



## Your Monthly Update

*Dear Colleague*

Welcome to the July 2010 newsletter from Pure Bio Ltd.

### **Did you know:**

Researchers have found that the fumes from paraffin wax – the most common and cheapest form of candle wax – are toxic and potential carcinogens. Paraffin-based candles produce chemicals such as toluene, which can cause dizziness; and benzene, a carcinogen found in tobacco smoke.

The chosen topic for this month is:

## Polycystic Ovary Syndrome

### Protocol Summary

Ranking	Nutritional Supplements	Botanical Medicine
Primary		
Secondary	<a href="#">Evening Primrose Oil</a>	<a href="#">Dong quai</a> <a href="#">Licorice</a> <a href="#">Black Cohosh</a> <a href="#">Chasteberry (Agnus castus)</a>
Other	<a href="#">Vitamin E</a> <a href="#">Vitamin C</a> <a href="#">Bioflavonoids</a>	<a href="#">Damiana</a> <a href="#">Raspberry</a> <a href="#">Sage</a> <a href="#">Ginseng</a> <a href="#">Fennel</a> <a href="#">Gotu kola</a>
<p><b>Primary</b> – Reliable and relatively consistent scientific data showing a substantial health benefit.</p> <p><b>Secondary</b> – Contradictory, insufficient, or preliminary studies suggesting a health benefit or</p>		

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.

## Definition

Polycystic ovary syndrome (also referred to as "polycystic ovarian syndrome" or "polycystic ovary disease") is a condition that causes numerous small cysts to develop in the ovaries. It is the most common hormonal disorder in women of childbearing age and may lead to infertility in some cases.

## Symptoms

In many cases, symptoms of polycystic ovary syndrome develop soon after a female first starts to menstruate. However, the condition can also develop during the reproductive years, especially after a significant weight gain.

Signs of polycystic ovary syndrome include:

- irregular periods (including infrequent menstruation or prolonged periods)
- excess facial and body hair
- severe acne
- decreased breast size
- infertility

## Causes

Every month the ovaries develop a follicle which normally releases an egg during ovulation. Cysts form when a follicle grows but neither releases an egg nor degenerates. Instead, it continues to grow in the ovary, secreting fluid that develops into a cyst. Most cysts naturally disappear within a cycle or two. Persistent or recurring problems with cysts are caused by hormonal imbalances which repeatedly inhibits the development of eggs in the ovaries.

Women with polycystic ovary syndrome tend to have abnormally high levels of male hormones (androgens). Although scientists have yet to determine what causes this hormonal imbalance, it appears that excess levels of insulin may precipitate an overproduction of androgens from the ovaries. Hormonal imbalances may also be related to diet, e.g. excessive intake of meat, saturated fats and products made from white flour, pastas and rice. Another possibility is impaired liver function, which is responsible for the detoxification of the steroid hormones.

Women with a family history of polycystic ovary syndrome are at an increased risk of developing the disease. About half the women with polycystic ovary syndrome are obese.

## Allopathic Treatment

Since polycystic ovary syndrome can lead to a number of serious complications (including increased risk of endometrial cancer, infertility, high blood pressure and diabetes), a doctor should be consulted in the management of the disease.

Standard medical treatment for polycystic ovary syndrome includes the use of birth control pills and clomiphene citrate (to promote the production of hormones that cause an egg to mature).

For overweight women with polycystic ovary syndrome, weight loss is typically recommended to help reduce insulin resistance and promote ovulation. A regime of regular exercise may also help decrease insulin resistance.

## **Dietary Modification**

Nutritional therapy can help prevent the enlargement of ovarian cysts. General recommendation includes a good intake of whole grains, legumes, fruits and vegetables. Enzyme-rich juices such as carrot, spinach, beetroot or cucumber juice boosts the immune system. Liver-cleansing foods as artichokes, lemons, black cherries, pineapple, parsnips, dandelion greens, watercress, turmeric, celery and burdock root will all help to up-regulate liver breakdown pathways. (Many of these can also be juiced). Other foods good for the liver are kelp, dulse, milk thistle, Swiss chard, turnip greens, wheat germ, seeds and nuts. Two tablespoons of unrefined, cold-pressed flax seed oil daily on salads or in any dishes which do not require heating to high temperatures provides an excellent source of the essential fatty acid omega-3 alpha-linolenic acid which is converted into anti-inflammatory prostaglandins.

Coffee, black tea, alcohol and processed foods all interfere with hormone function and should be avoided. Eliminating red meats from the diet lowers the intake of saturated fat and cholesterol. Minimise the intake of high-fat dairy products, especially cheeses. A predominantly vegetarian diet is ideal to nutritionally support POS. with fish as the main source of animal protein.

## **Other therapies**

**Acupuncture** - In a 2009 study of 20 women with polycystic ovary syndrome, researchers found that 16 weeks of electro-acupuncture treatments resulted in more regular menstrual cycles and lower levels of male hormones. Electro-acupuncture may calm nerve activity, which in turn might improve insulin resistance, according to the study's authors.

## **Nutritional Supplement Treatment Options**

[Vitamin E](#) is often helpful in preventing and reducing cysts, in its role of maintaining hormonal balance. Recommended dosage is 400 – 600 i.u. daily. The gamma-linolenic acid (GLA) available in [evening primrose oil](#) is highly recommended for building anti-inflammatory prostaglandins. They can also be found in cod or halibut liver oil, [flax seed oil](#), olive oil, [black currant oil](#) or [borage oil](#). [Vitamin C](#) with bioflavonoids is also helpful in combating inflammation. Bioflavonoids prevent oestrogens from being broken down too rapidly, thereby increasing overall oestrogen activity. They are abundantly available in citrus fruits, garlic, onions, peppers, cherries, berries, grape seed, currants and many other foods. In supplement form they are obtained from [hesperidin](#), [catechin](#), [quercetin](#), [grape seed](#)

[extract](#) or [pycnogenol](#). [Vitamin A](#) or [beta-carotene](#) is useful in helping to support the health of the ovarian lining.

## **Botanical Treatment Options**

There is heated debate about the use and effectiveness of natural progesterone cream in the treatment of POS; with an equal number of research studies both proving and disproving its efficacy. Natural progesterone cream should be applied topically from the fourteenth to twenty-eighth day of the menstrual cycle. Apply 1/4–1/2 tsp. on hips and thighs to help regulate hormone levels. – For more information, read [Natural Progesterone - John R Lee, M.D.](#)  
<http://www.purebio.co.uk/products.php?id=17851>

[Dong quai](#), [licorice](#), [black cohosh](#), [chaste berry](#) (agnus castus), [damiana](#), [raspberry](#), [sage](#), [ginseng](#), [fennel](#) and [gotu kola](#) are all used to regulate oestrogen. Take as teas, tinctures or capsules, as directed by a prescribing practitioner.

Preliminary research suggests that herbal formulas used in traditional Chinese medicine (including shakuyaku-kanzo-to, changbudodam-tang, and yongdamsagan-tang) may be useful in the treatment of polycystic ovary syndrome. A study published in 2009 also suggests that acupuncture combined with Chinese herbal medicine may be more beneficial than herbs alone in treating the condition.

## **Homeopathy**

An experienced homeopath should be sought for a more extensive treatment.

## **Tissue Salts**

*Take 4 tablets under the tongue three times daily.*

[Calc sulph](#) eliminates the waste material that causes ovarian cysts.

*For further information, contact:*

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