29 NEXENTURY

Super whitening

SLC24A5 Inhibitor III

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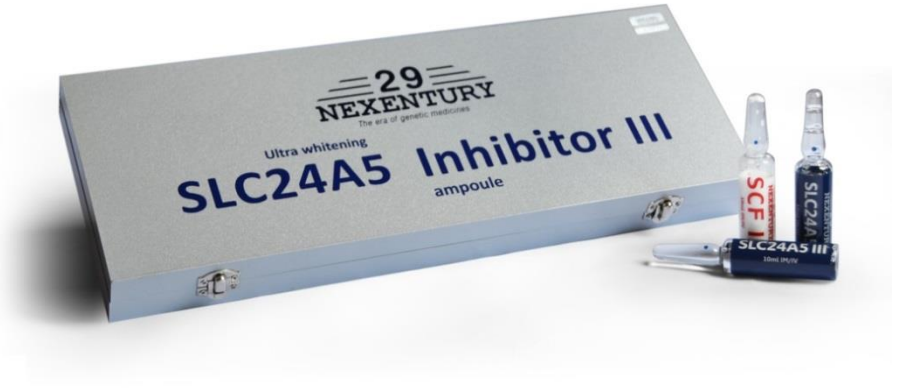


Clinical Study :

Conducted by: Prof. Jason R. Mest
Chief Scientist, The Research Team of Institution of Biomedical Research, Switzerland. Professor in Genetic Medicines, Philadelphia Medical University, USA.

Introduction
SLC24A5 is a genetic protein produced by SLC24A5 gene in human chromosome 15, which is comprises of 396 amino acid molecules, classified as one of the Potassium Dependent Sodium/Calcium Exchanger family. Clinical studies have revealed that the activities of SLC24A5 gene is closely related to the complexion of an organism, and low level of SLC24A5 gene activities is regarded as the major factor which contributed to lighter complexion in Caucasians versus other ethnics.

In 2005,the **Second Generation** of SLC24A5 Inhibitor II was found in organisms with albinism which inhibits the activities of SLC24A5 gene, which can disable the activities of SLC24A5 gene, disrupting the processes of melanogenesis.

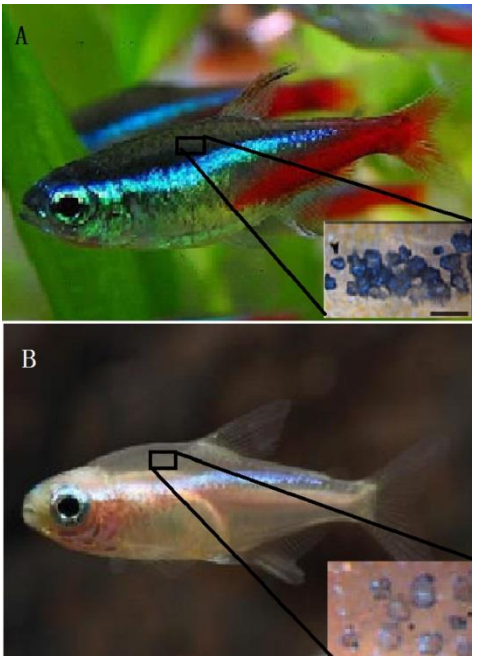
In 2008, a Research Team of Genetic Medicines of Institution of Biomedical Sciences, led by Prof. Jason R, had improvised on the previous SLC24A5 Inhibitor, with clearly defined and predictable biochemical pathways, with whitening effects confined to the skin cell only, without affecting the hair and eyes.

After careful improvisation and research, we started the first clinical study with SLC24A5 Inhibitor II in human subjects in 2008.

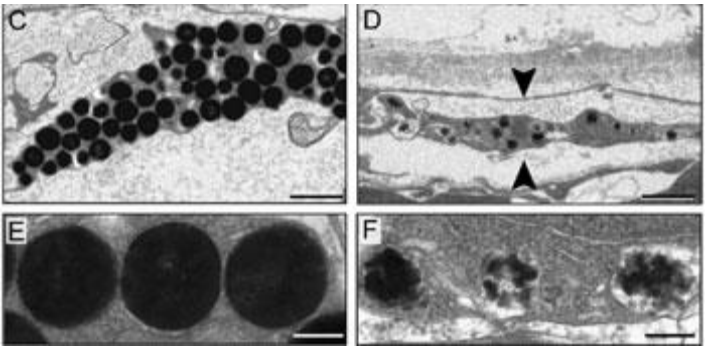
Science and technology leaps and bounds. In mid 2009, Prof. Jason R. led a Research team to the Ghana's largest national park - Mole National Park, to conduct a research on the melanocytes level of the native Africans. There, the team came across with a unique fruit – Anona Muricata. The native Africans take this fairy fruit for treating a wide array of ailments & capable to strengthen the wall of body stem cell.
When back to his laboratory, in vitro & in vivo, the Research Team of Genetic Medicines of Institution of Biomedical Sciences, Switzerland led by Prof. Jason R, successfully proved & combined the Anona Muricata Stem Cell with the Cereus Grandiflorus Stem Cell, evolve the new generation of **Stem Cell Factor III** (**SCF III**) .

In 2010, a Research Team of Genetic Medicines of Institution of Biomedical Sciences, led by Prof. Jason R., had improvised on the previous SLC24A5 Inhibitor II, with clearly defined and predictable biochemical pathways, with **enhanced** whitening effects confined to the skin cell only. In addition of the SCF III exerting stem cell stimulating effect, enhance the effectiveness of the **Third Generation** - **SLC24A5 inhibitor III**.

