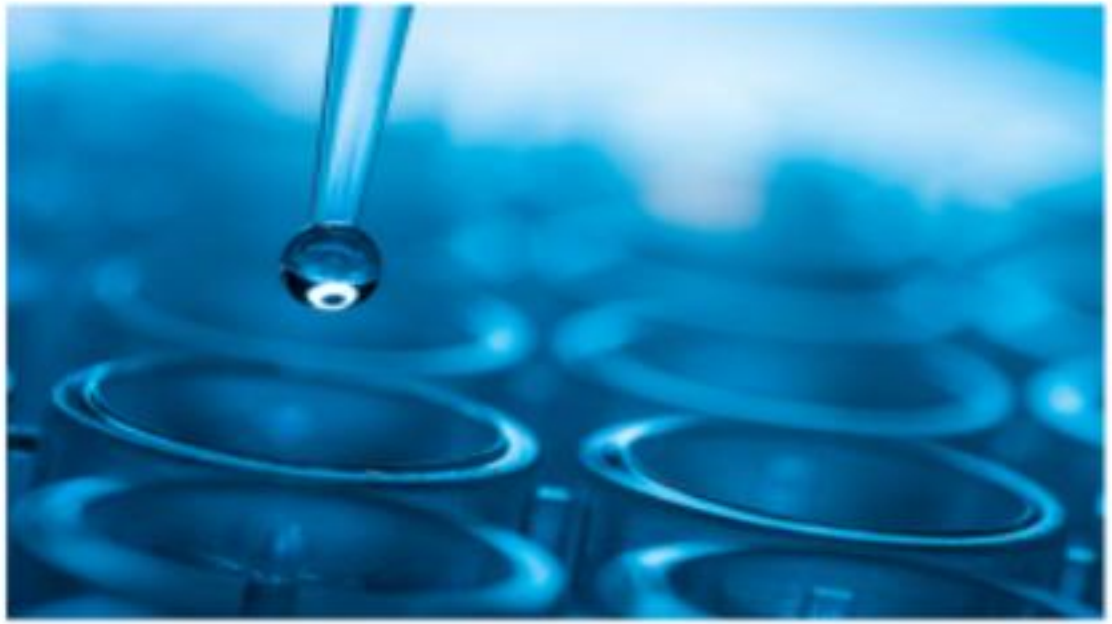
CELLTECH

Stem Cell

Bringing You “Life Rejuvenation”



干细胞

让你 “生命重生”

分享内容 – Shared Contents

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3. 3).干细胞功能 - Stem Cell Function.
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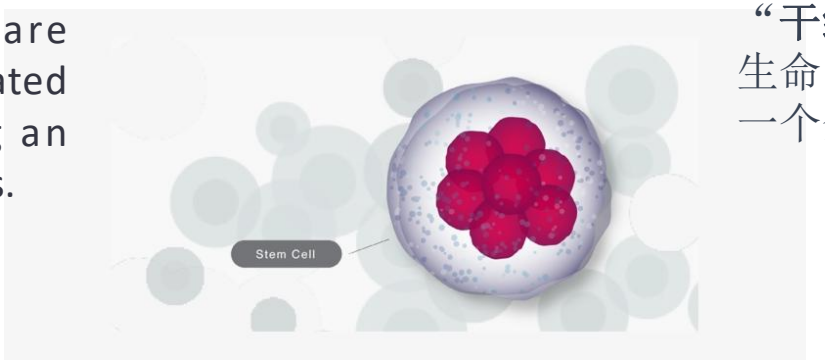
5. 5).如何选择安全/有效的干细胞 – MSC's Safety and Efficiency

New Era of "Stem Cell"

Stem cell, discovering the "New World of Life". In the 21st century, healthcare industries have accelerated and innovated into the era of stem cells, playing an increasingly important role in saving lives.

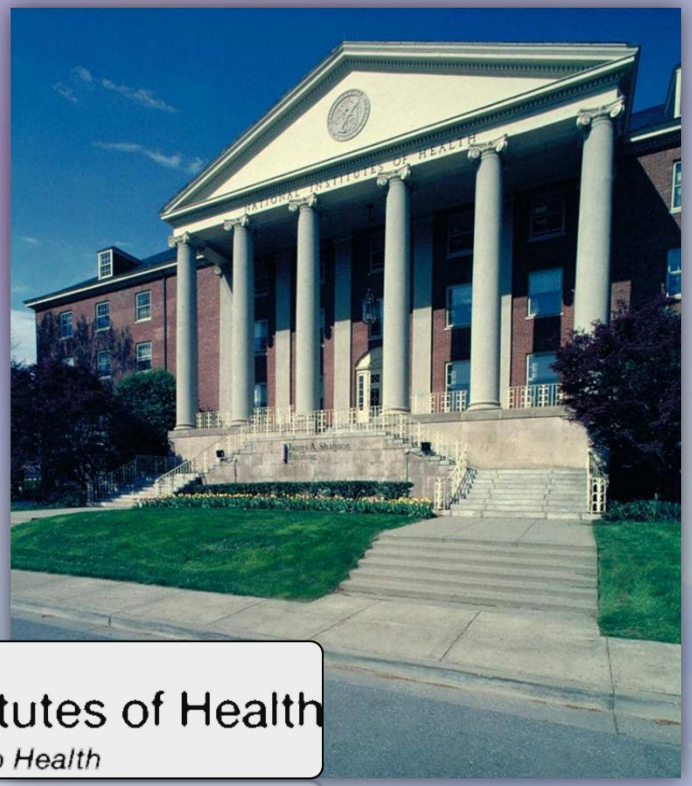


随着21世纪的到来，大健康产业正式进入**"干细胞时代"**，展现出更加卓越的拯救生命的能力。干细胞的发现为我们开启了一个全新的生命世界，在拯救生命的征程中扮演着越来越重要的角色。

NIH National Institutes of Health
Turning Discovery Into Health

NIH, located in Bethesda, Maryland, USA, is the foremost institution for medical and behavioral research in the United States. Founded in 1887 with the goal of exploring the fundamental nature of life and behavior, NIH utilizes this knowledge to extend human life, prevent, diagnose, and treat various diseases and disabilities. The groundbreaking research conducted at NIH over the past few decades has made tremendous strides in improving human health and wellbeing.

NIH位于美国马里兰州贝塞斯达，是美国最顶尖的医学与行为学研究机构。创立于1887年，旨在探索生命和行为本质，充分运用这些知识延长人类寿命，预防、诊断和治疗各种疾病和残障。近几十年来，NIH取得的开创性研究成果大大改善了人类的生命和健康状况



NIH National Institutes of Health
Turning Discovery Into Health

The safety and efficiency of Umbilical Cord Mesenchymal Stem Cell (MSC) has been widely acknowledged worldwide, as evidenced by over 1000 completed or ongoing clinical trials, according to clinical research data presented by the National Institutes of Health (NIH) in the United States.

根据美国国立卫生研究院（NIH）的临床研究资料，目前已有超过1000项与脐带间充质干细胞（MSC）相关的临床研究已经完成或正在进行中。这些研究表明，MSC的安全性和高效性已被全球公认。

醫識力

當藥物手術無法治癒時 幹細胞或成救命稻草

GVHD研究招募受試者

獲NPRA許可治4病

胚胎幹細胞具倫理爭議

NEW STRAITS TIMES
THURSDAY, APRIL 12, 2007
PRIME NEWS • 17

Stem cells may end diabetes jabs

WASHINGTON: Diabetics using stem-cell therapy have been able to stop taking insulin injections for the first time, after their bodies started to produce the hormone naturally again.

In a breakthrough trial, 15 young patients with newly diagnosed Type 1 diabetes were given drugs to suppress their immune systems, followed by transfusions of stem cells drawn from their own blood.

The results show that insulin-dependent diabetics can be freed from reliance on needles by an injection of their own stem cells. The therapy could signal a revolution in the treatment of the condition, which affects millions.

People with Type 1 diabetes have to give themselves regular injections to control blood-sugar levels, as their ability to create the hormone naturally is destroyed by an immune disorder.

All but two of the volunteers in the trial, details of which were published yesterday in the *Journal of the American Medical Association*, did not need daily insulin injections up to three years after stopping their treatment regimen.

The findings were released yesterday as the future of US stem-cell research was being debated in Washington.

Stem cells are immature, unprogrammed cells that have the ability to grow into different kinds of tissue and can be sourced from people of all ages.

Previous studies have suggested that stem-cell therapies offer huge potential to treat a variety of diseases, such as Alzheimer's, Parkinson's and motor neuron disease.

A study by British scientists in November also reported that stem-cell injections could repair organ damage in heart attack victims.

Graphic: Daily Mail

But research using the most versatile kind of stem cells — those acquired from human embryos — is currently opposed by powerful critics, including US President George W Bush.

The journal's study provides the first clinical evidence for the efficacy of stem cells in Type 1 diabetes. Sufferers of the chronic condition, which normally emerges in childhood or early adulthood, have to inject themselves at least four times a day.

Type 2 diabetes, which usually affect people later in life, is linked to lifestyle factors. There are almost two million Type 2 diabetics in Britain, most of whom control their blood sugar levels with pills or through diet.

The new study, by a joint team of Brazilian and American scientists, found that one of the first patients to undergo the procedure had not used any supplemental synthetic insulin for three years.

"Very encouraging results were obtained in a small number of patients with early-onset disease," wrote the authors, led by Julio Voltarelli, from the University of São Paulo in Ribeirão Preto, Brazil. "Ninety-three per cent of patients achieved different periods of insulin independence and treatment-related toxicity was low, with no mortality."

"It will probably be five to eight years before we see a treatment being available," said Richard Burt, a co-author of the study from Northwestern University's Feinberg School of Medicine in Chicago. — DM

FDA Approves Umbilical Cord Stem Cell Trial for Severe COVID-19 Care

MAY 14, 2020 | KEVIN KUNZMANN

The US Food and Drug Administration (FDA) has approved the start of a phase 1/2a trial assessing the use of umbilical cord mesenchymal stem cells for treating patients with severe coronavirus 2019 (COVID-19).

The 60-patient study from cell-based therapeutics company RESTEM will be the first of its kind in the US.

The cells used in RESTEM therapy candidates are grown from umbilical cord tissue through a proprietary process that replicates millions of doses in rapid succession. The Systemic Umbilical Cord Cells to Ease Severe Syndrome with COVID-19 (SUCCESS) trial will identify hospitalized patients with confirmed COVID-19 and acute respiratory distress syndrome (ARDS) who could be best benefit from the therapy.

The randomized, blinded, placebo-controlled study will look at whether umbilical cord lining stem cell therapy may be a safe and effective treatment for patients hospitalized with severe cases of COVID-19.

间充质干细胞治疗糖尿病足溃疡，大有可为

来源:Cel G/干细胞者说

糖尿病血糖控制不良，可引起多种急、慢性并发症。据媒体报道，褚时健就是在患糖尿病多年后出现了严重并发症，医治无效后去世的。

而糖尿病足是糖尿病常见的并发症。国际糖尿病联盟资料表明，70%的截肢手术发生在糖尿病患者身上。糖尿病足发展到后期可能会形成溃疡，糖尿病足溃疡已经成了一个全球公共卫生问题，仅在美国，每年的治疗费用就高达91亿美元。

间充质干细胞在治疗糖尿病伤口方面具备良好的前景，并在临床前和临床试验中都表现出安全有效性。但是，由于缺乏商业化产品，临床医生目前还难以使用到间充质干细胞。

其研究结果显示：间充质干细胞治疗糖尿病足溃疡安全有效。

American Diabetes Association. diabetes

Original Research

干细胞在4类肾脏病治疗上的临床应用

领蔚干细胞
2022-05-13 10:05 ·浙江
2

临床案例

日本湘南镰仓综合医院研究团队在《干细胞转化医学》上发表文章，分享了利用自体干细胞移植成功治疗急性肾损伤患者的经验。

研究团队选取了一名36岁男性患者的严重急性肾损伤，因顽固性高血压合并微血管病态溶血导致急性肾损伤合并慢性缺血性肾损伤，患者经血液透析后血肌酐（7.56 mg /dL）仍然很高，后接受了干细胞治疗。

结 果：移植后23周，他的血清肌酐（2.96mg/dl）水平显著改善，此外仅用60mg硝苯地平和20mg奥美沙坦便可以很好地控制之前难以控制的顽固性高血压。

干细胞治疗肝脏疾病，疗效惊人！

一代重生生命健康中心
2020年9月2日18:09
+关注

武汉大学人民医院启动干细胞治疗乙肝肝硬化（代偿期）临床研究

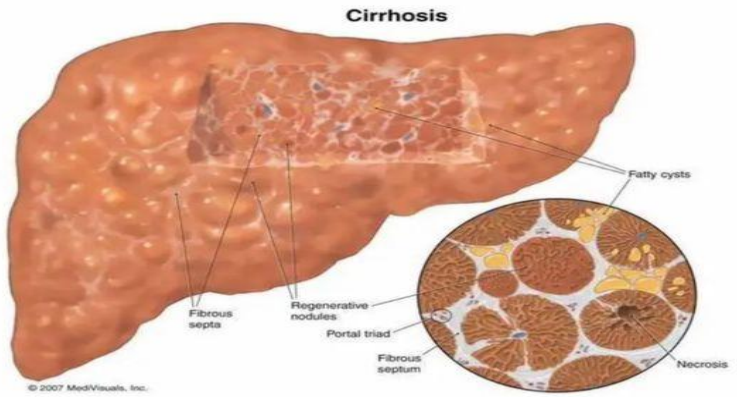
招募82名乙肝肝硬化患者免费接受干细胞治疗

2019-06-20 党委宣传部 浏览次数：1044

本站讯 中国目前有3000万乙肝病人，其中约15%-40%的慢性乙型肝炎患者可发展为肝硬化。6月17日下午，武汉大学人民医院正式启动人脐带源间质干细胞治疗乙肝肝硬化（代偿期）临床研究项目，并面向社会招募82名乙肝肝硬化患者免费接受干细胞治疗。

案例3

在一项最新的临床治疗报告中显示，对72名酒精性肝硬化患者进行间充质干细胞回输**可减轻肝纤维化并改善Child-Pugh评分**（对肝硬化患者的肝脏储备功能进行量化评估的分级标准）。



干细胞疗法或有望根治心脏病

干细胞 | 心力衰竭 | 心肌梗塞 | 心肌细胞 | 心脏病

来源：生物谷 2017-02-20 08:26

据美国CDC数据显示，在美国每隔43秒就会有人心脏病发作；如今，人群中心肌梗死和心力衰竭的高发病率和临床疗效的有限性催生着人们对干细胞疗法的厚望，目前全球已有数千名患者接受了成体干细胞的治疗。

【7】SCTM：新型干细胞可治疗心力衰竭

doi：10.5966/sctm.2015-0070

近日，一种新的研究方法可传递干细胞到受损心肌细胞从而治疗严重的心脏衰竭，本文于7月27日发表在《干细胞转化医学》杂志上。

Amit Patel医学博士，他是盐湖城犹他大学心血管再生医学主任，他和他的同事们招募了60名严重的心力衰竭患者。他们随机分配48名患者到常规护理干细胞疗法组，另外12名患者只用标准疗法治疗。

研究人员指出，干细胞疗法非常安全，治疗本身没有副作用。一年之后，病人的射血分数有了适度改善。目前还不清楚这些改善是否可能有意义，Patel补充说，更大的临床试验正在进行中用来观察这种方法是否可以作为重度心衰的适用方法。

