

Περίληψη άρθρου

Οι φλεγμονώδεις νόσοι του εντέρου, δηλαδή η ελκώδης κολίτιδα και η νόσος του Crohn είναι νόσοι π

Η δραστηριότητα της φλεγμονώδους νόσου του εντέρου συνδέεται στενά με ψυχολογικά συμπτώματα. Έχει παρατηρηθεί ότι υπάρχει εντονότερο άγχος στους ασθενείς με φλεγμονώδη νόσο του

εντέρου κατά τη διάρκεια της έξαρσης των συμπτωμάτων της νόσου [1, 2]. Μια μελέτη σε ασθενείς με **ελκώδη κολίτιδα** κατέληξε στο συμπέρασμα ότι, η ενδοσκοπικά επιβεβαιωμένη ενεργή φλεγμονή του βλεννογόνου σχετίζεται με περισσότερο ψυχολογικό στρες [3]. Γιαυτό παίζει ρόλο ο έλεγχος της φλεγμονής, τόσο για τη σωματική, όσο και για την ψυχολογική ευεξία των



Δρ Δημήτριος Ν. Γκέλης
Ιατρός,
Ωτορινολαρυγγολόγος,
Οδοντίατρος
Διδάκτωρ της Ιατρικής
Σχολής του Πανεπιστημίου
Αθηνών
Τηλ. 2744023768,
6944280764, e-mail:
pharmage@otenet.gr
www.gelis.gr
www.pharmagel.gr
www.orlpedia.gr
www.allergopedia.gr
www.gkelanto.gr
www.curcumin.gr
www.d3gkelin.gr
www.vitaminb12.gr
www.zinc.gr
www.gkelismedicalexicon.
gr
www.prolipsicarcinou.gr



Αικατερίνη Γκέλη

Ιατρός,

Ακτινοδιαγνώστρια

με ιδιαίτερο ενδιαφέρον

στην Ιατρική Διατροφολογία,

Ακτινοδιαγνωστική και

Υπερηχογραφική

Διαγνωστική,

Περιβαλλοντική Ιατρική,

Συμπληρωματική Ιατρική.

Διεύθυνση Ιατρείου:

Παπαληγούρα 16, Άσσος

Κορινθίας, Τηλ. 2741087758,

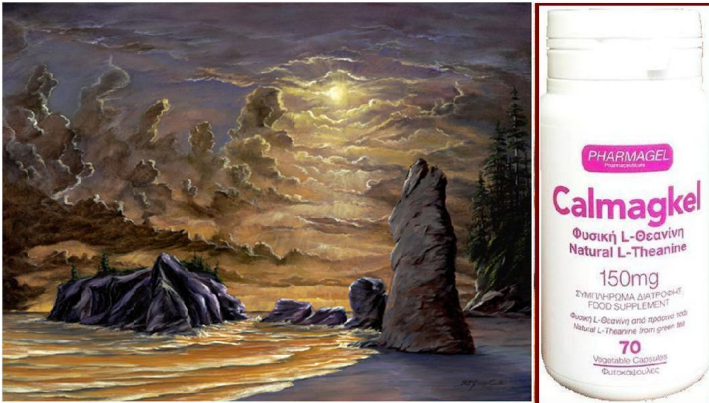
6944644820 email:

kgkeli@hotmail.com

Επικοινωνία: 2741087758, 6944644820 email: kgkeli@hotmail.com

Επικοινωνία: 2741087758, 6944644820 email: kgkeli@hotmail.com

Συντάχθηκε απο τον/την Δρ Δημήτριος Ν. Γκέλης, MD, ORL, DDS, PhD - Τελευταία Ενημέρωση Κυριακή, 02 Οκτώβριος 2022 08:39



L-θειανίνη [Calmagkel]

Η L-θεανίνη (γ-γλουταμιλαβιθουλαμίδιο) είναι, ένα αμινοξύ στο πράσινο τσάι, το οποίο, έχει αποδειχθεί ότι επηρεάζει τις εγκεφαλικές λειτουργίες, ανακουφίζοντας τις διαταραχές του στρες, βελτιώνοντας τη την ψυχική διάθεση, καταστάλνοντας το άγχος και αποκαθιστώντας την ομαλή λειτουργία του ύπνου, χωρίς να προκαλεί υπνηλία ή άλλες παρενέργειες.

Η L-θεανίνη μπορεί να συμβάλει στη βελτίωση της προσοχής, ενισχύοντας έτσι τη λειτουργική μνήμη και τις εκτελεστικές λειτουργίες.

