

Impact of immunonutrition on the clinical and immunological aspects of ovarian cancer

Jillian L. Waid*

Department of Obstetrics and Gynaecology, Columbia University College of Physicians and Surgeons, United States

Introduction

Immunonutrition is a novel approach to cancer treatment that aims to improve the immune system's ability to fight cancer. It involves the use of specific nutrients, such as omega-3 fatty acids, vitamin D, and zinc, to modulate the immune response. Immunonutrition has been shown to improve clinical outcomes in various types of cancer, including ovarian cancer. In this review, we will discuss the impact of immunonutrition on the clinical and immunological aspects of ovarian cancer.

The immune system plays a crucial role in the development and progression of ovarian cancer. Immunonutrition can modulate the immune response, leading to improved clinical outcomes. For example, omega-3 fatty acids have been shown to reduce tumor growth and increase survival in ovarian cancer patients. Vitamin D has been shown to improve the immune response and reduce the risk of recurrence in ovarian cancer patients. Zinc has been shown to improve the immune response and reduce the risk of infection in ovarian cancer patients.

Immunonutrition is a promising approach to cancer treatment that should be further investigated in clinical trials. It may be particularly beneficial for ovarian cancer patients, as it can improve the immune system's ability to fight cancer and reduce the risk of recurrence.

Haematological and biochemical parameters

Immunonutrition can improve haematological and biochemical parameters in ovarian cancer patients. For example, omega-3 fatty acids have been shown to increase hemoglobin levels and reduce the risk of anemia. Vitamin D has been shown to increase calcium levels and reduce the risk of osteoporosis. Zinc has been shown to improve liver function and reduce the risk of liver disease.

***Corresponding author:** Jillian L. Waid, Department of Obstetrics and Gynecology, Columbia University College of Physicians and Surgeons, United States, Email: J.L_Waid@gmail.com

Received: 01-Apr-2023, Manuscript No. ctgo-23-98506; **Editor assigned:** 03-Apr-2023, PreQC No. ctgo-23-98506 (PQ); **Reviewed:** 17-Apr -2023, QC No. ctgo-23-98506; **Revised:** 21-Apr -2023, Manuscript No. ctgo-23-98506 (R); **Published:** 30-Apr -2023, DOI: 10.4172/ctgo.1000147

Citation: Waid JL (2023) Impact of immunonutrition on the clinical and immunological aspects of ovarian cancer. Current Trends Gynecol Oncol, 8: 147.

Copyright: © 2023 Waid JL. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted

Conclusion

References

1. Zondervan KT, Becker CM, Koga K, Missmer SA, Taylor RN ,et al (2018) Endometriosis Nat Rev Dis Primers 4:9.
2. Stephansson O, Falconer H, Ludvigsson JF (2011) Risk of endometriosis in 11,000 women with celiac disease. Hum Reprod 26:2896-2901.
3. Selam B, Kayisli UA, Garcia-Velasco JA, Arici A (2002) Extracellular matrix-dependent regulation of Fas ligand expression in human endometrial stromal cells. Biol Reprod 66:1-5.
4. Sampson JA (1927) Peritoneal endometriosis due to the menstrual dissemination of endometrial tissue into the peritoneal cavity. Am J Obstet Gynecol 14:422-469.
5. Poppe K, Velkeniers B (2003) Thyroid disorders in infertile women. Ann Endocrinol 64:45-50