

The impact of a standardized powder made from a subtype of Rose Hip on IBDQ symptom score in patients with Crohn`s Disease or Ulcerative Colitis.

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INTRODUCTION:

A dried powder made from a subtype of Rose Hip (*Rosa-Canina*) has shown anti-inflammatory properties in different studies on osteoarthritis (1,2). In addition the chemotaxis of neutrophil leucocytes is decreased in patients taking the powder for one month (3,4) and recently the active ingredient responsible for the inhibition of chemotaxis was isolated (5).

AIM:

The aim of the present investigation was to test if a large dose of standardized powder (HybenVital®) made from a subtype of Rose-Hip (*Rosa-Canina*), known to reduce the chemotaxis of neutrophil leucocytes and to reduce symptoms of osteoarthritis, would alleviate symptoms in patients with inflammatory bowel disease (IBD).

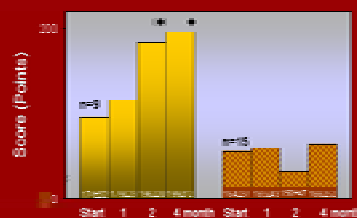
METHODS:

Results were obtained from 24 patients of which 9 suffered from Crohn`s Disease and 15 from Ulcerative Colitis. All patients were given 7.5 to 10 g of Rose Hip powder (capsules) daily, in an open trial for a period of 4 months. The IBDQ symptom score (higher score less symptoms) was used and blood samples for routine laboratory values were taken at the initial meeting and again each month during the whole trial period.

RESULTS:

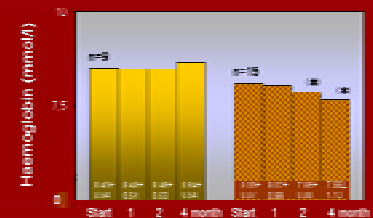
The total score of the IBDQ significantly improved in the Crohn group after two and four month treatment ($p<0.02$). The Ulcerative Colitis group remained unchanged during the whole treatment period. The Mann-Whitney test showed a p value of <0.04 after two month and was borderline significant after four month treatment. The haemoglobin concentration and haematocrite increased modestly but non-significantly in the Crohn group after four month treatment, whereas both parameters slightly, but insignificantly, declined in patients with Colitis.

IBDQ symptom score in patients with Crohn`s Disease and Ulcerative Colitis during treatment with HybenVital®



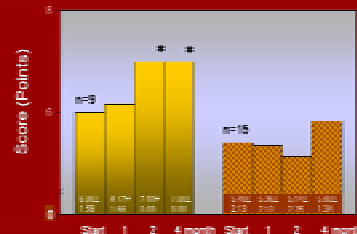
The IBDQ symptom score significantly improved as a result of treatment in the Crohn Group ($p<0.020$), indicating a reduction in discomfort from Symptoms. No change was seen in Colitis Ulcerosa. A Mann-Whitney test comparing the two groups resulted in a P-value of <0.040 .

Haemoglobin (mmol/l) in patients with Morbus Crohn and Colitis Ulcerosa during treatment with HybenVital®



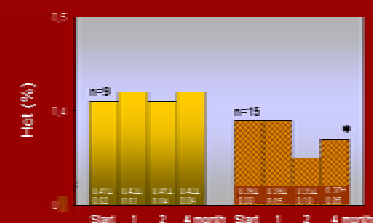
No change was seen in haemoglobin in the Morbus Crohn Group. There was a borderline decline in haemoglobin in the group with Colitis Ulcerosa ($p<0.067$). Mann-Whitney comparing groups $P<0.0516$ after 4 month treatment.

IBDQ₁₁ number of daily motions during the last two weeks in patients with Morbus Crohn and Colitis Ulcerosa during treatment with HybenVital®



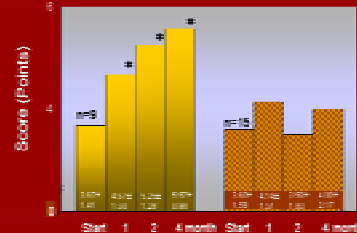
In the Crohn Group patients felt less troubled by motions after 2 and 4 months. Mann-Whitney comparing groups $P<0.0519$ after 4 month treatment.

Haematocrite (%) in patients with Crohn`s Disease and Ulcerative Colitis during treatment with HybenVital®



Comparing end of treatment resulted in a significant difference between the two groups (* $P<0.0425$).

IBDQ₂₂ episodes of tiredness and exhaustion during the last two weeks in patients with Morbus Crohn and Colitis Ulcerosa during treatment with HybenVital®



The feeling of tiredness and exhaustion was reduced by more than 50% in the Crohn Group ($P<0.0313$ after one month). Mann-Whitney comparing groups $P<0.032$ after 2 month treatment.

CONCLUSION:

The present data indicate that HybenVital® might be of value in reducing symptoms in patients with Crohn`s Disease, but not in patients with Ulcerative Colitis.

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