

Results of clinical observations of the effectiveness of herbal medicine in patients
ulcerative colitis

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The results of clinical observation of phytotherapy effectiveness for patients with
nonspecific ulcerative colitis

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SUMMARY

Massed herbal medicine infusions individually handpicked multicomponent collection was effective in all 16 cases and in a short time led to the relief of symptoms of exacerbation of ulcerative colitis. With systematic preventive treatment, herbal medicine provides complete long-term remissions and dramatically reduces the severity of infrequent exacerbations. The collection included plants that are effective in allergic diseases, in addition to the typical antidiarrheal, hemostatic, anti-inflammatory, vasoprotective. The high efficiency of the use of antiallergic, desensitizing species has also been confirmed during long-term herbal therapy in hundreds of patients with another autoimmune disease - multiple sclerosis.

Key words: herbal medicine, ulcerative colitis, autoimmune diseases.

RESUME

Phytotherapy with individually selected multicomponent infusions was effective in 16 cases of patients with nonspecific ulcerous colitis and relived symptoms of the disease in short time. Systematic prophylactic treatment with phytotherapy provides long term remission and reduces manifestations of rare aggravations. Typical medicinal plants compositions with antidiarrheal, hemostatic, anti-inflammatory and vasoprotective effect were completed with plants effective in therapy of allergic diseases. High efficiency of anti-allergic and desensitizing plants is confirmed by long term therapy of patients with another autoimmune disease - multiple sclerosis.

Keywords: phytotherapy, nonspecific ulcerative colitis, autoimmune diseases.

Introduction

The methods of traditional and folk medicine make it possible to approach the orthodox drug treatment of patients with nonspecific ulcerative colitis (UC) in a slightly different plane. This disease is autoimmune [1], and therefore it is rational to consider the effectiveness of plants with a solid reputation as antiallergic, desensitizing agents when used for a long time with a repetition of 2-3-month therapeutic and prophylactic courses of phytotherapy (FT). However, unidirectional, only desensitizing treatment, especially with exacerbation

NNC would also be a mistake, since it is necessary to use fixing, hemostatic, vasoprotective, antispasmodic, carminative, accelerating regeneration and other plant tendencies, which suggests a multicomponent collection typical for traditional medicine, but not mastered by domestic FT. The second feature of NUC is its fair classification as a typical psychosomatic disease [1], the cause of the onset and exacerbation of which is often stress in emotionally labile, neurotic, asthenic people. The third point in the treatment of patients with NUC is the need to take into account the so-called concomitant diseases. The possibility of effective FT not only for diarrhea, but also for "intestinal ulcers" was determined in various traditional medicine, in particular in the Iranian-Tajik - the great Abu Ali ibn Sina (Avicenna), in Armenian and Turkic - by Amirdovlat Amasiatsi [2, 3]. Accordingly, the task of our research was the assimilation of methods of traditional medicine and clinical testing the effectiveness of FT in the treatment of patients with NUC.

Material and research methods

A prospective observation of the effectiveness of PT, carried out in accordance with the methods of traditional medicine, was carried out in a group of 16 patients with NUC. Each patient's diagnosis was previously confirmed by colonoscopy and clinically at hospitalizations. Doubtful cases, inconsistently or once treated patients (only in the period of exacerbation), patients with Crohn's disease are excluded. We observed 14 men and 2 women (age 26–52) for 2.5–12 years. The main task was considered to monitor the effectiveness of infusions of multicomponent collections with the inclusion of those plants, antiallergic, immunomodulatory activity of which has been proven or is reasonably suspected of using them in folk or traditional medicine. Their leader, as well as generally elite medicinal plants of the countries of East Asia (China, Korea, Japan), is considered the root of the Ural licorice and with. naked [10]. The rest of the anti-allergic plants are highlighted in each of the recipes above. The methods of preparation of infusions (given in each observation) are adapted to home conditions, are consistent with those in traditional medicine, their effectiveness, the rationality of such preparation are confirmed by many years of experience in our FT [6, 7, 8].

Clinical observation data

Observation 1

Patient G.B.Y., was born on November 29, 1947 (52 years old). Electronic engineer, director of a large private company. Addressed on 12.10.1999 about exacerbation of NUC, which has been suffering for 10 years. The diagnosis was verified by colonoscopy (ulcerative lesions of the rectum, sigmoid, the beginning of the transverse colon), was repeatedly treated inpatiently, followed by periodic outpatient hormone therapy, which was gradually abandoned 4 years ago (warned of the rebound symptom) due to severe side effects. Salofalk is ineffective. Episodic aggravations over these 4 years quickly

