



Your Monthly Update

Dear Colleague

Welcome to the May 2014 newsletter from Pure Bio Ltd.

Did you know:

Transcendental Meditation (TM) can lower the risk of suffering a stroke or fatal heart attack by as much as 48%, even in those who smoke or are obese, according to research from the Institute for Natural Medicine and Prevention, Iowa. (*Circ Cardiovasc Qual Outcomes*, 2012; doi: 10.1161/Circoutcomes)

Be sure to check our homepage regularly on www.purebio.co.uk as there are currently a number of reformulations occurring.

Vaginitis

Protocol Summary

Ranking	Nutritional Supplements	Botanical Medicine
Primary	Lactobacillus acidophilus	
Secondary	Lactobacillus rhamnosus G R-1 Lactobacillus reuteri RC-14 Neem	
Other	Vitamin A Vitamin E	Barberry Echinacea Golden Seal Tea tree

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

Vaginitis is inflammation of the vagina. It is responsible for an estimated 10% of all visits by women to their healthcare practitioners.

The three general causes of vaginitis are hormonal imbalance, irritation, and infection:

- Hormone-related vaginitis includes the atrophic vaginitis generally found in postmenopausal or postpartum women and, occasionally, in young girls before puberty.
- Irritant vaginitis can result from allergies or irritating substances.
- Infectious vaginitis is most common in reproductive-age women and is generally caused by one of three types of infections: bacterial vaginosis (BV), candidiasis (yeast infection), or trichomoniasis.

Symptoms

- Hormone-related vaginitis is marked by dryness, irritation, thinning of the vaginal mucous membranes and painful intercourse.
- Irritant vaginitis is characterized by itching and soreness.
- Infectious vaginitis also itches and typically includes vaginal discharge that varies in colour, consistency, and odour, depending upon the infectious organism. Discharge may range from scant to thick and white and may or may not be accompanied by a strong odour. Symptoms are often worse immediately after intercourse or the menstrual period.

Lifestyle Modification

For irritant vaginitis, minimizing friction and reducing exposure to perfumes, chemicals, irritating lubricants, and spermicides can be beneficial.

Avoid excessive exertion and sweating, keep the vaginal area as dry as possible, and avoid sex until symptoms clear.

Take showers instead of baths, using unscented soap.

Wearing cotton underwear and avoiding tights and tight fitting trousers can help prevent infection.

Dietary Modification

Yoghurt - In a controlled trial, women with recurrent BV or vaginal candidiasis ate 5 ounces (150 grams) of yoghurt containing live *Lactobacillus acidophilus* daily. They had more than a 50% reduction in recurrences, while women who consumed pasteurized yoghurt that did not contain the bacteria had only a slight reduction.

Soy - In another study, women who ingested 45 grams of soy flour per day showed an improvement in the oestrogen effect on their vaginal tissue. The study suggests that supplementing with soy may be helpful for preventing or reversing atrophic vaginitis.

Food allergies are believed to be a contributory factor in some cases of recurrent irritant vaginitis.

- Eat foods high in B-vitamins and calcium, such as almonds, beans, whole grains (if no allergy is present), dark leafy greens (such as spinach and kale), and sea vegetables.
- Eat antioxidant foods, including fruits (such as blueberries, cherries, and tomatoes), and vegetables (such as squash and bell peppers).
- Eat more high fibre foods, including beans, oats, root vegetables (such as potatoes and yams), and psyllium seed.
- Avoid refined foods (such as white breads, pastas, and sugar).
- Eat fewer red meats and more lean meats, cold water fish, tofu (soy) or beans for protein.

Nutritional Supplement Treatment Options

Lactobacillus acidophilus - *apply a daily topical preparation or a suppository containing live culture.* *Lactobacillus acidophilus* is a strain of friendly bacteria that is an integral part of normal vaginal flora. Lactobacilli help maintain the vaginal microflora by preventing overgrowth of unfriendly bacteria and Candida. Lactobacilli produce lactic acid, which acts like a natural antibiotic. These friendly bacteria also compete with other organisms for the utilization of glucose. The production of lactic acid and hydrogen peroxide by lactobacilli also helps to maintain the acidic pH needed for healthy vaginal flora to thrive. Most of the research has used yoghurt containing live cultures of *Lactobacillus acidophilus* or the topical application of such yogurt or *Lactobacillus acidophilus* into the vagina. The effective amount of acidophilus depends on the strain used, as well as on the concentration of viable organisms.

