

Sabal serrulata extracts in LUTS



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Introduction: Discussions of the therapeutic usefulness of extracts of *Serenoa repens* fruits have been wide-spread in the past. Therefore it was relevant to assess the results of the randomized, double-blind, controlled clinical studies with different extracts of *S. repens* in the treatment of lower urinary tract symptoms (LUTS).

Methods: For addressing this question, a systematic review of RCTs was conducted.

Results: The study duration is relevant with respect to a chronic fluctuating disease. Of the studies conducted for up to 6 months a benefit was seen in 3 of 3 studies with ethanolic, in 8 of 9 studies with hexane and in 1 of 2 studies with CO₂ extracts. Of the studies conducted for more than 6 months a benefit was seen in 2 studies with hexane and in 1 study with CO₂ extracts, whereas 1 study with an ethanolic, 2 studies with hexane and 1 study with CO₂ extracts did not show positive results.

Conclusions: So, the best evidence of clinical efficacy is available for hexane as well as for ethanolic extracts, supporting the well-established use of these extracts. Especially as the extracts are well tolerated even in long term treatment, and as lower urinary tract symptoms are dynamic conditions with strong spontaneous fluctuation over time, the majority of patients might expect from their use an improvement of single symptoms and thus of quality of life.

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Health impact of traditional medicines: How do we proceed from “signs of effectiveness” from population survey to formal validation with clinical trial? The case of diabetes in Palau



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Introduction: Non-communicable diseases (diabetes, hypertension related to excess weight and obesity) especially prevalent in the Pacific, have been the subject of many public health interventions, often with rather disappointing results. New approaches are required; one possibility is that some local, traditional methods may have been overlooked.

Methods: In the Republic of Palau, Micronesia, a retrospective treatment-outcome study was conducted in a nation-wide representative sample of the adult population (about 15,000 individuals).

Results: With 188 respondents (61% female, age 16–87, median 48), 30 different plants were used, mostly self-prepared (69%), or obtained from a traditional healer (18%). In cases of diabetes (diagnosis from a doctor in 84% of the cases, by a nurse in 7%), when comparing personal experiences with the two most commonly used plants, *Phaleria nisidai* Kaneh. and *Morinda citrifolia* L., the former was statistically more often associated with the reported outcome “lower blood sugar” ($P=0.01$). Since in vitro studies of *P. nisidai* had revealed a high and fairly constant level of the active substance mangiferin, it was considered that a mangiferin-standardized local recipe could be used for a randomized controlled trial with *P. nisidai* preparation as adjuvant.

Conclusions: A so-called “reverse pharmacology” (or “bedside-to-bench”) process led to the identification of a promising local medicinal plant for diabetes. The next step is a randomized controlled trial (underway) for formal validation of the selected traditional recipe. Such a research process may lead to an integrative medicine system using both conventional and local, traditional treatments for better control of diabetes.

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Asking the experts: A qualitative analysis of patient-centered outcomes for Craniosacral Therapy research



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Introduction: Research in body based complementary therapies such as Craniosacral Therapy (CST) is often focused on physical outcome measures. This study therefore investigated patients’ experiences of CST to reveal additional outcome domains for further clinical trials.

Methods: A subsample of 19 chronic non-specific neck pain patients was drawn from a randomized controlled trial on CST efficacy (NCT01526447). Selected patients (mean age 42.5 ± 10.4 ; $N=13$ female) did not significantly differ from not included CST patients. Interview data were collected on the basis of body image drawings subsequent to the 8 weekly CST treatments and analyzed using qualitative content analysis.

Results: In most cases, changes due to CST were reported on more than one of the following domains: physical (little to great improvement in pain intensity, headache and dizziness, improved sleep and range of motion), perceptual (more upright and symmetrical posture, sustained deep relaxation), emotional (confusion, emotional release, increased calm and confidence),

cognitive (increased body awareness and self-efficacy, extinction of pain memory, increased concentration and less mental distraction), spiritual (sense of basic trust and peace), behavioral (moving in action alternatives, active prevention of stress and search for exercise), and socioeconomic domain (more social contacts and activities, improved work efficiency, less pain medication). Several patients reported initial aggravation of symptoms, but no persisting or serious adverse events.