passed, but at the end of August, in September, painful bowel movements became more frequent (by now up to 10–20 times), unproductive tenesmus, pain along the sigmoid and transverse colon were added. The stool is loose, constantly unformed with blood and mucus, profuse diarrhea, excruciating flatulence. Sometimes moderate chills, low-grade fever, weight loss of 6 kg in 8-9 days. Eructation empty, sympathetic to tenesmus, nausea, moderate, not frequent pain in the right hypochondrium (earlier on ultrasound - "indirect signs of biliary dyskinesia of the hypokinetic type"). Overseas and even intra-city trips are not possible. Route - home-work by car. She cannot stop working due to difficult production and financial circumstances (the syndrome of irreplaceability), the office is opposite the personal toilet. I was recommended to be treated inpatiently, but does not want to go to a polyclinic with subsequent hospitalization, because he lost faith in the effectiveness of the previously conducted therapy. Occasionally, for the last 4 years, I have been relatively successfully treated by some medicine man with medicinal herbs, the composition of which has not been disclosed, contact with him has been lost. He believes that a banana was a provocateur of an exacerbation, but after a thorough survey it was found that recently it has been working to wear and tear against the background of constant industrial stress. Normotonic, but sometimes blood pressure rises, tachycardia, "interruptions", less often generations in the area of the heart against the background of persistent stress. When questioned, the patient agrees with extreme emotional lability, asks for help to calm down, reduce the reaction to stress (obvious asthenoneurosis, aggravating the recurrence of NUC). Despite sports loads (cross-country skiing, tennis, exercise), dousing often (up to 4 times a year) is sick with ARVI. Radical pneumofibrosis as a consequence of unnoticed pneumonia transferred to the legs. Does not smoke, alcohol (whiskey, cognac) is consumed occasionally, in moderation. Oppressed by the fact that he cannot eat anything from his favorite food (herring, red fish, marinades, ham, meat, herbs, tomatoes, fruit juices), and is forced to eat cereals he does not like (oatmeal, rice). Sent to me at the Human Brain Institute of the Russian Academy of Sciences by one of the patients. I omit the typical objective symptomatology. fruit juices), but he is forced to eat cereals he does not like (oatmeal, rice). Sent to me at the Human Brain Institute of the Russian Academy of Sciences by one of the patients. I omit the typical objective symptomatology. fruit juices), but he is forced to eat cereals he does not like (oatmeal, rice). Sent to me at the Human Brain Institute of the Russian Academy of Sciences by one of the patients. I omit the typical objective symptomatology.

The composition of the first collection, which led already in the first 3 days to a decrease in the number of bowel movements, relief of pain, and then within 2-3 weeks to complete recovery: Ural licorice root * 40.0; Calamus rhizome of marsh * 20.0; Elecampane root high * 20.0; Leaf and flowers of elecampane high * 20.0; Shoots of wild rosemary * 20.0; Nadz. h. celandine large 20.0 *; Leaf of narrow-leaved fireweed 30.0; Nadz. h. a series of three-part *, Nadz. h. chamomile medicinal * 20.0; Flowers 40.0 and leaf 30.0 meadowsweet * (block of desensitizers, plants that reduce pain, have anti-inflammatory, sedative effect); Nadz. h. Hypericum perforatum 30.0; Common raspberry leaf 20.0; White willow leaf 20.0; Sage leaf 20.0 (anti-inflammatory block); Nadz. including meadow geranium 20.0; Nadz. including Veronica officinalis 10.0; Burnet root medicinal 20.0; Finger rhubarb root 10.0; Nadz. including horse sorrel 20.0; Nadz. h. Pochechuyny mountaineer 10.0; Nadz. h. snake mountaineer 20.0; Chokeberry fruits 10.0; May rose hips 40.0 (hemostatics, tanning, fixing); Nadz. h.

field mint, oregano, 10.0 each; Fruits of fragrant dill, coriander seed, fennel, ordinary anise 10.0 each (antispasmodics, carminative); The roots of Eleutherococcus spiny *, aralia high * 20.0 each (polyfunctional adaptogens); Nadz. including marsh creeper, Large plantain leaf (optimize regeneration).

Here and below, asterisks (*) mark plants with proven anti-allergic medicine used in folk and traditional medicine, desensitizing activity.

In parentheses, only the main direction of the action of plant blocks is given, which is characteristic of classical pharmacology, but a narrow interpretation of the medicinal properties of each plant would be erroneous. So, St. John's wort (St. John's herb) is legendary as djerbay - a healer of wounds (Kazakh) and has a wide range of indications for use [5, 6, 8, 13, 14]. Meadowsweet (meadowsweet) is also characterized by a highly positive effect on the regeneration processes, consolidating the damaging, hemostatic, anti-alterative, hepatoprotective, antiallergic effect [5-8]. Celandine, wild rosemary, fireweed, coriander not only have a moderate analgesic, but also stress-limiting, anti-neurotic, sedative, antispasmodic and a number of other actions.

After 3 weeks, simultaneously with FT, 2 tablets of mummy (0.4 g) were prescribed, which, in addition to optimizing the regeneration processes, also has an anti-allergic effect. Preparation: in an enameled dish without chips, pour 2-3 tablespoons of the chopped collection into 1 liter of water, soak, stirring, bring to a boil, simmer over low heat for 6-7 minutes, drain everything with the raw materials into a thermos, take the infusion warm. This preparation has advantages in efficiency in comparison with pharmacopoeial infusion in a water bath, which has been tested on thousands of patients with various diseases. Shock dose in the morning - 1 glass. Then take 100-150 ml according to the principle "the more often the better" before meals, in the interdigestive intervals, but possibly after meals.