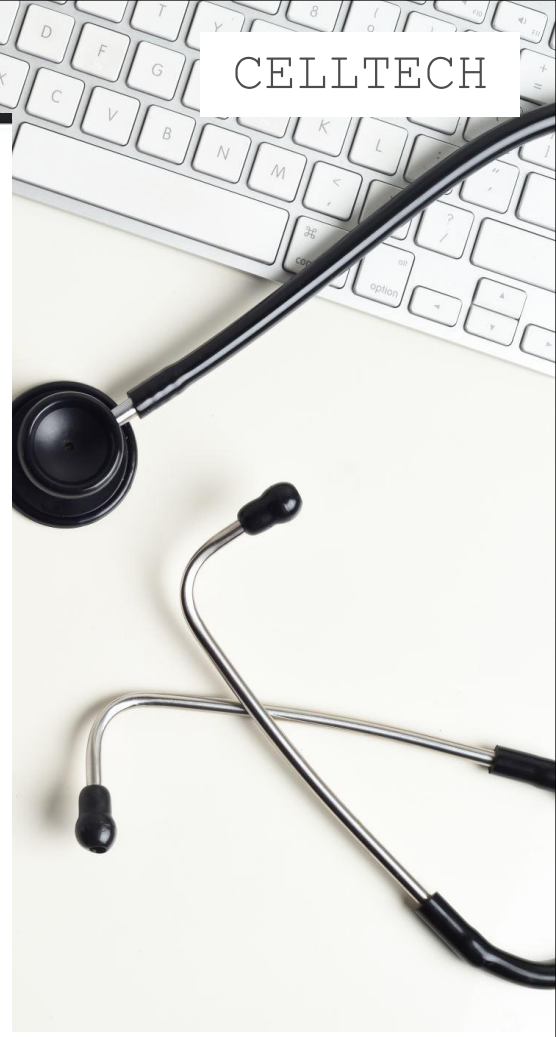
干细胞新疗法利用癌组织硬化特性精准抗癌

2017年07月27日11:20 | 来源：新华社

美国研究人员２６日说，他们研发出一种干细胞新疗法，能利用癌组织硬化的生物物理特性，精准杀灭癌细胞，并减少化疗常见的毒副作用。

加利福尼亚大学欧文分校研究人员当天在新一期美国《科学转化医学》杂志上发表了这一研究成果。该校药学系赵伟安副教授告诉新华社记者，癌组织硬化是实体瘤比较普遍的一个现象，但是传统的癌症治疗都没有把这种生物物理特性作为靶点的治疗方案，这是他们工作的创新之处。

首先，赵伟安团队对从人骨髓分离的间充质干细胞进行改造，使它们具有特异感应硬化肿瘤组织的能力。然后，在小鼠实验中，他们直接静脉注射这种干细胞，同时静



临床研究： 脐带血用于治疗血管性痴呆

2018-05-25 09:14

近期，山东省郓城县中医院在World Latest Medicine Information （世界最新医学信息文摘）发表了一项临床研究成果，**28例血管性痴呆患者在接受脐带血干细胞移植治疗后智能获得明显改善。**

74 World Latest Medicine Information (Electronic Version) 2018 Vol.18 No.23

·临床研究·

脐带血干细胞治疗血管性痴呆的临床研究

司成文
（郓城县中医院，山东 郓城）

摘要：血管性痴呆住院病人详细了解脐血干细胞治疗方法后同意并实施治疗病例 28 例，观察病人智能及安全性。血管性痴呆住院病人经颈动脉注入制备脐带血干细胞悬液，治疗后半年对病人智能及肿瘤标志物监测，治疗前后结果进行比较。结果显示经脐带血干细胞治疗后明显改善病人智能，不增加病人风险。

关键词：血管性痴呆；脐带血干细胞治疗；颈动脉注射治疗
中图分类号：R749.13 文献标识码：A DOI: 10.19613/j.cnki.1671-3141.2018.23.053
本文引用格式：司成文 . 脐带血干细胞治疗血管性痴呆的临床研究 [J]. 世界最新医学信息文摘 ,2018,18(23):74,82.

干细胞治疗中风取得突破

医生此前认为，人脑在中风六个月之后就无法修复，但美国斯坦福大学的科学家研发的新疗法，基本可让患者的脑部恢复到新生儿的状态，让它能够自己重建。

（伦敦讯）美国斯坦福大学的科学家为中风患者研发的干细胞治疗取得突破，让原本靠轮椅代步的患者能够再次站起来走动。科学家希望，这项技术也能用来治疗阿尔茨海默氏症等神经退行性疾病。

英国《电讯报》报道，共有18名因中风而瘫痪或行动不便的患者接受了这项治疗。他们的平均年龄为61岁，患的是缺血性中风（Ischemic stroke）。这类型的中风一般是因血管受堵，使脑部无法获得血供所致。

医生在这些患者的头颅钻了一个洞，并在其脑部受损的部分注入干细胞；这些干细胞取自两名捐赠者的骨髓。

报道说，患者只须接受局部麻醉，隔天就能出院。虽然大部分病患在手术后初期投诉出现头痛症状，但这一疗法并无长期后遗症，病人过后的康复情况非常好。

据了解，此疗法只适用于那些在六个月至三年前中风的患者。

医生此前认为，人脑在中风六个月之后就无法修复，但新疗法基本可让患者的脑部恢复到新生儿的状态，让它能够自己重建。

斯坦福大学神经外科主席斯坦因伯格教授表示，这些患者康复的情况相当令人惊讶。

原本坐轮椅患者

这名从事干细胞研究已有15年的教授说：“这些原本得坐轮椅的患者，现在已经能站起来走路，他们移动的能力已经明显恢复，这是前所未见的。”

斯坦因伯格指出，这项研究颠覆了科学家之前的看法，即患者中风六个月后就无法更好地康复。

科学家此前认为，干细胞不能融入大脑内成为脑神经元。但这个疗法显示，干细胞能够分泌一种化学物质，让大脑能够恢复其功能。

斯坦因伯格说：“简单来说，这个干细胞移植技术把成人的脑部变成了新生儿脑部，让它在经历中风或其他伤势后能够良好康复。”

英国每年有大约12万5000人患缺血性中风，但许多患者无法在关键的四个半小时内接受治疗，因此

英国中风协会的研究通讯经理卡迪尔则指出，英国每三分半钟就有一人中风，超过半数的患者身体会因此出现缺陷。

他表示，急需其他疗法来治疗这种疾病，而新干细胞疗法是个正面的发展，为许多患者带来了福音。

斯坦福大学医学院的科学家认为，这个方法也能用来治疗其他神经退行性疾病，例如阿尔茨海默氏症（Alzheimer's Disease），帕金森症（Parkinson's Disease）和葛雷克氏症（Lou Gehrig's Disease）。

2014年8月11日星期一

干细胞疗法 中风病人恢复行动

英国伦敦帝国学 院一项初步研究显示，脑部注入干细胞或许有助于中风后的复元。科学 家认为，干细胞有促进脑部受损区新血管生长之效，5名接受该实验的严重中风病患，在病发6个月后，恢复说话与行动能力，认知能力也明显改善。

英国每日邮报报导，参与 实验的患者包括3名男性、2名女性，其年龄在45岁至75岁之间。他们皆罹患严重的缺血性中风，也就是供血给脑的动脉阻塞;该情况发生时，脑细胞因缺氧而死，并引发严重的运动功能障碍，包括颜面下垂、四肢瘫痪，以及吞咽与说话等问题 。

报导说，其中4名患者为“完全前循环梗塞”，亦即有一侧前脑的血液供应完全被阻断。此类中风的预后十分不佳，约50%在6个月内死亡 ，46%必须仰赖他人生活，仅4%可复元至独立生活。

Formula 1 legend Michael Schumacher will have a stem cell operation 'within days' to regenerate his nervous system six years after his catastrophic skiing accident

By Will Griffee For Mailonline
06:48 GMT 11 Jun 2020 , updated 12:54 GMT 11 Jun 2020

舒马赫
修复神经线受伤的问题

拉斐尔
解决膝盖和背部受伤的问题

Rafael Nadal to have stem cell treatment on injured back, says doctor

- Nadal, who had appendix out recently, faces more surgery
- Doctor hopes treatment will regenerate cartilage

▲ Rafael Nadal could be back in training by next month if the treatment is successful.

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Sport › Football › Cristiano Ronaldo

Cristiano Ronaldo to undergo stem cell treatment in desperation to be fit for Manchester City second leg

The Real Madrid maestro sat out of the first leg but will be doing all he can in order to return for the second leg clash next week

SHARE COMMENTS By Aaron Flanagan 11:18, 28 APR 2016 SPORT

ique: Ronaldo is in a race against time to be ready for the second leg (Image: Reuters)

esperate Cristiano Ronaldo could be set to undergo revolutionary stem cell treatment in order to be fit Real Madrid's Champions League semi-final showdown with Manchester City.

罗纳尔多
改善脚受伤的问题

迈泰森
回到15年前的训练状态

The Sun NEWS MONEY DEAR DEIDRE TECH TRAVEL MOTORS PUZZLES SUN BINGO SUN VOUCHERS

BACK IN GLOVE Mike Tyson, 53, reveals he had stem cell research therapy and hadn't hit bags for 15 YEARS before returning to training

Richard Forrester
5 May 2020, 16:01 | Updated: 5 May 2020, 16:44

1 Comment

MIKE TYSON revealed how he has started training again having not thrown a punch for a staggering 15 years - and is being aided by stem-cell research therapy.

美国科学家最新发现

干细胞能延长寿命两倍

美国科学家认为，干细胞里面的蛋白质，可能含有有助人体恢复青春活力的关键。来自匹兹堡大学的研究人员说，进一步的研究可能给我们带来希望，我们可能完全延缓老化的过程。

（纽约综合电）美国科学家的研究发现，干细胞能够延缓老化，甚至把寿命延长两倍。

美国匹兹堡大学对老鼠进行的实验发现，只要注入年轻老鼠的干细胞，患有早衰症的老鼠的寿命得以延长，甚至会长得较大较强壮。

美国科学家在实验室内进行的试验揭示，把年轻的干细胞同早衰的细胞并排，那早衰细胞的情况随即获得明显的改善。

美国科学家认为，干细胞里面的蛋白质，可能含有有助人体恢复青春活力的关键。来自匹兹堡大学的研究人员说，进一步的研究可能给我们带来希望，我们可能完全延缓老化的过程。

美国匹兹堡大学研究人员在展开这项时，先在试验鼠身上动手脚，让它们出现早衰老情况。科研人员对这些老鼠的研究显示，它们的干细胞的再生能力，没有普通老鼠的干细胞快。

接着，科研人员给一些17天大的有早衰老问题的老鼠注入年轻老鼠的干细胞之后，其寿命从平均只有21天至28天延长到超过66天，足足增加了两倍。

这过早衰老的老鼠在注入健康老鼠的干细胞之后，还会长得同健康老鼠一样强壮。

美国匹兹堡大学的尼德恩霍弗医生说，"在注入年轻健康的老鼠的干细胞之后，原本患有过早衰老的老鼠，会变得更健康，寿命也会延长。"

科学家认为，这是因为健康的干细胞会协助修补迅速衰老的老鼠的畸形干细胞。

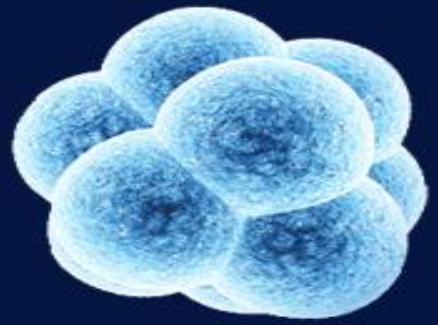
尼德恩霍弗医生说，"这情况告诉我们，干细胞机能失调，是，造成衰老变化的原因之一。随着患有过早衰老症老鼠的老化，它们的后腿会逐渐丧失肌肉团，会出现弯身，身躯发抖，行动迟缓等症状。"

尼德恩霍弗说，受影响的老鼠在刚要开始出现衰老迹象时就被注入干细胞，会更像正常的老鼠，也会长得几乎一样大。

他说，科研人员的进一步检查还发现，这些受影响的老鼠的脑部和肌肉会生长新血管，但这些长出新血管的部位并没有外来干细胞的踪迹。

"实际上，在给受影响的老鼠的腹部注入干细胞后，这些干细胞并没有转移到这些老鼠的其他部位去。"

他说："我们因此推测，外来的健康的干细胞内的一些神秘的因子创造一个有利的环境，协助修正原有的干细胞群和老化组织的功能。"



究竟什么是干细胞？

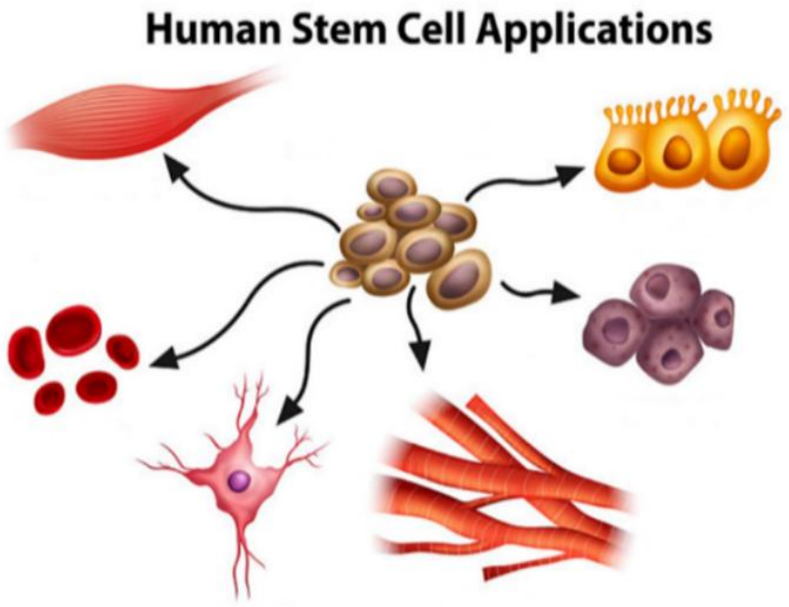
WHAT IS A STEM CELL?

干细胞是一种未充分分化，
具有再生各种器官与组织细胞更新的“母细胞”。

Stem cells, with their unique ability to regenerate and replace various types of tissue cells, are a remarkable class of immature cells that hold great potential for medical breakthroughs. These cells are not fully differentiated yet possess the innate ability to develop into a vast array of specialized cells, offering new hope for tissue repair and regeneration.

Stem cells serve as a powerful tool replenishing the body's diminishing number of functional cells

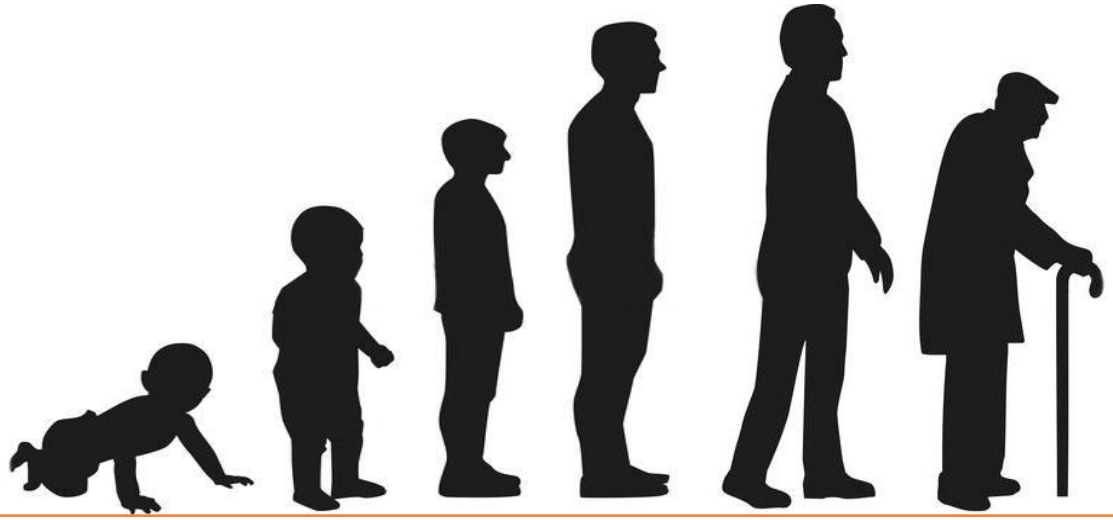
Whether caused by degeneration, aging, disease, or injury, autologous stem cells respond swiftly to promote differentiation into specialized cells required by the body. By providing an ample supply of specialized cells, stem cells aid in the body's natural repair and healing processes.



