Pycnogenol Found to Help with Hemorrhoids

By Greg Arnold, DC, CSCS, January 12, 2010, abstracted from “Pycnogenol® Treatment of Acute Hemorrhoidal Episodes” printed online in Phytotherapy Research

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Hemorrhoids are one of the most common medical problems, characterized by swollen, inflamed veins in the buttocks. They result most commonly from constipation, but other factors include pregnancy and aging (1). Although more than half of the population develops hemorrhoids (2), only 20% visit a medical doctor (3). Of the 20% of the population that seeks treatment, nearly 1 in 5 will require surgery (4).

The medical approach for treating hemorrhoid attacks is very basic yet “very effective in improving signs and symptoms”. It includes dietary changes to lessen constipation, reducing sugar and alcohol, increasing intake of fluids and the use of fibers and stool softeners, and even exercise.

For acute attacks off hemorrhoids, both oral topical anti-inflammatory medications have been used (5). Now a new study (6) has found that Pycnogenol®, an extract from French Pine Bark, may help with hemorrhoids. Pycnogenol® has been found to have numerous other health benefits that include helping deal with lower leg swelling (7), helping with venous ulcers (8) and venous leg circulation (9), benefiting both mental health (10) and healthy levels of inflammation (11) and even helping with pain (12).

In the study, 84 patients admitted to a local hospital with acute hemorrhoid attacks (within the last 2 days) were put in one of four groups:

Group 1: Pycnogenol® 300 mg (six 50 mg tablets) per day for four days, then 150 mg (three tablets) per day for three days.
Group 2: Placebo tablets.
Group 3: Same supplementation as Group 1 but an addition of topical 0.5 % Pycnogenol® cream
Group 4: Pycnogenol tablets and placebo topical cream.

Patients were then released from the hospital and followed on one of these protocols for seven days and then were observed for an additional seven days after the treatments were stopped. The patients provided feedback on their hemorrhoid pain through the use of a 100-point survey called the Karnofsky scale (13). They also kept a diary to keep track of social life and lost working days. They were permitted to ask for extra inflammatory medications to help with their pain.

When looking at pain duration, those in group 3 (combined oral and topical Pycnogenol cream) had 32% shorter duration of pain (16 vs. 23.6 total hours of significant pain) than the placebo group, 10% shorter than group 1 (oral Pycnogenol) (16 vs. 17.8 hours) and 6% shorter than group 4 (oral Pycnogenol and placebo topical cream) (16 vs. 17 hours).

When looking at total treatment costs, those in group 3 (combined oral and topical Pycnogenol cream) had 67% lower costs compared to the placebo group ($129 vs. $389.50), 43% lower costs compared to group 1 (oral Pycnogenol) ($129 vs. $225) and 42% lower than group 4 (oral Pycnogenol and placebo topical cream) ($129 vs. $221.)

For the researchers, “This study indicates that Pycnogenol®, both in oral and in topical form, is effective for controlling this common, disabling health problem” and that “The application of Pycnogenol® eases the management of acute hemorrhoidal attacks and help avoid bleedings.”

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