Το Calmagkel είναι συμπλήρωμα διατροφής, η κάθε κάψουλα του οποίου περιέχει 150mg θειονίνης. Η συνήθης δόση του Calmagkel είναι 1-3 κάψουλες ημερησίως.

1. **Genetic factors**: Family history, inherited mutations (e.g., BRCA1/2 for breast cancer, APC for colon cancer).
 2. **Lifestyle factors**: Diet (high fat/salt, low fiber), physical inactivity, smoking, alcohol consumption.
 3. **Environmental factors**: Exposure to carcinogens (e.g., asbestos, UV radiation, air pollution).
 4. **Immunological factors**: Chronic inflammation, autoimmune diseases.
 5. **Hormonal factors**: Hormone therapy, reproductive history (e.g., early menarche, late menopause for breast cancer).
 6. **Infectious factors**: Certain viruses (e.g., HPV for cervical cancer, Hepatitis B for liver cancer).
 7. **Age**: Risk generally increases with age for most common cancers.
 8. **Sex**: Some cancers are more prevalent in one sex (e.g., prostate cancer in men, ovarian cancer in women).
 9. **Race/Ethnicity**: Certain cancers have higher prevalence in specific racial or ethnic groups (e.g., higher rates of prostate cancer in African Americans, higher rates of stomach cancer in East Asians).
 10. **Obesity**: A significant risk factor for several cancers, including breast, colon, and pancreatic cancer.
 11. **Reproductive factors**: For women, factors like parity (number of children) and age at first birth can influence the risk of certain cancers.
 12. **Chronic conditions**: Long-term conditions like Crohn's disease or ulcerative colitis can increase the risk of colorectal cancer.
 13. **Occupational factors**: Certain jobs involve exposure to carcinogenic substances.
 14. **Family history**: Having first-degree relatives with certain cancers can increase an individual's risk.
 15. **Genetic predisposition**: Specific gene mutations can significantly increase the risk of developing certain cancers, often at a younger age.
 16. **Immunosuppression**: Weakened immune system, either from disease or medication, can increase cancer risk.
 17. **Chronic inflammation**: Persistent inflammation in a tissue can lead to cellular damage and potentially cancer.
 18. **Hormonal influences**: Hormones like estrogen and progesterone can influence the development of certain cancers, particularly in the reproductive system.
 19. **Infectious agents**: Certain viruses, bacteria, and parasites are known to be associated with the development of specific cancers.
 20. **Age-related changes**: The body's ability to repair DNA damage and maintain cellular integrity decreases with age, leading to a higher accumulation of mutations.
 21. **Sex-specific factors**: Hormonal differences and reproductive patterns between men and women lead to different cancer profiles.
 22. **Racial and ethnic disparities**: These disparities often reflect a combination of genetic, lifestyle, and environmental factors.
 23. **Obesity and metabolic syndrome**: These conditions are linked to chronic inflammation and hormonal changes that can promote cancer growth.
 24. **Reproductive history**: For women, factors like early menarche, late menopause, and use of oral contraceptives can influence cancer risk.
 25. **Chronic diseases**: Conditions like Crohn's disease and ulcerative colitis are associated with an increased risk of colorectal cancer.
 26. **Occupational exposures**: Jobs involving exposure to asbestos, silica, and other carcinogens increase cancer risk.
 27. **Family history**: A family history of certain cancers, especially at a young age, suggests a genetic predisposition.
 28. **Genetic predisposition**: Mutations in genes like BRCA1/2, APC, and others can significantly increase the risk of specific cancers.
 29. **Immunosuppression**: Weakened immune response can allow cancer cells to grow unchecked.
 30. **Chronic inflammation**: Persistent inflammation can lead to cellular damage and the formation of cancerous cells.
 31. **Hormonal influences**: Hormones like estrogen and progesterone can influence the development of certain cancers.
 32. **Infectious agents**: Certain viruses, bacteria, and parasites are known to be associated with the development of specific cancers.
 33. **Age-related changes**: The body's ability to repair DNA damage and maintain cellular integrity decreases with age, leading to a higher accumulation of mutations.
 34. **Sex-specific factors**: Hormonal differences and reproductive patterns between men and women lead to different cancer profiles.
 35. **Racial and ethnic disparities**: These disparities often reflect a combination of genetic, lifestyle, and environmental factors.
 36. **Obesity and metabolic syndrome**: These conditions are linked to chronic inflammation and hormonal changes that can promote cancer growth.
 37. **Reproductive history**: For women, factors like early menarche, late menopause, and use of oral contraceptives can influence cancer risk.
 38. **Chronic diseases**: Conditions like Crohn's disease and ulcerative colitis are associated with an increased risk of colorectal cancer.