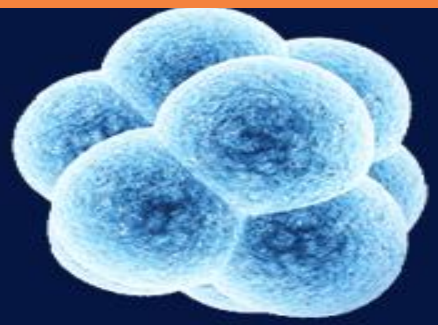
干细胞可以不断补充工作细胞的缺失

当身体细胞遇到退化、衰老、疾病，某个器官罢工或受伤时，自体干细胞会第一时间做出反应，促进分化成器官专属的细胞帮助修复与愈合。

随着年龄的增长，身体活化的干细胞数量就越來越少，因此新生细胞不足補充死亡细胞，也就是老化

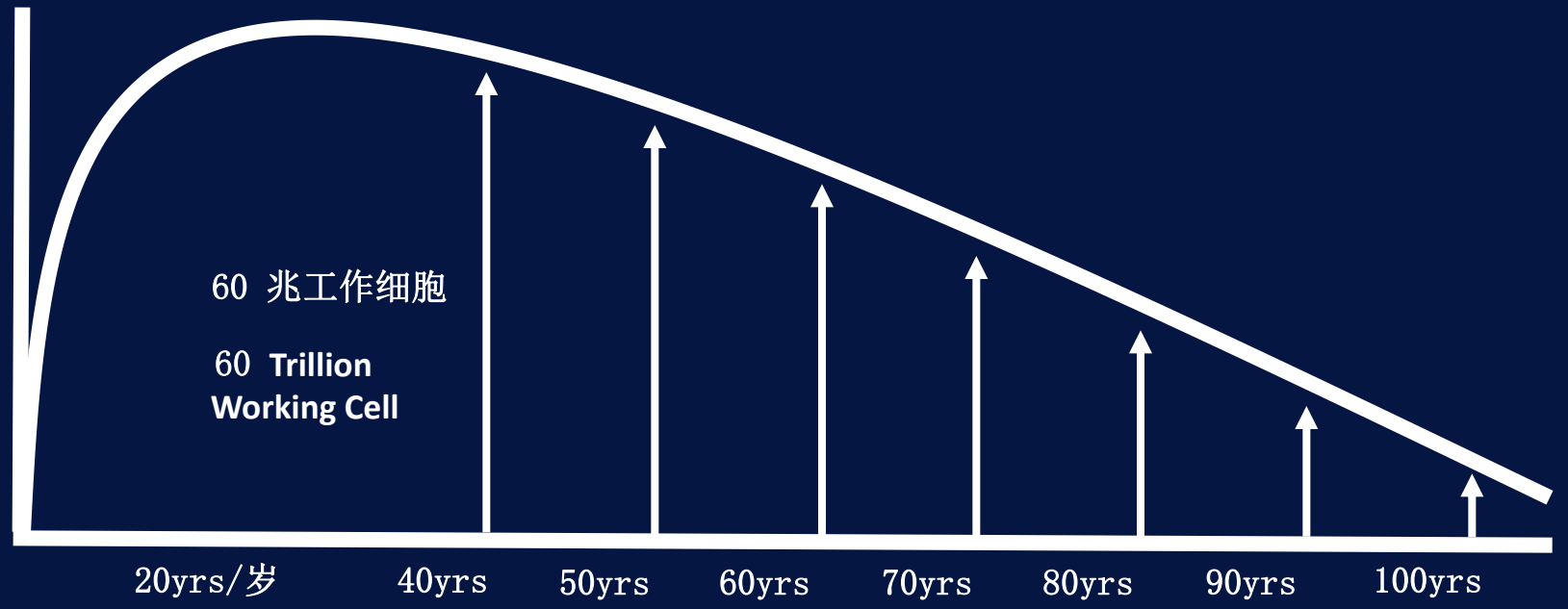


Stem cells persist throughout the lifespan, faithfully replacing cells that are lost due to homeostatic turnover, injury, and disease. However, as time passes, the number and functionality of these stem cells begin to decline, leading to the onset of degeneration and dysfunction within the body.



根据报告人体40岁身体细胞已死亡20%,之后身体细胞每年平均死亡1%至2%,
而身体器官也会跟着萎缩，器官功能退化与老化引起疾病

Medical reports indicate that, after reaching the age of 40, our body's cell count decreases by approximately 20%, with an annual reduction rate of 1-2%. This progressive decline in cell count leads to organ atrophy and, ultimately, increases the risk of degenerative diseases.



1岁至20岁成长期 • Growing period of 1 to 20 years old

衰老开始:
女子 **21岁**
男子 **24岁**

50岁之后:
老化速度加快，
变化明显。

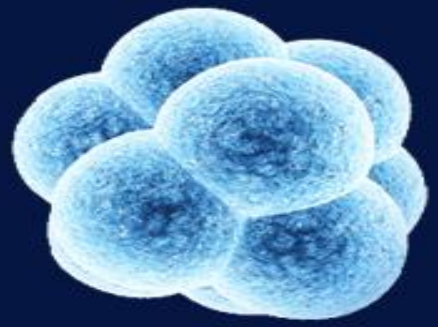
人体器官衰老有“日程表”Human Organ Maintenance Timetable

人体几个主要器官的衰老变化 Aging Progress Of Human Organs

人体各部位开始衰败的年龄: Aging changes in your organ:	
大脑 Brain： 20岁/Years	牙齿 Teeth： 40岁/Years
肺 Lung： 20岁/Years	肾 Kidney： 50岁/Years
皮肤 Skin： 25岁/Years	前列腺 Prostate： 50岁/Years
肌肉 Muscle： 30岁/Years	耳朵 Ear： 55岁/Years
头发 Hair： 30岁/Years	肠 Intestine： 55岁/Years
性器官 Sexual Organ： 35 岁/Years	舌头鼻子 Tongue/Nose： 60岁/Years
乳房 Breast： 35岁/Years	膀胱 Bladder： 65岁/Years
骨骼 Bone： 35岁/Years	喉咙 Throat： 65岁/Years
眼睛 Eye： 40岁/Years	肝脏 Liver： 65岁/Years
心脏 Heart： 40岁/Years	

所以10年前的你和10年后的你，
无论是精力、体力、外表都不可能一样。

The inevitability of aging makes it difficult to maintain our youthful vitality, energy, and appearance over time.

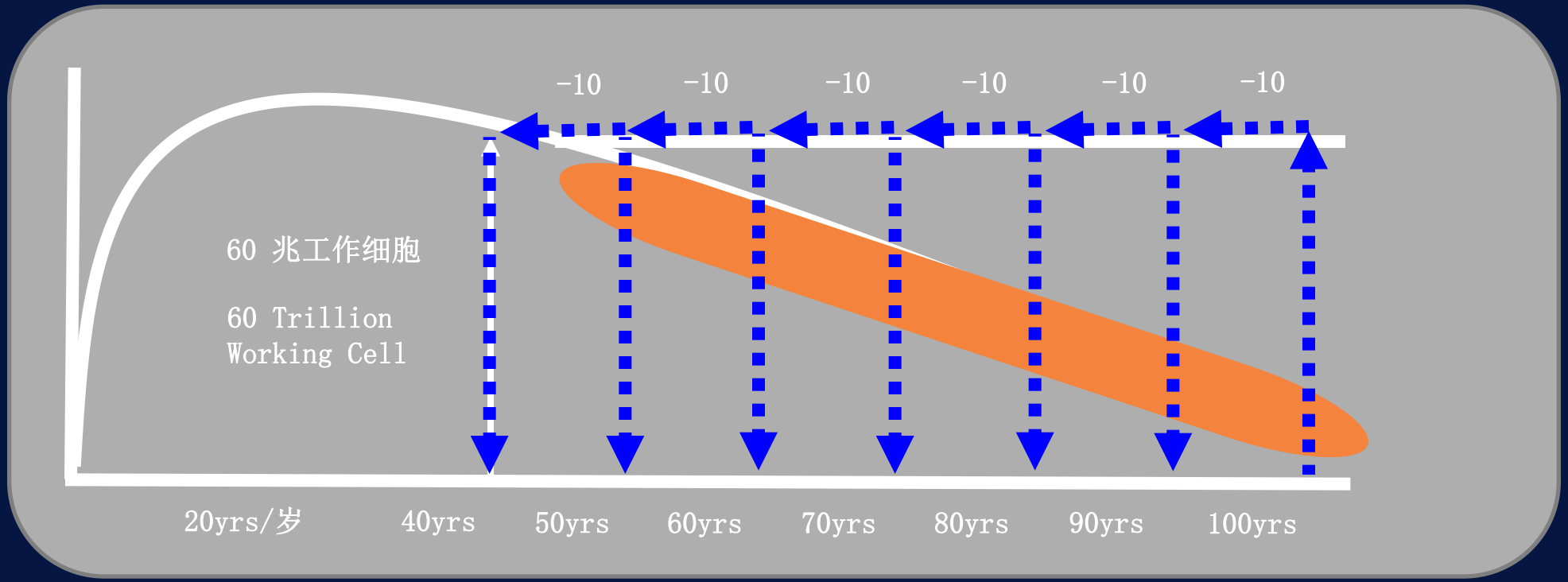


如何延缓老化,逆转老化

让身体有足够的活化干细胞去”分化”及”补充缺失”的工作细胞，就可以逆转各种老化现象并且有可能让慢性疾病消失。

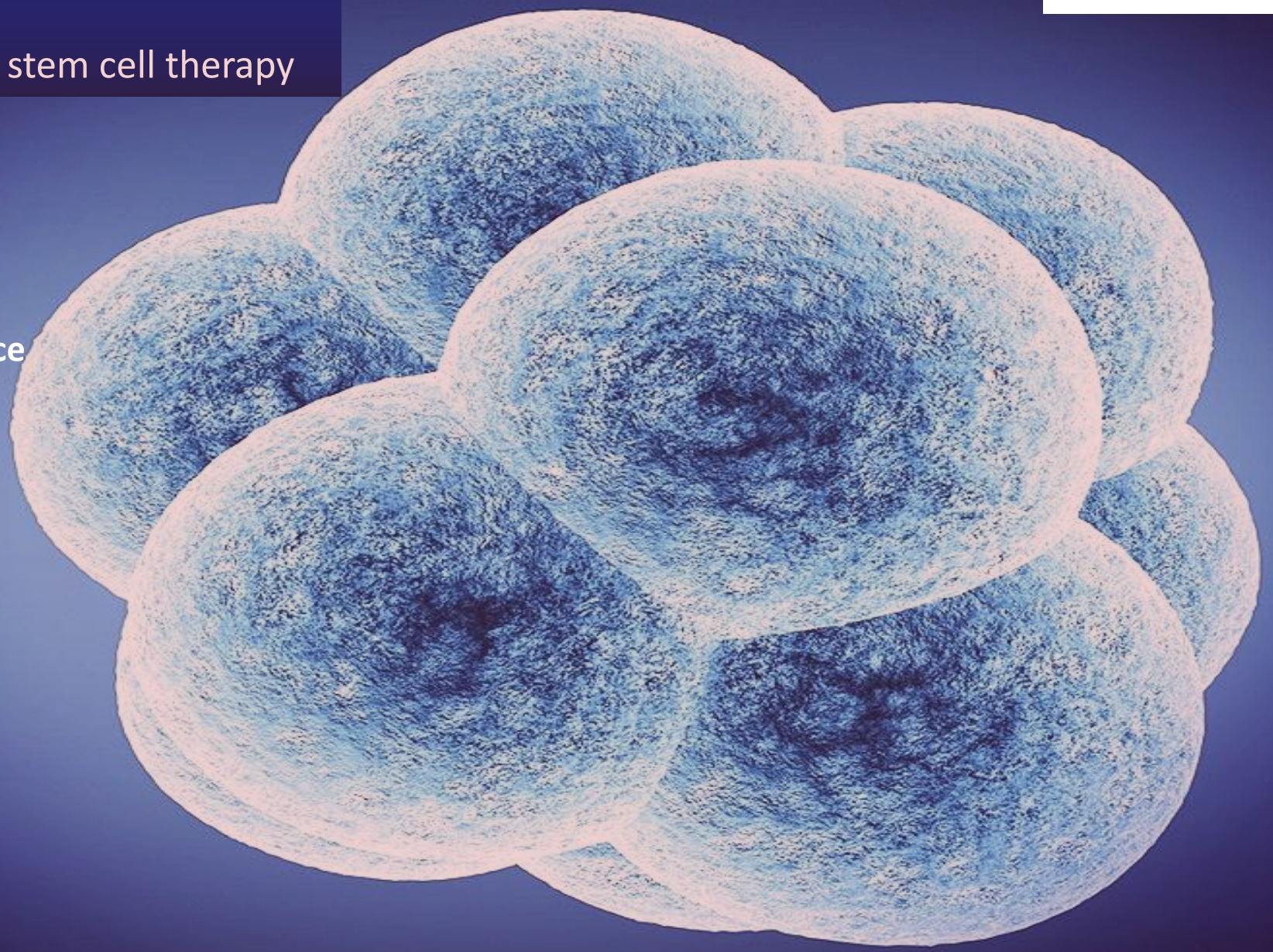
How To Delay Aging And Reverse Aging

By increasing the number of stem cells and promoting differentiation, the body can effectively replenish the outflow of functional cells. This process can help to reverse signs of aging and may even contribute to the disappearance of chronic diseases, leading to a healthier and more vibrant life.



注射干细胞必须注意的事项
Precautions to take when undergoing stem cell therapy

1. 注射干细胞安全吗?
   Are Stem Cells safe to use?
2. 干细胞拥有产品责任险?
   Is there any Product Liability Insurance for Stem Cells?
3. 如何证明是干细胞?
   How can we authenticate the use of Stem Cells?
4. 如何计算干细胞数量?
   How do we accurately measure the quantity of Stem Cells?
5. 干细胞的活性测试?
   How do we conduct an active Stem Cells' test?



MSC – 脐带间充质干细胞

www.celllife.com.my

Product Purpose – 产品宗旨

Safe & Effective 安全及有效

由英国 LLOYD'S 保险承保
2千万澳元 Cell Life 干细胞产品责任险

Insured by LLOYD'S Insurance UK
AUD 20 Million of Cell Life Stem Cell Product Liability Insurance

Level 2, 85 West Burleigh Road, Burleigh Heads QLD 4220
P.O. BOX 3858 Burleigh Town QLD 4220
T: 07 5586 9955
E: admin@abc2c.com.au
W: abc2c.com.au

Austbrokers Coast to Coast Pty Ltd
ACN 011 046 414 ABN 79 011 046 414
Australian Financial Services Licence No: 241012

austbrokers Coast to Coast
YOUR broker, working for YOU

COMBINED BIOTECHNOLOGY AND MEDICAL MALPRATICE LIABILITY INSURANCE

CERTIFICATE OF CURRENCY

INSURED BY LLOYD'S AUD 20 MILLION

INSURED:	Autologous Stem Cell Technology Pty Ltd and/or Subsidiary Companies	
BUSINESS DESCRIPTION:	Production of Autologous Stem Cells; Import, Export and Sale of Mesenchymal Stem Cell Products, Cytokine and related products including "CellLife +", supplied to 'Cell life medic & Aesthetic Sdn Bhd'	
INTERESTED PARTY:	N/A	
LIMIT/S OF LIABILITY:	Public Liability	$20,000,000
	Products Liability	$20,000,000
	Clinical Testing Liability	$20,000,000
	Clinical Trials No Fault Compensation	$20,000,000
	Errors & Omissions	$20,000,000
	Medical Malpractice	$20,000,000
POLICY TERRITORY:	Anywhere in the world excluding North America	
POLICY NUMBER:		
UNDERWRITER:	100% Lloyd's Underwriters.	

This Certificate of Currency does not form part of the policy document issued. The content of this Certificate of Currency is for general information purposes only and is correct at the Date of Issue. This Certificate of Currency does not provide, mend, extend or alter the cover provided by the above policy/s or to the parties.

BIOTEST LABORATORIES PTY LTD

A.B.N. 82 010 324 971
2 Darnick St, Underwood QLD 4119
Telephone: (07) 3841 2232
Email: admin@biotestlab.com.au

Attention:	Quality Assurance Manager Autologous Stem Cell Technology Pty Ltd Suite 3, Building 10 Level 2, 2404 Logan Road EIGHT MILE PLAINS QLD 4113	**Report Reference** **Issue** **Purchase Order:** **Report Date** **Page Number**	A1A 1 NONE 16 May 2019 1 of 1

Samples received from:	Autologous Stem Cell Technology Pty Ltd
Date samples received:	08 May 2019
Sample Condition on receipt:	Representative 7.6°C, by infrared thermometer, at 12:55 PM
Sample Storage:	Fridge (5±3°C)
Testing Commenced:	16 May 2019, samples analysed as received

TEST RESULTS

Biotest Sample No.	Cell Life A1/1
Sample Description	2mL of Cell Life
Batch Number	Cell Life A1

Test	Biotest Method		Test Result
Bacterial Endotoxin	Endotoxin Units per mL	MTM-06-006-01	<6
Total Viable Aerobic Count	Columbia Blood Agar 37°C/3days CFU per 0.1mL	MTM-07-005-01	<1
Total Viable Count	Columbia Blood Agar CO2 37°C/3days CFU per 0.1mL	MTM-07-005-01	<1
Microbial Growth	Thioglycollate Medium 37°C/3days per 0.1mL	MTM-07-005-02	Not Detected
Microbial Growth	Tryptone Soya Broth With tween 37°C/3days per 0.1mL	MTM-07-005-02	Not Detected
Mycoplasma Real-Time PCR Test	External Microgenetix Per 0.1mL	MTM-07-005-03	Negative Appended Microgenetix Report# A1-01

Key: ≈ = Approximate Count < = Less than > = Greater than
CFU = Colony forming unit TNTC = Too Numerous to Count

All samples analysed as received. This report relates specifically to the samples received and replaces all previous revisions and preliminary results. Results relate to the source material only to the extent that the samples are supplied are truly representative of the sample source. All tests were performed at various times between the sample received date and the reported date.

