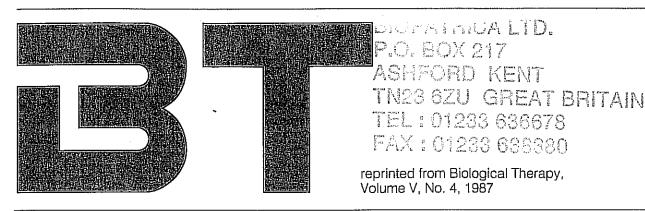
BIOLOGICAL THERAPY

JOURNAL OF NATURAL MEDICINE



REPORT FROM THE MEDICAL PRACTICE.

A Comparative View of the Therapeutical Use of Zeel® and Traumeel® in General Practice by Ingrid Riedel, M.D.

Ingrid Riedel, M.D.

A Comparative View of the Therapeutical Use of Zeel® and Traumeel® in General Practice

Charles College Colleg

Traumeel *and Zeel *are two of the more popular HEEL medications. As both preparations have qualities in common, questions occasionally arise concerning discernment of the better indicated remedy.

For the benefit of practitioners, this report illustrates concisely the chief areas of effectiveness of Traumeel *and Zeel *. Dr. Riedel differentiates between the two products with the aid of cases from her practice.

Since both medicaments are preparations that are used in diseases in which the articular and supporting systems are involved, it is desirable to make a differentiation or delineation. The following areas of application are among those recommended by the manufacturer for Traumeel®: posttraumatic and postoperative edemas, degenerative processes connected with inflammations as well as sports and accident injuries. The preparation Zeel® is an antiarthrotic agent in the sense of a chondroprotectively acting preparation. Since the transitions between rheumatoid degenerative diseases, such as arthrosis, and traumatically induced degenerations of the articular cartilage, such as posttraumatic chondropathy of the patella, are fluid, and the one condition can be induced by the other, I specially observed those of my patients who were treated with the two above mentioned preparations over a period of approximately 6 months and recorded my experiences in this report.

As can be seen from *table 1*, 12 patients (2 female, 10 male) with an average age of 41.1 years and the diagnosis of gonarthrosis were treated with intramuscular Zeel® injections. The dosage schedule was uniformly 2 ampules of Zeel® per week. The patients had the usual symptoms occurring in gonarthrosis such as pain on loading and weather sensitiv-

ity. These symptoms improved on average after 2.9 weeks, i.e. after approximately 6 Zeel® injections.

In all these 12 gonarthrosis cases, freedom from complaints occurred on average after 5 weeks, i.e. after 10 Zeel® injections. It is also clearly visible from the table that there exists an age dependence with regard to the incidence of the improvement and also to freedom from symptoms. According to the degree of severity, some showed improvement after only 1 week, while a gonarthrosis case accompanied by lumbalgia (case 1) required 10 weeks for complete freedom from symptoms. The individual data can be taken from *table 1*.

In total, 5 patients with spondylarthrosis, i.e. with arthrosis of the small vertebral joints, who were treated with intramuscular Zeel® injections according to the same schedule, showed an improvement in their symptoms, i.e. pain and movement restriction, after 10.7 weeks on average. Freedom from symptoms occurred here only in 4 cases, this being on average after 12.7 weeks, i.e. after approximately 25 Zeel® injections.

If the therapeutic results of the spondylarthrosis patients are compared with those of the gonarthrosis patients, the higher average age of the patients with spondylarthrosis (57.2 years) surely plays a part in connection with the treatment duration. A similar situation can be noted in the case of the 71 year old polyarthrosis patient who, after 11 weeks of Zeel® treatment, had a remarkable improvement in his symptoms because of the advanced condition of the degenerative disease of his joints. The 41 year old polyarthrosis patient treated with Zeel®, on the other hand, exhibited complete freedom from symptoms after 3 weeks.

The two patients in *table 1* illustrate that Zeel® treatment shows good effect in scapulohumeral periarthritis as well.

I also subjected 3 patients with polyarthritis Zeel® therapy experimentally, but here the results were less striking and in the severe syndrome of polyarthritis, freedom from symptoms could scarcely be expected with Zeel® treatment alone. The patients received in addition to the Zeel® therapy further antirheumatically acting substances which, however, were also not sufficient in two cases to obtain freedom from symptoms.

It is interesting to mention further in this connection that I treated 3 other patients aged 71, 79 and 80 exclusively with Zeel® tablets (dosage of 1 tablet 3 times daily). One female patient had spondylarthrosis and two female patients polyarthrosis. A clear improvement in symptoms occurred in these cases after 8, 9 and 12 weeks, respectively. In the case of the 71 year old polyarthrosis patient, even freedom from symptoms resulted after 14 weeks treatment.