 39. **Occupational exposures**: Jobs involving exposure to asbestos, silica, and other carcinogens increase cancer risk.
 40. **Family history**: A family history of certain cancers, especially at a young age, suggests a genetic predisposition.
 41. **Genetic predisposition**: Mutations in genes like BRCA1/2, APC, and others can significantly increase the risk of specific cancers.
 42. **Immunosuppression**: Weakened immune response can allow cancer cells to grow unchecked.
 43. **Chronic inflammation**: Persistent inflammation can lead to cellular damage and the formation of cancerous cells.
 44. **Hormonal influences**: Hormones like estrogen and progesterone can influence the development of certain cancers.
 45. **Infectious agents**: Certain viruses, bacteria, and parasites are known to be associated with the development of specific cancers.
 46. **Age-related changes**: The body's ability to repair DNA damage and maintain cellular integrity decreases with age, leading to a higher accumulation of mutations.
 47. **Sex-specific factors**: Hormonal differences and reproductive patterns between men and women lead to different cancer profiles.
 48. **Racial and ethnic disparities**: These disparities often reflect a combination of genetic, lifestyle, and environmental factors.
 49. **Obesity and metabolic syndrome**: These conditions are linked to chronic inflammation and hormonal changes that can promote cancer growth.
 50. **Reproductive history**: For women, factors like early menarche, late menopause, and use of oral contraceptives can influence cancer risk.
 51. **Chronic diseases**: Conditions like Crohn's disease and ulcerative colitis are associated with an increased risk of colorectal cancer.
 52. **Occupational exposures**: Jobs involving exposure to asbestos, silica, and other carcinogens increase cancer risk.
 53. **Family history**: A family history of certain cancers, especially at a young age, suggests a genetic predisposition.
 54. **Genetic predisposition**: Mutations in genes like BRCA1/2, APC, and others can significantly increase the risk of specific cancers.
 55. **Immunosuppression**: Weakened immune response can allow cancer cells to grow unchecked.
 56. **Chronic inflammation**: Persistent inflammation can lead to cellular damage and the formation of cancerous cells.
 57. **Hormonal influences**: Hormones like estrogen and progesterone can influence the development of certain cancers.
 58. **Infectious agents**: Certain viruses, bacteria, and parasites are known to be associated with the development of specific cancers.
 59. **Age-related changes**: The body's ability to repair DNA damage and maintain cellular integrity decreases with age, leading to a higher accumulation of mutations.
 60. **Sex-specific factors**: Hormonal differences and reproductive patterns between men and women lead to different cancer profiles.
 61. **Racial and ethnic disparities**: These disparities often reflect a combination of genetic, lifestyle, and environmental factors.
 62. **Obesity and metabolic syndrome**: These conditions are linked to chronic inflammation and hormonal changes that can promote cancer growth.
 63. **Reproductive history**: For women, factors like early menarche, late menopause, and use of oral contraceptives can influence cancer risk.
 64. **Chronic diseases**: Conditions like Crohn's disease and ulcerative colitis are associated with an increased risk of colorectal cancer.
 65. **Occupational exposures**: Jobs involving exposure to asbestos, silica, and other carcinogens increase cancer risk.
 66. **Family history**: A family history of certain cancers, especially at a young age, suggests a genetic predisposition.
 67. **Genetic predisposition**: Mutations in genes like BRCA1/2, APC, and others can significantly increase the risk of specific cancers.
 68. **Immunosuppression**: Weakened immune response can allow cancer cells to grow unchecked.
 69. **Chronic inflammation**: Persistent inflammation can lead to cellular damage and the formation of cancerous cells.
 70. **Hormonal influences**: Hormones like estrogen and progesterone can influence the development of certain cancers.
 71. **Infectious agents**: Certain viruses, bacteria, and parasites are known to be associated with the development of specific cancers.
 72. **Age-related changes**: The body's ability to repair DNA damage and maintain cellular integrity decreases with age, leading to a higher accumulation of mutations.
 73. **Sex-specific factors**: Hormonal differences and reproductive patterns between men and women lead to different cancer profiles.
 74. **Racial and ethnic disparities**: These disparities often reflect a combination of genetic, lifestyle, and environmental factors.
 75. **Obesity and metabolic syndrome**: These conditions are linked to chronic inflammation and hormonal changes that can promote cancer growth.
 76. **Reproductive history**: For women, factors like early menarche, late menopause, and use of oral contraceptives can influence cancer risk.
