Nutrition: Complementary & Alternative Choices

Urinary Tract Infections: Cystitis

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Note: to have optimal response, all recommendations begin with **Ultra Vites** and **Ultra Omega-Linic**.

This information is intended for the use of health care professionals. It has not been evaluated by the FDA and is not intended to diagnose, treat, cure or prevent any disease. You should consult a qualified health care provider for advice before beginning any new health care program.

Supplement Recommendations for UTI & Cystitis

| Nutrient | Product | Q/Day |
|--|-----------------------------------|-----------|
| d-Mannose | d-Mannose | see below |
| bladder support | BladrEase | see below |
| monolaurin | Ultra Monolaurin | 3/day |
| if more support is needed | | |
| high magnesium | Ultra Vites with 150 mg Magnesium | 2 |
| vitamin C | Ultra C-1000 | 4 |
| Consider a probiotic with antibiotic use | | |
| probiotics | Ultra 4x6 Probiotic | 1-2 |
| anti inflammatory | Ultra Omega-Linic | 2-8 |

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Urinary tract infections (UTIs) are the second most common type of infection in the body. They account for about 8.3 million doctor visits each year. 90% of these are Cystitis. Women are especially prone to Cystitis. One woman in five develops this infection during her lifetime. UTIs in men are not as common as in women but can be very serious when they do occur.

Recurrent cystitis is usually defined as 3 episodes of UTI in the previous 12 months or 2 episodes in the previous 6 months. A UTI is defined as a relapse if it is caused by the same species that caused the original UTI, and if it occurs within 2 weeks after treatment.

Normally, urine is sterile - free of bacteria, viruses, and fungi, but it does contain fluids, salts, and waste products. An infection occurs when tiny organisms, usually bacteria from the digestive tract, cling to the opening of the urethra and begin to multiply. The urethra is the tube that carries urine from the bladder to outside the body. Most bladder infections arise from one type of bacteria, *Escherichia coli* (*E coli*), which normally lives in the colon.

Antibiotics

Continuous use of antibiotics for 6 to 12 months has been shown to reduce the rate of recurrent infection. As an alternative, a single dose of antibiotics within 2 hours of intercourse reduced

the rate of recurrent UTI as effectively as continuous treatment. If you are using antibiotics consider the use of **Ultra 4x6 Probiotic** to re-innoculate the colon with good bacteria.

Make sure the body has everything it needs daily. **Ultra Vites** contains the required nutrients, plus it has 150 mg Magnesium to diminish bladder spasm.

It has been shown that **d-Mannose** can lessen the infectious effects of E Coli, the most common pathogen associated with cystitis. d-Mannose is unique in that it attracts and holds E Coli, thus preventing them from attaching to the bladder wall. E Coli is then flushed from the bladder with normal urine flow. If supplemented at 1 tsp per day, it may be useful at preventing a UTI, which may eliminate the need for anti biotics. In female patients, 1 tsp before and after intercourse has been useful in preventing recurrent infections. If used in an acute infection it is most commonly supplemented at 1 tsp every 2 or 3 hours as necessary. This can be reduced as symptoms subside.

BladrEase is an Endobiogenic Concept™ formula that has been useful in bladder infections. It is a special Proprietary blend of Fennel (Foeniculum dulce) herb extract, Bilberry (Vaccinium myrtillus) fruit extract, Witch hazel (Hamamelis virginiana) leaf extract, and Burdock (Arctium lappa) root extract.

BladrEase suggested use:

- 2 capsules 5 times per day for 5 days,
- 2 capsules 4 times per day for 4 days,
- 2 capsules 3 times per day for 10 days,
- 2 capsules 2 times per day for 21 days.

If a bacteria other than *E coli* is the cause of the UTI, **Ultra Monolaurin** has been shown to be effective. It works against many pathogenic bacteria and yeast. Use 1-3 scoops daily (each scoop is approximately 1/4 tsp).

Ultra C-1000 (ascorbic acid) acidifies the urine, and is helpful for UTI. I recommend 1000 mg within 2 hours of intercourse or 1000 mg four times per day for flare-ups of UTI.

General Recommendations

The following is helpful no matter how the infection is being treated:

Drink lots of fluids. Lots of water, cranberry juice and coconut water are commonly recommended. Use anti-inflammatories like **InflamEase** and/or **Ultra Omega-Linic**

WARNING: Consult your physician if you have:

- Blood in the urine
- · Pain in the lower back or flank
- Fever
- Nausea or vomiting

or, if the condition does not improve in 3 days.



