

# Case #1272: A Case Study Evaluating the Effects of an Inflammatory-Modulating Medical Food and a Nutritional Supplement Containing a Proprietary Blend of RIAA, Vitamin D<sub>3</sub>, Selenium, and Zinc in a Patient with Raynaud's Phenomenon

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## PURPOSE

*This study was designed to assess the effectiveness of an anti-inflammatory medical food, a targeted nutritional supplement (featuring a proprietary blend of reduced iso-alpha acids, vitamin D<sub>3</sub>, selenium, and zinc), and a complementary diet in a patient with Raynaud's phenomenon.*

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## PATIENT'S PRESENTATION AND HISTORY

A 54-year-old Caucasian female presented in 8/05 with a long-term history of Raynaud's phenomenon in her hands and fingers. She played a lot of soccer in her 20s and 30s and this seemed to exacerbate her symptoms. After having problems with cold fingers for a long time, she was finally diagnosed with Raynaud's in 1993. She was placed on amlodipine desylate and she had been doing fairly well except her fingers were still getting cold, which required that she wear gloves when she was outside.

Her current medical conditions also included increasing arthritis over the past several years with inconsistent improvement by anti-inflammatory medications, cortisone, and physical therapy. She also had back and neck pain and mobility problems, with occasional severe discomfort secondary to MVA (2004). In addition, she had been diagnosed with IBS.

The patient's medical history included bronchitis and the following additional surgical procedures: appendectomy (1959), tonsillectomy and nose reconstruction (1964), and hysterectomy (1991). Her family history included hypertension and cancer on the paternal side and depression on the maternal side.

### *Patient's Objective Information*

- Ht: 63"; Wt: 120 lb; BP: 119/70
- Laboratory tests revealed hs-CRP at 1.3 mg/L and positive antinuclear antibodies (titer of 1:640 with a nucleolar pattern associated with scleroderma)
- Physical examination: Essentially unremarkable except for erythema on fingers of both hands, coolness to touch
- Prescriptive medications and supplements: None

## PLAN AND RESULTS

*Assessment:* Raynaud's phenomenon, polyarthritis, and neck and shoulder pain from previous injury.

*Plan:* The patient was instructed to begin inflammatory-modulating medical food in powdered beverage form, including reduced iso-alpha acids from hops (RIAA) and vitamin D<sub>3</sub>, working up to 2 scoops twice daily.

### *2 and 4 Week Results*

After 2 weeks, the patient reported no change in symptoms and she was placed on an elimination diet to assess potential food intolerances. Based on laboratory results that indicated depressed 2/16 alpha-hydroxyestrone ratio, she was also instructed to begin a supplement containing 150 mg indole-3-carbinol (I3C), 1 tablet twice daily with meals.

After 4 weeks, the patient reported that her fingertips were less reactive to cold and she noted significant improvement in her knee arthritis symptoms. She was instructed to take:

- Inflammatory-modulating medical food in powdered beverage form, 2 scoops twice daily
- Nutritional supplement containing 200 mg RIAA, 1 tablet twice daily
- Nutritional supplement containing 2,000 IU vitamin D<sub>3</sub> with soy isoflavones, 1 tablet daily

Based on stool analysis that indicated lack of bifidobacteria, she was also placed on 2 probiotic supplements—one featuring a blend of *Bifidobacterium lactis* strains (targeting the large intestine) and the other featuring a blend of *Lactobacillus* strains (targeting the small intestine)—1 capsule twice daily each (upon rising and at dinner).

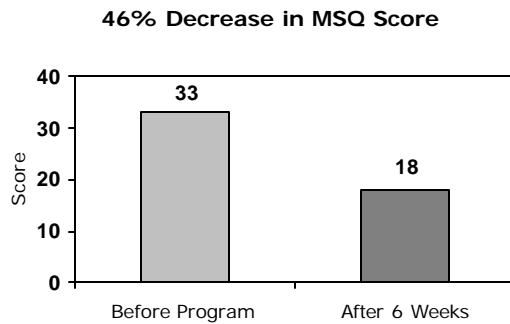
### *6 and 8 Week Results*

At the 6-week visit, the patient reported that her hands seemed to be warm even though cooler Fall weather had started, and that the level of discomfort in her fingers was much less than before starting the protocol. She was instructed to:

- Continue the medical food, 2 scoops twice daily; probiotic supplements; and I3C
- Discontinue the RIAA and vitamin D<sub>3</sub>/isoflavone supplements
- Start a supplement featuring a combination of RIAA, vitamin D<sub>3</sub>, zinc, and selenium, 1 tablet twice daily

After 8 weeks, the patient continued to report improved Raynaud's and arthritic symptoms and she was instructed to remain on the prescribed protocol.

Figure 1. After 6 weeks, the patient's MSQ\* score decreased from 33 to 18. This result suggests a substantial improvement in general physical symptoms.



### SUMMARY

This case study suggests that a protocol combining an inflammatory-modulating medical food and a nutritional supplement—featuring a combination of RIAA, vitamin D<sub>3</sub>, selenium, and zinc—along with a prescribed dietary plan may be beneficial as nutritional support for patients with

immune-inflammatory conditions such as Raynaud's phenomenon.

### NOTE

The information provided in this case study describes the results of one patient under the care of a licensed healthcare practitioner and may not be a typical response.

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\*The Medical Symptoms Questionnaire (MSQ) is a clinical tool for the evaluation of general physical symptoms. Total scores above 75 are generally associated with substantial symptomatology and disability; scores below 30 generally indicate few or low-intensity symptoms.

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