Subsequently, the patient for 3 years episodically, more often in the fall (seasonal exacerbations are characteristic), conducted anti-relapse courses. Cholagogues, hepatoprotectors (calendula, immortelle, corn silk, tansy, nettle, milk thistle) were introduced into the collection. Then contact with him was lost. On February 17, 2015 (13 years after the last treatment) he applied for heartburn, belching, epigastric pain. Fibrogastroscopy: erosive gastritis. Moderate hypertension up to 130-140 / 80-90 instead of the norm of 110-120 / 70-80 mm. mercury column. The content of ALT and AST, total cholesterol in the blood is increased. I do not give the composition of the fee, since a successful FT according to these indications outside the topic of the article was published earlier [6]. As for the NUC, the patient considers himself to be completely cured, there have been no relapses in the past years. The FT expanded the diet a year later,

Observation 2

Patient R.I.A., born on February 24, 1964, Appealed on September 12, 2001 (37 years old). Sick

NUC for 16 years (since 1985) with multiple exacerbations, hospitalizations. The diagnosis was repeatedly confirmed clinically and by colonoscopy, which the patient does not tolerate, and therefore is afraid of hospitalization. During this year - a series of exacerbations, prednisone and other drug therapy does not help. Someone tried to treat the patient with urine therapy without effect. Ribbon, mushy stools with blood, pus and mucus, tenesmus, pain (and soreness) in the sigmoid and rectum, unproductive bowel movements 5-7 times a day, excruciating flatulence, peristalsis with pain. Heartburn, belching, moderate pain and epigastric discomfort are associated with steroid therapy. Drawing pains in the right hypochondrium. The psychosomatic nature of UC is confirmed by the fact that stress is the triggering moment of exacerbations most often in all patients. The patient is in a panic extremely agitated, extremely pessimistic about the possibility of not only curing, but also improving. Obviously asthenodepressive state. Other most significant points: on prednisolone, I gained body weight up to 83-85 kg with a height of 175 cm. Within 12 years, frequent headaches, diffuse (forehead, crown of the head, temples), requiring relief with citramone. Neurologists explain them by vertebral compression of the right vertebral artery. Occasionally, in the morning, dizziness (associates with taking 1-2 glasses of beer in the evening). 4 years ago he suffered bronchopneumonia, 10 years ago - dry pleurisy, in 1999 for the first time herpes labialis. Currently, he rarely suffers from colds (up to 2 times a year). For 5 years he has been suffering from chronic prostatitis with a typical picture of nict and pollakiuria, unpleasant sensations in the perineal region, a decrease and lack of libido, erection, on which the patient places special emphasis. Residual urine 50 ml. Definitely cannot speak about allergies. Therefore, a small collection of limited composition (I do not give) is prescribed for several days to stop diarrhea and moderate bleeding, to determine its tolerance by the patient.

The subsequent collection is made according to the principle of including desensitizing plants, immunocorrectors, emphasis on anti-inflammatory, hemostatic, fixing, anti-neurotic, anti-asthenic therapy. Included are vasoprotective plants that improve brain perfusion.

Composition of the collection: Naked licorice root * 30.0; Chamomile flower baskets * 30.0; Small duckweed * 20.0; Nadz. h. yarrow * 20.0; Scutellaria baikal root * 10.0; flowers 20.0 and leaves of meadowsweet * 10.0; Nadz. hours of common blackhead * 10.0; Shoots of wild rosemary * 20.0; Nadz. h. celandine large *, St. John's wort 20.0; Raspberry leaf, white willow, heart-shaped linden, medicinal sage, three-leafed watch, narrow-leaved fireweed, dioecious nettle 20.0 each; The roots of Eleutherococcus spiny * 20.0; Burnet roots medicinal 20.0; May rose hips 40.0; English oak bark 10.0; Nadz. h. snake mountaineer and g. pochechuyny 10.0 each; horse sorrel 20.0; meadow geranium 20.0; creeping Tribulus 10.0; Flax seed 20.0; Fruits of sowing coriander, caraway seeds, 10.0 each; Nadz. part of the marsh dryweed, toadflax, 10.0 each; Flower baskets of common tansy 20.0; calendula officinalis 10.0. For preparation, use, see the previous recipe.

In parallel, 2 tablets (0.4 g) of mummy were prescribed.

Result: after 1 month. 19.10 2001 stool 2-3 times a day without mucus and pus, rarely with single streaks of blood. Pains, belching, heartburn, occasionally tenesmus were stopped, decreased, but flatulence remained. After 2 months, I expanded my diet. The frequency and intensity of headaches has significantly decreased; he does not resort to citramone. Less pronounced symptoms of prostatitis, although the feeling of incomplete emptying, nocturia remained. Notes an increase in potency. Subsequently, for 9 years (inclusively until 2010), he systematically applied for preventive, anti-relapse courses. There were no exacerbations, the patient stopped rare cases of diarrhea plus diet and imodium. Then, considering himself cured, he did not undergo anti-relapse FT courses for 3 years. September 15, 2013 the patient again complained of loose stools 2-3 times a day (feces without mucus and blood, no tenesmus), which was quickly stopped by an infusion of a collection of a similar composition. In the next 2 years, he only once asked to repeat the FT course.