Authorised by:

Yugdeep Bura
B.Technology (Science)., MSc. **Microbiology**
Team Leader

TGA Licence No.: MI-04022005-LI-00420-2
APVMA Licence No.: 6036

Chemists & Microbiologists

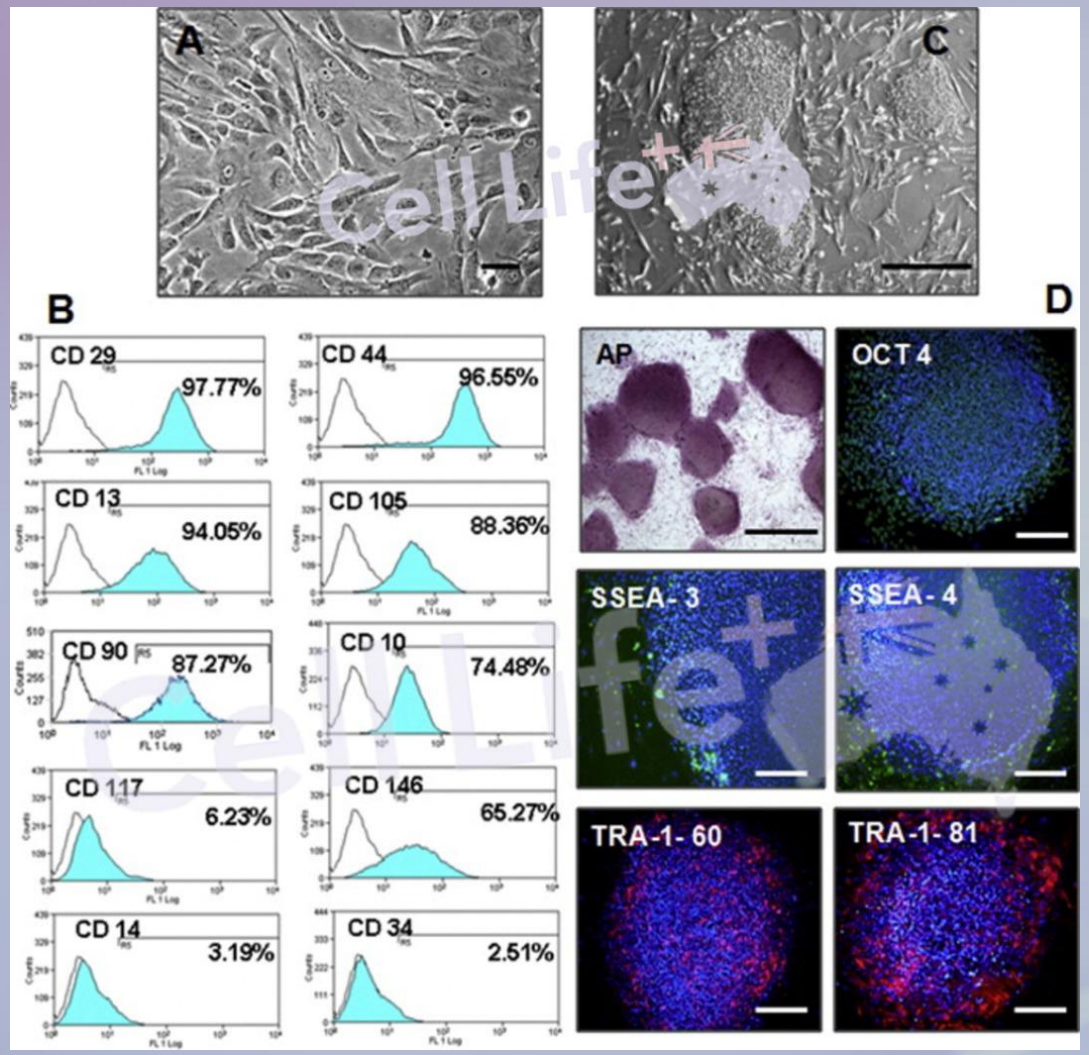
Report of Bacteria Analysis
细菌安全分析報告

Biotest Laboratories
第三方品质监控安全测试。

Biotest Laboratories acted as
third-party quality and safety controller.

脐带间充质干细胞不会介导癌细胞基因 - 分化分析报告

MSC do not mediate cancer genes –Analysis Report



Stemlife™
tomorrow's lifeline

PO Box 40
Darling South
VIC 3145
AUSTRALIA
Phone: +61 43777 2272

10 June 2019

Dear Sir or Madam,

Re: Cell Life+ Safety Assurance

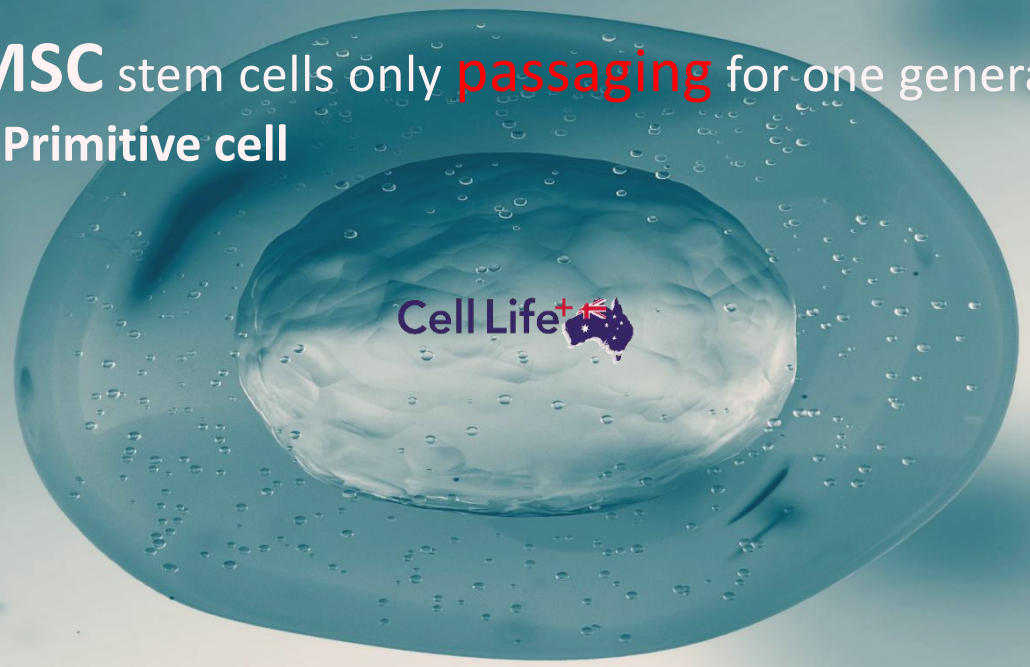
I hereby confirm that all Cell Life+ products released for distribution by Stem Life, a subsidiary of Stem Cell Australia, have been confined to cell passaging of **one generation only**, and production is compliant with best practices to ensure product safety.

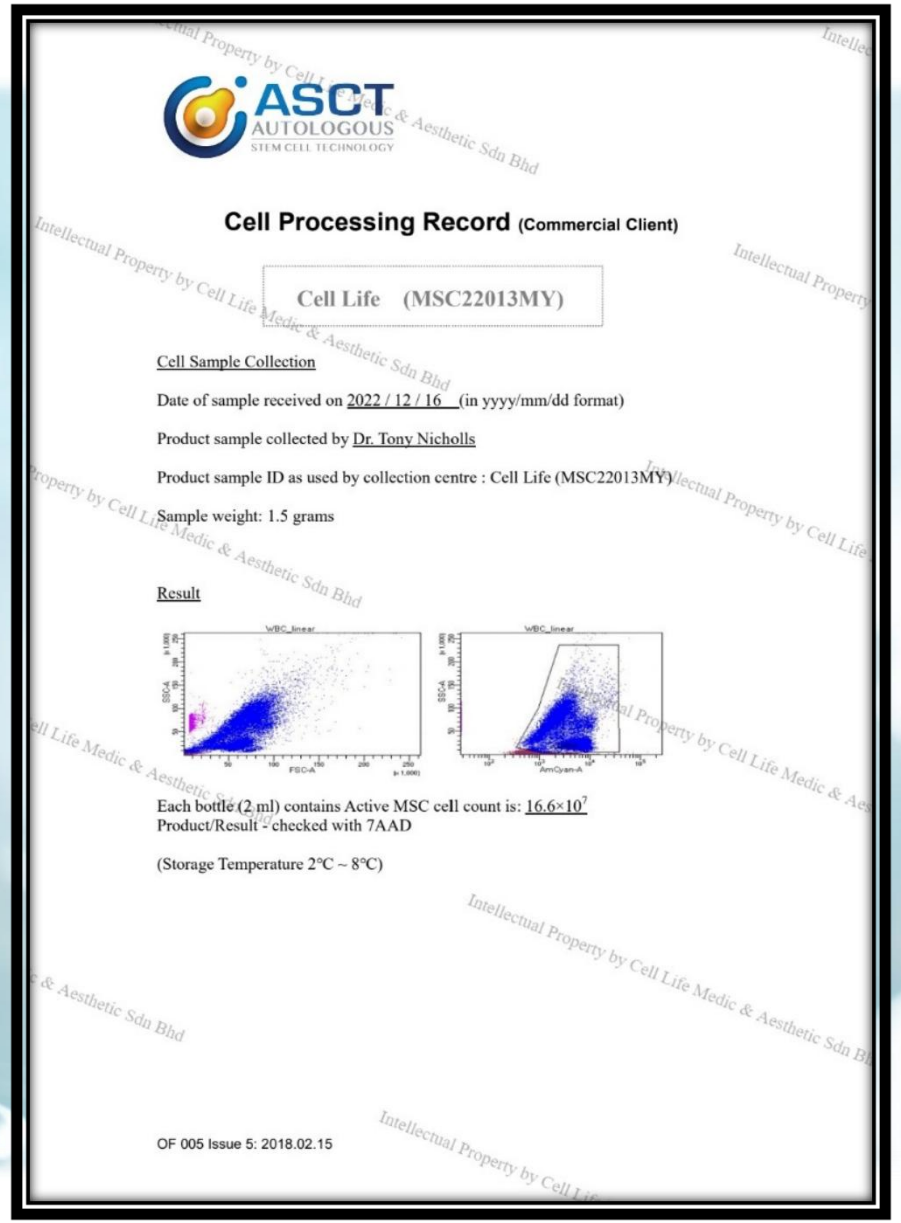
Yours sincerely,

Anastasios Nicolaou
Director

MSC 脐带间充质干细胞保证 分化 一代 – 母细胞

MSC stem cells only **passaging** for one generation only
– Primitive cell





ASCT AUTOLOGOUS STEM CELL TECHNOLOGY

Cell Processing Record (Commercial Client)

Cell Life (MSC22013MY)

Cell Sample Collection

Date of sample received on 2022 / 12 / 16 (in yyyy/mm/dd format)

Product sample collected by Dr. Tony Nicholls

Product sample ID as used by collection centre : Cell Life (MSC22013MY)

Sample weight: 1.5 grams

Result

Each bottle (2 ml) contains Active MSC cell count is: 16.6×10^7
Product/Result - checked with 7AAD

(Storage Temperature 2°C ~ 8°C)

OF 005 Issue 5: 2018.02.15

Quantitative Testing Experimental Report
干细胞数量的测试检验报告

以上两个程序之后，交由**ASCT干细胞科技进行数量测试检验**。

Once completed the 2 procedures, will send to **Autologous Stem Cell Technology (ASCT) for quantitative Testing.**

7-AAD细胞检测属于“淘汰弱留强”的细胞计数检测方法，使用一种荧光性DNA染料来分析细胞的强弱程度。

所有被鉴定为无活力或死亡的细胞都将被排除，只有活细胞的数量会被记录在定量检测实验报告中。

Survival of the fittest: **7-AAD (7-Aminoactinomycin D) is a fluorescent DNA dye used to assess cell viability and count cells.**

It differentiates between strong and weak cells. In the Quantitative Testing Experimental Report, inactive or dead cells are identified and eliminated, leaving only live cells recorded.

肾功能衰竭问题

CELLTECH

CLINIPATH MALAYSIA SDN BHD (248187-W)

No.23, Galeri Empire
Jalan Empayar Off Persiaran
Sultan Ibrahim/KU1
41150 Klang Bandar Diraja
Selangor Darul Ehsan
Tel: (03) 3342 2828 (H.Line)
Fax: (03) 3343 5858
Email: clinipath@tm.net.my
Website: www.clinipath.com.my

RESULTS: TEL 3342 2828

DIEH SIEW HUAT

Sex : Male Age : 59
I/C :
Service Date: 02/11/2021

Req No :15(

DR NICHOL
NURI SIMFONI
37, JALAN SET
SEKSYEN U13,
SHAH ALAM 40
PHONE : 011-5

Estimated GFR	80	Units :-mL/min/1.7

Estimated GFR (ml/min)	Stage of CKD
>=90	1 - Normal or increased GFR
60-89	2 - Slight decrease in GFR
30-59	3 - Moderate decrease in GFR
15-29	4 - Severe decrease in GFR
<15	5 - Indicative of renal failure

* This estimate GFR should not be used for patient below 18 years old, pregnant or dialysis patients.

Name : DIEH SIEW HUAT
IC
Passport No
Date of Birth : 16/08/1962 60Y
Gender : M
Your Reference :

Doctor : Dr Henry Pang
Location : Symphony Medical Centre
Received Date / Time : 28/12/2022 0858
Collection Date / Time : 27/12/2022 0858

TEST 检验	RESULT 检验结果	UNIT 单位	REF. RANGES 参考值
Renal Profile 1 肾功能检验1			
Total Protein 总蛋白			
Albumin 白蛋白			
Globulin 球蛋白			
A/G Ratio 白蛋白/球蛋白比率			
Calcium 钙			
Corrected Calcium 校正钙			
Inorganic Phosphate 无机磷			
Glucose 血糖			
Sodium 钠			
Potassium 钾			
Chloride 血清氯			
Creatinine 肌酐			
Urea 尿素			
eGFR 估计肾丝球滤过率	>90		

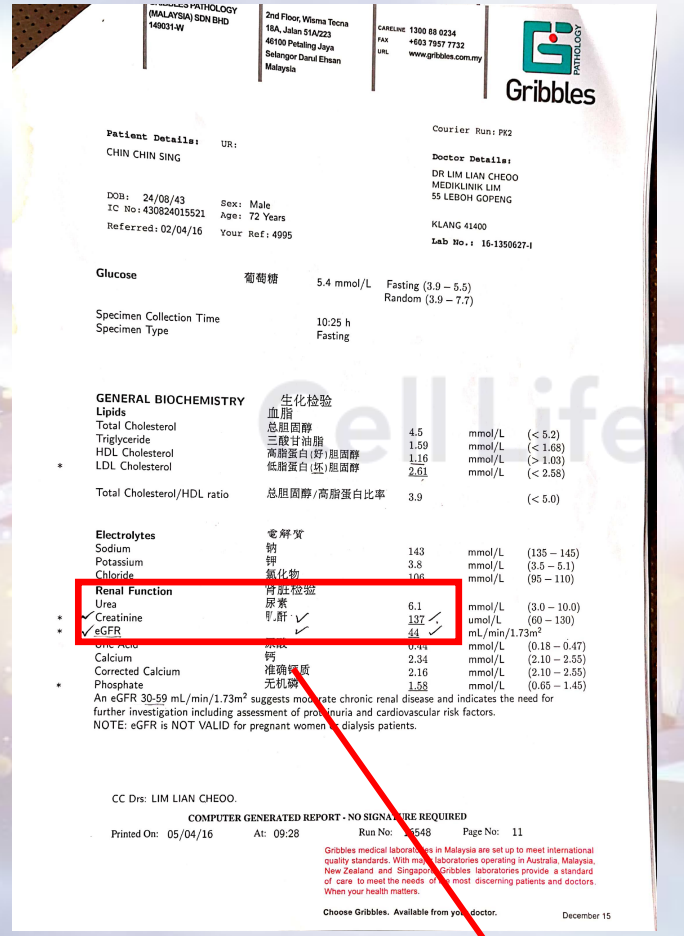
90 above	Normal or high
60-89	Mildly decreased*
45-59	Mildly to moderately decreased
30-44	Moderately to severely decreased
15-29	Severely decreased
<15	Kidney failure