Vaginal application of a proprietary *Lactobacillus acidophilus* preparation may help bacterial vaginitis. In one trial, 80% of women with bacterial vaginitis who used the preparation were either cured or experienced marked improvement in symptoms. In another trial, application of a vaginal capsule containing *Lactobacillus rhamnosus*, *Lactobacillus acidophilus*, and *Streptococcus thermophilus* reduced the recurrence rate of bacterial vaginosis. The treatment was given for 7 consecutive days, and then after 7 days off was given for another 7 days. In another trial, women who were predisposed to vaginal Candida infection because they were HIV-positive received either *Lactobacillus acidophilus* vaginal suppositories, the antifungal drug, clotrimazole, or placebo weekly for 21 months. Compared to those receiving placebo, women receiving *Lactobacillus acidophilus* suppositories had only half the risk of experiencing an episode of Candida vaginitis—a result almost as good as that achieved with clotrimazole. In a preliminary trial, women with vaginal *Trichomonas* infection received vaginal *Lactobacillus acidophilus* suppositories for one year. Over 90% of them were reported to be cured of their clinical symptoms in that time.

Lactobacillus rhamnosus GR-1 and **Lactobacillus reuteri** RC-14 – these two specific strains of lactobacillus () have been found to be effective against bacterial vaginosis when taken orally. In a double-blind study, supplementation with a capsule containing 10 billion of each of these organisms twice a day for 30 days increased the

cure rate from antibiotic therapy to 88%, compared with a 40% cure rate in the group receiving antibiotics alone.

Vitamin A – *topical application*. Vaginal administration of vitamin A is believed to improve the integrity of the vaginal tissue and to enhance the function of local immune cells. Vitamin A can be administered vaginally by inserting a vitamin A capsule or using a prepared vitamin A suppository.

N.B. Vitamin A used this way can be irritating to local tissue, so it should not be used more than once per day for up to seven consecutive days.

Vitamin E – *topical application and / or 400i.u. daily*. Vitamin E (taken orally, topically, or vaginally) is frequently prescribed for certain types of vaginitis. Vitamin E as a suppository in the vagina or vitamin E oil can be used once or twice per day for 3 to 14 days to soothe the mucous membranes of the vagina and vulva.

Botanical Treatment Options

Neem - *Use a cream containing seed extract, saponins of **Sapindus mukerossi** (reetha), and quinine hydrochloride (5 ml applied vaginally once at bedtime)*. In a double-blind, placebo-controlled trial, a cream containing neem seed extract, saponins of **Sapindus mukerossi** (reetha), and quinine hydrochloride (5 ml applied vaginally once at bedtime) eliminated all symptoms in 10 of 14 women with chlamydia compared with none of four women given placebo cream. Neither cream was effective in women with trichomoniasis or candidal vaginitis.

Goldenseal, **Barberry**, and **Echinacea** are also sometimes used to treat infectious vaginitis. Recommended application is to douche with one of these teas twice each day, using 1–2 tablespoons (15–30 grams) of herb per pint of water. One to two pints (500–1,000 ml) are usually enough for each douching session. Echinacea is also known to improve immune function in humans. In order to increase resistance against infection, many practitioners recommend oral use of the tincture three or more times per day—during all types of infection—to improve resistance.

Tea Tree - Topically applied tea tree oil has been studied and used successfully as a topical treatment for ***Trichomonas***, ***Candida albicans***, and other vaginal infections. Tea tree oil must be diluted when used as a vaginal douche, and should only be used for this purpose under the supervision of a qualified healthcare practitioner. Some practitioners suggest using tea tree oil by mixing the full-strength oil with vitamin E oil in the proportion of 1/3 tea tree oil to 2/3 vitamin E oil. A tampon is saturated with this mixture or the mixture is put in a capsule to be inserted into the vagina each day for a maximum of six weeks.

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