Observation 3

Patient V.A.S., born on April 9, 1952, Addressed on January 10, 2002 (52 years old) with complaints of tenesmus, pain in the region of the descending colon, sigmoid and rectum. Stool 3-6 times a day in the form of a stream of liquid with ribbons of mucus, blood. Excruciating flatulence, also accompanied by tenesmus, of moderate intensity pain. Imperative urge to defecate, excluding the ability to work. The debut of the disease from autumn to December 2001. Hospitalization. The diagnosis of NUC is visualized. Previously suffered from constipation. Some features of the patient: overweight - 100-110 kg with a height of 182 cm. He quit smoking and gained 12 kg, but with an exacerbation of NUC, he lost 12 kg. Pain in the knee joints, most likely associated with excess weight. He is the deputy director of a large vehicle fleet, constant conflicts, stress, hypertension up to 180/100 with normal blood pressure 140-150 / 70-90 mm Hg. During frequent crises, diffuse cephalgia, sometimes pain in the temples, tachycardia (up to 92 beats per minute), fever, facial flushing, emotional incontinence are disturbing. Very irregularly, with crises, he takes Corinfar, pretarium. Currently prescribed oral and suppository salofalk, ascorutin, multivitamins, but this therapy did not stop the exacerbation. Sanguine, plethoric, the skin of the face is hyper-hypertensive ("red hypertension"). He believes that this aggravation was provoked by the protracted celebration of the New Year. Loves pork, beef, bacon, fish, potatoes, beets, radish. Particularly notes the frequent errors in the reception of vodka. Hobby - fishing. Does not like unleavened food: porridge, muesli, vinaigrette. In the epicrisis, concomitant diagnoses include chronic pyelonephritis and prostatitis. Nocturia, the jet is weakened. Absent during exacerbation, but outside it is sharply reduced potency, which the patient pays special attention to (when re-visiting these symptoms are stopped). Some doubts about the prognosis are caused by the addiction to alcohol, persistent stress. For 2 years, he inconsistently took infusions of fees similar in composition to those previously given, there were no exacerbations, he considered himself recovered. In December 2003, an inaccuracy in the diet provoked a severe exacerbation. Assigned by analogy

with autoimmune disease - multiple sclerosis - 2 collections. The exacerbation was arrested within 1-2 weeks. In April, he was re-treated with an infusion of the collection of the same composition, including antiallergic plants, species with a positive gonadotropic effect.

Collection No. 1 for the preparation of the broth: Ural licorice roots * 30.0; Common raspberries 10.0; Rhizomes of calamus marsh * 20.0; Roots and oversight part of elecampane high * 20.0 each; river gravity 10.0; mountaineer snake 20.0; English oak bark 30.0; white willow 20.0; Chokeberry fruits 10.0; mountain ash ordinary 10.0; Rhizome of Potentilla erect 20.0; Nadz. part of horse sorrel 20.0; Marsh cinquefoil roots 20.0; Roots of Leuzea (rapontica) safflower *, Rhodiola rosea * 20.0; Scutellaria Baikal * 10.0; Nadz. part of bisexual shiksha, marsh wild rosemary, marsh creeper, Hypericum perforatum (insemination phase) 20.0 each; field horsetail 10.0; cornflower meadow 30.0; Flax seed 20.0.

The preparation was oriented towards the maximum accessibility for patients at home, since the recommendation of heat treatment in a water bath in most cases leads to the rejection of herbal medicine. Pharmacopoeial methods for the preparation of decoctions and infusions are far from the traditions of Chinese (evaporation from 800 to 300 ml) [12] and Tibetan medicine (see condensed decoctions - khandas and other dosage forms in the main treatise of Tibetan medicine "Chzhud-shi") [4, 21, 22]. The lack of assimilation of dosage forms, dosages, arsenal of traditional medicine, multicomponent collection leads to low efficiency of TF attempts during its revival in Russia.

Cooking. Soak 1–1.5 tablespoons of the collection, stirring, in 1 liter of water, boil, simmer over low heat for 15–20 minutes. The evaporated water can be replenished with boiling water, since concentrated decoctions are hardly tolerated by patients. In 6-7 minutes. before the end of the heat treatment add 1-1.5 tbsp. collection spoon No. 2, containing ether-bearing and soft parts of plants.