CELLTECH

分享者 Sharer：

陈先生，81岁

进行间充质干细胞疗程后，尿酸，肾脏功能衰竭问题显著改善。



GRIBBLES PATHOLOGY (MALAYSIA) SDN BHD 149031-W
2nd Floor, Wisma Tecna 18A, Jalan 51A/223 46100 Petaling Jaya Selangor Darul Ehsan Malaysia
CARELINE 1300 88 0234 FAX +603 7957 7732 URL www.gribbles.com.my
Gribbles PATHOLOGY

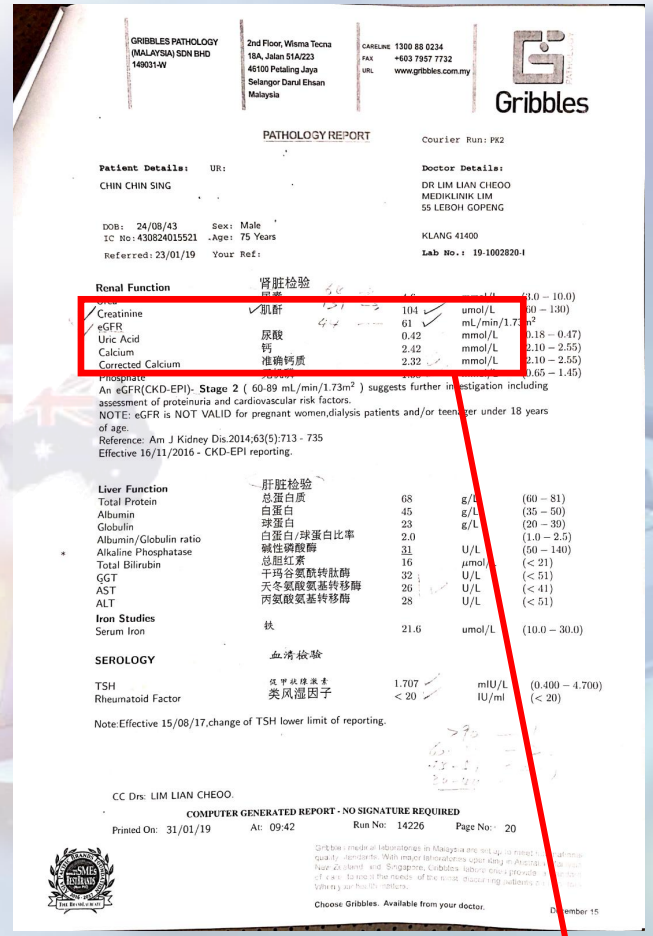
Patient Details: CHIN CHIN SING UR:
DOB: 24/08/43 IC No: 430824015521 Sex: Male Age: 72 Years
Referred: 02/04/16 Your Ref: 4995
Courier Run: PK2
Doctor Details: DR LIM LIAN CHEOO MEDIKLINIK LIM 55 LEBOH GOPENG KLANG 41400
Lab No.: 16-1350627-I

Glucose	葡萄糖	5.4 mmol/L	Fasting (3.9 – 5.5) Random (3.9 – 7.7)	
Specimen Collection Time		10:25 h		
Specimen Type		Fasting		
GENERAL BIOCHEMISTRY	生化检验			
Lipids	血脂			
Total Cholesterol	总胆固醇	4.5	mmol/L	(< 5.2)
Triglyceride	三酸甘油脂	1.59	mmol/L	(< 1.68)
HDL Cholesterol	高脂蛋白(好)胆固醇	1.16	mmol/L	(> 1.03)
* LDL Cholesterol	低脂蛋白(坏)胆固醇	2.61	mmol/L	(< 2.58)
Total Cholesterol/HDL ratio	总胆固醇/高脂蛋白比率	3.9		(< 5.0)
Electrolytes	电解质			
Sodium	钠	143	mmol/L	(135 – 145)
Potassium	钾	3.8	mmol/L	(3.5 – 5.1)
Chloride	氯化物	106	mmol/L	(95 – 110)
Renal Function	肾脏检验			
Urea	尿素	6.1	mmol/L	(3.0 – 10.0)
* ✓Creatinine	肌酐 ✓	137 ✓	umol/L	(60 – 130)
* ✓eGFR	✓	44 ✓	mL/min/1.73m²	
Uric Acid	尿酸	0.44	mmol/L	(0.18 – 0.47)
Calcium	钙	2.34	mmol/L	(2.10 – 2.55)
Corrected Calcium	准确钙质	2.16	mmol/L	(2.10 – 2.55)
* Phosphate	无机磷	1.58	mmol/L	(0.65 – 1.45)

An eGFR 30-59 mL/min/1.73m² suggests moderate chronic renal disease and indicates the need for further investigation including assessment of proteinuria and cardiovascular risk factors.
NOTE: eGFR is NOT VALID for pregnant women, dialysis patients.

CC Drs: LIM LIAN CHEOO.
COMPUTER GENERATED REPORT - NO SIGNATURE REQUIRED
Printed On: 05/04/16 At: 09:28 Run No: 2548 Page No: 11

Gribbles medical laboratories in Malaysia are set up to meet international quality standards. With major laboratories operating in Australia, Malaysia, New Zealand and Singapore, Gribbles laboratories provide a standard of care to meet the needs of the most discerning patients and doctors. When your health matters.
Choose Gribbles. Available from your doctor.
December 15



GRIBBLES PATHOLOGY (MALAYSIA) SDN BHD 149031-W
2nd Floor, Wisma Tecna 18A, Jalan 51A/223 46100 Petaling Jaya Selangor Darul Ehsan Malaysia
CARELINE 1300 88 0234 FAX +603 7957 7732 URL www.gribbles.com.my
Gribbles PATHOLOGY

PATHOLOGY REPORT
Patient Details: CHIN CHIN SING UR:
DOB: 24/08/43 IC No: 430824015521 Sex: Male Age: 75 Years
Referred: 23/01/19 Your Ref:
Courier Run: PK2
Doctor Details: DR LIM LIAN CHEOO MEDIKLINIK LIM 55 LEBOH GOPENG KLANG 41400
Lab No.: 19-1002820-I

Renal Function	肾脏检验			
✓Creatinine	✓肌酐	104 ✓	umol/L	(60 – 130)
✓eGFR		61 ✓	mL/min/1.73m²	
Uric Acid	尿酸	0.42	mmol/L	(0.18 – 0.47)
Calcium	钙	2.42	mmol/L	(2.10 – 2.55)
Corrected Calcium	准确钙质	2.32	mmol/L	(2.10 – 2.55)
Phosphate				(0.65 – 1.45)

An eGFR(CKD-EPI)- **Stage 2** (60-89 mL/min/1.73m²) suggests further investigation including assessment of proteinuria and cardiovascular risk factors.
NOTE: eGFR is NOT VALID for pregnant women,dialysis patients and/or teenager under 18 years of age.
Reference: Am J Kidney Dis.2014;63(5):713 - 735
Effective 16/11/2016 - CKD-EPI reporting.

Liver Function	肝脏检验			
Total Protein	总蛋白质	68	g/L	(60 – 81)
Albumin	白蛋白	45	g/L	(35 – 50)
Globulin	球蛋白	23	g/L	(20 – 39)
Albumin/Globulin ratio	白蛋白/球蛋白比率	2.0		(1.0 – 2.5)
* Alkaline Phosphatase	鹼性磷酸酶	31	U/L	(50 – 140)
Total Bilirubin	总胆红素	16	µmol/L	(< 21)
GGT	干玛谷氨酰转肽酶	32	U/L	(< 51)
AST	天冬氨酸氨基转移酶	26	U/L	(< 41)
ALT	丙氨酸氨基转移酶	28	U/L	(< 51)
Iron Studies				
Serum Iron	铁	21.6	umol/L	(10.0 – 30.0)
SEROLOGY	血清检验			
TSH	促甲状腺激素	1.707 ✓	mIU/L	(0.400 – 4.700)
Rheumatoid Factor	类风湿因子	< 20 ✓	IU/ml	(< 20)

Note:Effective 15/08/17,change of TSH lower limit of reporting.

CC Drs: LIM LIAN CHEOO.
COMPUTER GENERATED REPORT - NO SIGNATURE REQUIRED
Printed On: 31/01/19 At: 09:42 Run No: 14226 Page No: 20

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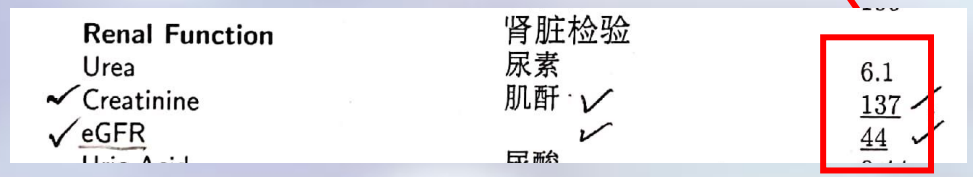
December 15



之前 **BEFORE**

肾脏功能增强
Kidney function increased from 44 to 61

之后 **AFTER**

肾功能衰竭问题

CELLTECH

之前 **BEFORE**

之后 **AFTER**

PATHLAB

PATHOLOGY & CLINICAL LABORATORY (M) SDN BHD

165, TAMAN MELAKA RAYA, 75000 MELAKA
TEL:06-2842375 FAX:06-2840934

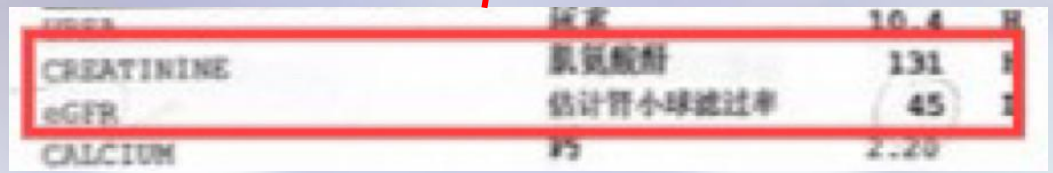
Scan QR for Verification

CLIENT ID: 5010000
TELEME DOCTOR
PATHLAB MELAKA
165 TAMAN MELAKA RAYA
MELAKA
75000 (606)284-5635
ATT: FBMAY17

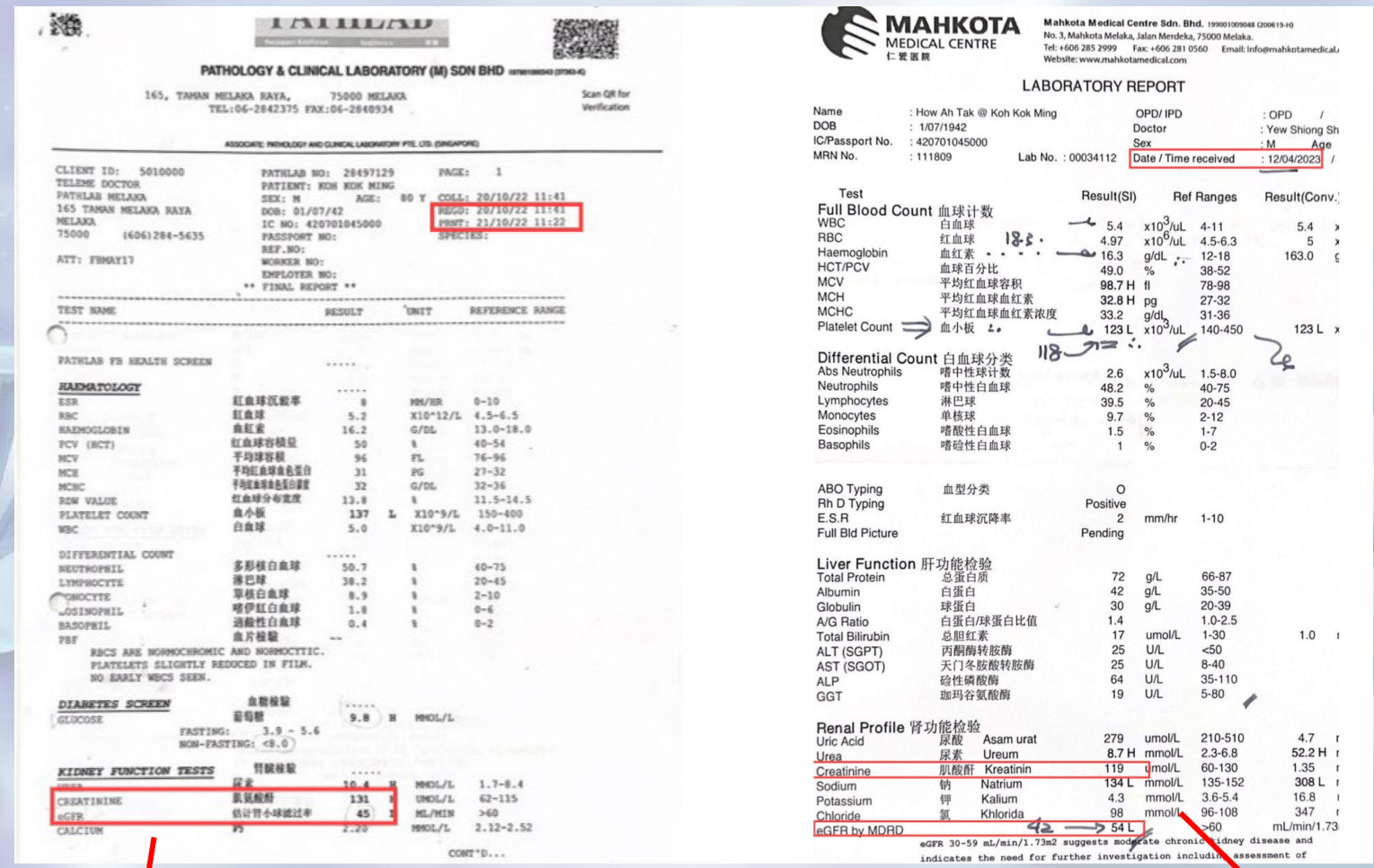
PATHLAB NO: 28497129 PAGE: 1
PATIENT: KOH KOK MING
SEX: M AGE: 80 Y COLL: 20/10/22 11:41
DOB: 01/07/42 RECD: 20/10/22 11:41
IC NO: 420701045000 PRNT: 21/10/22 11:22
PASSPORT NO: SPECIES:
REF.NO:
WORKER NO:
EMPLOYER NO:
** FINAL REPORT **

TEST NAME		RESULT		UNIT	REFERENCE RANGE
PATHLAB FB HEALTH SCREEN					
HAEMATOLOGY					
ESR	红血球沉积率	8		MM/HR	0-10
RBC	红血球	5.2		X10^12/L	4.5-6.5
HAEMOGLOBIN	血红素	16.2		G/DL	13.0-18.0
PCV (HCT)	红血球容积量	50		%	40-54
MCV	平均球容积	96		FL	76-96
MCH	平均红血球血色蛋白	31		PG	27-32
MCHC	平均红血球血色蛋白浓度	32		G/DL	32-36
RDW VALUE	红血球分布宽度	13.8		%	11.5-14.5
PLATELET COUNT	血小板	137	L	X10^9/L	150-400
WBC	白血球	5.0		X10^9/L	4.0-11.0
DIFFERENTIAL COUNT					
NEUTROPHIL	多形核白血球	50.7		%	40-75
LYMPHOCYTE	淋巴球	38.2		%	20-45
MONOCYTE	单核白血球	8.9		%	2-10
EOSINOPHIL	嗜伊红白血球	1.8		%	0-6
BASOPHIL	嗜酸性白血球	0.4		%	0-2
PBF	血片检验	--			
RBCS ARE NORMOCHROMIC AND NORMOCYTIC. PLATELETS SLIGHTLY REDUCED IN FILM. NO EARLY WBCS SEEN.					
DIABETES SCREEN	血糖检验				
GLUCOSE	葡萄糖	9.8	H	MMOL/L	
FASTING: 3.9 - 5.6 NON-FASTING: <8.0					
KIDNEY FUNCTION TESTS	肾脏检验				
UREA	尿素	10.4	H	MMOL/L	1.7-8.4
CREATININE	肌酸酐	131	H	UMOL/L	62-115
eGFR	估计肾小球滤过率	45	L	ML/MIN	>60
CALCIUM	钙	2.20		MMOL/L	2.12-2.52

CONT'D...