Conclusions: Study results indicate that CST may impact on various dimensions of health not limited to symptoms and physical function. Future studies should include such outcomes to cover the extent of intervention related changes.

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Patient-centred intercultural collaboration: An avenue towards integrative medicine in developing countries with socio-culturally stratified societies?



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Introduction: In Guatemala, biomedical health services are hard to access and low in quality for the indigenous Maya majority of the population that therefore resorts to traditional health services, which however remain unacknowledged by western institutions. In turn, ethnopharmacological fieldwork investigates traditional herbal medicine, but tends to restrict itself to interview-based techniques for eliciting concepts of plant perception and application, without taking into account the context of its medical use.

Methods: This talk presents a case-controlled study of medical treatments given to patients of traditional Maya healers conducted in 2013–2015 in a transdisciplinary collaboration of ETH Zurich (scientific design and overall coordination), University of Del Valle de Guatemala (herbal specimen identification), the Guatemalan National Cancer Institute (INCAN, biomedicine) and two councils of Maya elders representing traditional medicine. Its objectives were to search patients with chronic diseases treated by traditional healers, biomedically diagnose them at INCAN and scientifically reconstruct the Maya treatments in their social context.

Results: 37 patients of Maya healers have been diagnosed and their treatments reconstructed. This has allowed (a) documenting Maya medicine for both scientific purposes and strengthening traditional medical practice in Guatemala (b) collecting data that supports INCAN in adapting its health services to cultural expectations of the Maya population, and (c) creating an arena for interaction, familiarization and trust-building.

Conclusions: Whilst the operationalization of the design in the Guatemalan context is complex, results show promising

outcomes of the study. The project links an innovative approach to basic ethnopharmacological research with a view towards opening up avenues for integrating traditional and modern medicine in this developing country.

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Effects of high phenolic olive oil on cardiovascular risk factors: A systematic review and meta-analysis



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Introduction: The aim of this review was to systematically access and meta-analyse the effects of HPOO on risk factors of the cardiovascular system and thusly to evaluate its use as a nutraceutical in prevention.

Methods: Medline/PubMed, EMBase, the Cochrane Library, CAMbase and CAM-QUEST were searched through July 2013. Randomized controlled trials (RCTs) comparing high vs. low phenolic olive oils in either healthy participants or patients with cardiovascular diseases were included. Main outcomes were blood pressure, serum lipoproteins and oxidation markers. Standardized mean differences (SMD) and 95% confidence intervals (CI) were calculated and analysed by the generic inverse variance methods using a random effects model. Eight cross over RCTs comparing ingestion (21–90 d) of high vs. low phenolic olive oils with a total of 355 subjects were included.

Results: There were medium effects for lowering systolic blood pressure ($n=69$; SMD -0.52 ; CI $[-0.77/-0.27]$; $p<0.01$) and small effects for lowering oxLDL ($n=300$; SMD -0.25 ; CI $[-0.50/0.00]$; $p=0.05$). No effects were found for diastolic blood pressure ($n=69$; SMD -0.20 ; CI $[-1.01/0.62]$; $p=0.64$); malondialdehyde ($n=71$; SMD -0.02 ; CI $[-0.20/0.15]$; $p=0.79$), total cholesterol ($n=400$; SMD -0.05 ; CI $[-0.16/0.05]$; $p=0.33$); HDL ($n=400$; SMD -0.03 ; CI $[-0.14/0.08]$; $p=0.62$); LDL ($n=400$; SMD -0.03 ; CI $[-0.15/0.09]$; $p=0.61$); and triglycerides ($n=360$; SMD 0.02 ; CI $[-0.22/0.25]$; $p=0.90$).

Conclusions: HPOO provides small beneficial effects on systolic blood pressure and serum oxidative status (oxLDL). HPOO should be considered as a nutraceutical in cardiovascular prevention.

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