



Your lifestyle solution

Your Monthly Update



Dear Colleague

Welcome to the December 2012 newsletter from Pure Bio Ltd.

Office Hours over the Christmas Period:

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

Monday 24 th December 2012	CLOSED
Tuesday 25 th December 2012	CLOSED
Wednesday 26 th December 2012	CLOSED
Thursday 27 th December 2012	normal office hours
Friday 28 th December 2012	normal office hours
Monday 31 st December 2012	09.00 – 12.00
Tuesday 1 st January 2013	CLOSED

Normal office hours will resume on **Wednesday 2nd January 2013**.

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 this year of continued economic challenges; 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 www.purebio.co.uk at any time during the Christmas period.

We always welcome feedback and suggestions.

The chosen topic for this month is:

Diverticulitis

Protocol Summary

Ranking	Nutritional Supplements	Botanical Medicine
Primary	Fibre	Psyllium
Secondary	Acidophilus Glutamine	Aloe vera
Other	Vitamin B Complex Proteolytic enzymes	Glucomannan Chlorophyll Garlic Alfalfa

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.

Definition

Diverticulitis is a condition marked by inflammation of the diverticula, which are abnormal sacs that form in the walls of the intestines. (The presence of these sacs without inflammation is known as diverticulosis).

Causes

It is estimated that half the UK population over the age of 50 have diverticula, the majority of whom have no symptoms at all. Diverticula are thought to result from abnormal pressure within the colon. This pressure causes pouches of intestinal lining to protrude through the intestinal wall and form diverticula. In about 10 – 25% of individuals with diverticulosis, the diverticula become inflamed and diverticulitis occurs.

The term "diverticular disease" can refer to either diverticulitis or diverticulosis.

The causes of diverticulosis and diverticulitis are unknown. However, research suggests that the following may increase the risk for diverticulosis:

- eating a low-fibre diet
- straining during bowel movements (due to constipation or the presence of hard stools)
- lack of exercise

Symptoms

- abdominal pain (in particular, tenderness in the lower left side of the abdomen)
- cramping
- nausea
- vomiting
- fever
- chills
- a change in bowel habits

The abdominal pain associated with diverticulitis tends to be severe and occur suddenly, although in some cases it may begin as a mild discomfort and then worsen over several days.

Lifestyle Modification

Obesity may be associated with increased severity of diverticular disease.

Physical activity, specifically jogging or running, has been reported to protect against symptomatic diverticular disease.

While the association is not exactly known, there is some evidence that links smoking & stress to an exacerbation of symptoms.

Other factors that increase risk of diverticulitis are disease in the genes, gallbladder disease, obesity & coronary artery disease.

Additional modifications:

- Try not to strain during bowel movements
- Avoid alcohol
- Exercise moderately
- Drink at least eight glasses of pure water a day
- Establish a regular bowel routine by trying to have a bowel movement at approximately the same time.
- Avoid extremely hot or cold foods and fluids (which are more likely to cause flatulence).

At the onset of an attack, have a cleansing enema with 900ml of luke-warm water mixed with the juice from a fresh squeezed lemon. This will aid in ridding the colon of undigested food that has been trapped and will also relieve pain.

Dietary Modification

A high fibre diet has been shown to be protective against diverticular disease. One study of food intake revealed a 50% increase in incidence of diverticular disease in people eating a diet high in meat and low in vegetables relative to those eating a high-vegetable and low-meat diet. In addition to helping prevent the disease, a high-fibre diet may also be useful as a treatment for diverticular disease. Recommended

intake is at least 20 to 35 grams of fibre, in the form of fresh fruits and vegetables, and cereals that are high in fibre and bran. At least 2 litres of pure water should be consumed each day, as a high fibre diet will not be effective without adequate water consumption.

A diet where the primary source of protein is from fish & vegetables should be recommended.

Foods such as celery and corn should be avoided as these foods contain indigestible roughage. Other foods that should be avoided include grains, seeds and nuts as these foods can be hard to digest, resulting in bloating & flatulence. Additionally avoid dairy products, red meat, fried foods, spices and sugar products (including processed & refined foods).

