-359, 1996.
- 16) Dwivedi C, Agrawal P, Natarajan K, Sharma H. Antioxidant and protective effects of Amrit nectar tablets on adriamycinand cisplatin-induced toxicities. *J Altern Complement Med* 11, 143-148, 2005.
- 17) Misra NC, Sharma HM, Chaturvedi A, Ramakant, Srivastav S, Devi V, Kakkar P, Vishwanathan U, Natu SM, Bogra J. Antioxidant Adjuvant Therapy Using Natural Herbal Mixtures [MAK-4 and MAK-5] During Intensive Chemotherapy: Reduction in Toxicity. A Prospective Study of 62 Patients Proceedings of the XVI International Cancer Congress. Bologna, Monduzzi Editore, 3099-3102, 1994.
- 18) Mok T, Yeo W, Johnson PJ, Hui P, Ho WM, Lam KC, Xu M, Chak K, Chan A, Wong H, Mo F, Zee B. A double-blind placebo-controlled randomized study of Chinese herbal medicine as complementary therapy for reduction of chemo-

- therapy-induced toxicity. Annals of Oncology 18, 768-774, 2007.
- 19) Annika Billhult, Ingegerd Bergbom, Elisabet Stener-Victorin. Massage relieves nausea in women with breast cancer who are undergoing chemotherapy. J Altern Complement Med 13, 53-37, 2007.
- 20) Lu W, Hu D, Dean-Clower E, Doherty-Gilman A, Legedza AT, Lee H, Matulonis U, Rosenthal DS. Acupuncture for chemotherapy-induced leukopenia: exploratory meta-analysis of randomized controlled trials. J Soc Integr Oncol 5, 1-10, 2007.
- 21) Shin YH, Kim TI, Shin MS, Juon HS. Effect of acupressure on nausea and vomiting during chemotherapy cycle for Korean postoperative stomach cancer patients. Cancer Nurs 27, 267-74, 2004.
- 22) Yu G, Ren D, Sun G, Zhang D. Clinical and experimental studies of JPYS in reducing side-effects of chemotherapy in late-stage gastric cancer. J Tradit Chin Med 13, 31-7, 1993.
- 23) Kim HS, Hong SB, Sung HJ, Moon GA, Yoon YS. Effect of deer blood on reduction of the side effects of chemotherapeutic drugs. Kor J Pharmacogn 34, 145-149, 2003.
- 24) Moon GA, Sung HJ, Yoon YS. Study of th safety and efficacy of an oriental herbal composition for the reduction of hematopoietic toxicity of fluorouracil. Kor J Pharmacogn 35, 122-127, 2004.
- 25) Taixiang W, Munro AJ, Guanjian L. Chinese medical herbs for chemotherapy side effects in colorectal cancer patients. Cochrane Database of Systematic Reviews, Issue 4 Art. No.: CD004540. DOI: 10.1002/14651858.CD004540.pub2, 2007.
- 26) Zhang M, Liu X, Li J, He L, Tripathy D. Chinese medicinal herbs to treat the side-effects of chemotherapy in breast cancer patients. Cochrane Databasd of Systematic Reviews, Issue 2 Art. No.: CD004921. DOI: 10.1002/14651858.CD004921.pub2, 2007
- 27) Park MK. Strategy for globalization of natural raw meal. Food Industry and Nutrition 11, 10-12, 2006.
- 28) Kim ES, Park MH, Hwang SJ, Jeong YH. Saengshik, a formulated health food, decreases blood glucose and increase survival rate in setreptozotocin-induced diabetic rats. J Med Food 7, 162-167, 2004.
- 29) Lee E, Kim WJ, Lee YJ, Lee MK, Kim PG, Park YJ, Kim SK. Effects of natural complex food on specific enzymes of serum and liver and liver microstructure of rats fed a high fat diet. J Korean Soc Food Sci Nutr 32, 256-262, 2003.
- 30) Song MK, Hong SG, Hwang SJ. Improve effects of Saengshik on patient with fatty liver and hyperlipidemia in murine. Kor J Nutr 36, 834-840, 2003.
- 31) Kang SM, Shim JY, Hwang SJ, Hong SG, Jang HE, Park MH. Effects of Saengshik supplementation on health improvement in diet-induced hypercholesterolemic rats. J Korea Soc Food Sci Nutr 32, 906-912, 2003.
- 32) Park JY, Yang M, Jung HS, Lee JH, Bae HK, Park TS. Effect of raw brown rice and Job's tear supplemented diet on serum and hepatic lipid concentration, antioxidative system, and

