



When the infection goes to the knee - reactive arthritis. Impulses for a holistic therapy.

Inflammation of one or more joints can occur as a result of an infection, usually bacterial, that is distant from the joint and is known as post-infectious or reactive arthritis (reA for short). The most common bacteria involved in the occurrence of reA are various pathogens of urethritis or enteritis. It is not uncommon for the triggering infection to go unnoticed.

When reactive arthritis occurs, it usually manifests itself through a series of symptoms that generally appear a few weeks after a bacterial infection. The most common symptoms include joint pain, swelling and stiffness, often affecting the hips, knees and feet, although other joints may also be affected. In some cases, the inflammation can also affect other parts of the body, such as the eyes, urethra, skin or mucous membranes. Symptoms such as fever, fatigue and general malaise can also occur. The intensity of reA varies, and it may progress in phases.

Reactive arthritis is often triggered by certain bacteria, less frequently by viruses. The most common pathogens include chlamydia, salmonella, shigella, yersinia, mycoplasma and campylobacter. These pathogens can cause an infection in the body, which then leads to an overreaction of the immune system and triggers the symptoms of reactive arthritis. The inflammation is aseptic, i.e. the pathogens themselves are not detectable in the joints or joint fluid. The pathogenesis has not yet been clearly clarified, but a genetic predisposition appears to play a role.

The duration of reactive arthritis can vary greatly and depends on a number of factors, including the severity of the condition, the nature of the underlying infection, the individual body's response and the state of the immune system.

In many cases, symptoms can resolve within a few weeks to a few months, especially if the original infection is successfully treated. In some people, however, symptoms may persist for longer, sometimes for several months or even years.

SANUM therapy can be used to support reactive arthritis. In the case of joint inflammation, affected patients can be advised to use a combination of local rubbing with NOTAKEHL® D3 ointment and taking NOTAKEHL® D4 capsules (2x 1 daily). The musculoskeletal system can also be supported with NIGERSAN® D5 drops (3x 5 daily). Immunomodulation, especially for inflammatory processes and rheumatic complaints, can be achieved by administering BOVISAN® D5 capsules (2x 1 a week before going to bed). Last but not least, there is a whole range of SANUKEHL® preparations that can be assigned to the pathogens in question in order to support the body in overcoming the infection. In the most likely case of an infection with chlamydia, a combination of SANUKEHL® Myc D6 drops and SANUKEHL® Pseu D6 drops would be used. It



is best to use them alternately every day for a few days in the evening before going to bed (1x 1-8 drops daily), if necessary also initially by rubbing them into the crook of the elbow.

Trading forms

NOTAKEHL® D4 Capsules

20 capsules (other dosage forms available)

Dosage

Adults and adolescents from 12 years: 1-3x 1 capsule daily.

NOTAKEHL® D3 Ointment

30 g (other dosage forms available)

Dosage

Adults and adolescents aged 12 and over: apply a thin layer 1-3 times a day to the affected areas

NIGERSAN® D5 Drops

10 ml dropper bottle (other dosage forms available)

Dosage

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

BOVISAN® D5 Capsules

5 pcs (other dosage forms available)

Dosage

Adults and adolescents from 12 years: 2x 1 capsule per week

SANUKEHL® Myc D6 drops

10 ml dropper bottle (other dosage forms available)

Dosage

Adults and adolescents from 12 years: 1-2x 5-10 drops daily.

SANUKEHL® Pseu D6 drops

10 ml dropper bottle (other dosage forms available)

Dosage

Adults and children from 2 years: 1-2x 5-10 drops daily.

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