Orthodox treatment

To treat diverticulitis, doctors often focus on eliminating the cause of the inflammation. Antibiotics, for instance, may be used to treat inflammation resulting from a bacterial infection. Depending on the severity of symptoms, treatment may also include bed rest, use of pain medication, the implementation of a liquid diet (in order to allow the colon to rest), and/or surgery to remove the affected area.

Since diverticulitis can lead to a number of serious complications (including rectal bleeding, the formation of abscesses, and intestinal obstruction), it's important to seek medical treatment if you experience any diverticulitis symptoms.

Nutritional Supplement Treatment Options

Fibre - 20 grams daily, plus extra fluids. In people with diverticular disease, a fibre supplement may improve constipation. Studies have demonstrated a beneficial effect of fibre supplementation in people who suffered from abdominal pain and pain with bowel movements. A good alternative to loose fibre is **Nutraflax**.

Acidophilus – according to practitioner instruction (best taken at night with a glass of water). Lactobacillus acidophilus helps to support a healthy intestinal tract and maintain a healthy intestinal flora particularly in the small intestine, thus improving assimilation.

Vitamin B Complex - 100 mg, up to TDS – The B vitamins play a role in the conversion of carbohydrates into energy, in the metabolism of fats and protein, and in the maintenance of muscle tone in the GI tract.

Proteolytic Enzymes – as directed, always with meals when used to support digestion. Proteolytic enzymes aid in digestion by promoting the breakdown of protein, carbohydrates and fat; and reduce inflammation in the colon.

L-Glutamine - 500 mg BD, best taken with juice. Glutamine plays a large role in maintaining healthy intestinal integrity by enhancing the intestine's protective mucosal lining.

Botanical Treatment Options

Psyllium - *7 grams daily in water, followed by a second glass of water.* A preliminary trial of the herb psyllium supports the use of this type of fibre in relieving the symptoms associated with diverticular disease and constipation. Available in powder, capsule, and wafer form, psyllium is a natural source of mucilage, which helps trigger contraction of the colon wall.

Glucomannan - *The amount of glucomannan shown to be effective as a laxative is 3–4 grams per day.* Glucomannan is a water-soluble bulk-forming dietary fibre that is derived from konjac root (*Amorphophallus konjac*). A preliminary clinical trial found that approximately one-third to one half of people with diverticular disease had reduced symptoms of diverticular disease after taking glucomannan.

Chlorophyll – *according to practitioner recommendation.* Chlorophyll has been shown to have anti-inflammatory properties. It is also a detoxifier by chelating with many toxic metals and chemicals in the digestive tract. Additionally, chlorophyll helps to maintain a healthy intestinal flora. Chlorophyll is commonly prescribed in the form of chlorella or spirulina.

Garlic – *according to practitioner recommendation.* Garlic aids in digestion and is a natural antibiotic. It is also a potent chelator of toxic chemicals in the digestive tract.

Alfalfa - *2,000 mg in capsules or tincture equivalent.* Alfalfa is a natural source of vitamin K and essential minerals which are frequently deficient in those suffering with diverticulitis. Alfalfa also contains chlorophyll, which aids in healing – as above.

Aloe Vera Juice - *½ cup TDS.* Scientists have identified nearly 100 active ingredients within the Aloe Vera plant of which 75 have been found to be active healing compounds. Aloe Vera juice contains a class of long-chain sugars called **polysaccharides** and is especially rich in acemannan, a polysaccharide that stimulates the body's macrophages to produce interferon and interleukin, both of which inhibit the proliferation of viruses. Aloe vera is an "amphoteric" as it can treat opposite conditions by either raising or lowering levels of hydrochloric acid as required.

Aloe Vera helps restore balance in the digestive system in several ways:

- It acts as an alkalisng agent.
- It reduces yeast overgrowth that can destroy the normal "friendly" bacteria in the gut.
- It penetrates the walls of the digestive system to remove harmful bacteria.

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