

# American MediReport

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## *Near-normalcy restoration for 70% of Type II diabetics*

Once again Canada has hit world headlines with a pathfinding discovery in the reversal of diabetes. The University of Calgary in Alberta and Eastwood Biomedical Research Inc (EBMR) <sup>i</sup> in British Columbia have finally released the results of twenty years of research in the development of a herbal complex labelled P-700 that restores diabetics suffering from NIDDM (non-insulin dependant diabetes mellitus). According to the results <sup>ii</sup> of the latest trials, there is a 98% statistical chance that patients taking the tea (now named Eleotin) can expect major blood glucose level (BGL) drops, or a return to near normal or normal levels of blood glucose even after the intake of Eleotin is discontinued (true for 70% of participants) <sup>iii</sup>. More significantly, 30-40% of those who returned to normal BGL's have remained so for six years, another 30-40% became mildly diabetic again over 2-3 years while the balance relapsed mildly around six months. However, re-commencing Eleotin at minimal use (one-quarter of previous dosage) was found to once again bring BGL's back to normal. Moreover, several cases of the improvement and/or actual reversal of advanced retinopathy (some of which had culminated in recent blindness), plus significant repair of diabetic induced stroke have been observed.<sup>iv</sup> Australian scientists, who independently examined Eleotin's effects in Australia, comment "In 1921 Canada captured world headlines in diabetic research when Drs. Banting and McLeod of the University of Toronto received Nobel Prize for the first isolation of insulin. This time the news is even better."<sup>v</sup>

Recent statistical analysis of the latest human trial (involving 80 patients and 20 patients in a control group) shows a quite reliable prediction of the improvement (where R square value = 0.93) for a person who takes Eleotin for more than 3 months. In the study, a typical user was a 55 year old patient whose initial BGL was 300 mg/dl and who had been diabetic for 10 years.

### **Editorial Policy and Disclaimer :**

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After having taken Eleotin for 4 months, had the BGL drop to 157 mg/dl, which -although still abnormal-is below the renal threshold (detection of sugar in urine). Moreover, the BGL drop was found to continue its descent over further time. EBMR also discloses that approximately 20,000 people used Eleotin from April of 1998 to October 2000 and there were virtually no cases of side effects. EBMR explains that as all the ingredient herbs have been used for many centuries in south eastern Asian countries as foods, governments of some Asian countries approved Eleotin to be marketable as food.<sup>vi</sup> In toxicity tests, rats were given 50 times the human dosage for 7 months with no damages to organs. The 'JR Lab', a well known Canadian food and drug safety investigation company, examines every batch of the herbs used.

## *Regeneration of beta-cells and upregulation of insulin sensitivity*

Although Eleotin and its previous versions were developed over 20 years to produce four distinct combination BGL control paths (see box 'Modes of action' <sup>vii</sup>) the major discovery, after trialing thousands of herbal combinations, was a 15-herb complex that actually regenerated pancreatic beta cells <sup>viii</sup> and insulin receptor upregulation.<sup>ix</sup>

Importantly, these up-regulations did not come with the side effects common to pharmaceutical drugs that stimulate such an effect (one such drug, Rezulin by the Japanese company Sangyo, triggered a spate of deaths in the UK through liver shut-offs). Moreover, this improved insulin sensitivity was not a so-called 'secondary effect' caused by the down-regulation of BGL through alpha-glucohydrolase inhibition. Scientists were immediately excited by the evidence of a primary up-regulation of beta cell activity and insulin sensitivity upregulation-never seen before in the gentle realm of natural medicine.

## ***Damaging BGL fluctuations controlled***

According to Medifile Report <sup>3</sup>, a prominent Australian medical journal, the diabetic syndrome deteriorates during periods of poor BGL control because the resultant fluctuations cause damaging events in macro and micro-circulation (such as atheroma, a thickening of the vascular walls, accompanied paradoxically by hyperpermeability) that lead to the familiar pattern of glomerulopathy (kidney disease), atherosclerosis, peripheral circulatory problems and eye damage. The trials have found that Eleotin effectively controls these fluctuations by controlling the breakdown of carbohydrates through reduction of alpha-glucohydrolase, another of the four major biological response modifiers that combine to produce Eleotin's anti-diabetic effect. But even when good BGL control is able to be maintained by standard insulin, drug and dietary methods diabetic patients still develop vascular changes 10 years earlier (av.) than the non-diabetic. So it will be interesting to see in ten years time if Eleotin's multiple action produces a lesser percentage difference in those who drink this herbal tea. A significant number of Eleotin users whose eyesights were impaired due to diabetes showed remarkable improvements in their eyesights relative to the control group when Eleotin was used more than 3 months.

