

Chronic Urticaria

RELIEVING PRURITUS BIOLOGICALLY

Violent pruritus is the most disagreeable symptom in urticaria. As a rule antihistamines will be used to relieve it. Dermatologists of Munich TU (Technical University) now chose a biological approach to control “the itch”. (Medical Tribune, April 1999)

While acute urticaria is self-limited in most cases, the chronic course continues to be an unsolved problem. One out of five patients with recurrent episodes of urticaria will be experiencing outbreaks of hives even 20 years later, and no responsible noxa will be identifiable in the majority of cases. Professor Dr. Oietrich Abeck, University Department and Policlinics of Dermatology and Allergology am Biederstein, Munich, suggests an association of allergic skin disease and intestinal candidosis or an imbalance in bacterial colonization. In a randomized double-blind study he investigated the use of a multiple step regulation of the intestinal flora (control of symbiosis) in 40 patients suffering from chronic idiopathic urticaria. Prior to the therapeutic regimen all participants received nystatin for one week to eliminate potential candidosis, Professor Abeck reported. The treatment group then took magnesium peroxide against intestinal pathogens for another week which was followed by a three-week phase when patients received an oral combination of lactose and chamomile extract together with a tincture consisting of the bitters of quinine bark, wormwood, and cinnamon bark to stimulate bile secretion and gastric activity. In addition participants took a blessed-thistle (*carduus mariae*) preparation for its hepatic effect, and in the subsequent third phase of the twelve-week study period had vegetable drops and a homeopathic complex to strengthen hepatic and pancreatic function. Patients did not receive any physiological intestinal symbionts.

While microbiological evaluation revealed no pathological intestinal flora, intestinal pH was found to be elevated in the study participants. The clinical outcome showed that pruritus in the treatment group had improved considerably at the end of the study which permitted the majority of patients to cut down their antihistamine doses (by 25 to 50 %), or even abandon antihistamine therapy altogether in one third of the group; these results contrasted substantially with those obtained in the placebo group.

(substantially in der letzten Zeile könnte durnh significantly ersetzt werden, wenn statistische Signifikanz im Vergleich erreicht wurde))

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