Composition of collection No. 2: Supervision. h. yarrow, etc. ptarmik * by 10.0; Leaf of common raspberry, white willow, medicinal sage, narrow-leaved fireweed, bird cherry, 20.0 each; white birch 30.0; Nadz. h. discoid chamomile *, a series of three-part *, celandine large *, motherwort heart 20.0 each; Leaf and flowers of meadowsweet * 30.0 each; stigmas and columns of corn 10.0; Fruits of fragrant dill, anise, common coriander, fennel, 10.0 each; Nadz. h. peppermint 20.0; spike lavender, oregano, lemon balm, medicinal drop caps, 10.0 each; May rose hips 30.0; Nadz. including Veronica officinalis 30.0. In addition to the obvious use of plant parts containing tannins (see collection No. 1) in order to quickly eliminate diarrhea and bleeding, the collection includes species used in folk and traditional medicine for allergies (licorice, calamus,

immunocorrectors [23] organically suggests itself in autoimmune diseases, and therefore systematically and successfully we used them in hundreds of patients with multiple sclerosis [8]. Obviously, in model clinical experiments in the treatment of patients with NUC, the logic of including in the collections of plants used for atopic dermatoses, atopic and infectious-allergic forms of bronchial asthma was justified.

Without significant changes, this and similar fees were occasionally adapted in accordance with specific rare (once a year), not severe and not long-term (timely FT) exacerbations provoked by the patient's love of life, errors in the intake of alcoholic beverages, conflicts associated with professional activities ... Blood pressure normalization was successful. The patient's sexual performance normalized within 4–6 months. FT. Currently, due to long-term remission, a patient who considers himself to be completely cured (which is the typical mistake of some patients with UC) does not apply for 1.5 years.

Observation 4

Patient B.N.K., born on 06/11/1981, applied on 12/01/2008 (27 years old). He is being treated systematically, punctually for 7 years to this day. Lawyer in the administration of St. Petersburg, examines complex cases in resort areas, stress. Before treatment within 4 months. he was treated for an alleged dysbiosis following a course of hardly needed antibiotic therapy prescribed for a minor colds (rhinitis, tracheitis). As a result of treatment for 1.5 months. stool 4-5 times a day with tenesmus, pain, urge to defecate. Profuse diarrhea, loose stools in a stream of blood, mucus, pain. The patient especially notes "terrible" flatulence also with tenesmus, a feeling of weakness, headaches, a sharp breakdown. Colonoscopically, ulcerative lesion of the rectum, sigmoid colon was finally established. libido and erections not only in the last 4–5 months, but even earlier, which creates the most difficult family difficulties. Undoubtedly asthenodepressive, panic state, lack of faith in healing, fear of the future. Allergic rhinitis to fish in batter, wheat baked goods. When planning FT, the following tasks were set: 1) urgent, symptomatic reinforcing, carminative and hemostatic FT; 2) anti-inflammatory, regenerative PT; 3) antiallergic, desensitizing FT; 4) stress-limiting, modulating mood FT; 5) fortifying FT, treatment of impotence, since the patient, a young man, longs to have a child in marriage. Usually, the resolution of these tasks is carried at different stages, since what potency can we talk about against the background of profuse diarrhea and pain? But my own experience suggests that it is quite possible to lay in 1 collection (for 2-3 months) components,

because even 1 plant does not act unidirectionally, but polyvalently.

Composition of the collection: Ural licorice root * 30.0; English oak bark 30.0; Nadz. including horse sorrel, St. John's wort, meadow geranium, 30.0; yarrow * 20.0; a series of three-part * 20.0; motherwort heart, common blackhead * 20.0 each; black nightshade *, European dodder, peppermint, oregano, creeping thyme 10.0 each; Burnet root, medicinal asparagus * 10.0; Leuzea safflower *, eleutherococcus prickly * 20.0 each; Rhodiola rosea * 10.0; Raspberry leaf, white willow, medicinal sage 20.0; meadowsweet * 30.0; Root and leaf of river gravilata, elecampane high * 10.0 each; meadowsweet flowers * 30.0; Calamus rhizome marsh * 10.0; Valerian officinalis 20.0; small duckweed * 10.0; May rose hips 40.0; fragrant dill, seed coriander, caraway seeds, 10.0 each.

An asterisk (*), as before, marks those plants that, among other numerous medicinal properties, are known to have anti-allergic properties. Plants of anchoring, hemostatic, carminative action are well known. The symptomatology of an exacerbation of the disease was stopped completely after 8-10 days. In this observation, it is noteworthy that FT increased the libido, the patient's erection, and completely stopped the symptoms of impotence. Parallel PT and hirudotherapy of the wife for secondary infertility (impassable right tube - graviditas extrauterina, chronic adnexitis) led to conception, pregnancy, independent childbirth of a full-term, healthy girl. The patient often conducts anti-relapse FT courses, and therefore there were no severe exacerbations for 7 years. Single, easily controlled exacerbations without pain (tenesmus, traces of blood, defecation 3 times a day), were provoked by persistent stress at work, as well as alcohol, dietary errors. The result can hardly be considered as demonstrative as in observation 1, since in 2014–2015 there were 4 exacerbations, which, according to the patient, occurred through his fault. According to the patient's assessment, FT helps him significantly. The composition of the subsequent fees was expanded. For the implementation of desensitizing therapy, the root of the sticky remania, the sweet potato dioscorea, the skullcap of Baikal, was connected. part of dasifora dwarf shrub ("Kuril tea") [14, 17]. which, according to the patient, came through his fault. According to the patient's assessment, FT helps him significantly. The composition of the subsequent fees was expanded. For the implementation of desensitizing therapy, the root of the sticky remania, the sweet potato dioscorea, the skullcap of Baikal, was connected. part of dasifora dwarf shrub ("Kuril tea") [14, 17]. which, according to the patient, came through his fault. According to the patient's assessment, FT helps him significantly. The composition of the subsequent fees was expanded. For the implementation of desensitizing therapy, the root of the sticky remania, the sweet potato dioscorea, the skullcap of Baikal, was connected. part of dasifora dwarf shrub ("Kuril tea") [14, 17].

