

APPLICATION OF PHYTOTHERAPY IN THE TREATMENT OF CHRONIC PROSTATITIS

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Annotation

Contrary to popular belief, the incidence of prostatitis detected and confirmed by laboratory tests is only about 9%. However, inflammation of the prostate often recurs or becomes chronic. The prevalence of chronic forms of prostatitis, characterized by an inactive inflammatory process and insignificant clinical symptoms that reduce the quality of life, is difficult to assess. In addition to acute and chronic bacterial prostatitis, a syndrome of inflammatory chronic pelvic pain is distinguished, in which leukocytes are detected in the third portion of urine or seminal fluid, as well as chronic pelvic pain syndrome without inflammatory changes. In the occurrence and maintenance of symptoms characteristic of chronic prostatitis, functional urination disorders are of great importance, expressed in high urination pressure, intraprostatic reflux, which forms a turbulent urine flow, pathogenic influence of microorganisms, immunological reactions, and an altered state of the pelvic floor muscles.

Keywords. Diseases, urination, prostatitis, herbal remedies, treatment, prostate gland.

Introduction

The use of herbal preparations in the treatment of prostate diseases has a long history. Evidence for the efficacy and safety of herbal medicine has been obtained empirically. At present, the possibility of using herbal remedies should be due to modern ideas about the pathogenesis and development of pathological processes, in particular in the prostate gland. Processes such as functional obstruction, the occurrence of turbulence in the prostatic urethra, the pathological influence of commensal



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microorganisms, and immune changes disrupt normal metabolism. Some violations inevitably lead to others. For example, chronic inflammation leads to cellular disorders and damage. Normally, products of incomplete oxidation, the so-called free radicals, are constantly formed in the body, the number of which increases under various pathological conditions, in particular inflammation. Violation of oxygen supply to tissues, in which the rate of accumulation of active radical compounds (oxygen, nitrogen and chlorine radicals) exceeds the rate of their neutralization, is called oxidative stress. As a result, oxidative stress leads to tissue damage over time, including in the prostate gland.

Biochemists have long known natural antioxidants: vitamins E, C and carotenoids, but they cannot seriously affect oxidative stress. In recent years, more and more attention has been paid to bioflavonoids, which are ten times stronger than vitamin E, vitamin C and beta-carotene in terms of antioxidant activity. In total, more than 6,000 bioflavonoids are known, of which more than 3,000 are flavones and more than 700 isoflavones. About 2% of the total organic carbon produced by photosynthesis is synthesized by plants into flavonoids or other polyphenols. Flavonoids protect plants from radiation, ultraviolet radiation, oxidation, diseases, infections, bacteria. One of the representatives of medicinal plants containing bioflavonoids growing in Russia is the forgotten hedysarum (Hedysarum neglectum) - a perennial herbaceous plant from the legume family. This small, 25–50 cm tall plant, which grows only in Altai, blooms from June to August with small purple-violet flowers. Forgotten Hedysarum roots contain the flavonoid quercetin, saponins and other biologically active substances. It is guercetin derivatives that have antioxidant activity and are effective in patients with chronic prostatitis, which is confirmed by the results of clinical studies. In addition to these properties, catechins contained in the roots of the forgotten kopek have a high P-vitamin activity, strengthen the walls of capillaries and optimize microcirculation. The roots of the forgotten hedysarum have adaptogenic properties, which also determines the value of including the plant in the complex therapy of patients with chronic prostatitis.

According to the questionnaire, there was an improvement in urination in patients with chronic prostatitis during treatment, however, the differences were not statistically significant both between groups receiving Red Root Plus tincture at various dosages, and compared with the control group. When analyzing the data of the urination diary obtained after the course of treatment, there were also no statistically significant differences in all three groups. According to the results of control uroflowmetry, an increase in the maximum urination rate was noted in all groups, which ranged from 5 to 12%. The volume of residual urine in patients treated



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with Red Root Plus in various dosages, and in patients treated with the herbal reference preparation, decreased by 4-6%. Differences between groups were not statistically significant. This fact can be explained by the relatively short period of use, as well as the absence in the Red Root tincture plus components that would have an effect similar to α -blockers and 5α -reductase inhibitors. The main active ingredient of Red Root Plus is compounds from the group of bioflavonoids, which have a variety of effects, primarily antioxidant and anti-inflammatory effects.

An analysis was also made of changes in the amount of lecithin grains in prostate secretion. Initially, the groups of patients, depending on the methods of treatment, did not have statistically significant differences in this indicator (p = 0.872). In a control study, patients treated with Red Root Plus tincture in various dosages showed a significant increase in the number of lecithin grains in prostate secretion compared with a group of patients who received treatment with another herbal preparation (p = 0.042). Thus, the effectiveness of the Red Root Plus tincture for the treatment of chronic prostatitis in patients of various age groups has been confirmed. First of all, this was expressed in a decrease in the severity of pain in 51-55% of patients (according to the questionnaire). An improvement in the quality of life, depending on the dose of the drug taken, was noted by 55–59% of patients. The total score on the NIH-CPSI scale decreased by 50-52%. According to the study of prostate secretion, a significant decrease in the severity of the inflammatory process and an improvement in the functional state of the prostate gland were established. Various herbal preparations contain an individual set of bioflavonoids, which have different activities. Apparently, the combination of rhizomes and roots of the forgotten hedysarum and knotweed bird (Red Root Plus tincture) contains bioflavonoids that are active against the effects of oxidative stress in the prostate tissue. This can be assumed based on the results of the effectiveness of the drug and the absence of dosedependent differences. However, this assumption needs to be confirmed by further studies.

Conclusion

Among the methods of treatment of prostatitis, the use of herbal preparations occupies a significant place. The effectiveness of this group of drugs has been confirmed by clinical experience. However, the conduct of randomized clinical trials to evaluate the effectiveness of herbal preparations based on modern ideas about the active principle, allows a new approach to herbal medicine. The rationale for the effectiveness of plant bioflavonoids is the theory of oxidative stress, according to which the products of uncontrolled free radical oxidation have a damaging effect on





the cell and cause numerous disorders in the functioning of organs and systems. Given the above, it seems possible to conclude that phytotherapy using Red Root Plus tincture, a drug with pronounced anti-inflammatory and antioxidant effects, is most effective both in the complex treatment of patients with chronic prostatitis and in monotherapy to prevent this disease.

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