

Stem Cell Therapy for Diabetes: A Patient's Guide

Regenerating Pancreatic Function and Improving Glucose Control



Your Journey to Regenerative Health Starts Here

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What Is Diabetes?

Diabetes mellitus is a chronic metabolic disease characterized by elevated blood glucose levels due to insufficient insulin production (Type 1), insulin resistance (Type 2), or both. It affects over 537 million adults worldwide. Uncontrolled diabetes leads to progressive damage to blood vessels, nerves, kidneys, eyes, and heart, making it a leading cause of blindness, kidney failure, heart attacks, and lower limb amputation.

Types and Complications

- Type 1 Diabetes — Autoimmune destruction of insulin-producing beta cells in the pancreas, requiring lifelong insulin therapy.
- Type 2 Diabetes — Progressive insulin resistance and declining beta cell function, often associated with obesity and lifestyle factors.
- Diabetic Neuropathy — Nerve damage causing numbness, pain, and weakness, particularly in the extremities.
- Diabetic Nephropathy — Progressive kidney damage that can lead to dialysis or kidney transplant.
- Cardiovascular complications — Accelerated atherosclerosis increasing risk of heart attack and stroke.

The progressive loss of beta cell mass and function is central to diabetes progression. Stem cell therapy offers the potential to regenerate beta cells and restore the body's natural insulin-producing capacity.

CHAPTER 2

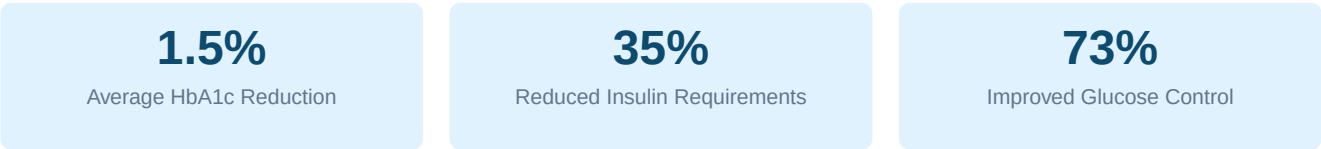
How Stem Cell Therapy Helps

Pancreatic Regeneration

MSC therapy for diabetes works through multiple mechanisms: stimulating the regeneration of beta cells in the pancreatic islets, improving insulin sensitivity in peripheral tissues, reducing the chronic inflammation that contributes to insulin resistance, and protecting remaining beta cells from further damage. For Type 1 diabetes, immune modulation helps reduce the autoimmune attack on beta cells.

A clinical trial published in Diabetes Care demonstrated that MSC infusion in Type 2 diabetes patients reduced HbA1c by an average of 1.5 percentage points and reduced insulin requirements by 30-50% at 12-month follow-up.

Measurable Outcomes



Treatment at StemCell Longevita

Our Diabetes Protocol

Our diabetes treatment protocol combines IV stem cell infusion for systemic metabolic improvement with targeted pancreatic delivery where appropriate. Treatment is customized based on diabetes type, duration, current medications, and the extent of complications. We use high-dose umbilical cord-derived MSCs known for their potent immunomodulatory and regenerative properties.

Treatment Process

- Day 1 — Comprehensive metabolic evaluation including HbA1c, C-peptide levels, insulin levels, lipid panel, and complication screening at Liv Hospital Ulus.
- Day 2-3 — Sequential IV stem cell infusions with blood glucose monitoring throughout treatment.
- Day 4 — Post-treatment assessment, medication adjustment guidance, and long-term management plan.

Expected Improvements

Blood glucose improvements typically begin within 4 to 8 weeks. HbA1c improvements are measurable at 3 months. Reduced medication and insulin requirements develop over 3 to 6 months. Improvements in diabetic complications (neuropathy, nephropathy) may develop over 6 to 12 months.

4-8

Weeks to Glucose Improvement

78%

Improved HbA1c Levels

18+

Months of Sustained Benefits

Candidacy and Next Steps

Stem cell therapy may benefit Type 1 and Type 2 diabetes patients who desire better glucose control, want to reduce medication burden, or are developing complications. Send your recent lab work and medical history for a free evaluation and treatment recommendation.

Frequently Asked Questions

Can stem cells cure diabetes?

While a complete cure is not currently achievable, stem cell therapy can significantly improve glucose control, reduce medication needs, and slow the progression of diabetic complications. Ongoing research continues to advance toward more definitive treatments.

Is stem cell therapy effective for both Type 1 and Type 2 diabetes?

Yes, though through different mechanisms. For Type 1, the focus is on immune modulation and beta cell regeneration. For Type 2, it addresses insulin resistance and supports remaining beta cell function. Both types can benefit from treatment.

Will I be able to stop insulin after treatment?

Some Type 2 diabetes patients have been able to significantly reduce or discontinue insulin after stem cell therapy. Type 1 patients typically still require insulin but at reduced doses. Any medication changes should be made under medical supervision.

How is blood sugar managed during treatment?

Our team closely monitors blood glucose levels throughout the treatment period and makes real-time adjustments to diabetes medications as needed to maintain optimal glucose control.

Medical Disclaimer

The information contained in this guide is provided for educational purposes only and is not intended as medical advice, diagnosis, or treatment. Stem cell therapy outcomes vary by individual, and no specific results are guaranteed. The content herein reflects current scientific understanding and clinical experience as of the publication date but is subject to change as new research emerges. Always consult with a qualified healthcare professional before making any medical decisions. StemCell Longevita and its affiliated practitioners are not responsible for any actions taken based on the information in this guide. All medical treatments carry inherent risks, and patients should discuss potential benefits, risks, and alternatives with their treating physician.

Ready to Begin Your Healing Journey?

Our team of regenerative medicine specialists is ready to evaluate your case and create a personalized treatment plan.

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