Observation 5

Patient P.N.A., born on September 27, 1975, Graduated from the Pedagogical Institute, works at a school. Single. Applied at the age of 12.06. 2001 (26 years old) with complaints of pain in the area of the transverse colon, sigmoid and rectum, tenesmus, urgent urge, frequent (4 times a day) liquid stools with mucus and blood. She fell seriously ill on 23.02.2001. She considers errors in diet, alcohol, sexual excesses as provocateurs. In May, a colonoscopy was performed, the diagnosis of NUC was visualized. Metatrexate was prescribed, which did not lead to relief of symptoms and any tangible improvement, but sharply reduced the sexual viability of the patient. Similar therapy tactics various immunosuppressants is also adopted in the treatment of patients with other severe

autoimmune disease - multiple sclerosis [26], a typical complication of which is lack of libido, menstrual irregularities and related family complications against a background of highly questionable effectiveness. The patient achieves a moderate, unstable fixing and hemostatic effect with the help of a decoction of oak bark. Takes multivitamins. She lost weight from 54–55 to 49 kg (height 173 cm). Constantly hungry, no feeling of fullness. Food tastes are formed. Loves nuts, baked milk, cheese, garlic, turkey, fruits, juices, sweets (chocolate). However, sweets are painful. Can't eat fatty foods, cream, hot and sweet peppers. The patient is communicative, but neurotic, pessimistic, depressed. Punctures in the region of the heart, tachycardia are triggered by emotions (cardioneurosis). Typical asthenic, hypotonic (90/60), anemia after prolonged bleeding. As a result - dizziness, weakness, increased fatigue, works with difficulty, periodically takes a sick leave, thinks about disability. If an allergy was noted in the previous observation, then there is also a history of polyposis, an atopic form of bronchial asthma, which ended (?) By 14 g. She was susceptible to ARVI, in 2001 she had medium-lobe pneumonia, and occasionally she was bothered by dry, wheezing rales. Until 1998, she suffered from recurrent cystitis. Treatment with metatrexate suppressed libido but did not disrupt the menstrual cycle: 28 (5) days. Moderate median pain. In premenstrual syndrome, aggression, conflicts, "zhor", mastalgia. Coitus is currently undesirable and painful. thinking about disability. If an allergy was noted in the previous observation, then there is also a history of polyposis, an atopic form of bronchial asthma, which ended (?) By 14 g. She was susceptible to ARVI, in 2001 she had medium-lobe pneumonia, and occasionally she was bothered by dry, wheezing rales. Until 1998, she suffered from recurrent cystitis. Treatment with metatrexate suppressed libido but did not disrupt the menstrual cycle: 28 (5) days. Moderate median pain. In premenstrual syndrome, aggression, conflicts, "zhor", mastalgia. Coitus is currently undesirable and painful. thinking about disability. If an allergy was noted in the previous observation, then there is also a history of polyposis, an atopic form of bronchial asthma, which ended (?) By 14 g. She was susceptible to ARVI, in 2001 she had medium-lobe pneumonia, and occasionally she was bothered by dry, wheezing rales. Until 1998, she suffered from recurrent cystitis. Treatment with metatrexate suppressed libido but did not disrupt the menstrual cycle: 28 (5) days. Moderate median pain. In premenstrual syndrome, aggression, conflicts, "zhor", mastalgia. Coitus is currently undesirable and painful. Treatment with metatrexate suppressed libido but did not disrupt the menstrual cycle: 28 (5) days. Moderate median pain. In premenstrual syndrome, aggression, conflicts, "zhor", mastalgia. Coitus is currently undesirable and painful. Treatment with metatrexate suppressed libido but did not disrupt the menstrual cycle: 28 (5) days. Moderate median pain. In premenstrual syndrome, aggression, conflicts, "zhor", mastalgia. Coitus is currently undesirable and painful.

