Benign Prostatic Hyperplasia? Efficacious herbs to the rescue

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The Internet which is the world library is filled with lots of information on all aspects of knowledge and for me it is unnecessary to re-invent basic information on the subject matter of Prostate Enlargement (Benign Prostatic Hyperplasia). My purpose of writing this article is to narrate a personal experience which supports the contention that Prostate Enlargement is curable using Natural Medicine.

The remedy for Prostate Enlargement was given to me in 2002 by a sufferer who also got it from a herbal practitioner. It was then in the form of a decoction from a combination of herbal ingredients. The main herb in this remedy is known as Anthoeleista djalonensis (Sapo in Yoruba). The sufferer eventually died of post-operative complications after going through surgery and I then had very serious doubt in my mind as to the true efficacy of this remedy.

Nevertheless, I decided to work on the remedy by improving on the packaging, dosage and presentation and introduced it to many patients who gave testimonies about its efficacy. In the process, I became aware that many useful local herbal remedies have great potential if only they could be researched. About a couple of years ago, a patient from the Lagos University Teaching Hospital (LUTH) who was scared of a surgical operation approached me and brought his diagnosis report showing a Prostate-Specific Antigen (PSA) of 13.5. After three months of treatment, it came down to 5.2.

In June 2010, my daughter who is based in the USA suggested that I should travel to the USA for a general health screening and arranged with her doctors to do this. The major concern from the report was my PSA which was 9.8 and the doctors insisted that I should go for Rectal Ultrasound and Prostate Biopsy to ascertain that there was no cancer involved. I tried to reassure my daughter that I was sure I would not have cancer in my system and that I could manage the problem myself as I have treated many cases in the past. I was saved the agony of the biopsy because I had only a few days to travel out of the USA after the diagnosis.

I came back early in July 2010 and started my herbal treatment immediately. On July 24, I went to Echo Scan located at 88B Opebi Road, Ikeja for a recheck and the PSA had reduced to 6.2. Another recheck on August 28 showed a further reduction to 5.6. On October 2, the PSA had further dropped to 4.9. To the consternation of the staff operating in this laboratory, the PSA eventually dropped to 1.8 on November 8, thus falling within the normal range of 0 -4.

From the foregoing, it would be seen that it took a period of about three months for the problem to be solved and I am prepared to offer a month’s free sample to Medical Practitioners who may want to explore this herbal remedy as a viable option to the established surgical operation in their practice.

Basic information on prostate enlargement (Benign Prostatic Hyperplasia)

The basic information in this article is reproduced from "National Kidney and Urologic Diseases Information thenationonlineng.net/.../23807.html?pri...
Clearinghouse (NKUDIC). As a man matures, the prostate goes through two main periods of growth. The first occurs early in puberty, when the prostate doubles in size. At around age 25, the gland begins to grow again. This second growth phase often results, years later, in BPH.

Though the prostate continues to grow during most of a man’s life, the enlargement doesn’t usually cause problems until late in life. BPH rarely causes symptoms before age 40, but more than half of men in their 60s and as many as 90 per cent in their 70s and 80s have some symptoms of BPH.

As the prostate enlarges, the layer of tissue surrounding it stops it from expanding, causing the gland to press against the urethra like a clamp on a garden hose. The bladder wall becomes thicker and irritable. The bladder begins to contract even when it contains small amounts of urine, causing more frequent urination. Eventually, the bladder weakens and loses the ability to empty itself, so some of the urine remains in the bladder. The narrowing of the urethra and partial emptying of the bladder cause many of the problems associated with BPH.

Many people feel uncomfortable talking about the prostate, since the gland plays a role in both sex and urination. Still, prostate enlargement is as common a part of aging as gray hair. As life expectancy rises, so does the occurrence of BPH. In the United States in 2000, there were 4.5 million visits to physicians for BPH.

**Why BPH occurs**

The cause of BPH is not well understood. No definite information on risk factors exists. For centuries, it has been known that BPH occurs mainly in older men and that it doesn’t develop in men whose testes were removed before puberty. For this reason, some researchers believe that factors related to aging and the testes may spur the development of BPH.

Throughout their lives, men produce both testosterone, an important male hormone, and small amounts of estrogen, a female hormone. As men age, the amount of active testosterone in the blood decreases, leaving a higher proportion of estrogen. Studies done on animals have suggested that BPH may occur because the higher amount of estrogen within the gland increases the activity of substances that promote cell growth.

Another theory focuses on dihydrotestosterone (DHT), a substance derived from testosterone in the prostate, which may help control its growth. Most animals lose their ability to produce DHT as they age. However, some research has indicated that even with a drop in the blood’s testosterone level, older men continue to produce and accumulate high levels of DHT in the prostate. This accumulation of DHT may encourage the growth of cells. Scientists have also noted that men who do not produce DHT do not develop BPH.

Some researchers suggest that BPH may develop as a result of "instructions" given to cells early in life. According to this theory, BPH occurs because cells in one section of the gland follow these instructions and "reawaken" later in life. These "reawakened" cells then deliver signals to other cells in the gland, instructing them to grow or making them more sensitive to hormones that influence growth.

**Symptoms**

Many symptoms of BPH stem from obstruction of the urethra and gradual loss of bladder function, which results in incomplete emptying of the bladder. The symptoms of BPH vary, but the most common ones involve changes or problems with urination, such as

- A hesitant, interrupted, weak stream
• Urgency and leaking or dribbling
• More frequent urination, especially at night

The size of the prostate does not always determine how severe the obstruction or the symptoms will be. Some men with greatly enlarged glands have little obstruction and few symptoms while others, whose glands are less enlarged, have more blockage and greater problems.

Sometimes a man may not know he has any obstruction until he suddenly finds himself unable to urinate at all. This condition, called acute urinary retention, may be triggered by taking over-the-counter drug or allergy medicines. Such medicines contain a decongestant drug, known as a sympathomimetic. A potential side effect of this drug may prevent the bladder opening from relaxing and allowing urine to empty. When partial obstruction is present, urinary retention also can be brought on by alcohol, cold temperatures, or a long period of immobility.

It is important to tell your doctor about urinary problems such as those described above. In eight out of 10 cases, these symptoms suggest BPH, but they also can signal other, more serious conditions that require prompt treatment. These conditions, including prostate cancer, can be ruled out only by a doctor’s examination.

I would therefore welcome inquiries through The Editor, The Nation Newspaper.

Comments (1 posted):

Ginika Okonkwo on 10/01/2011 12:49:42

The EDITOR, The Nation Newspaper. Pls link me up with thewriter of this wonderful piece of research.

Dear reader, I'll try and get back to you... Thanks