- immune function of rats. J Korean Soc Food Sci Nutr 32, 197-206, 2003.
- 33) Park JS, Park JG, Kim JH, Yu YK, Pyo YH, Lee MG, Sin JH, Hwang SJ, Park MH. The effect of natural food uptake for 6 months on physical fitness and lipids in blood of athletic player. Korean J Physical Education 42, 883-893, 2003.
- 34) Park SH, Han JH. The effects of uncooked powdered food on nutrient intake, serum lipid level, dietary behavior and health index in healthy women. Kor J Nutr 36, 49-63, 2003.
- 35) Lee YJ, Lee HM, Park TS. Effects of uncooked powdered food on antioxidative system and serum mineral concentrations in rats fed unbalanced diet. Kor J Nutr 346, 898-907, 2003.
- 36) Han JH, Park SH. The Effects of uncooked powdered food on nutrient intake, body fat and serum lipid composition in hyperlipidemic patients. Kor J Nutr 36, 589-602, 2003.
- 37) Jang YS, Lee JH, Kim OY, Park HY, Lee SY. Consumption of whole grain and legume power reduces insulin demand, lipid peroxidation, and plasma homocysteine concentration in patients with coronary artery disease: randomized controlled clinical trial. Arterioscler Thromb Basc Biol 21, 2065-2071,
- 38) Surh YJ. Cancer chemopreventive effects of dietary phytochemicals. Cancer Prve Res 9, 68-83, 2004.
- Michael S Donaldson. Nutrition and cancer: a review of the evidence for an anti-cancer diet. Nutrition Journal 3, 19, 2004.
- 40) Kil JH, Kong CS, Moon SH, Park KY. Cancer preventive effects of Saengshik, a formulated health food, prepared with pine needle. Cancer Prev Res 9, 84-91, 2004.
- 41) De Maria D, Falchi AM, Venturino P. Adjuvant radiotherapy of the pelvis with or without reduced glutathione: a randomized trial in patients operated on for endometrial cancer. Tumori 78, 374-376, 1992.
- 42) Bergmeyer HU, Horder M, Rej R. Approved recommendation (1985) on IFCC methods for the measurement of catalytic concentration of enzymes. Part2. IFCC Method for aspartate aminotransferase. J Clin Chem Clin Biochem 24, 497-510, 1986.
- 43) Bergmeyer HU, Horder M, Rej R. Approved recommendation (1985) on IFCC methods for the measurement of catalytic concentration of enzymes. Part3. IFCC Method for aspartate aminotransferase. J Clin Chem Clin Biochem 24, 481-495, 1986.
- 44) Milicevic Z, Splepcevic V, Nikolic D, Zivanovic V, Milicevic NM. Effects of cis-diamminedichloroplatinum II (cisplatin) on the splenic tissue of rats: a histoquantitative stydy. Exp Mol Pathol 61, 77-81, 1994.
- 45) Kumararatne DS, Gagnon RF, Smart Y. Selective loss of large lymphocytes from the marginal zone of the white pulp in rat spleens following a single dose of cyclophosphamide. A study using quantitative histological methods. Immunology 40, 123-131, 1980.
- 46) Ohe Y, Yamamoto S, Suzuki K, Hojo F, Kakinuma R, Matsumoto T, Ohmatsu H, Nishiwaki Y. Risk factors of treatment-related death in chemotherapy and thoracic radiotherapy for lung cancer. Eur J Cancer 37, 54-63, 2001.

- 47) Ohe Y. Treatment-related death from chemotherapy and thoracic radiotherapy for advanced cancer. *Pannineva Med* 44, 205-212, 2002.
- 48) Mills EED. The modifying effect of beta-carotene on radiation and chemotherapy induced oral mucositis. *Brit J Cancer* 57, 416-417, 1988.
- 49) Wadleigh RG, Redman RS, Graham ML, Krasnow SH, Anderson A, Cohen MH, Vitamin E in the treatment of chemotherapy-induced mucositis. Am J Med 92, 481-484, 1992.
- 50) Lopez I, Goudou C, Ribrag V, Sauvage C, Hazebroucq G. Treatment of mucositis with vitamin E during administration of neutropenic antineoplastic agents. *Ann Med Intern* 145: 405-408, 1994.
- 51) Sen CK. Nutritional biochemistry of cellular glutathione. Nutr

- Biochem 8, 660-672, 1997.
- 52) Flagg EW, Coates RJ, Jones DP, Byers TE, Greenberg RS, Grindley G, McLaughlin JK, Blot WJ, Haber M, Preston-Martin S, Schoenberg JB, Austin DF, Fraumeni JF Jr. Dietary glutathione intake and the risk of oral and pharyngeal cancer. Am J Epidemiol 139, 453-465, 1994.
- 53) Marco K. C. Hui, William K. K. Wu, Vivian Y. Shin, Wallace H. L. So and Chi Hin Cho. Polysaccharides from the root of Angelica sinensis protect bone marrow and gastrointestinal tissues against the cytotoxicity of cyclophosphamide in mice. *Int J Med Sci* 3, 1-6, 2006.
- 54) David E, Rivadeneira, Denis Evoy, Thomas J, Fahey III, Michael D, Lieberman, John M, Daly. Nutritional support of the cancer patient. *Ca Cancer J Clin* 48, 69-80, 1998.