

Spinal Muscular Atrophy

Spinal Muscular Atrophy: Diagnosis and Management in a New Therapeutic Era

Spinal muscular atrophy (SMA) describes a group of disorders associated with spinal motor neuron loss. In this review we provide an update regarding the most common form of SMA, proximal or 5q SMA, and discuss the contemporary approach to diagnosis and treatment



> Advances in modeling and treating Spinal Muscular Atrophy

Spinal muscular atrophy (SMA) is an inherited childhood neurodegenerative disorder caused by ubiquitous deficiency of the survival motor neuron (SMN) protein—the hallmarks of which are the selective loss of motor neurons and skeletal muscle atrophy.







> Treatment of Spinal Muscular Atrophy with Intrathecal Mesenchymal cell

SMA1 is a genetic disease that leads to progressive apoptosis of the second motoneuron and then to complete paralysis. There are reports of efficacy of mesenchymal cells in the treatment of other neurological diseases; therefore we decided to treat some children with these cells.



Stem Cell Model Of Spinal Muscular Atrophy

Human embryonic stem cells provide a useful source of material for studying basic human development and various disease states. However, ethical issues concerning their procurement limit their acceptance and possible clinical applicability.







> Aging hallmarks: The Benefits of Physical Exercise

The world population has been continuously increasing and progressively aging. Aging is characterized by a complex and intraindividual process associated with nine major cellular and molecular hallmarks, namely, genomic instability, telomere attrition, epigenetic alterations, a loss of proteostasis, deregulated nutrient sensing, mitochondrial dysfunction, cellular senescence, stem cell exhaustion, and altered intercellular communication. This review exposes the positive antiaging impact of physical exercise at the cellular level, highlighting its specific role in attenuating the aging effects of each hallmark



Stem cell Aging: Mechanism, Regulators and Therapeutic Opportunities

Aging tissues experience a progressive decline in homeostatic and regenerative capacities, attributed to degenerative changes in tissue-specific stem cells, stem cell niches, and systemic cues that regulate stem cell activity.











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