

Welcome to the December newsletter from Pure Bio Ltd.

Please note that the office will be open at the following times during the Christmas and New Year period:

Thursday 21st December 2006 Friday 22nd December 2006 **Monday 25th December 2006 Tuesday 26th December 2006** Wednesday 27th December 2006 Thursday 28th December 2006 Friday 29th December 2006 **Monday 1st January 2007** normal office hours 09.00 – 13.00 **CLOSED** normal office hours normal office hours 09.00 – 13.00 **CLOSED**

Normal office hours will resume on **Tuesday 2nd January 2007.**

Orders will, as usual, be sent out using first class business mail, but please allow at least 3 extra working days for deliveries to reach their destination during this period.

All of the staff at Pure Bio would like to take this opportunity of thanking you for your much valued custom over the past year and to extend to you and your families and staff the very warmest wishes for a happy and peaceful Christmas season.

Don't forget that orders can be placed on our website on <u>www.purebio.co.uk</u> at any time during the Christmas period.

Did you know. . .?

The American Dental Association have recently published a position paper warning mothers against preparing baby foods with fluoridated water as it may be bad for the development of babies' teeth.

Fluoride can cause fluorosis, a disease that damages the tooth's enamel, the ADA has announced.

Our topic for this month is FIBROMYALGIA

Fibromyalgia

Ranking	Nutritional Supplements	Botanical Medicine
Secondary	5-HTP SAMe	Chlorella
Other	D-Ribose Magnesium Malic acid Melatonin Vitamin B1 Vitamin E	

Primary – Reliable and relatively consistent scientific data showing a substantial health benefit.

Secondary – Contradictory, insufficient, or preliminary studies suggesting a health benefit or minimal health benefit.

Other – An herb is primarily supported by traditional use, or the herb or supplement has little scientific support and/or minimal health benefit.

The Facts

Also known as: fibrositis, myofascial pain syndrome, fibromyositis

The name fibromyalgia indicates pain in fibrous tissues, muscles, tendons, ligaments, and other sites on the body. The neck, shoulders, thorax, low back, and thighs are the most common areas affected.

Fibromylagia occurs mainly in women aged 30 to 50. Some clinicians believe that fibromyalgia may be induced or intensified by physical or mental stress, poor sleep, trauma, exposure to damp or cold, and occasionally by a systemic and usually rheumatic disorder.

People often report a traumatic event that triggered the initial symptoms, such as severe infectious illness, emotional or physical stress, an accident, or a history of childhood physical abuse.

Symptoms

Generalized aching, pain and tenderness throughout the body.

People often describe neck, shoulder, low back and hip pain that seem to move from place to place.

Sleep is often disturbed, and people often wake up at night with a feeling of stiffness, fatigue, and achiness. People with fibromyalgia appear to have abnormal brain waves in stage 4 sleep, which is the deepest stage of sleep. Stage 4 sleep is important for tissue repair, antibody production, the formation of growth hormone; and muscle and bone health. Sufferers wake during this stage, and consequently do not feel they have had a restful sleep.

People with fibromyalgia have been found by researchers to have increased amounts of neurotransmitters that cause pain responses, such as substance P, and depressed levels of natural painkillers, such as serotonin and growth hormone. Lower levels of serotonin are also involved in depression.

The American College of Rheumatologists defines fibromyalgia as the presence of widespread chronic pain and the existence of pain in at least 11 of 18 specific points on the body when pressure is applied.

Other symptoms include intolerance to cold or heat, increased urinary frequency, irritable bowel syndrome, anxiety, headache, numbness and tingling. Conventional lab tests and physical examination are often normal, which can be frustrating for the patient.

Dietary Modification

A vegan diet (includes no animal products) that is also low in salt may help women with fibromyalgia. In a controlled clinical trial, women with fibromyalgia were put on a special diet consisting only of raw foods—primarily fruits, vegetables, nuts, seeds, legumes, and cereals (such as rolled oats). The diet also contained several fermented foods, including a fermented yogurt-food made from oats, a fermented beverage made from wheat berries (called Rejuvalac), and several types of fermented vegetables, particularly cabbage. During the three-month trial, women following the therapeutic diet experienced a significant reduction in body weight, pain, morning sickness, use of painkillers, depression, and the number of sore fibromyalgia points, compared with those who continued to eat their regular diet. Due to the liberal use of nuts and seeds, this diet was not low in fat; for example, 31% of all calories came from fat. Nonetheless, the total number of calories was relatively low (less than 1,900 calories per day), which was probably responsible for the decrease in body weight.

In a preliminary report, four women with fibromyalgia experienced marked improvement or complete resolution of their symptoms within months after eliminating monosodium glutamate (MSG) or MSG plus aspartame from their diet. In each case, symptoms recurred whenever MSG was ingested.

Lifestyle Modification

Low-intensity exercise may improve fibromyalgia symptoms. People with fibromyalgia who exercise regularly have been reported to suffer less severe symptoms than those who remain sedentary. In a controlled trial, a program consisting of two 25-minute exercise classes plus two educational sessions per week for six weeks resulted in immediate and sustained improvement in walking distance, fatigue, and well-being in a group of people with fibromyalgia; however, no reductions in pain, anxiety, or depression were seen. In a more recent controlled trial, a 35-minute exercise program in a warm pool once a week for six months, coupled with counselling sessions, led to improvements in hand-grip strength and endurance, as well as to reductions in pain, distress, depression, and anxiety. The results of this trial, and other similar trials, suggest that underwater exercise training, in combination with a counselling intervention, should be considered by people with fibromyalgia.