Composition of the collection: Root 10.0 and leaf 20.0 of thick-leaved bergenia, Rhizome of medicinal burnet 10.0; River gravel root and leaf 10.0 each; Ural licorice root *, eleutherococcus prickly *, snake mountaineer 20.0 each; angelica medicinal *, elecampane high *, medicinal dandelion 10.0 each; English oak bark, cinnamon tree (cinnamon) * 10.0 each; May rose hips 20.0; bird cherry ordinary prickly plum, Japanese sophora 10.0; Nadz. including yarrow *, horse sorrel, passerine sorrel, common blackhead *, two-spike ephedra * 10.0 each; Hypericum perforatum, meadow geranium at 20.0 Rhizome calamus marsh *, marsh cinquefoil at 10.0; Small duckweed * 10.0; White willow leaf and bark 10.0 each; Schisandra chinensis seed * 10.0; Flower baskets of calendula officinalis 10.0; chamomile * 10.0; Viburnum leaf, officinal sage 10.0; Flowers 20.0 and roots 10.0 meadowsweet *. Due to the predominance of solid parts of plants, the absence of pronounced etheric substances (mint, lemon balm, etc.) in the collection, a method of preparing a decoction according to Chinese traditional medicine was adopted [12] tablespoons of the crushed collection should be boiled in 1 liter of water with evaporation to 0.4 –0.5 L, refrigerate, take 3 servings after meals.

All symptoms of exacerbation of UC were completely arrested within 2 weeks. Subsequently, with hypothermia, she fell ill with cystitis with a partial return of NUC symptoms. The collection introduced supervision. including bearberry, lingonberry, common blueberry, flowering tops of common heather, roots of peony evading (arbutin containing plants), oversight. including wild rosemary and large celandine (to relieve pain, cuts, burning).

For 3 years, the patient has applied for phytotherapeutic help 10 times,

Plants are noted that, in addition to numerous areas of therapeutic action, also exhibit anti-allergic, desensitizing, immunomodulating, anti-anaphylactic properties. Application, preparation, see observation 1. The patient irregularly takes the infusion collection to the present, preferring 2-3 times a year to ask to repeat the above recipe without talking to a doctor. There were no exacerbations for 2.5 years. Considers himself healthy.

Within the limits of one publication it is impossible to consider the remaining 10 cases of successful herbal medicine in patients with NUC. Typically fast (from several days to 2 weeks) complete relief of the acute phase, and subsequently - stable remissions, decrease and absence of exacerbations, and with the onset of single ones - less severe symptoms. Herbal medicine, in contrast to drug treatment with xenobiotics, did not lead to any side effects. On the contrary, patients noted an increase in reproductive functions, efficiency, energizing, anti-neurotic, socializing effects, a decrease in the frequency and severity of ARVI, and an increase in stress resistance.

The discussion of the results

A significant difference between FT in traditional medicine in the countries of East Asia [10] India, Tibet [4, 21, 22] is the multicomponent collection, operating not with one plant, but with blocks of synergists. It is this principle that we assimilated in the treatment of patients with UC, which led to an undeniable effect in all cases. The rule of expanding the composition of the collection, depending on the severity of the course of the disease, was also applied by us, since the periods of onset and exacerbation of the ulcerative colitis with bleeding, frequent bowel movements, pain cannot be attributed to a mild course. According to the personal communications of E. Bazon, V. Nimbuev, Z. Tarmaeva, T.A. Aseeva, S.M. Nikolaeva, K.A. Korshikov and other representatives of traditional Indo-Tibetan medicine, the presence of 100 plant species in the collection is not the limit. If the need for the use of plants, containing a large amount of tannins, to stop diarrhea and bleeding is obvious and lies on the surface, then the mobilization of anti-allergic, desensitizing active species, tracking the effectiveness of their treatment were just the main tasks put forward for the first time, which were quite satisfactorily resolved. In parallel, this principle was successfully observed by me and in the treatment of patients with another autoimmune disease - multiple sclerosis [8]. Actually, FT of a limited contingent of UC patients should be considered as a model clinical experiment, in which side effects were not foreseen and absent with a high guarantee and which confirmed the validity of a similar approach to the treatment of patients with allergic and autoimmune diseases. In the field of the Institute of the Human Brain of the Russian Academy of Sciences, this means the success of desensitizing PT in the treatment of hundreds of patients with multiple sclerosis [8]. Since the presence of inflammation, a vascular component in the pathogenesis of both NUC [1] and multiple sclerosis [24] is indisputable,

most species are also in demand for autoimmune aggression. Regarding side effects, it should be noted that the use of metatrexate and other immunosuppressants, cytostatics in most cases leads to dysfunctions of the gonads, impotence, dysmenorrhea and does not correct disorders in the psycho-emotional sphere, does not carry out stress-limiting therapy. The high efficiency of stress-limiting PT, for example, with classical phytoadaptogens, has been proven and generally recognized [5, 8, 11, 15, 19]. The antidestructive, anti-alterative, and also the activity of many medicinal plants that optimize the regeneration processes are also significant [5]. "Side" effects of massive PT are: general strengthening, antiasthenic, anti-neurotic antidepressant effects, restoration of reproductive functions. The question of the usefulness of a combination of aggressive medications (cytostatics, immunosuppressants) and phytotherapeutic methods of treatment was worked out by a brilliant Russian pharmacologist who developed the theory of initiation by plants of the state of nonspecific resistance of the organism (SNPS), the doctrine of phytoadaptogens, N.V. Lazarev and his students [15, 16, 19, 25]. Information about the stock of used antiallergic, desensitizing plants can be compiled according to the compositions of the above fees.

