

Interstitial Cystitis - An Herbal Approach

by Michael Moore

What it is

Interstitial cystitis is a chronic disorder of bladder function, characterized by frequent and urgent urination, and bladder and pelvic pain, aggravated as the bladder fills.

It is yet another one of our chronic and subtle late-20th century health problems (like Fibromyalgia, Chronic Fatigue Syndrome and Multiple Chemical Sensitivities), whose causes lay somewhere between iatrogenesis, environmental factors such as overt pollutants and covert xeno-estrogens, diminished dietary complexity resultant from centralization of food distribution and manufacture, and something akin to a cultural "Spirit Sickness". ALL of these disorders are to be found in the First World, with the United States having the vast majority of sufferers.

Even a decade ago, those with such disorders as Epstein-Barr and Cytomegalovirus infections, as well as those with Interstitial Cystitis, were generally treated as if they were suffering from "yuppie burnout"...having spent too long in a fugue-state self examination...self-obsessed hypochondriacs that should simply get back to work and shut up. Since 90% of those with Interstitial Cystitis were and are women, the most frequent response was tranqs and other anti-anxiety agents. These women had "neurotic bladders", were probably neurotic themselves, and were best dealt with by shunting them over to the garbage collectors in psychiatry. It took the work of a physician-sufferer, Vicky Ratner, stubbornly educating her profession and the public about the disorder, to finally start to get medical recognition of the disease. The organization she founded, the Interstitial Cystitis Foundation, estimates that, as of 1995, the average person sees SEVEN physicians before the condition gets correctly diagnosed.

To quote the ICF: "Interstitial Cystitis is generally caused by a chronic inflammation of the bladder wall, and produces symptoms that wax and wane. Scientists aren't certain what triggers the inflammatory process; suspects include previous infections; unidentified substances in the urine; defects in the cells lining the bladder; disorders of nerve functions; activation of mast cells, which play an important role in allergic reactions; or a combination of these factors. Whatever the cause, the affected bladder wall is hypersensitive to stimulation, and the presence of even a small amount of urine causes it to contract. As a result, discomfort is almost constant during flares of interstitial cystitis; pain and pressure are relieved only temporarily after responding to each urge to urinate."

Although the condition can appear out of the blue in people who have had no urinary problems, it is more likely to occur in those who have endured several bouts with bladder disease. An estimated 70% of women with interstitial cystitis have a history of urinary-tract infections, and many report having had "childhood bladder problems."

Treatment Philosophy

Since Interstitial Cystitis is not a specific disease entity deriving from specific causes, but an end result, like arthritis, that can be reached through many pathways, the best Holistic approach is to FIRST strengthen metabolism through tonics, and then start using specific therapeutics UNTIL something works...trial and error. It is very likely that an approach that helps now may gradually stop working in a few months, so having several approaches is preferable. Using herbs alone is less beneficial than combining botanicals with TCM, nutritional counseling and bodywork. Medical procedures are similarly "pyramidal"..including water dilation of the bladder, instillation of DMSO, the use of tricyclic antidepressants, agents such as sodium pentosan polysulfate to alter the bladder mucosa, even, finally, various drastic resections, restructuring and even complete removal of the bladder (...surgeons WILL be surgeons...).

TONICS

LIVER DEFICIENCY TINCTURE

Mahonia (Oregon Grape)	2 parts
Yellow Dock Root	2 parts
Buckbean	2 parts
Pleurisy Root	2 parts
Blue Flag Root	1 part
Ocotillo Bark	1 part

Mix from tinctures, with Mahonia, Yellow Dock, Pleurisy Root and Blue Flag made from dry herb, and Buckbean (if possible) and Ocotillo (mandatory) made as fresh tinctures. Take 30 drops, morning, afternoon and before retiring. A constitutional tonic for those with catabolic, catecholamine or adrenergic excess.