## ***Genesis of discovery*** <sup>xi</sup>

*"You have two options-we amputate, or you die"  
The frail Asian lady who prompted the search for  
"another way".....*

About 25 years ago, a frail but determined diabetic with serious kidney and peripheral vascular complications faced two options given by her doctor's advice ... either live without one or maybe both legs, or die. She refused the operation and set out on an Asian holiday to enjoy her last days. Once in Asia she discovered that many traditional remedies, herbal medicines and more modern alternative treatments had a long history of successful anecdotal evidence, much of it preserved in scholarly volumes and treatises. Having nothing to lose she ate and drank every possible food or herb that may help

her. After six months she began to feel much stronger. Her trip had given her a renewed peace of mind and a new appreciation of life. On returning to Canada she was requested to make an appointment for a set of tests. To her surprise the doctor informed the woman that both her diabetes and kidney disease had improved to the point where there was no longer any need for amputation.

The doctors themselves were astonished at this recovery and after questioning her extensively they became convinced that her story was worth substantiating scientifically. To this end the scientists of the University of Calgary diabetes research team began to trace her journey and her traditional medicine contacts. At first, the team randomly tested most of the various herbs the old lady had tried, on animals. Later some patients volunteered to try the most likely combinations. One of these was a retired nurse from the University of Calgary Hospital who had seen the amazing change in the old lady. This nurse herself was a serious Type II diabetic. She became one of the first success stories of the trials and has now been a cured diabetic for 12 years.

Because of local dialect names and other language barriers, and the sheer difficulty of quality control of the herbs that have an effect on diabetes and the lengthy travel requirement, the team took four years to trace seven of the essential herbs used by the patient. Meanwhile, the 'pioneer' of this remarkable search-the patient herself, had continued to improve and was now free of all complications. Tests showed her return to normalcy. The next step was to trace good sources and quantities of the herbs for studies and trials. Back at the University of Calgary, researchers began the long and arduous task of understanding the pharmacology and modes of action. Their research showed historically that the herbs were regarded as restorative in function and had been in use as foods for thousands of years. They promoted health improvements by way of diuresis and blood purification. Furthermore, they had no toxic side effects and did not produce resistance. The research team then looked closely at the world's herbal pharmacopoeias for improving the original combinations. These efforts were jointly made with various universities. With international co-operation and over a period of some further seven years the team was able to research a staggering list of herbal combinations that were candidates for the criteria established by the University of Calgary scientists. By 1992 the final successful herbal complex was selected and named P-700. Further work found ways to grow without chemicals or heavy metals, to mill it into a tea and to develop a patented manufacturing technique that maximised the efficacy of the tea's benefits.

## ***Some testimonies from trial results***

### **D-Former nurse in Calgary, Canada (70 years)**

"I developed diabetes in my late sixties. There was a time I could not sleep because of it and had to take 30 painkillers a day. My

limbs decayed even though I was taking insulin shots. The diabetes research institute where I worked recommended that I take Eleotin (P-700). I took it for 4 months. All my severe diabetic symptoms disappeared. I have not taken Eleotin (P-700) since that time and I still feel better even after 2 years time. I never expected that this could happen to me."

### **B-former diabetic patient who participated in a test**

"I took Eleotin to see how insulin secretion in pancreas would change. The secretion increased 0.5nmol/min, 10 minutes after intake and maximum 3.0nmol/min, after 55 minutes. Compared with the secretion prior to Eleotin intake, it was an increase of 1.5-2 times."

### **HG-NIDDM patient**

"I have had diabetes for 14 years. It has been 4 months since I took Eleotin. My blood glucose level has dropped to 187mg/dl, which used to rise up to 425mg/dl. I still have insulin injections though."

