

New study: Pine bark significantly reduces menstrual pain

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A new study reveals dysmenorrhea, a condition that causes extremely painful menstrual periods affecting millions of women each year, can be reduced naturally by taking Pycnogenol (pic-noj-en-all), pine bark extract from the French maritime pine tree. The multi-center field study, published in the *Journal of Reproductive Medicine*, shows women with dysmenorrhea who supplemented with Pycnogenol experienced less pain and required less pain medications during menstruation.

"Dysmenorrheal pain is thought to be caused by elevated levels of inflammation and characterized by menstrual cramping pain, which may reach incapacitating severity," said Dr. Nobutaka Suzuki, lead researcher of the study. "Non-steroid anti-inflammatory drugs (NSAID) like aspirin or ibuprofen provide temporary help against menstrual pain. Unfortunately, they are generally ineffective for resolving spasmodic events and commonly cause side effects, particularly gastric problems."

Numerous published studies reveal Pycnogenol's effectiveness in relieving menstrual disorders, such as relief of menstrual pain and endometriosis, and it is patent protected for this application. Additional studies reveal Pycnogenol is a natural anti-inflammatory, which provides the basis for the rationale to use Pycnogenol to naturally moderate inflammatory pain sensation involved in menstruation. A study published last year in the *Journal of Reproductive Medicine* revealed that Pycnogenol significantly reduces symptoms of endometriosis by 33 percent. This study also demonstrated that Pycnogenol does not exert any estrogen-like activity, which considerably adds to the safety for

women who seek help for painful periods.

The randomized, double-blind, placebo-controlled study was conducted at four Japanese hospitals (Kanazawa University Hospital, Keiju Medical Center, Hamamatsu University Hospital and Sugiura Clinic) and sampled 116 women, aged 18-48, suffering from menstrual pain.

Patients were monitored for five menstrual cycles. They were supplied with a diary to note the pain during days of menstruation, which was evaluated using the established Visual Analog Scale. The first two pre-treatment menstrual cycles were utilized for establishing base-line values for pain sensation and NSAID analgesics. During the following two menstrual cycles women were randomly assigned to groups receiving daily regimens of Pycnogenol or placebo. Thereafter, supplementation was discontinued to investigate the recurrence of symptoms. The use of NSAID analgesics was not restricted during the entire study. However, patients were required to note the dose and the type of analgesics, as well as the time taken in their diary.

Results showed treatment with Pycnogenol lowered pain during menstruation, which was reflected by a significant reduction of NSAID used. The number of painful days due to dysmenorrhea decreased from an average of 2.1 days prior to treatment to 1.3 at both the third and fourth cycle. Discontinuation of Pycnogenol did not cause an immediate relapse, and pain medication use did not increase.

Dysmenorrhea is the leading cause of recurrent short-term school absence in adolescent girls and a common problem in women of reproductive age. While NSAID, oral contraceptives and hormone injections are the most common treatments, many women also seek safe and natural alternatives, such as Pycnogenol.

Source: MWW Group

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