Briefly about some of the known mechanisms of antiallergic, desensitizing, immunocorrecting action of plants. The ability of a decoction of licorice, glycyrrhetic, glycyrrhizic acids (triterpenes) to optimize the functions of the adrenal cortex within physiological limits, to have a moderate cortisone-like effect, to slow down the metabolism of corticosteroids is well known, as well as the antiallergic effect of the latter [20]. For the prevention of suppression of adrenal functions during irrepressible, long-term therapy with corticosteroids, which occurs with NUC, Beck's disease, a preparation for glyceram, ammonium salt of glycyrrhizic acid, was created, but its use was not observed. The antiallergic effect of the indirect adrenomimetic of the alkaloid ephedrine, in addition to the more well-known bronchodilator, is also generally recognized. I have proved a moderate indirect adrenomimetic effect of a number of flavonoids and phenolcarboxylic acids [5], which increases the adaptive trophic function of the sympathetic nervous system [18], the spectrum of which also includes a desensitizing effect. In folk medicine, elecampane is successfully used as antiallergic agents [13] in combination with calamus, for example, in atopic form of bronchial asthma. Under her, during the Great Patriotic War, in the absence of medicines at the Arkhangelsk Medical Institute, a decoction of wild rosemary shoots was successfully used, and the sesquiterpenes iceol and palyustrol are not desensitizers and are of interest mainly as secretory, bronchodilator, antitussive agents. Cinnamon has an anti-anaphylactic effect [7]. A string, nightshade, violet (averin tea), viburnum, meadowsweet (meadowsweet) have been considered folk medicine since ancient times in remedies effective for atopic dermatoses. An attempt to explain only by the presence of chamazulene (dimethylene) the desensitizing properties of chamomile species,

Yarrow, Sievers wormwood, manifested only with long courses of treatment, was not convincing, despite the establishment of such a mechanism of action as activation, training of histaminolytic systems that neutralize the pro-inflammatory and destructive effects of histamine [9]. Antiallergic properties of bisabolols are being studied. The most convincing work revealing some of the mechanisms of the immunocorrective action of classical phytoadaptogens is the study of S.N. Shanin [23], who proved that aqueous extracts (decoctions) of the roots of aralia, leuzea, rhodiola, eleutherococcus, and alpine cinquefoil limit in time the stress-induced release of lymphocyte-activating factor, pro-inflammatory and destructive cytokines, in particular interleukin-1 β . This ability of classical phytoadaptogens, on the one hand, to increase cellular and humoral immune protection, to provide a therapeutic effect in case of immunodeficiencies, and on the other hand, and in case of allergic, autoimmune diseases, allows them and other medicinal plants to be positioned not as immunostimulants or immunosuppressants, but as immunocorrectors, the direction of which depends on the pathological process. In the implementation of the desensitizing, and ultimately anti-destructive effect, mechanisms that are well established for most plants are also involved, such as the normalization of impaired permeability of histohematogenous barriers, suppression of the activity of proliferation factors (hyaluronidase), antioxidant, antitoxic, dehydrating, vasoprotective action. autoimmune diseases, allows them and other medicinal plants to be positioned not as immunostimulants or immunosuppressants, but as immunocorrectors, the direction of which depends on the pathological process. In the implementation of the desensitizing, and ultimately anti-destructive effect, mechanisms that are well established for most plants are also involved, such as the normalization of impaired permeability of histohematogenous barriers, suppression of the activity of proliferation factors (hyaluronidase), antioxidant, antitoxic, dehydrating, vasoprotective action. autoimmune diseases, allows them and other medicinal plants to be positioned not as immunostimulants or immunosuppressants, but as immunocorrectors, the direction of which depends on the pathological process. In the implementation of the desensitizing, and ultimately anti-destructive effect, mechanisms that are well established for most plants are also involved, such as the normalization of impaired permeability of histohematogenous barriers, suppression of the activity of proliferation factors (hyaluronidase), antioxidant, antitoxic, dehydrating, vasoprotective action.

conclusions

1. Multi-course herbal medicine for patients with ulcerative colitis infusions of multicomponent collections of medicinal plants in accordance with the methods of traditional medicine allows you to quickly stop the onset and exacerbation of the disease, demonstratively lengthen remissions up to multi-year, reduce not only the frequency, but also the severity of exacerbations.
2. Rationally including in the collection of plants with immunocorrective, antiallergic activity. This reduces and eliminates the need for 5-amino salicylic acid and glucocorticoid preparations.
3. Herbal medicine for patients with ulcerative colitis individually selected collections of non-toxic and detoxifying medicinal plants have no side effects, has a positive gonadotropic, tonic, anti-asthenic, stress-limiting effect.

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