### **S.L-NIDDM patient**

"Two weeks after taking Eleotin I felt as if I was walking on air. My blood glucose level eventually dropped from 380 to 120"

## ***Eleotin v. Standard drugs***

**N**ew patients are advised to continue on their current medical therapy and inform their doctor while monitoring their BGL's closely. As time goes by, the BGL's will normally level out and reduce. This means that gradual supervised reduction in oral or injectable medication is possible. Users report other beneficial effects of this improved herbally induced homeostasis that include:

- improvement in sleep quality
- less nerve pain
- less frequent urination + increased quantity
- greater energy levels
- improvement in skin quality and tone

**T**hese beneficial effects are inversely proportional in time to age/start-up condition. A mild diabetic (<3 yrs)-improves in 1-3 months, can hope for normalcy in 6 months. Moderate: 3-6 months-normalcy in 1-2 years. Severe (6>yrs): 6-12 months -

## ***Modes of action*** <sup>xii</sup>

### **Regeneration of pancreatic beta- cells.**

**R**esults have shown beta cell activity levels improved after only 3 months of Eleotin usage. This included cases where beta cells had been almost decimated. Following this discovery of increased insulin production, three Type I diabetic volunteers were included in the program and after 3-4 months showed less severe daily swings in BGL's. They also reported substantial general health improvements. All of them succeeded in reducing the daily requirement of insulin dosages by more than 30%. (The improvements of these volunteers are summarized in the "Statistical Summary" in Science at [www.eastwoodcos.com](http://www.eastwoodcos.com))

**T**he resultant increased insulin secretion in the Type II trial was followed for six years to monitor for the stress effects on beta cells that is common with normal pharmaceutical drugs that also stimulate (but often overstimulate) insulin production. No evidence of such side-effects was noted. Moreover, over the 15 years of the various trials, no resistance (secondary failure) to the herbal-complex became apparent, meaning that beta cell response continued unabated. It has been concluded that the 'gentle' action of the herbal-complex was responsible for a more natural synergetic biological response than is found with single-molecule 'kick-start' activity. This causes a 5-10% annual reduction in effectiveness, leading to serious end-time consequences.

### **Up-regulation of insulin receptors**

**A**s Type II diabetes is mostly related to an acquired resistance (lack of response) to insulin by muscle and liver cells (glucose is denied cell-wall entry without an insulin 'password') Eleotin's ability to restore the binding for insulin reception greatly improves the ability of the body to utilise the increased insulin production of the beta cells induced by Eleotin and once again metabolise glucose. To this date, no other health food or drug has demonstrated this attribute safely.

### **GLUT 2 concentration increase**

**G**lucose Transporter 2 (GLUT 2) is an important facilitative glucose transporter found in the liver and pancreas. Eleotin has been found to increase low levels of GLUT 2, so making glucose more available.

### **Kidney and Liver Function**

**T**he synergistic herbal complex developed by JMDRC includes herbs with a proven record of body function benefits. Almost all patients in the various trials reported increased well-being, better sleep and toned skin. Loss of fat above the hips (the typical 'pear shape' of diabetes) occurred in unison with controlled BGL's. Eleotin is now being trialed as a preventive agent against onset of NIDDM.

normalcy 2 years or more. In contrast, the usual long term outcome with standard therapies is gradual physical deterioration and resistance to therapy, leading to the typical terminal outcomes of diabetes, as well as cardiac problems, gastrointestinal disturbances, hypoglycemia, metabolism change induced weight gains and skin disorders. Eleotin is known to be free of these side effects and can be used in combination with existing drug therapy <sup>xiii</sup> without causing any interactions with any of the currently used diabetes therapies. As with any remedy, the best results are seen when it is in conjunction with a well balanced diet, and regular exercise.

## Animal studies show preventive roles

Using GK rats (that usually develop diabetes at 6-8 weeks) in (1) Eleotin and (2) PBS treated controls commencing at 3 weeks of age, BGLs were monitored before onset. By 10 weeks, 70% of the control group rats had developed diabetes, but, only 10% of the Eleotin group rats had developed diabetes: (BGL's 354 ± 39) vs. (BGL's 168 ± 40). The conclusion: Eleotin prevents onset of diabetes.

