

MAX GXL AND CHEMO THERAPY

The following information was provided by Max International Product support in regards to a question about the use of MaxGXL, by people undergoing Chemo Therapy.

I cannot give medical advice but would like to share some information with you **from a doctor**. This information should be discussed with your oncologist and his or her opinion must be the final word. **This is offered merely as information only and not as medical advice**. This information does not relate to MaxGXL but only generally to glutathione (GSH). I do not have any information regarding Max N-Fuze in this situation.

When I was first questioned about using GSH in cancer, I said that it should not be used with platinum based therapeutic agents such as Cisplatin the day before, the day of, and the day after platinum administration as glutathione destroys platinum-based agents in the blood before it can get to the cancer cells. While this is true, further research suggests that there is a safer and perhaps more effective use of GSH in cancer patients whether they are undergoing therapy or not to both reduce the toxic effects of chemotherapy and improve the overall quality of life of the patient.

To use GSH effectively, one must first separate the two branches of chemotherapy. The first and oldest involves agents that cause metabolic mayhem in cancer cells as well as any normal cell (hair, gastrointestinal cells, bone marrow cell) which is metabolically active (dividing). This type of chemotherapy (Cytosan, Adriomycin, Cisplatin to name but a few) requires cell division to work and in all cases causes a buildup of free radicals.

In this type of cancer, I suggest based on my research that GSH be used but stopped two days before chemotherapy and restarted two days after chemotherapy. Although this is a generalization based on the characteristics of cell division in multiple cell types, there may be exceptions. Nonetheless, it provides a general guideline that should both facilitate tumor cell destruction by chemotherapy and yet rescue many normal cells and limit the side effects of chemotherapy.

The second branch of chemotherapy is newer and is generally termed targeted tumor therapy. It involves using an agent, usually a monoclonal antibody directed against a biologic factor required for tumor cell growth. In this type of chemotherapy, GSH should not be interrupted as increasing glutathione in immune cells and decreasing it in tumor cells should increase the effect of the targeted tumor cell agent. If targeted therapy is combined with cytotoxic tumor cell therapy, I believe the two day guideline should pertain. These represent opinions based on the best research available and no nutritional supplement should be used in cancer without informing your oncologist or radiotherapist.

I hope this general information is helpful and I wish your Mother complete success and healing.

Kind regards,
Product Support