Nutritional Supplement Treatment Options

5-HTP- People with fibromyalgia often have low serotonin levels in their blood. Supplementation with 5-HTP may increase serotonin synthesis in these cases. Both preliminary and double-blind trials have reported that 5-HTP supplementation (100 mg TID) relieves some symptoms of fibromyalgia.

VITAMIN B1 - Some studies have found low vitamin B1 (thiamine) levels and reduced activity of some thiamine-dependent enzymes among people with fibromyalgia. The clinical significance of these findings remains unknown.

Vitamin E - One early preliminary study described the use of vitamin E supplements in the treatment of "fibrositis"—the rough equivalent of what is today called fibromyalgia. Several dozen individuals were treated with vitamin E using amounts ranging from

100–300 IU per day. The results were positive and sometimes dramatic. Double-blind trials are needed to confirm these preliminary observations.

SAMe - IV S-adenosylmethionine (SAMe) given to people with fibromyalgia reduced pain and depression in two double-blind trials; but no benefit was seen in a short (tenday) trial. Oral SAMe (800 mg per day for six weeks) was tested in one double-blind trial and significant beneficial effects were seen, such as reduced pain, fatigue, and stiffness, and improved mood.

Magnesium - A preliminary trial found that a combination of magnesium and malic acid lessened pain in people with fibromyalgia. The amounts used in this trial were 300–600 mg of elemental magnesium and 1,200–2,400 mg of malic acid per day, taken for eight weeks. Though these researchers claimed that magnesium and malic acid appeared to have some effect at higher levels (up to 600 mg magnesium and 2,400 mg malic acid), the positive effects were not demonstrated under blinded study conditions. (use in the form of Magnesium Citrate/Malate – PE)

Melatonin supplementation may be useful in the treatment of fibromyalgia. In a preliminary trial, 3 mg of melatonin was found to reduce tender points and to improve sleep and other measures of disease severity, though pain and fatigue improved only slightly.

Adrenal Support – patients have lower levels of the adrenal hormone, cortisol. Depleted levels are indicative of adrenal fatigue.

Low cortisol secretion is linked to low energy, muscle weakness and pain, thyroid dysfunction, immune system depression, sleep disorders, poor skin regeneration, and decreased growth hormone uptake. Glandular adrenal extract, pantothenic acid (vitamin B5), vitamin C, licorice, rhodiola rosea, and Bacopa Monniera are just some of the supplements that can support the adrenals.

Antioxidants – Vitamin C and E, selenium, CoQ10, cysteine, and N-acetyl cysteine (NAC) are antioxidant nutrients that may benefit people with fibromyalgia.

Botanical Treatment Options

- Echinacea an immune tonic
- Devils claw (Harpagophytum procumbens) an anti-inflammatory
- Black cohosh (Cimicifuga racemosa) an anti-inflammatory
- Licorice (Glycyrrhiza glabra) an adrenal tonic and anti-inflammatory
- Dandelion (Taraxacum officinale) a liver cleanser
- Burdock (Arctium lappa) blood cleanser

Integrative Options

Stress is believed by some researchers to be capable of aggravating fibromyalgia symptoms. Stress-reduction techniques, such as meditation, have proven helpful in preliminary research.

Acupuncture may be useful for short-term relief of fibromyalgia symptoms. In one preliminary trial, acupuncture produced a significant decrease in pain and point tenderness along with related biochemical changes measured in the fibromyalgia patients' blood. Another uncontrolled trial used electroacupuncture (acupuncture with electrical stimulation) treatment in people with fibromyalgia who were unresponsive to conventional medical therapies. After an average of seven treatments per person, 46% claimed that electroacupuncture provided the best relief of symptoms when compared to all other therapies, and 64% reported using less medication for analgesia than prior

to electroacupuncture. A double-blind trial compared fake acupuncture to electroacupuncture and reported significant differences in improvement in five of eight outcome measurements among people with fibromyalgia.

Chiropractic & Osteopathy - and related treatments may be helpful for relieving some of the symptoms of fibromyalgia. A preliminary study found that almost half of people with fibromyalgia who received chiropractic care had "moderate to good" improvement. A small preliminary trial evaluated the effect of four weeks of osteopathic treatment (three to five times per week) consisting of soft tissue massage, stretching, spinal manipulation, and general advice and information. Treatment resulted in a significant decrease in pain and an increase in range of neck movement, but there was no improvement in tender points or in ability to function in daily life. Another preliminary trial evaluated a longer treatment period (30 sessions) consisting of spinal manipulation and deep pressure massage to tender points in the muscles. More benefit was reported by this study, as 60% of the patients experienced significant pain reduction, reduced sensed of fatigue, and improved sleep. These benefits persisted one month after the treatment was completed. People who did not feel better after 15 treatments were not likely to benefit from this type of treatment. No controlled research has evaluated manipulation therapies for fibromyalgia.

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