Other controlled experiments examined the mechanisms of action. These included histological examination of insulin receptors on cell sites (hepatocytes and skeletal muscles), measurements of secretion of insulin in pancreatic beta cells and the inhibition of alpha-glucohydrolase enzymatic reactions.<sup>xiv</sup> These studies show that Eleotin improves the insulin sensitivity of the liver cells, as well as that of the muscle cells.

These experiments were the proving grounds for the human trials that followed these discoveries that P-700 (as it was then known) had the definitive biological response modifying effects.

i) [www.eastwoodcos.com](http://www.eastwoodcos.com). North American Toll Free number: 1-888-401-2233 (1 pm to 5 pm pacific time), Regular Business Telephone number: 1-604-730-9700, Fax number 1-604-730-9800, e-mail: [biotec@eastwoodcos.com](mailto:biotec@eastwoodcos.com)

ii) Details of the recent test statistics can be found at [www.eastwoodcos.com/Science/statsum.html](http://www.eastwoodcos.com/Science/statsum.html). This trial was done by Eastwood Biomedical Research Inc.

iii) Alberta Report (August 24, 1998)

iv) These cases are still of anecdotal nature. More studies are needed for more concrete conclusions.

v) Medifile Volume 3 Issue 1. Australian scientists are known to have tested Eleotin on 15 patients independently of the aforementioned trial which is based on 80 user patients vs. 20 patient control group. The results are available upon requests.

vi) Republic of Korea, Japan, People s Republic of China

vii) Also, for more information on the modes of actions, refer to the science section of [www.eastwoodcos.com](http://www.eastwoodcos.com), or, Townsend Letter May 1999. Inquiries and correspondence can be sent to [biotec@eastwoodcos.com](mailto:biotec@eastwoodcos.com)

viii) As observed in the changes in C-peptide levels. One should be careful in the interpretation. This should not be interpreted to mean that Type I diabetes is cured by Eleotin, even though there are a few cases in which Type I patients experience improvement in their ability to control BGL. For more detail, see [www.eastwoodcos.com/Science](http://www.eastwoodcos.com/Science) Inquiries and correspondence can be sent to [biotec@eastwoodcos.com](mailto:biotec@eastwoodcos.com)

ix) As observed in the changes in plasma insulin levels, and, insulin binding rates.

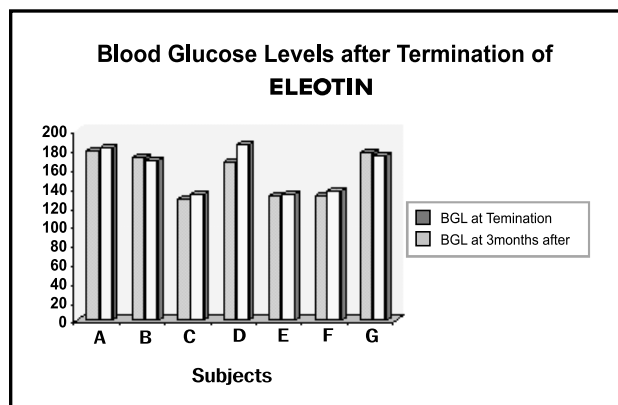
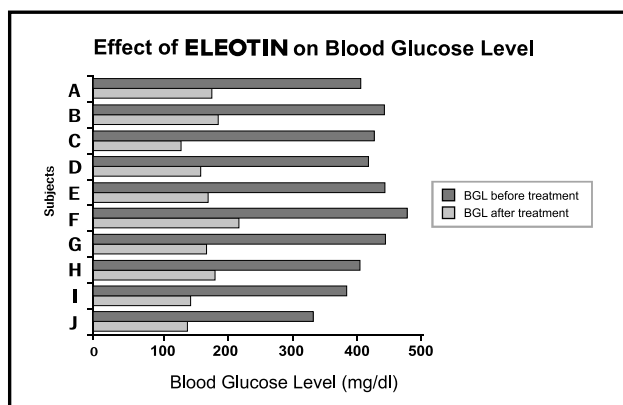
x) March 2000 edition.

xi) This part of the report is mostly quoted from the aforementioned Medifile.

xii) US Research Reports Inc. Metairie, Los Angeles, 1999: Experiments on Eleotin s Effects on Diabetes, University of Calgary

xiii) Healthy Living Nov/Dec 1998.

xiv) For more details, see [www.eastwoodcos.com/Science](http://www.eastwoodcos.com/Science)



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