UREA	尿素		10.4	H	
CREATININE	肌氨酸酐		131	H	
eGFR	估计肾小球滤过率		45	L	
CALCIUM	钙		2.20		



MAHKOTA MEDICAL CENTRE 仁爱医院

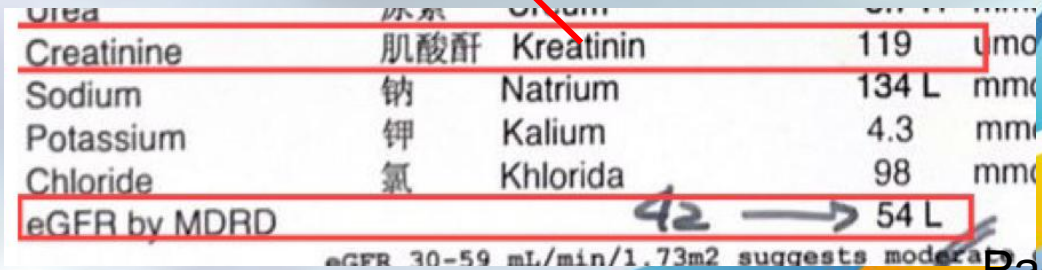
Mahkota Medical Centre Sdn. Bhd. 199001009048 (208619-H)
No. 3, Mahkota Melaka, Jalan Merdeka, 75000 Melaka.
Tel: +606 285 2999 Fax: +606 281 0560 Email: info@mahkotamedical.
Website: www.mahkotamedical.com

LABORATORY REPORT

Name : How Ah Tak @ Koh Kok Ming
DOB : 1/07/1942
IC/Passport No. : 420701045000
MRN No. : 111809
OPD/ IPD : OPD /
Doctor : Yew Shiong Sh
Sex : M Age
Lab No. : 00034112
Date / Time received : 12/04/2023

Test		Result(SI)		Ref Ranges	Result(Conv.)
Full Blood Count 血球计数					
WBC	白血球	5.4	x10^3/uL	4-11	5.4
RBC	红血球	4.97	x10^6/uL	4.5-6.3	5
Haemoglobin	血红素	16.3	g/dL	12-18	163.0
HCT/PCV	血球百分比	49.0	%	38-52	
MCV	平均红血球容积	98.7 H	fl	78-98	
MCH	平均红血球血红素	32.8 H	pg	27-32	
MCHC	平均红血球血红素浓度	33.2	g/dL	31-36	
Platelet Count	血小板	123 L	x10^3/uL	140-450	123 L
Differential Count 白血球分类					
Abs Neutrophils	嗜中性球计数	2.6	x10^3/uL	1.5-8.0	
Neutrophils	嗜中性白血球	48.2	%	40-75	
Lymphocytes	淋巴球	39.5	%	20-45	
Monocytes	单核球	9.7	%	2-12	
Eosinophils	嗜酸性白血球	1.5	%	1-7	
Basophils	嗜硷性白血球	1	%	0-2	
ABO Typing	血型分类	O			
Rh D Typing		Positive			
E.S.R	红血球沉降率	2	mm/hr	1-10	
Full Bld Picture		Pending			
Liver Function 肝功能检验					
Total Protein	总蛋白质	72	g/L	66-87	
Albumin	白蛋白	42	g/L	35-50	
Globulin	球蛋白	30	g/L	20-39	
A/G Ratio	白蛋白/球蛋白比值	1.4		1.0-2.5	
Total Bilirubin	总胆红素	17	umol/L	1-30	1.0
ALT (SGPT)	丙酮酶转胺酶	25	U/L	<50	
AST (SGOT)	天门冬胺酸转胺酶	25	U/L	8-40	
ALP	硷性磷酸酶	64	U/L	35-110	
GGT	珈玛谷氨酸酶	19	U/L	5-80	
Renal Profile 肾功能检验					
Uric Acid	尿酸 Asam urat	279	umol/L	210-510	4.7
Urea	尿素 Ureum	8.7 H	mmol/L	2.3-6.8	52.2 H
Creatinine	肌酸酐 Kreatinin	119	umol/L	60-130	1.35
Sodium	钠 Natrium	134 L	mmol/L	135-152	308 L
Potassium	钾 Kalium	4.3	mmol/L	3.6-5.4	16.8
Chloride	氯 Khlorida	98	mmol/L	96-108	347
eGFR by MDRD		42 → 54 L		>60	mL/min/1.73

eGFR 30-59 mL/min/1.73m2 suggests moderate chronic kidney disease and indicates the need for further investigation including assessment of



Urea	尿素	Ureum		umo
Creatinine	肌酸酐	Kreatinin	119	umo
Sodium	钠	Natrium	134 L	mmo
Potassium	钾	Kalium	4.3	mmo
Chloride	氯	Khlorida	98	mmo
eGFR by MDRD			42 → 54 L	

eGFR 30-59 mL/min/1.73m2 suggests moderate

CELLTECH

肾功能衰竭问题

之前 **BEFORE**

NeoGenix Laboratoire

Neogenix Laboratoire Sdn Bhd
(1191967-W)
C709, Level 7, Block C, Kelana Square
17, Jalan SS7/26, Kelana Jaya
47301 Petaling Jaya, Selangor
Tel: 03-7621 2154 Fax: 03-7621 2153

Name : CHAN [redacted]NG
IC : 6[redacted]
Passport No :
Date of Birth : 14/11/1961 61Y
Gender : F
Your Reference :

Doctor : Dr Henry Pang
Location : Symphony Medical Centre
Received Date / Time : 16/03/2023 0920
Collection Date / Time : 15/03/2023 1145

TEST 检验		RESULT 检验结果	UNIT 单位	REF. RANGES 参考值	
Renal Profile 1 肾功能检验1					
Total Protein 总蛋白		67	g/L	64	- 83
Albumin 白蛋白		39	g/L	32	- 46
Globulin 球蛋白		28	g/L	20	- 35
A/G Ratio 白蛋白/球蛋白比率		1.4		1.1	- 2.5
Calcium 钙		2.21	mmol/L	2.10	- 2.55
Corrected Calcium 校正钙		2.23	mmol/L		
Inorganic Phosphate 无机磷		1.46	mmol/L	0.74	- 1.52
Glucose 血糖		4.5	mmol/L	Fasting 4.2 Random <7.8	- 6.4
Sodium 钠		143	mmol/L	136	- 145
Potassium 钾	*	**5.8**	mmol/L	3.5	- 5.1
Chloride 血清氯	*	**110**	mmol/L	98	- 107
Creatinine 肌酐	*	**310**	umol/L	49	- 90
Urea 尿素	*	**18.4**	mmol/L	3.5	- 7.2
eGFR 估计肾丝球滤过率	*	**13**		90 above Normal or high 60-89 Mildly decreased* 45-59 Mildly to moderately decreased 30-44 Moderately to severely decreased 15-29 Severely decreased <15 Kidney failure	
Comment 注释		**eGFR is not valid for individuals under the age of 18, individuals with unstable creatinine concentrations e.g. pregnancy, AKI, and persons with extremes in muscle mass and diet.**			
Uric Acid 尿酸	*	**473**	umol/L	150	- 350
Liver Profile 肝功能					
Total Protein 总蛋白		67	g/L	64	- 83
Albumin 白蛋白		39	g/L	32	- 46
Globulin 球蛋白		28	g/L	20	- 35
A/G Ratio 白蛋白/球蛋白比率		1.4		1.1	- 2.5
Bilirubin Total 总胆红素		9.8	umol/L	3.4	- 20.5
AST 天冬氨酸氨基转移酶		19	U/L	5	- 34
ALT 丙氨酸氨基转移酶		13	U/L	[redacted]	- 55
Alkaline Phosphatase 碱性磷酸酶		51	U/L	[redacted]	- 150
GGT 干玛谷氨酸转肽酶		10	U/L	9	- 36

Lab No : 3030019038 Page | 2
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Creatinine 肌酐 * **310**
Urea 尿素 * **18.4**
eGFR 估计肾丝球滤过率 * **13**

之后 **AFTER**

KLINIK LEE 李医诊所

gnosis Laboratories

Patient Name : CHAN [redacted]NG
Refer From : Dr Lee Jun Hao
KLINIK LEE (JENJAROM)
No 24 (Tingkat Bawah), Jalan Cermai,
Taman Gembira, 42600 Jenjarom, Selangor.
PH: 03-3191 5993 Fax: -
klinikleejenjarom@gmail.com
Courier Area : JJB03

Lab No. : 0231613159
Sex / Age : Female / 61
IC No / Passport : [redacted]4
Your Ref. No. :
Collected : 11/04/2023 10:30
Received : 11/04/2023 13:20
Reported : 13/04/2023 11:52
Copy No : 1 / (Final)

GSB: GENERAL SCREEN - B

No.	Description		Result		Unit	Reference value
RENAL FUNCTION & METABOLIC 肾功能和代谢						
17	Urea	尿素	18.4	↑	mmol/L	2.8 - 7.2
18	Creatinine	肌酸酐	251	↑	umol/L	45-84
19	estimated GFR-cr (MDRD)		18	↓	ml/min/1.73m2	> 60

Stage	Description	GFR
1	Normal or High GFR	90+
2	Mild decreased in GFR	60-89
3	Moderate decreased in GFR	30-59
4	Severe decreased in GFR	15-29
5	Kidney Failure	<15

20	Uric Acid	尿酸	425	↑	umol/L	155 - 357
21	Sodium (Na)	钠	142		mmol/L	136 - 146
22	Potassium (K)	钾	5.1		mmol/L	3.5 - 5.1
23	Chloride (Cl)	氯	109		mmol/L	101 - 109
24	Calcium	钙	2.26		mmol/L	2.20 -2.65
25	- Corrected Calcium		2.3		mmol/L	2.1 - 2.6
26	Phosphorus	磷	1.41		mmol/L	0.81-1.45
27	Magnesium, Serum	血清镁	0.94		mmol/L	0.77-1.03
28	Urine Microalbumin	尿微白蛋白	429.4	↑	mg/L	<20
29	Urine Creatinine	尿肌酸肝	9.3		mmol/L	0.9 - 26.5
30	Urine Alb/Crea. Ratio	白蛋白/肌酸肝比率	46.2	↑	mg/mmol	<3.4

RENAL FUNCTION & METABOLIC 肾功能和代谢
17 Urea 尿素 18.4
18 Creatinine 肌酸酐 251
19 estimated GFR-cr (MDRD) 18

肾功能衰竭问题

CELLTECH

之前 **BEFORE**

PATHLAB

Penjagaan Kesihatan Healthcare 保健

PATHOLOGY & CLINICAL LABORATORY (M) SDN.BHD 197801000343 (37363-K)

HQ: 87-91, JLN SS25/2, 47301 PETALING JAYA, SELANGOR
TEL:0378098100 FAX:0378039901

Scan QR for Verification

BRANCH ID: 3019998
PATHLAB PJ, PJSC
87-91,JLN SS25/2
PETALING JAYA, SELANGOR.
47301 (037)809-8188
DR GRACE REUBENA (53051)

PATHLAB NO: 32063311
PATIENT: KHOO
SEX: M AGE: 62 Y
IC NO:
REF.NO:

PAGE: 2
COLL: 11/11/22 10:08
REGD: 11/11/22 10:08
PRNT: 16/11/22 10:22
SPECIES:

visit us at www.pathlab.com.my

** FINAL REPORT **

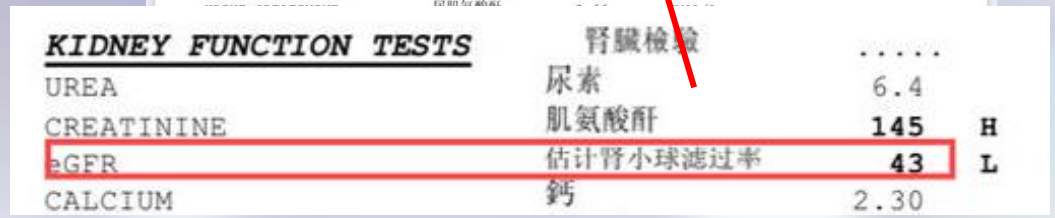
TEST NAME	RESULT	UNIT	REFERENCE RANGE
NORMAL	<5.7 %	(<39 MMOL/MOL)	
PRE-DIABETES	5.7-6.2 %	(39-44 MMOL/MOL)	
DIABETES	>=6.3 %	(>=45 MMOL/MOL)	

INDIVIDUALISED HBA1C TARGETS BASED ON PATIENT PROFILE

<=6.5 % (TIGHT) / <=48 MMOL/MOL	6.6-7.0 % / 49-53 MMOL/MOL	7.1-8.0 % (LESS TIGHT) / 54-64 MMOL/MOL
*Newly and recently diagnosed *Younger age *Healthier (no complications) *Low risk of hypoglycaemia	*All others	*Elderly patients *Presence of co-morbidities *High risk of severe hypoglycaemia, hypo unawareness *Short life expectancy

PLEASE NOTE NEW REFERENCE RANGE EFFECTIVE 13/4/2022 AS RECOMMENDED IN THE 6TH EDITION MANAGEMENT OF T2DM, MOH.

KIDNEY FUNCTION TESTS	腎臟檢驗				
UREA	尿素	6.4		MMOL/L	1.7-8.4
CREATININE	肌氨酸酐	145	H	UMOL/L	62-115
eGFR	估计肾小球滤过率	43	L	ML/MIN	>60
CALCIUM	鈣	2.30		MMOL/L	2.12-2.52
INORGANIC PHOSPHATE	無机磷	1.16		MMOL/L	0.78-1.65
URIC ACID	尿酸	0.40		MMOL/L	0.20-0.42
SODIUM	鈉	144		MMOL/L	137-150
POTASSIUM	鉀	5.0		MMOL/L	3.5-5.3
	氯	107		MMOL/L	96-108
MICROALBUMIN:CREAT RATIO					
URINE MICROALBUMIN	尿微量白蛋白	10.7		MG/L	



之后 **AFTER**

NeoGenix Laboratoire

Neogenix Laboratoire Sdn Bhd
(1191967-W)
C709, Level 7, Block C, Kelana Square
17, Jalan SS7/26, Kelana Jaya
47301 Petaling Jaya, Selangor
Tel: 03-7621 2154 Fax: 03-7621 2153

Name : KHOO
IC :
Passport No :
Date of Birth : 13/06/1960 63Y
Gender : M
Your Reference :

Doctor : Dr Henry Pang
Location : Symphony Medical Centre
Received Date / Time : 15/06/2023 551
Collection Date / Time : 15/06/2023 1100

TEST 检验		RESULT 检验结果	UNIT 单位	REF. RANGES 参考值	
Renal Profile 1 肾功能检验1					
Total Protein 总蛋白		69	g/L	64	- 83
Albumin 白蛋白		42	g/L	32	- 46
Globulin 球蛋白		27	g/L	20	- 35
A/G Ratio 白蛋白/球蛋白比率		1.6		1.1	- 2.5
Calcium 钙		2.35	mmol/L	2.20	- 2.50
Corrected Calcium 校正钙		2.31	mmol/L		
Inorganic Phosphate 无机磷		1.20	mmol/L	0.74	- 1.52
Glucose 血糖		5.0	mmol/L	Fasting 4.2 Random <7.8	- 6.4
Sodium 钠		141	mmol/L	136	- 145
Potassium 钾		4.7	mmol/L	3.5	- 5.1
Chloride 血清氯		104	mmol/L	98	- 107
Creatinine 肌酐	*	**130**	umol/L	64	- 104
Urea 尿素	*	**9.4**	mmol/L	3.0	- 9.2
eGFR 估计肾丝球滤过率	*	**50**		90 above Normal or high 60-89 Mildly decreased* 45-59 Mildly to moderately decreased 30-44 Moderately to severely decreased 15-29 Severely decreased <15 Kidney failure	
Comment 注释		**eGFR is not valid for individuals under the age of 18, individuals with unstable creatinine concentrations e.g. pregnancy, AKI, and persons with extremes in muscle mass and diet.**			
Uric Acid 尿酸	*	**476**	umol/L	210	- 420
Liver Profile 肝功能					
Total Protein 总蛋白		69	g/L	64	- 83
Albumin 白蛋白		42	g/L	32	- 46
Globulin 球蛋白		27	g/L	20	- 35
A/G Ratio 白蛋白/球蛋白比率		1.6		1.1	- 2.5
Bilirubin Total 总胆红素		9.9	umol/L	3.4	- 20.5
AST 天冬氨酸氨基转移酶		18	U/L	5	- 34

Validated By Ruthradevi A/P Manivanan
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分享者 Sharer:

林女士， **52岁**

MSC treatment: Reduced High Glucose Level
MSC间充质干细胞疗程：减低 高血糖

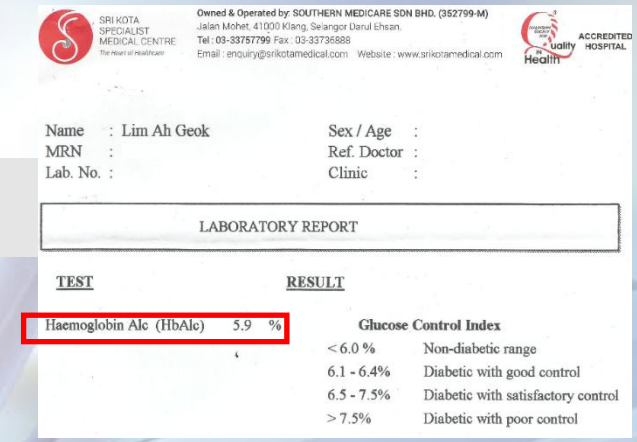
2018年11月29日： HbA1c 糖化血色素 10.3%

2018年12月28日： HbA1c 糖化血色素 9.2%

2019年1月31日： 1st MSC treatment 首次MSC疗程

2019年2月18日： HbA1c 糖化血色素 6.5%

2019年4月30日：
HbA1c 糖化血色素 5.9%



SRI KOTA SPECIALIST MEDICAL CENTRE
Owned & Operated by: SOUTHERN MEDICARE SDN BHD. (352799-M)
Jalan Mohet, 41000 Klang, Selangor Darul Ehsan.
Tel : 03-33757799 Fax : 03-33736888
Email : enquiry@srikotamedical.com Website : www.srikotamedical.com
ACCREDITED HOSPITAL

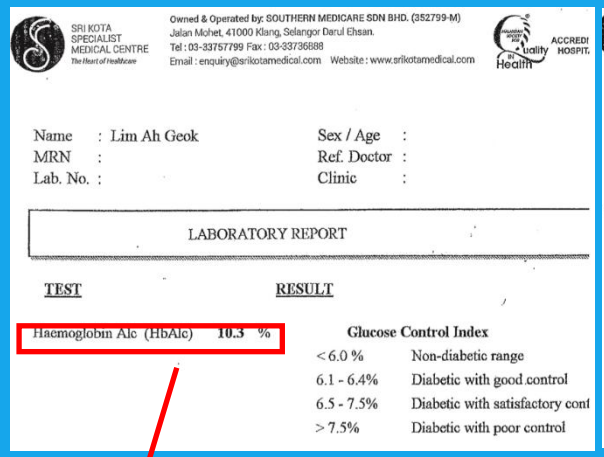
Name : Lim Ah Geok
MRN :
Lab. No. :
Sex / Age :
Ref. Doctor :
Clinic :

LABORATORY REPORT

TEST	RESULT
Haemoglobin A1c (HbA1c)	5.9 %

Glucose Control Index

< 6.0 %	Non-diabetic range
6.1 - 6.4%	Diabetic with good control
6.5 - 7.5%	Diabetic with satisfactory control
> 7.5%	Diabetic with poor control



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Name : Lim Ah Geok
MRN :
Lab. No. :
Sex / Age :
Ref. Doctor :
Clinic :

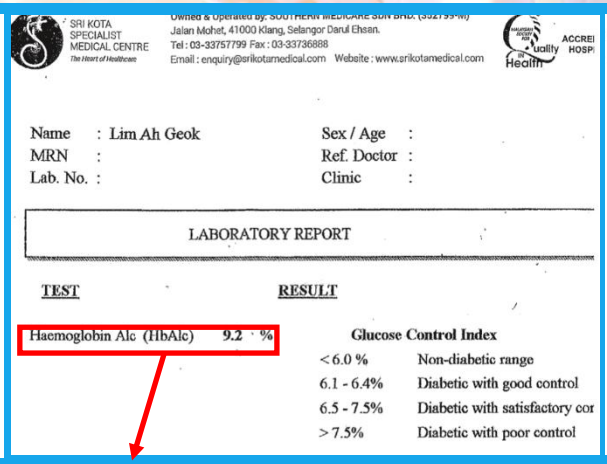
LABORATORY REPORT

TEST	RESULT
Haemoglobin A1c (HbAlc)	10.3 %

Glucose Control Index

< 6.0 %	Non-diabetic range
6.1 - 6.4%	Diabetic with good control
6.5 - 7.5%	Diabetic with satisfactory cont
> 7.5%	Diabetic with poor control

2018年11月29日：
HbA1c 糖化血色素 10.3%



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Name : Lim Ah Geok
MRN :
Lab. No. :
Sex / Age :
Ref. Doctor :
Clinic :

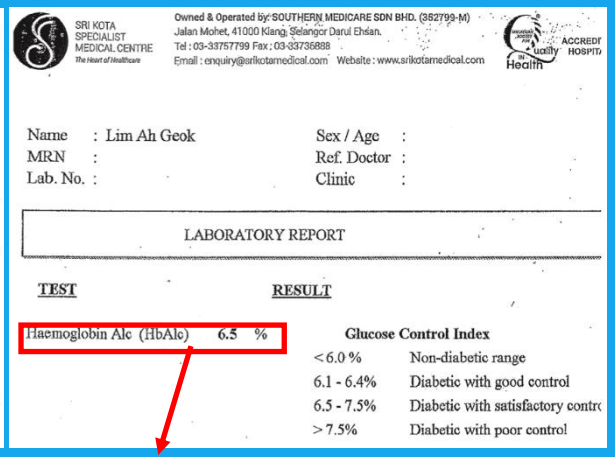
LABORATORY REPORT

TEST	RESULT
Haemoglobin A1c (HbAlc)	9.2 %

Glucose Control Index

< 6.0 %	Non-diabetic range
6.1 - 6.4%	Diabetic with good control
6.5 - 7.5%	Diabetic with satisfactory cor
> 7.5%	Diabetic with poor control

2018年12月28日：
HbA1c糖化血色素 9.2%



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Email : enquiry@srikotamedical.com Website : www.srikotamedical.com

Name : Lim Ah Geok
MRN :
Lab. No. :
Sex / Age :
Ref. Doctor :
Clinic :

LABORATORY REPORT

TEST	RESULT
Haemoglobin A1c (HbAlc)	6.5 %

Glucose Control Index

< 6.0 %	Non-diabetic range
6.1 - 6.4%	Diabetic with good control
6.5 - 7.5%	Diabetic with satisfactory contr
> 7.5%	Diabetic with poor control

2019年2月18日：
HbA1c 糖化血色素 6.5%

分享者 Sharer:

梁女士, 77岁

BEFORE 之前　　AFTER 之后

未接受干细胞疗法前:
长期饱受糖尿病的困扰，常常觉得精神不振，容易疲惫;
淤血长久不清, 严重糖尿病问题。

Condition before treatment :
Long term diabetes patient , often seen in weak and fatigued condition, facing long term unclear congestion.

之前 BEFORE

1 星期后
AFTER 1 Week

2 星期后
AFTER 1 Week

Oct 2018
糖尿病导致脚部溃烂
Suffered from Ulceration Caused by diabetes

12 Nov 2018
接受MSC 疗程后，在一个月的时间内迅速复原

Speedy recovery within 1 month after MSC treatment

12 Dec 2018
第二个月后, 伤口复原, 血糖也正常了

After 2 months, Wound recovered and blood sugar back to normal

30 April 2019
创伤康复程度迅速

Speedy Recovery

分享者 Sharer：

梁女士, 77岁

CELLTECH

The miraculous effect of MSC
间充质干细胞神奇疗效

分享者 Sharer:

刘先生, 51岁

BEFORE
之前
22/10/2015

缺血性中风，
左脑损害70%，记忆衰退，
讲话障碍，半身不遂。

Ischemic stroke, Left brain 70% damage, Memory decline, speech disorder, half body mal-function

AFTER
之后

2018年 5月
开始接受 **MSC** 间充质干细胞疗程
脸部矫正；行动、记忆讲话大有改善。

Therapy started in year 2015/May Facial movement restored. Significant improvement in action, memory & speech.

分享者 Sharer：

Mok 先生， 49岁

MSC treatment：

Cerebral Infarction in left middle Cerebral Artery Territory

MSC间充质干细胞疗程：大脑血管阻塞

PANTAI HOSPITAL
Sungai Petani

IMAGING REPORT

NAME :
AGE/SEX :
REF. DR :
ID NO. :
EXAM :
MRN :
RN :
ACCESSION NO :
REFERENCE NO :
EXAM DATE :

CT BRAIN (

A large area of parenchymal hypodensity involving the left fronto-temporo-parietal lobe which is isodense to CSF. This suggests encephalomalacic change.
No intracranial bleed.
No mass effect or evidence of cerebral edema.
No hydrocephalus or pneumocephalus.
No skull vault fracture. Visualized sinuses and mastoid air cells are clear.

左边中脑动脉柱塞

Impression :
Left cerebral encephalomalacic change. Current CT shows no evidence of acute insult.
However suggest clinical correlation.

MAHKOTA MEDICAL CENTRE SDN BHD

RADIOLOGY REPORT

Patient :
PRN :
NRIC/PP/BC :
Location :
Account No :
Report No :
Ref. Doctor :
Service :
Sex/Age :
Reg. Date :
Requested :
Reported :

MRI BRAIN DWI

Sagittal T1FLAIR
Axial T2W,T2FLAIR,GRE
Diffusion study and ADC map
Axial T1W precontrast and T1W postcontrast in axial, coronal and sagittal.

Findings
There is hyperintense region with restricted diffusion seen in the left frontoparietal lobe as well as in the left basal ganglia inkeeping with acute infarct.
No intracranial bleed is seen.
No focal enhancing brain mass or white matter edema.
The ventricles are not compressed.
Midline is central.
Basal cisterns are patent.
Normal CP angle, brainstem and orbit.

急性脑动脉柱塞

Impression
Acute left MCA territory infarct.
No intracranial bleed or focal enhancing brain lesion.

MAHKOTA MEDICAL CENTRE SDN BHD

RADIOLOGY REPORT

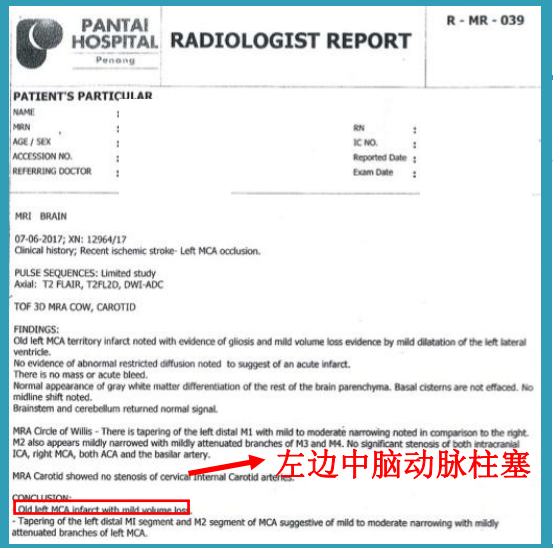
Patient :
PRN :
NRIC/PP/BC :
Location :
Account No :
Report No :
Ref. Doctor :
Service :
Sex/Age :
Reg. Date :
Requested :
Reported :

MR ANGIOGRA
3D TOF MR Angiogram of brain.

Findings:
The ICA is patent bilaterally, with normal attenuation. No focal stenosis, occlusion or aneurysm.
There is long segment occlusion of the left MCA M1 segment with less left MCA branches to the left temporal and parietal branches.
The left anterior cerebral artery is patent, no occlusion.
Normal flow with no stenosis seen in right ACA, right MCA and their branches.
No aneurysm or AVM noted.
Smaller right vertebral artery.
There is normal flow seen in vertebrobasilar junction, posterior cerebellar arteries and their proximal branches.
No stenosis, aneurysm or AVM.

左边中脑动脉柱塞

Impression :
Long segment occlusion of the left MCA (M1 segment) .
No focal stenosis, occlusion or AVM seen in the rest of the visualized intracerebral arteries.



PANTAI HOSPITAL
Penang

RADIOLOGIST REPORT

R - MR - 039

PATIENT'S PARTICULAR

NAME :
MRN :
AGE / SEX :
ACCESSION NO. :
REFERRING DOCTOR :
RN :
IC NO. :
Reported Date :
Exam Date :

MRI BRAIN

07-06-2017; XN: 12964/17
Clinical history; Recent ischemic stroke- Left MCA occlusion.

PULSE SEQUENCES: Limited study
Axial: T2 FLAIR, T2FL2D, DWI-ADC

TOF 3D MRA COW, CAROTID

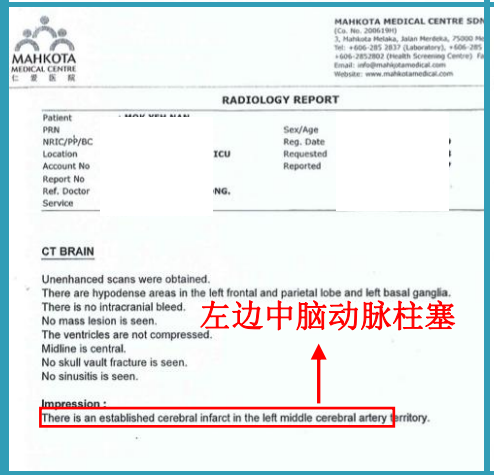
FINDINGS:
Old left MCA territory infarct noted with evidence of gliosis and mild volume loss evidence by mild dilatation of the left lateral ventricle.
No evidence of abnormal restricted diffusion noted to suggest of an acute infarct.
There is no mass or acute bleed.
Normal appearance of gray white matter differentiation of the rest of the brain parenchyma. Basal cisterns are not effaced. No midline shift noted.
Brainstem and cerebellum returned normal signal.

MRA Circle of Willis - There is tapering of the left distal M1 with mild to moderate narrowing noted in comparison to the right. M2 also appears mildly narrowed with mildly attenuated branches of M3 and M4. No significant stenosis of both intracranial ICA, right MCA, both ACA and the basilar artery.

左边中脑动脉柱塞

MRA Carotid showed no stenosis of cervical internal Carotid arteries.

CONCLUSION:
Old left MCA infarct with mild volume loss.
- Tapering of the left distal M1 segment and M2 segment of MCA suggestive of mild to moderate narrowing with mildly attenuated branches of left MCA.



MAHKOTA MEDICAL CENTRE SDN

RADIOLOGY REPORT

Patient :
PRN :
NRIC/PP/BC :
Location : ICU
Account No :
Report No :
Ref. Doctor :
Service : NG.
Sex/Age :
Reg. Date :
Requested :
Reported :

CT BRAIN

Unenhanced scans were obtained.
There are hypodense areas in the left frontal and parietal lobe and left basal ganglia.
There is no intracranial bleed.
No mass lesion is seen.
The ventricles are not compressed.
Midline is central.
No skull vault fracture is seen.
No sinusitis is seen.

左边中脑动脉柱塞

Impression :
There is an established cerebral infarct in the left middle cerebral artery territory.

MAHKOTA MEDICAL CENTRE SDN BHD

RADIOLOGY REPORT

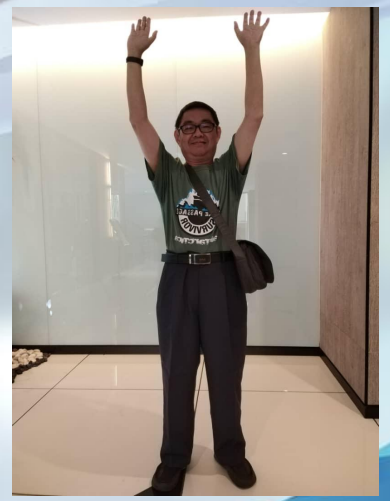
Patient :
PRN :
NRIC/PP/BC :
Location :
Account No :
Report No :
Ref. Doctor :
Service :
Sex/Age :
Reg. Date :
Requested :
Reported :

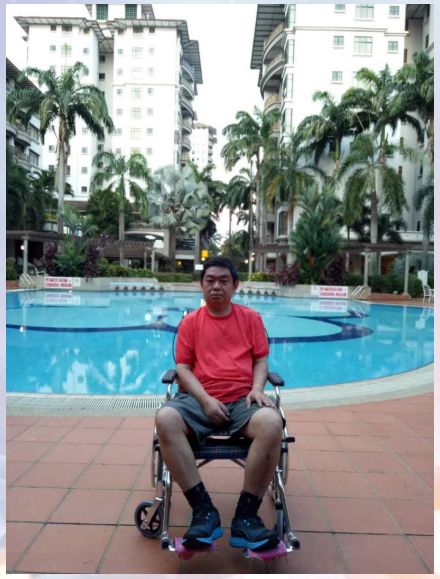
NECT BRAIN

Findings:
There is mild effacement of the left frontal temporal parietal lobe sulci.
However the grey-white matter differentiation is still preserved .
No focal brain parenchymal lesion.
No intracranial haemorrhage.
No mass effect or midline shift.
Ventricles and basal cisterns are normal.
No skull vault lesion or fracture.
Globes and obital contents are unremarkable.
Visualized paranasal sinuses and mastoid air cells are clear bilaterally.

左边中脑动脉柱塞

Impression:
Mild effacement of the left frontal temporal parietal lobe sulci. Possibility of hyperacute left MCA territory infarction need to be considered.





