



Smouldering in the gut What to do with chronic inflammatory bowel disease?

3.5 million people currently suffer from a chronic inflammatory bowel disease in North America and Europe alone. In Germany, the prevalence of Crohn's disease is now thought to be up to 200 and ulcerative colitis up to 250 per 100,000 inhabitants. The trend is rising worldwide. Inflammatory bowel disease is also becoming increasingly prevalent in countries that are described as "newly industrialised".

When we talk about chronic inflammatory bowel disease (IBD), we are primarily referring to Crohn's disease and ulcerative colitis. The former affects the entire digestive tract and all layers of the intestinal wall, while ulcerative colitis is mainly found in the large intestine, particularly in the rectum, and only affects the inner mucosal layer. Clinically, both diseases are characterised by recurrent episodes of abdominal pain, (mucous and/or bloody) diarrhoea, severe weight loss and micronutrient deficiencies. As the disease progresses, it can lead to stenoses, fistulas and abscesses in the bowel as well as serious complications (such as toxic megacolon) or an increased risk of cancer. Inflammatory processes in other parts of the body, such as the lungs, joints, skin or eyes, are also possible.

The causes of these chronic diseases are still unclear. While it used to be referred to as an autoimmune disease, it is now assumed that it is merely an "immune-associated" process. One of the factors currently being discussed is a deficiency of defensins in the intestine, which can lead to a weakened antimicrobial function of the mucosa and thus to an altered composition of the microbiome. A genetic component could favour this. In addition, various yeasts, such as *Candida (C.) albicans* and *C. tropicalis*, are increasingly found in the microbiome of patients and can contaminate the mucous membrane with toxic excretions. Whether this is one of the causes of IBD or a consequence of it remains the subject of further research. Research is also being conducted into the connection between infections with *Mycobacterium avium* subspecies *paratuberculosis* (MAP) and Crohn's disease. MAP leads to paratuberculosis in cattle, known as Johne's disease. This is characterised by a similar chronic inflammatory change in the mucous membrane of the small intestine.

Smoking, antibiotic intake, environmental toxins, industrially produced food and micronutrient deficiencies appear to increase the risk of developing the disease and, in the event of illness, the risk of more frequent and more severe recurrences. As with many diseases, the psychological factor should not be ignored in the case of IBD. Stress seems to favour the development of new relapses, which in turn can lead to a massive psychological burden for those affected and thus trigger renewed stress.

In SANUM therapy, IBD can be treated with the myco-preparations NOTAKEHL® (for inflammation and bacterial infections) and the combination preparation EXMYKEHL® (to support the mucous membrane and for mycotic infections) as well as the carboxylic acid preparation SANUVIS® (to support the intestinal environment) over a period of 10-12 weeks. In addition, the diet should be based on the principles of the SANUM diet.

SANUM intestinal cure

NOTAKEHL® D5 drops:

1x 2-10 daily in the morning, starting with low dose

EXMYKEHL® D5 drops:

1x 2-10 daily at night starting with low dose

SANUVIS® D2 drops:

1-3x 5 daily in the morning (noon, evening)

or



SANUVIS® drops:

1x 60 drops drink 1 litre of water throughout the day

MUCEDOKEHL® D5 drops: 1x 8 daily in the evening (for psychological stress)

An aromatic Christmas season

Especially now in the run-up to Christmas, you should always plan enough time for a break.

Treat yourself to the atmospheric essential oil blend "Christmas Feeling" with jojoba (*Simmondsia chinensis*), bergamot oil (*Citrus aurantium bergamia*), mandarin oil (*Citrus reticulata*) and lavender oil (*Lavandula angustifolia*).

The mixture can be used with a cloth to scent the room or as a rub, e.g. in the décolleté area. This way you can breathe in the flavour. This measure is supported by a steaming cup of tea and a few delicious Christmas chocolate croissants:

Ingredients:

100 g cornflakes or other flakes (unsweetened)

70 g rough chopped almonds

30 g dried mango or other dried fruit cut into small cubes

150 g dark chocolate (flavoured with Christmas spices such as cinnamon, cloves, cardamom, etc.)

Roughly chop the flakes and mix in a bowl with the chopped almonds and dried fruit. Melt the chocolate in a water bath, stirring constantly. Add the spices. Now pour the flakes and almond mixture into the pan and mix well so that everything is well covered with chocolate. Using a spoon, place small "chocolate heaps" on a plate lined with baking paper. Place in the freezer for 20 minutes. Enjoy.



Trading forms

NOTAKEHL® D5 drops

10 ml bottle (also available in other dosage forms)

Dosage

Adults and adolescents from 12 years: 1-2x 5 drops daily.

EXMYKEHL® D5 drops

10 ml bottle (also available in other dosage forms)

Dosage

Adults and adolescents from 12 years: 1-2x 5 drops daily

SANUVIS® D2 drops

30 ml bottle

Dosage

Adults and adolescents from 12 years: 1-3x 5 drops daily

SANUVIS® drops

100 ml bottle

Dosage

Adults and adolescents from 12 years: 3x 60 drops daily

MUCEDOKEHL® D5 drops

10 ml bottle (also available in other dosage forms)

Dosage

Adults and adolescents from 12 years: 1 x 8 drops daily.

For further product information, please refer to the instructions for use.
