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Warholm 0, Skaar S, Hedman E, Mølmer H, Eik L, Vestfold Central Hospital. An herbal remedy, Hyben Vital, reduces pain and improves flexion and rotation of the hip in patients suffering from severe osteoarthrosis.



Hyben Vital, a standardized powder produced from the seeds and shells of rosehips (Rosa canina), has been reported to inhibit certain leucocyte functions of relevance to the cell injury seen in osteoarthrosis and rheumatoid arthritis. The aim of the present study, therefore, was to test the impact of Hyben Vital on pain and stiffness of the hip and knee in a large group of patients with osteoarthrosis. One hundred patients, all with an X-ray-verified diagnosis of osteoarthrosis of the hip or knee, and all on the waiting list for hip or knee surgery, participated in a randomised, placebo-controlled, double-blind study. Fifty of the patients were given 5 Hyben Vital capsules twice daily for 4 months and the other 50 were given identical placebo capsules in the same dosage for the same amount of time. Pain was assessed by the patient on a scale of 0-4 and stiffness of the hip or knee was estimated by measuring the degree of flexion on a scale during passive flexion (made by the investigator) and active voluntary flexion. Rotation of the hip was estimated in a similar way, and the patients were questioned about energy and motivation for daily activities. In the group treated with Hyben Vital, pain significantly declined as compared to placebo, P<.035 (Mann-Whitney). In addition, stiffness, estimated as the change in the degree of flexion of the hip, significantly declined. This was shown by an improvement in passive flexion of the hip of approximately 4 degrees in the active treated group, as compared with less than 1 degree in the placebo group, P<.033 (Mann-Whitney). A similar, significant change in favor of Hyben Vital was also observed after active flexion and after rotation of the hip. Pain of the knee joint was also relieved by Hyben Vital, but flexion of the knee showed improvement in both therapies, with no significant difference between them. The present data indicate that Hyben Vital reduces osteoarthritic pain in the hip and knee joints when tested in a double-blind, placebo-controlled design. Stiffness of the hip declined, and the patients reported improvement in energy and motivation for daily activities during active treatment.



All rights to the text, illustrations and tests as contained in thes pages belong to Hyben Vital ApS Misuse will result in claim for compensation Rein E, Kharazmi A, Winther K (University of Copenhagen). Hyben Vital reduces pain, stiffness, and inflammatory markers and improves general well-being in patients suffering from osteoarthrosis.

HARVARD/UCSF ABSTRACTS

The study aimed to test whether Hyben Vital, a standardized natural remedy made from rosehips (Rosa canina), would reduce the pain and stiffness of osteoarthrotic joints, and to evaluate if a possible reduction was accompanied by lower levels of C-reactive protein (CRP) and erythrocyte sedimentation rate (ESR). **Methods:** One



hundred patients with osteoarthrosis of the hip, knee, neck, or wrist were randomly allocated to treatment with either Hyben Vital or placebo for 3 months. The study was a double-blind crossover. Group A received 10 placebo capsules daily for 3 months and then immediately switched to identical capsules with Hyben Vital for 3 months (5g daily), and vice versa with group B. Stiffness and pain relief were estimated by the patient on a scale from 0 (no impact) to 4 (total relief of symptoms). General well-being was evaluated using yes/no answers. CRP and ESR were estimated by routine methods. Eightyfour patients completed the study. All results given are mean +/- SD. Wilcoxon nonparametric statistics were used, except for yes/no answers, where the chi-squared test was applied. Results: Comparing the groups as a whole resulted in borderline significant P levels in favor of HybenVital in the parameters tested (P < .099). Taking the groups separately, group A (placebo first) showed a highly significant difference between the effects of placebo and Hyben Vital. The pain relief score from placebo was 0.90 + 1.4, rising to 1.92 +/- 1.5 from Hyben Vital, P < .0033, while stiffness relief rose from 0.75 +/- 1.3 with placebo to 1.87 +/- 1.3 with HybenVital P < .0008. Wellbeing likewise improved during active treatment (P = .0070). CRP declined from 9.1 +/- 8.7 to 6.4 +/- 5.4 P < .023 and ESR fell from 13.9 +/- 12.2 to 11.1 +/- 10.2 P < .042. By contrast, group B (Hyben Vital first) did not show significant difference in any parameter between the 2 treatment periods, though both treatment values were consistently around the levels of the active period in group A, suggesting a "carryover" effect from Hyben Vital. Summary: The data suggest that Hyben Vital significantly reduces pain and stiffness and augments general well-being in patients with osteoarthrosis. The activity of the inflammatory markers CRP and ESR was concomitantly reduced. The results also suggest that the action of Hyben Vital is protracted.



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