

## Celltox<sup>®</sup> 3G

Problem	Uses	Solution	Composition	Action Mechanisms	Posology
<p>The growing environmental pollution creates inevitable heavy metal accumulation in the body, such as mercury, lead, cadmium, etc., depending on the level of exposure.</p> <p>This buildup can affect cognitive abilities, reasoning and concentration, reduce immune system efficiency and foster degenerative and endocrine diseases.</p> <p>Furthermore, this contaminated environment significantly increases the production of free radicals in the body.</p>	<p>High exposure to industrial pollutants and chemicals.</p> <p>Heavy metal toxicity in the body.</p> <p>Mineral elements: Selenium.</p>	<p>Elimination of heavy metal and other chemical pollutant accumulations through chelation processes.</p> <p>Antioxidant enzymes block the effect of free radicals, preventing the damage due to oxidative stress.</p>	<p><b>Each enteric coated tablet of 500 mg contains:</b></p> <p>Opothropic cell extracts: Liver 10%, Thymus Gland 10%;</p> <p>Mineral elements: Zinc, Selenium, Magnesium; Lycopene, EDTA (Ethylenediaminetetraacetic acid), micronized Clinoptilolite Zeolite, R-Lipoic Acid, Vitamin D, Vitamin C, Vitamin E, Cysteine, Glycine, antioxidant enzyme Complex: superoxide dismutase, glutathione S-transferase; Maltodextrin and stabilizers.</p>	<p>The formula components have the ability to link with heavy metals to form water-soluble chelated complexes, which are further eliminated in the urine.</p> <p>The powerful antioxidants in the formula provide antioxidant protection, significantly neutralizing free radicals.</p>	<ul style="list-style-type: none"> <li>• <b>Preventive action:</b> <b>High exposure to industrial pollutants and chemicals</b></li> </ul> <p><b>Orally:</b> One tablet in the morning and one at night (1 X 1) for at least six months.</p> <ul style="list-style-type: none"> <li>• <b>Adjuvant action:</b> <b>Poisoning by heavy metals in the organism</b></li> </ul> <p><b>Orally:</b> 2 tablets in the morning and 2 tablets at night (2 x 2) for at least six months.</p> <p>The tablets are taken in the morning on an empty stomach and at night before dinner (30 minutes before meals)</p> <p><b>NOTE:</b> Because chelation results in essential minerals reduction in the body, it is recommended to complement this treatment with <b>Mekenz<sup>®</sup> H7 3G</b>, which represents an efficient contribution mechanism for trace elements.</p> <p><b>NOTE:</b> The dose may be increased according to the clinical picture of the patient and the physician's discretion; the results depend on the completion of treatment.</p>
				<h3>Contraindications</h3>	
				<ul style="list-style-type: none"> <li>• Allergies to animal proteins</li> <li>• Allergy to any of its components</li> <li>• Prostate Cancer</li> </ul>	



