Inflammatory Bowel Disease
Natural Medicine for Crohn’s Disease and Ulcerative Colitis

Patients dealing with Crohn’s Disease or any form of Colitis may be reluctant to try some of the contemporary medications prescribed to treat this autoimmune disorder. Even those who have already tried many of the medicines with limited results and disturbing side effects may eventually be ready for a different approach. Many of them are looking for something more natural.

In today’s world, alternative treatments are available for every condition. Nutrients, oils, probiotics and herbs are being studied for their natural healing effects. While many of these studies are published in reputable medical journals they often escape the attention of medical practitioners as these products lie outside of their field of expertise.

It is estimated that approximately 30,000 Australians suffer from Crohn’s disease and about the same number from Ulcerative Colitis. The primary aims of medical therapy for patients with Crohn’s Disease or the many forms of Colitis are directed at inducing and then maintaining remission of symptoms and mucosal inflammation and an improved quality of life with the least amount of steroid exposure. The treatment of ulcerative colitis relies on initial medical management with corticosteroids and anti-inflammatory agents, such as sulfasalazine and mesalamine in conjunction with symptomatic treatment with anti-diarrhoeal agents and rehydration.

Immune modulators are medications that suppress the body’s immune system either by reducing the cells that are responsible for immunity, or by interfering with proteins that are important in promoting inflammation. Immune modulators are becoming increasingly common treatments for patients with severe ulcerative colitis who do not respond adequately to anti-inflammatory agents. Examples of immune modulators, azathioprine, olsalazine and methotrexate. Surgery is contemplated when medical treatment fails or when a surgical emergency (e.g. perforation of the colon) occurs.

For many people despite continuous treatment with immune suppressing drugs flare ups occur regularly and are managed with high doses of prednisolone. Here at the IBS Clinic our approach begins with eliminating foods that generally aggravate inflammation in the digestive tract and foods that contribute to inflammation in the individual (Bio-Compatibility Testing).

While most medical sources will tell you the cause of Inflammatory Bowel Diseases is unknown and diet has very little or nothing to do with it however studies that have focused on diet in relation to remission rates go back as far as 1987 (Sanderson 1987). Food triggers are different for each individual patient and elimination diets are tedious. Our Bio-Compatibility test can screen for over 500 foods and household items; when all reactive foods are eliminated at the same time there can be a dramatic reduction in inflammation and significant healing of the bowel wall.

Many herbal medicines are effective when used as therapeutic agents in treating illness and disease. Most herbal medicines undergo a similar level of rigorous testing as pharmaceutical medicines and positive examples of successful biochemical, animal model, and human-controlled trials exist within the literature. Thus, herbal medicine is one of the great medical systems of the world, with an unbroken tradition dating back to the third century BC.

Natural Therapies for IBD

Curcumin. The efficacy of the turmeric extract curcumin as an anti-inflammatory agent in a variety of settings is well-documented. Prominent among its multiple effects is the inhibition of nuclear factor kappa-B (NF-kB) signaling. NF-kB is a signaling protein that drives production of related cytokines central in IBD pathology.
In one study, curcumin helped reduce symptoms of Crohn’s disease and ulcerative colitis in a small group of patients, many of whom were able to discontinue aminosalicylates and/or glucocorticoids (Holt 2005; Taylor 2011). Curcumin coupled with amino salicylates reduced recurrence of acute flares and symptom severity compared to placebo plus aminosalicylates in a group of 82 ulcerative colitis patients. In the curcumin group, the relapse rate during 6 months of therapy was 4.6%, while in the control group it was over 20% (Hanai 2006).

**Boswellia.** Resin from the Boswellia genus of tree contains a powerful anti-inflammatory compound. One double-blind clinical trial found that Boswellia was as effective as mesalamine at improving symptoms of Crohn’s disease with far fewer side effects (Gerhardt 2001). One trial has also found Boswellia as effective as sulfasalazine for inducing remission from ulcerative colitis in 30 patients (Gupta 2001).

Therapeutic herbs such as Matricaria recutita (German Chamomile) have anti-inflammatory, anti-spasmodic and calming properties, while Filipendula ulmaria (Meadowsweet) can help to protect the digestive tract and reduce stomach acid secretions. In addition, Ulmus fulva (Slippery Elm) reduces digestive pain and irritation.

It is important to state that herbal medicines are not orthodox drugs; they are not to be viewed or used in the same way. In herbal medicine a single herb is almost never used on its own to treat an ailment. Several herbs are usually combined together to produce a formula, and in most cases are given either in liquid form, or in the form of a tablet. In herbal medicine the concept of synergy is a very important one.

**Fish oils** are well known for their role in reducing inflammation however new animal research published in the *Scandinavian Journal of Gastroenterology* found dietary supplementation with krill oil offered several protective effects against inflammatory bowel disease, including a reduction in inflammation and oxidative stress, and preservation of colon length.

The study suggests that krill oil has both antioxidant and anti-inflammatory properties that may benefit patients with IBD. This oil could soon overtake fish oil in popularity for IBD conditions.

**Probiotics**
Most people, including many physicians, do not realize that 70 percent of your immune system is located in your digestive tract, making a healthy gut a major focal point if you want to achieve optimal health.

The most extensively studied probiotic organism in the treatment of IBD is Saccharomyces boulardii. Many studies have demonstrated that S. boulardii reduces colonic inflammation and regulates inflammatory gene expression, leading to increased remission rates.

*If you suffer from Inflammatory Bowel Disease and would like to use Natural Medicine to support your current therapy or are unable to use conventional medicine contact Linda Lowen at the*

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