 77. **Chronic diseases**: Conditions like Crohn's disease and ulcerative colitis are associated with an increased risk of colorectal cancer.
 78. **Occupational exposures**: Jobs involving exposure to asbestos, silica, and other carcinogens increase cancer risk.
 79. **Family history**: A family history of certain cancers, especially at a young age, suggests a genetic predisposition.
 80. **Genetic predisposition**: Mutations in genes like BRCA1/2, APC, and others can significantly increase the risk of specific cancers.
 81. **Immunosuppression**: Weakened immune response can allow cancer cells to grow unchecked.
 82. **Chronic inflammation**: Persistent inflammation can lead to cellular damage and the formation of cancerous cells.
 83. **Hormonal influences**: Hormones like estrogen and progesterone can influence the development of certain cancers.
 84. **Infectious agents**: Certain viruses, bacteria, and parasites are known to be associated with the development of specific cancers.
 85. **Age-related changes**: The body's ability to repair DNA damage and maintain cellular integrity decreases with age, leading to a higher accumulation of mutations.
 86. **Sex-specific factors**: Hormonal differences and reproductive patterns between men and women lead to different cancer profiles.
 87. **Racial and ethnic disparities**: These disparities often reflect a combination of genetic, lifestyle, and environmental factors.
 88. **Obesity and metabolic syndrome**: These conditions are linked to chronic inflammation and hormonal changes that can promote cancer growth.
 89. **Reproductive history**: For women, factors like early menarche, late menopause, and use of oral contraceptives can influence cancer risk.
 90. **Chronic diseases**: Conditions like Crohn's disease and ulcerative colitis are associated with an increased risk of colorectal cancer.
 91. **Occupational exposures**: Jobs involving exposure to asbestos, silica, and other carcinogens increase cancer risk.
 92. **Family history**: A family history of certain cancers, especially at a young age, suggests a genetic predisposition.
 93. **Genetic predisposition**: Mutations in genes like BRCA1/2, APC, and others can significantly increase the risk of specific cancers.
 94. **Immunosuppression**: Weakened immune response can allow cancer cells to grow unchecked.
 95. **Chronic inflammation**: Persistent inflammation can lead to cellular damage and the formation of cancerous cells.
 96. **Hormonal influences**: Hormones like estrogen and progesterone can influence the development of certain cancers.
 97. **Infectious agents**: Certain viruses, bacteria, and parasites are known to be associated with the development of specific cancers.
 98. **Age-related changes**: The body's ability to repair DNA damage and maintain cellular integrity decreases with age, leading to a higher accumulation of mutations.
 99. **Sex-specific factors**: Hormonal differences and reproductive patterns between men and women lead to different cancer profiles.
 100. **Racial and ethnic disparities**: These disparities often reflect a combination of genetic, lifestyle, and environmental factors.
 101. **Obesity and metabolic syndrome**: These conditions are linked to chronic inflammation and hormonal changes that can promote cancer growth.
 102. **Reproductive history**: For women, factors like early menarche, late menopause, and use of oral contraceptives can influence cancer risk.
 103. **Chronic diseases**: Conditions like Crohn's disease and ulcerative colitis are associated with an increased risk of colorectal cancer.
 104. **Occupational exposures**: Jobs involving exposure to asbestos, silica, and other carcinogens increase cancer risk.
 105. **Family history**: A family history of certain cancers, especially at a young age, suggests a genetic predisposition.
 106. **Genetic predisposition**: Mutations in genes like BRCA1/2, APC, and others can significantly increase the risk of specific cancers.
 107. **Immunosuppression**: Weakened immune response can allow cancer cells to grow unchecked.
 108. **Chronic inflammation**: Persistent inflammation can lead to cellular damage and the formation of cancerous cells.
 109. **Hormonal influences**: Hormones like estrogen and progesterone can influence the development of certain cancers.
 110. **Infectious agents**: Certain viruses, bacteria, and parasites are known to be associated with the development of specific cancers.
 111. **Age-related changes**: The body's ability to repair DNA damage and maintain cellular integrity decreases with age, leading to a higher accumulation of mutations.
 112. **Sex-specific factors**: Hormonal differences and reproductive patterns between men and women lead to different cancer profiles.
 113. **Racial and ethnic disparities**: These disparities often reflect a combination of genetic, lifestyle, and environmental factors.
 114. **Obesity and metabolic syndrome**: These conditions are linked to chronic inflammation and hormonal changes that can promote cancer growth.
 1