BIOLOGICAL THERAPY

JOURNAL OF NATURAL MEDICINE

BT

Reprinted from Biological Therapy,
Volume IX No. 2, April 1991

FEATURE ARTICLE

Experience in Utilizing Euphorbium compositum Nasal Spray in the ENT Practice

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On a number of occasions, this journal has presented accounts regarding the application of Euphorbium compositum Nasal Spray as related by an ENT physician (1,2,3,4). In these reports, with a total suject collective numbering 66, particular emphasis has been placed on this nasal spray's excellent effectiveness in treatment of atropic processes within the olfactory mucous membranes - i.e. in therapy of rhinitis sicca and atrophic rhinitis (1,3).

During an interval of four months, 29 individuals were treated in my ENT practice utilizing Euphorbium compositum Nasal Spray. The constitution of this group was as follows:

20 female patients ranging in age between 11 and 79 years, with an average age of 57.9 years, and 9 male patients between the ages of 37 and 91, their ages averaging 65.2 years.

These patients were subsequently monitored; a summary of the findings is presented below.

1. Patient collective categorized according to age:

under 25 years	1 female
26 - 40 years	3 female, 1 male
41 - 55 years	3 female, 2 male
56 - 70 years	9 female, 2 male
over 70 years	4 female, 4 male
	20 female, 9 male patients

2. The following diagnoses were indicative in administering Euphorbium compositum Nasal Spray (as is frequently the case, two or more differing symptoms were found to exist simultaneously in a high percentage of these patients):

a) Rhinitis sicca, mucosal atrophy, rhinopharyngitis sicca or atrophicans;	28
b) Chronic, polypous sinusitis and hyperplasia of the conchae;	5
c) Acute and chronic maxillary sinusitis;	3
d) Acute rhinitis;	2
e) Deviation of the nasal septum;	1
f) Radical sinus;	1
g) Nasal furuncle (in 1 case of rhinitis sicca), inflammation of the rhinal lumen, rhagades at the nasal vestibules.	4

Through this tabulation of diagnoses, Euphorbium compositum's principal area of application is clearly apparent: the infamous crux medicorum! (1) of atrophic and "sicca" alteration to the nasal mucous membranes (see also 1 and 3). As is common knowledge, the degree of atrophic alteration of the rhinal mucosae grows with increasing age. Correspondingly, the patients included in this study measured a mean age of 57.9 (female) and 65.2 (male) years; see also item 1 above, showing the majority of the group as consisting of individuals in excess of 56 years of age.

On the other hand, further examination of the diagnostic summary reveals Ephorbium compositum Nasal Spray to be equally indicated in treatment of such manifestations as polypous and hyperplastic alterations of rhinal mucosae. As early as 1973, the ENT physician K.L. Schmeisser (5) conducted a detailed study on this subject, providing precise data on the application of Euphorium compositum oral drops in treatment of 148 ambulant patients (6 cases).

3. Dosage of Euphorbium compositum Nasal Spray:
   a) Standard dosage:
      2 sprays, 5 times daily;
      in 18 cases.
   b) Reduced dosage:
      2 sprays, 4 times daily;
      7 female patients
      (ages: 11, 26, 55, 60, 65, 78, and 79 years),
      3 male patients (ages: 65, 67, and 84 years).
      2 sprays, 3 times daily;
      1 male patient (age: 91 years).

4. Supplementary medication

   a) 8 of these 29 patients were additionally treated utilizing Naso-Heel® drops*, at a dosage of 10 drops orally, 4 times daily.

      *Naso-Heel® was applied in treatment of rhinitis on recommendation of the ENT specialist W. Hallermann (6).

   b) Simultaneous therapy employing specific rhinological medications, such as nasal ointments and drops (including those of an oil base), was performed in the cases of 7 other patients of this group. Adjuvant antibiotic treatment was required in one case, in which Ampicillin® was administered over a period of 6 days.

   c) For 10 of the 29 patients, further ENT-specific measures were necessary, such as flushing of the paranasal sinuses, inhalation, and localized short-wave therapy.

   d) Due to having contracted concomitant pathological manifestations requiring treatment, appropriate supplemental non-rhinal medication was administered to 10 further patients.

These medicines included lozenges and throat disinfectants for sore throat pain, as well as antitussive preparations and expectorants for treatment of bronchitis. In one case, Helfergin® was prescribed as an additional therapeutic measure for tinnitus.

e) As may be concluded from items a) and b), specific medicinal adjuvant therapy was carried out in 8 + 8 of these 29 cases.

5. Therapeutic results:

a) Improvement
- within 7 days of initial treatment (Ø = 4.1 days), in 19 cases;
- within 14 days of initial treatment (Ø = 10 days), in 10 cases.

b) Symptom-free
- within 7 days of initial treatment (Ø = 4.5 days), in 2 cases;
- within 14 days of initial treatment (Ø = 12.6 days), in 7 cases;
- within 21 days of initial treatment (Ø = 14.25 days), in 3 cases;
- within 28 days of initial treatment in 1 case;
- only after longer than 28 days, in 5 cases.

c) While improvment was noticeable in each of the 29 patients, complete recession of symptoms was achieved in only 18 of these during the interval of observation. Under consideration of the diagnoses, however, as indicated under item 2, and the corresponding chronicity involved, such results are by no means unexpected.

d) On the basis of the therapeutic results achieved in each case, 13 of the patients were advised to continue application of Euphorbium compositum Nasal Spray as long-term medication, whereas 8 of the 29 patients received the recommendation to apply this preparation only as needed.

6. In none of the 29 cases were side effects reported; neither objective nor subjective in character: Tolerance of Euphorbium compositum Nasal Spray was evaluated by one patient as excellent, by 27 others as well-tolerable, and in only one case was tolerance described as moderate. This preparation was readily accepted by the patients, a great many describing its usage as "pleasant". In many cases, the request was expressed for re-prescription of Euphorbium compositum Nasal Spray, should a similar situation again arise.

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