LIVER EXCESS TINCTURE

Burdock Root FE	2 parts
Dandelion Root FE	2 parts
Milk Thistle Seeds	2 parts
Larrea	1 part
Tribulus (Puncture Vine)	1 part

Mix from Burdock and Dandelion Fluidextracts (1:1 strength) strong Milk Thistle Seed Tincture (1:2, 75% alcohol), dry Larrea and Tribulus tinctures (1:5) Use 30-60 drops to 3X a day, and decrease protein and fat consumption by at least one third. A constitutional tonic for those with anabolic excess.

LONG CYCLE TONIC

Vitex	3 parts
Devil's Club	2 parts
Black Cohosh	2 parts
Oregon Grape Root	2 parts
Peony	2 parts
Immortal	2 parts
Anemone (Pulsatilla)	1 part

Mix as tinctures, since the Anemone MUST be made fresh, the Peony is BETTER fresh, the rest can or should be made dry. Use 30-60 drops (1 or 2 squirts) 2 or 3 times a day For symptoms that start just before menses, deriving from weak progesterone levels with a premature rise in estrogen before menstruation; the cycle is generally longer than 28 days. Problems also include rapid-onset water-retention, headaches, joint pain, and labile emotions.

SHORT CYCLE TONIC

Dandelion FE	3 parts
Red Root tincture	3 parts
Yellow Dock tincture	2 parts
Yerba Mansa tincture	2 parts
Bugleweed tincture	2 parts
Ocotillo tincture	2 parts
Celery Seed tincture	1 part

Make from the fluid extract and tinctures. Use 30-60 drops (1 or 2 squirts) 2 or 3 times a day.

For symptoms that may start a week before menses, with the estrogen phase short, the progesterone phase strong, and the anabolic dominance showing as late-night energy, sweating, irritability, craving for proteins and fats (but with poor digestion), pelvic congestion (aggravated by fatty foods), and premenstrual acne.

SINGLE STRATEGIES

1. Agents that improve the quality of bladder mucosa or mucus layer.

1a. *Althea officinalis* or *A. rosea* (Marshmallow Root or Hollyhock Root), 2 grams in tea, 4X a day as a suspended cold infusion. MOST LIKELY

1b. *Ulmus rubra* (Slippery Elm Bark), 2 grams in tea, 4X a day as a suspended cold infusion. LESS LIKELY

1c. *Anemopsis californica* (Yerba Mansa Root), 2 grams in tea, 4X a day as an infusion, hot or cold.

2. Agents that decrease pain or act as antispasmodics.

2a. *Piper methysticum* (Kava). Fresh root tincture, 30-50 drops in hot water, 4X a day.

2b. *Cannabis sativa* (Marijuana). Dry "Shake" tincture, 45-90 drops in hot water, 4X a day. (Illegal to possess, of course)

2c. *Garrya* sp. (Silk Tassel, Cuauachichic). 1-2 grams of VERY bitter tea, 3X a day as a hot infusion.

2d. *Kalmia latifolia* (Mountain Laurel). fresh plant tincture, 5-15 drops to 4X a day. (Use with care...a low dosage botanical that can be toxic in substantially larger dosages)

3. Agents to use as sitz baths. (urinating afterwards)

3a. *Anemopsis californica* (Yerba Mansa Leaf or Root)

3b. *Ephedra* spp. (Mormon Tea, American Ephedra)

3c. *Stellaria media* (Chickweed herb)

3d. *Verbesina encelioides* (Anil del Muerto)

4. Others.

4a. Psyllium seed as a dietary supplement.

4b. *Echinacea angustifolia* or *E. pallida*, to decrease tissue edema and damage.

4c. Mullein Root tea to strengthen trigone muscle in early stage incontinence.

4d. *Lobelia inflata* fresh herb tincture as a parasympathomimetic antispasmodic.

4e. *Paeonia albiflora* or *P. brownii* fresh root tincture to decrease concurrent reproductive irritability

4f. *Nuphar lutea* fresh root tincture to decrease general chronic pelvic irritability and inflammation.