I normally treat sports injuries accompanied with inflammatory components (tendovaginitis, epicondylitis, distortion) with Traumeel® injection solution. After an average of 2.1 weeks an improvement took place, with freedom from symptoms after 3.3 weeks. The shoulder arm syndrome of a 62 year old female patient as well as a cervical spine - lumbar spine syndrome of a 66 year old female patient who was treated daily with a subcutaneous Traumeel® injection for 2 and 3 weeks respectively improved in a similar period. I also achieved equally good success in 3 cases of arthritis (table 2).

Ingrid Riedel, M.D.

Diagnosis	Age	Sex	Improvement after	Freedom from symptoms after	Accompanying therapy
Gonarthrosis	54 years	female	4 weeks	10 weeks	_
	36 years	male	3 weeks	5 weeks	-
	44 years	male	4 weeks	6 weeks	_
	61 years	male	4 weeks	6 weeks	-
	50 years	male	5 weeks	8 weeks	-
	64 years	male	4 weeks	5 weeks	-
	35 years	female	1 week	2 weeks	_
	26 years	male	1 week	2 weeks	-
	29 years	male	1 week	2 weeks	-
	28 years	male	1 week	2 weeks	-
	22 years	male	1 week	2 weeks	<u>.</u>
	44 years	male	6 weeks	10 weeks	-
Spondylarthrosis	62 years	female	12 weeks	• • • • • • • • • • • • • • • • • • • •	
	63 years	female	11 weeks	_	_
	52 years	female	11 weeks	15 weeks	
	49 years	female	14 weeks	18 weeks	-
	68 years	male	9 weeks	5 months	_
	49 years	male	7 weeks	12 weeks	analgesics
Polyarthrosis	71 years	female	11 weeks	-	
	41 years	male	2 weeks	3 weeks	-
calpulohumeral	36 years	male	3 weeks	5 weeks	
periarthritis	43 years	female	3 weeks	8 weeks	-
Polyarthritis	56 years	female	. 9 weeks	-	antirheumatics
	16 years	female	_		 -
	48 years	male	5 weeks	8 weeks	analgesics, antirheumatics in severe pain

Table 1 (Zeel®)

Diagnosis /	Age	Sex	Dosage (Traumeel [®] s.c.)	Improvement after	Freedom from complaints after
Tendovaginitis	29 years	male	1 ampule daily	2 weeks	3 weeks
	23 years	male	1 ampule daily	2-1/2 weeks	4 weeks
	35 years	male	2 ampules weekly	2 weeks	3 weeks
	28 years	male	2 ampules weekly	2 weeks	3 weeks
Epicondylitits	34 years	male	2 ampules weekly	2 weeks	3 weeks
Distortion right ankle joint	56 years	female	3 ampules weekly	2 weeks	4 weeks
Shoulder arm syndrome	62 years	female	2 ampules weekly	2 weeks	4 weeks
Cervical spine - lumbar spine syndrome	66 years	female	1 ampule weekly	3 weeks	4 weeks
Arthritis	53 years	male	1 ampule daily	3 weeks	4 weeks
	62 years	male	1 ampule daily	3 weeks	4 weeks
	32 years	male	1 ampule daily	2 weeks	3 weeks
Gonarthrosis, coxarthrosis	71 years	female	1 ampule daily	3 weeks	-
Gonarthrosis	59 years	female	2 ampules weekly	2 weeks	-

Table 2 (Traumeel®)

I also used Traumeel® experimentally in 2 cases of gonarthrosis or coxarthrosis and although I certainly achieved an improvement here (in 2 and 3 weeks respectively), no complete freedom from symptoms occurred. The Traumeel® injection probably first influences the inflammatory component of the disease but not the degenerative process. If these two cases are compared with the arthrosis patients mentioned previously who were treated with Zeel®, it appears to become clear that Traumeel® is less suitable for degenerative diseases; Zeel® on the other hand is less suitable in inflammatory diseases (see polyarthritis case). Combined therapy with Zeel® and Traumeel® is certainly sensible. A heel spur (calcaneal spur), a thorn-shaped bony protuberance at the underside of the calcaneal tuberosity at the attachment of overstressed tendons is taken as an example. Here the combined subcutaneous application of one ampule of Zeel® and one ampule of Traumeel® led to freedom from symptoms in 2 weeks.

Address of the author:

Ingrid Riedel, M.D. General practitioner Hoher Weg 11 D-86152 Augsburg Germany