SLC24A5 II successfully whitened the complexion of zebra fish. An animal study was conducted with SLC24A5 III, which successfully whitened the complexion of Neon Tetra, with results as shown below:



The above clinical study is followed by an in vitro study of synthetic SLC24A5 Inhibitor III, which shown that it is able to reduce the number and size of melanocytes, as in the following diagram :



All the above studies had revealed the potentials of SLC24A5 inhibitor III as an ideal enhancing skin whitening therapy, as in theory, treatment of SLC24A5 Inhibitor III will disable the SLC24A5 gene in the body permanently, rendering a permanent solution to skin whitening in aesthetic medicines. However, the activities of such inhibitor have to be contemplated sufficiently to avoid the consequences of pathologic, systemic albinism (loss of pigments in hairs and eyes).

Details:
1200 subjects of different ethnics took part in this second clinical study in mid of 2011, comprises of 500 black Africans and 700 Asians of darker complexion (From China, Korea, Japan, Thailand, India, Indonesia, Middle East…etc), 600 females and 600 males, age between 15-65. All subjects were treated with 1000mcg of SLC24A5 Inhibitor III of different duration, depending on their complexion.

Subjects with darker complexion, e.g. Africans, Indians, Indonesian…etc, will be treated 24 times (in 48 days) while those of lighter complexion will be treated 12 times (in 24 days). Changes of pigments in skin, hair and eyes are recorded weekly throughout the period of clinical study, and continue to observe the subjects for 6 months after the completion of the study, to make sure there's no spread of SLC24A5 Inhibitor's effects to the hair and eyes.

Result:
Complexion of 300 Asian subjects of darker complexion become fairer after the 9th treatment (18th day) of

SLC24A5 Inhibitor III, characterized as slightly whitening and glowing of facial complexion, with improvement of 40-55% fairer than before treatment. Asian subjects of darker complexion also have shown a 25-35% improvement in complexion following 9 treatment. Approximately 5% of African subjects shown slight lightening of facial complexion after the 8th treatment. The efficacies of SLC24A5 Inhibitor III is consistent, which begins from the head, then gradually extended downwards to the face and neck, and continue to the whole body.

24 days after treatments: Subjects with lighter complexion had obtained very good skin complexion after the 12th treatment, with ideal and even whitening of skin of their whole body. Subjects with darker complexion achieved 35% lightening of the complexion in 30% of the skin surface and they shall continue to use 1000mcg of SLC24A5 Inhibitor III till the 24th treatment.

36 days after treatment: Subjects of darker complexion continue to show improvements in complexion, with 70% of skin surface become fairer.

48 days after treatment: At the completion of the study, all subjects of darker complexion become as fair as Caucasians.

Conclusion:
This third generation of SLC24A5 Inhibitor III invented by Institution of Biomedical Sciences, Switzerland has exhibited superb inhibition of SLC24A5 gene in all ethnics, exerting whitening of pigments confined only to the skin. This is an unprecedented achievement, which can whiten the skin effectively and safely. All subjects are

observed for 6 more months after the completion of clinical study and it is concluded that all organ functions are not affected by the treatment of SLC24A5 Inhibitor III, without cytotoxic effects of this treatments against the pigments in the hair and eyes.
As we can see from the below diagram, the effect of SLC24A5 gene inhibitor III will whiten the skin without affecting the pigment of eyes and hairs. Hence, concluded that the newly improvised SLC24A5 Inhibitor III acts only on skin pigments without affecting other pigment cells. The followings are before and after comparisons of other subjects:

Before

After the 8th treatments

After the12th treatments

Before | After the 12th treatments | After the 24th treatments

References:

1) Lamason RL, Mohideen MA, Mest JR, Wong AC, Norton HL, Aros MC, Jurynec MJ, Mao X, Humphreville VR, Humbert JE, Sinha S, Moore JL, Jagadeeswaran P, Zhao W, Ning G, Makalowska I, McKeigue PM, O'donnell D, Kittles R, Parra EJ, Mangini NJ, Grunwald DJ, Shriver MD, Canfield VA, Cheng KC (December 2005). "SLC24A5, a putative caption exchanger, affects pigmentation in zebra fish and humans". Science 310 (5755): 1782–6. doi:10.1126/science.1116238. PMID 16357253.

2) SLC24A5 Encodes a trans-Golgi Network Protein with Potassium-dependent Sodium-Calcium Exchange Activity That Regulates Human Epidermal Melanogenesis, Rebecca S. Ginger, Sarah E. Askew, Richard M. Ogborne, Stephen Wilson, Dudley Ferdinando, Tony Dadd, Adrian M. Smith, ShubanaKazi, Robert T. Szerencsei, Robert J. Winkfein, Paul P. M. Schnetkamp and Martin R.

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3) Norton HL, Kittles RA, Parra E, McKeigue P, Mao X, Cheng K, Canfield VA, Bradley DG, McEvoy B, Shriver MD (2006) Genetic evidence for the convergent evolution of light skin in Europeans and East Asians. MolBiolEvol 24:710–722 [PubMed] [Cross Ref] doi: 10.1093/molbev/msl203.

4) SLC24A5, a putative caption exchanger, affects pigmentation in zebra fish and humans. Lamason RL, Mohideen MA, Mest JR, Wong AC, Norton HL, Aros MC, Jurynec MJ, Mao X, Humphreville VR, Humbert JE, Sinha S, Moore JL, Jagadeeswaran P, Zhao W, Ning G, Makalowska I, McKeigue PM, O'donnell D, Kittles R, Parra EJ, Mangini NJ, Grunwald DJ, Shriver MD, Canfield VA, Cheng KC.JakeGittlen Cancer Research Foundation, Department of Pathology, The Pennsylvania State University College of Medicine, Hershey, PA 17033, USA.

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