### Adjuvant treatment with:

Category	Therapeutic Class
<b>Bronchodilators</b>	Aminophylline, Theophylline, Tiotropium, albuterol, levalbuterol
<b>Antihistamines</b>	Loratadine, Desloratadine, cetirizine, levocetirizine
<b>Antihypertensive and heart failure</b>	Calcium antagonists: Nifedipine
	ACE inhibitors: Enalapril, Captopril
	ARB-II: losartan, candesartan
	Beta-blockers: Atenolol, Metoprolol, Carvedilol, Bisoprolol
	Thiazide diuretics: Hydrochlorothiazide, chlorthalidone, indapamide, xipamide, Ameride (thiazide & K+ saver)
<b>Hypoglycemic</b>	Biguanides: Metformin
	Inhibitors of alpha-glucosidase: Acarbose
	Sulfonylureas: glibenclamide, glimepiride, glyburide and Tolazamide
	Injectable drugs (like GLP-1): Sitagliptin, Saxagliptin, and linagliptin
	Meglitinides: Repaglinide, nateglinide
	SGLT2 Inhibitors: Dapagliflozin
	Thiazolidinediones: Pioglitazone
	DPP IV inhibitors: Sitagliptin and vildagliptin
	Injectable insulin
<b>Diuretics</b>	Thiazide and analogues: IDEM (above)
	K + Savers: Spironolactone
	Osmotic: Mannitol
<b>Statins</b>	Selective, competitive inhibitors of HMG-CoA reductase: atorvastatin, simvastatin, pravastatin
<b>Coronary vasodilators</b>	Antianginal: Calcium antagonists - Nifedipine
	Competitive antagonist of beta 1 and beta 2 adrenergic receptors: Propranolol
<b>Heart failure</b>	Digitalis: Digoxin
<b>Venous insufficiency</b>	Venotonic and vasculoprotective drugs: Diosmin, Hidrosmin, Horse Chestnut Seed
	Reversible inhibitor of the enzyme acetylcholinesterase: Donepezil, Galantamine
<b>Alzheimer</b>	NMDA receptor antagonist: Memantine
	Neurometabolic stimulator: Piracetam
	Porcine-brain derived peptide preparation: Cerebrolysin
	Cholinesterase inhibitors: Rivastigmine
<b>Hormone Replacement Therapy</b>	Estrogen, Progesterone, Testosterone, Prasterone, Mesterolone, Fluoxymesterone
<b>Chemotherapy</b>	Methotrexate, actinomycin D, vincristine, ifosfamide, Raltitrexed, Bevacizumab, Irinotecan, oxaliplatin, cetuximab, capecitabine, carboplatin, tamoxifen, cisplatin, Megestrol, Gestonorone, Anastrozole, Paclitaxel, Vinorelbine, Trastuzumab, leuprorelin, Diethylstilbestrol, Nilutamide, epirubicin, among others
	Selective serotonin reuptake inhibitors (SSRI): paroxetine, sertraline, fluoxetine, citalopram, escitalopram
	Serotonin-norepinephrine reuptake inhibitors (SNRIs): venlafaxine, duloxetine, Desvenlafaxine
<b>Antidepressants</b>	NaSSA: Mirtazapine
	Tricyclic: amitriptyline, clomipramine, imipramine
	MAOIs: Moclobemide
	Serotonin-norepinephrine reuptake inhibitor (SNRI): Reboxetine
	Dopamine-norepinephrine reuptake inhibitor (DNRI): Bupropion
	Zoledronic acid, bisphosphonates: risedronate, alendronate
<b>Osteoporosis</b>	NSAIDs: ketorolac, paracetamol, diclofenac, indomethacin, Etoricoxib, diclofenac, misoprostol, etc. Opioids: Tramadol, morphine, buprenorphine, etc. Neuromodulators: Pregabalin, Gabapentin, Duloxetine. Corticosteroids: Dexamethasone, hydrocortisone, methylprednisolone, etc.
	Corticosteroids: Betamethasone, Prednisone
	Chondroitin, Glucosamine
<b>Anti-anemic</b>	Iron
<b>Renal impairment</b>	Recombinant erythropoietin, Furosemide, Amino Acids
<b>Erectile dysfunction (ED)</b>	Cyclic GMP-specific phosphodiesterase type 5 (PDE5): Sildenafil
<b>Immunomodulators</b>	Interferon alfa
<b>Antibiotics</b>	Beta-lactams, aminoglycosides, cephalosporins, macrolides
<b>Intestinal motility regulators</b>	Cisapride, metoclopramide, Trimebutine, Pinaverium
<b>Antacids</b>	Omeprazole, famotidine, pantoprazole, ranitidine
<b>Stool softeners</b>	Fiber, Sennosides, Docusate
<b>Digestive enzymes</b>	Bromelain, papain, pepsin, trypsin, lipase, Pancreatin
<b>Alpha-blockers</b>	Tamsulosin, terazosin, doxazosin, alfuzosin