之前
BEFORE

2017年
大脑**60%** 血管阻塞。
60% Vascular Occlusion

MSC treatment： Cerebral Infarction in left middle Cerebral Artery Territory

MSC间充质干细胞疗程 :大脑血管阻塞

之后 **AFTER**

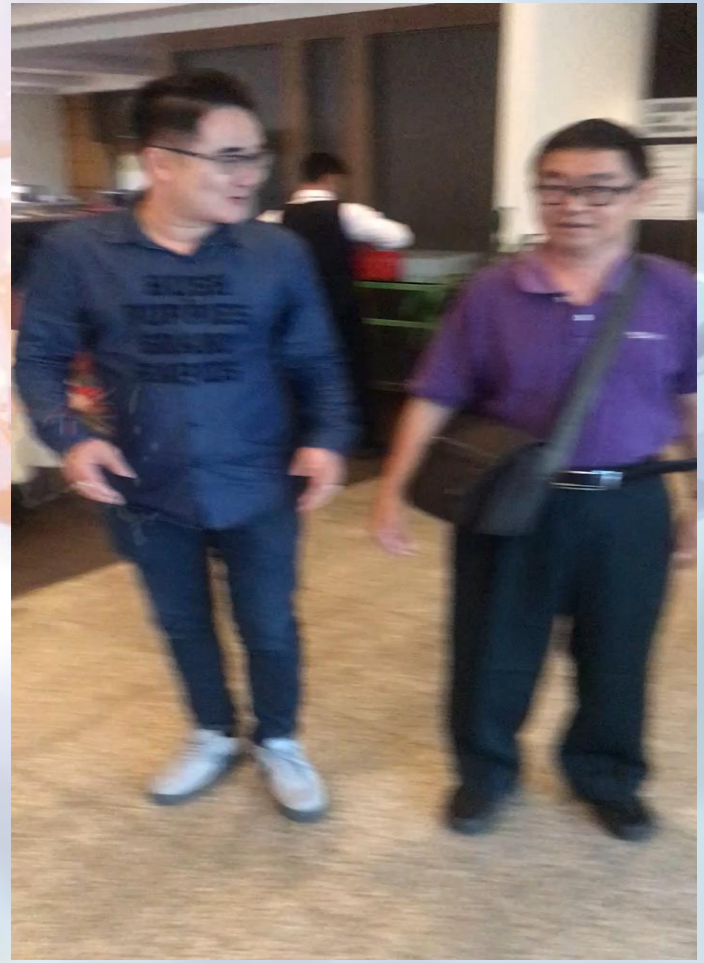
接受MSC间充质干细胞疗程后，病情获得很大改善，行动自如。
After receiving the MSC mesenchymal stem cell treatment, the condition is greatly improved.

Stroke, speech disorder for 2 years

Did Australian MSC treatment once，hands and feet restore 100% flexibility, The ability to speak is also much better. There is no problem driving now. It’s really gratifying!

中风瘫痪说话有障碍2年

做了1次澳洲MSC疗程手脚恢复100%的灵活性， 说话的能力也好转很多，现在驾车都没有问题了，真的是可喜可贺，加油。



分享者 Sharer：

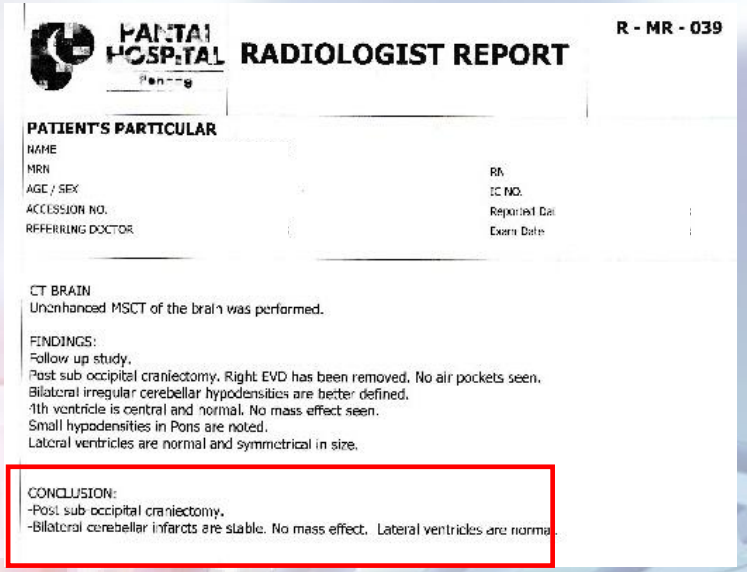
张先生(马来西亚)，48岁

- Stroke
(language disability, mobility disorder, complete loss of self-care ability)
中风
(语言障碍，行动障碍，完全失去自理能力)

之前 BEFORE：

- High body temperature (37-38°) causes physical discomfort, hot temper, and uncontrollable emotions
- Memory decline, currently in a fuzzy state, do not remember the location of current home which had stay for more than 10 years
- Can't eat any food, only suck the milk through the pipe. Can't shower by himself, not able to dress himself, unable to go to the bathroom without help

- 身体温度偏高 (37-38°) 造成身体不适，脾气暴躁，无法控制情绪
- 记忆衰退，当下处于模糊的状态，对于10多年的住处也毫不记得
- 无法进食任何食物只能通过管道吸食牛奶。不能自己冲凉，穿衣，上洗手间



PANTAI HOSPITAL Penang

R - MR - 039

RADIOLOGIST REPORT

PATIENT'S PARTICULAR

NAME
MRN
AGE / SEX
ACCESSION NO.
REFERRING DOCTOR

RA
IC NO.
Reported Dat
Exam Date

CT BRAIN
Unenhanced MSCT of the brain was performed.

FINDINGS:
Follow up study.
Post sub occipital craniectomy. Right EVD has been removed. No air pockets seen.
Bilateral irregular cerebellar hypodensities are better defined.
4th ventricle is central and normal. No mass effect seen.
Small hypodensities in Pons are noted.
Lateral ventricles are normal and symmetrical in size.

CONCLUSION:
-Post sub occipital craniectomy.
-Bilateral cerebellar infarcts are stable. No mass effect. Lateral ventricles are normal

之后 AFTER：

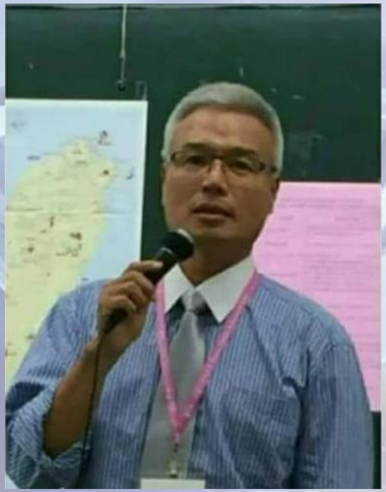
- The body temperature back to normal (36°) and feels comfortable
- Good memory improvement, aware of what is happening surrounding
- After only 20 days, don't have to rely on the pipe to eat. Could consume soft food by himself, could start walking slowly independently, could dress himself up, and could go to the bathroom without help

- 体温降回正常 (36°)，感觉舒适
- 记忆良好改善，对周围发生的事有了认知
- 只过了20天就无须依靠管道来进食，可以自己进偏软的食物，可以开始自己缓慢的行走，穿衣，上洗手间


3月/2019
行动需要协助
5月/2019
可以进食走动

分享者 Sharer：

Mr Won 翁先生，60岁



國民身分證統一編號 P120357174
軍人補給證號碼 字第 號之( )

高雄醫學大學附設中和紀念醫院
診斷證明書

診字第1080601010號

姓名	翁樹鴻	性別	男	職業	
年齡		籍貫			
住址					
應診日期	108年06月01日	科別及病歷號碼	耳鼻喉部 19205762		
病名	右側口咽癌（以下空白）。				
醫師囑言	該病患因疾病經同步放射線及化學藥物治療導致味覺異常（以下空白）。				

◎◎本證明書如無本院印章則認為無效
◎◎無身分證統一號碼或軍人補給證號碼則認為無效

以上病人經本院醫師診斷屬實特予證明

主治醫師：曾良鵬　診治醫師：曾良鵬

中華民國 108年06月01日

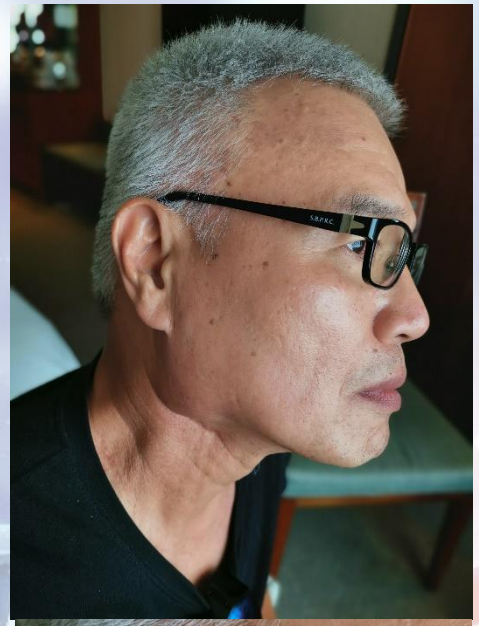
- Right oropharyngeal cancer
  右側口咽癌

人生七十古来稀，是应该开始要享受人生还是受罪人生?

来自台湾，如今60岁的翁先生，数年前不幸罹患右侧口腔癌。 经过了开到手术、化疗、放射线治疗、标靶治疗等等的治疗程式，翁先生熬了过来，性命保住了，但是却付出了惨痛的代价。 不仅味蕾细胞失效，尝不到咸甜味，就连口水也沒了。 一直到早前，他接触了來自澳洲的Cell Life MSC间充质干细胞疗程。 疗程完成之后10天，翁先生惊喜的发现他的咸味甜味都回来了，人生变彩色了，获得了重生的感觉，重新拥有了高品质的老年生活。

An enjoyable life or a suffering life you wish to own in your 70s?

Mr. Won, a senior citizen from Taiwan, suffered from right oral cancer several years ago. Various of treatments have been done including different procedures of surgery, chemotherapy, radiation therapy, targeted therapy and etc., Even though he has fought through and saved his life, however, he paid a painful price from these therapies. His lost his sense of taste. Recently he has a chance to expose to the MSC treatment with Cell Life Australia. After the 10-day treatment, he found that he has regained his taste bud, he could differentiated the taste of salty and sweetness again. This MSC treatment has not only brought him the true meaning of life rejuvenation. He has truly to own a quality golden life.



分享者 Sharer：

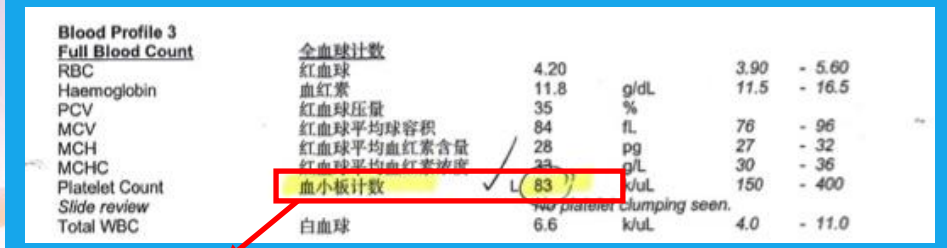
蔡女士， **76岁**

MSC treatment：Stimulate Platelet Index Rebound
MSC间充质干细胞疗程 ： 治愈血小板指数回升

2017年4月 ：
造血功能衰竭和造血功能的失败。
血小板指数下降。
造血功能失效，血小板指数下跌。

2017年4月5日:
报告显示骨髓造血
功能无效, 血小板指数下降到83。
报告显示，骨髓造血功能失效，血小板指数下跌至83。

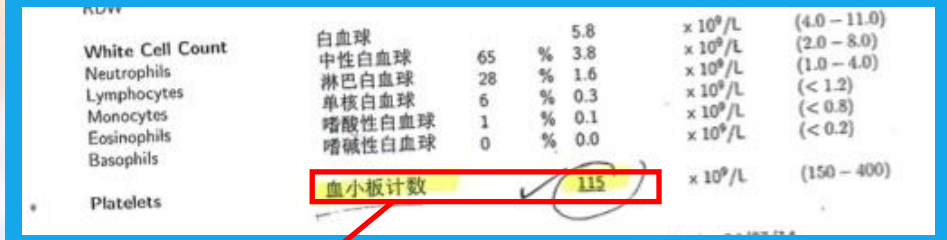
2019年1月23日:
接受 MSC 间充质干细胞治疗后血小板指数恢复到115。



Blood Profile 3					
Full Blood Count	全血球计数				
RBC	红血球	4.20		3.90	- 5.60
Haemoglobin	血红素	11.8	g/dL	11.5	- 16.5
PCV	红血球压量	35	%		
MCV	红血球平均球容积	84	fL	76	- 96
MCH	红血球平均血红素含量	28	pg	27	- 32
MCHC	红血球平均血红素浓度	33	g/L	30	- 36
Platelet Count	血小板计数	L 83	k/uL	150	- 400
Slide review		*No platelet clumping seen.*			
Total WBC	白血球	6.6	k/uL	4.0	- 11.0

2017年4月5日 ：
Bone marrow hematopoietic function is ineffective, platelet index fell to 83.

骨髓造血功能失效，血小板指数下跌至83。



RDW		5.8		x 10^9/L	(4.0 – 11.0)
White Cell Count	白血球			x 10^9/L	(2.0 – 8.0)
Neutrophils	中性白血球	65	% 3.8	x 10^9/L	(1.0 – 4.0)
Lymphocytes	淋巴白血球	28	% 1.6	x 10^9/L	(< 1.2)
Monocytes	单核白血球	6	% 0.3	x 10^9/L	(< 0.8)
Eosinophils	嗜酸性白血球	1	% 0.1	x 10^9/L	(< 0.2)
Basophils	嗜碱性白血球	0	% 0.0		
Platelets	血小板计数		115	x 10^9/L	(150 – 400)

2019年1月23日 ：
After receiving stem cell treatment, the platelet index reverted to 115。

接受干细胞疗程后，血小板指数回升至115。

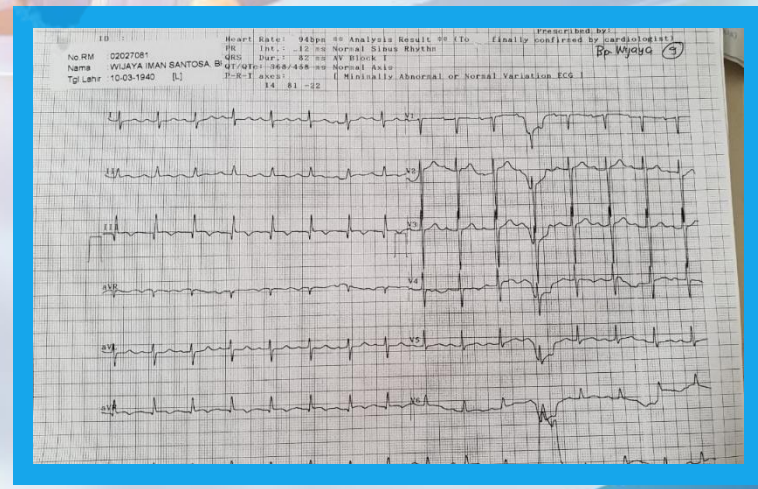
分享者 Sharer：

Widjaja Iman Santosa 先生，
79岁

MSC treatment： Vascular Occlusion
MSC间充质干细胞疗程 :疏通血管阻塞

之前 BEFORE：
The vascular obstruction caused a heart attack and was admitted to the hospital for 5 days. The doctor recommends using a wheelchair, to not increase the burden on the heart.
血管阻塞造成心脏病突发，入院了5天。 医生建议使用轮椅，不要加重心脏的负担。

2018年12月初：
After receiving the MSC mesenchymal stem cell treatment, feels comfortable, better energy and physical strength improved. The muscles are also stronger, especially the hips, arms, thighs and calves, which were the parts that lack of muscle strength before the treatment.
接受 MSC 间充质干细胞疗程后，感觉身体舒畅，精神很好，体力也增强了。
肌肉也比较结实了，特别是臀部，手臂，大腿与小腿，这些部位之前已经很松弛。



心电图
ECG

Needed to walk on crutches 3 months ago. After the injection of mesenchymal stem cells (MSC), he has been able to move freely on his own legs.

3个月前 需要靠著拐杖才能夠走路

通过MSC间充质干细胞医疗的注射后已经能夠靠自己双腿行动自如 。

多项研究已经证实了干细胞的
神奇功效，它能让我们买到
健康与长寿

Extensive research reports have conclusively demonstrated the profound impact of **stem cells** in providing us with robust health and longevity.

Thank You