



A challenge of the winter -

Infectious gastroenteritis on the rise

Cases of infectious gastroenteritis are particularly frequent in the winter months.

These diseases then spread like a wave. They often pose a major problem in institutions such as day-care centres, hospitals or nursing homes because they can lead to life-threatening conditions in elderly or sick people and small children due to dehydration and loss of electrolytes. These forms of gastroenteritis are also known as "winter vomiting diseases" and were first described around 75 years ago. They are mostly viral diseases that reach their peak in the months of January to March. The majority of cases of infections of the gastrointestinal tract are caused by the norovirus (approx. 11%), although rotaviruses, astroviruses and adenoviruses can also play a role. Most can be assigned to the calicivirus family. However, other viruses, such as coronaviruses, can also lead to gastrointestinal symptoms. Bacterial infections are much less common.

Typical symptoms of viral gastroenteritis are a short incubation period of sometimes only a few hours, sudden onset of nausea with explosive vomiting and severe, watery diarrhoea. Fever and abdominal pain are also possible.

Most of the viruses mentioned are highly resistant to environmental influences. Noroviruses, for example, can be detected on a contaminated carpet for up to 12 days. They can easily withstand temperatures between -20°C and 60°C as well as high chlorine concentrations and pH fluctuations. They are also extremely present in the environment. Infections usually occur from person to person; however, there have also been occasional waves of illness via contaminated drinking water.

Infections with parasitic protozoa, e.g. *Cryptosporidium* species, also repeatedly lead to notable waves of infection with severe and long-lasting diarrhoea. *Cryptosporidia* are also very robust as oocysts if there is sufficient moisture, can easily survive many of the standard disinfectants used and thus remain viable for years. They are excreted faecally and are mainly ingested through the use of contaminated drinking water. As recently as the end of 2023, a remarkable number of *cryptosporidium* infections occurred in the UK[3]. However, infection via contaminated meat or from person to person is also possible. Diagnosis can be made microscopically or by PCR.

In order to prevent the spread of infectious gastroenteritis, it is advisable to follow strict hygiene rules, such as hand washing and disinfection measures. In the event of illness, experience has shown that SANUM therapy can also be used very effectively to regulate the environment and the microbiome.

SANUM intestinal cure

NOTAKEHL® D5 drops

1x 2-10 daily. in the morning increase slowly

SANUM NEWSLETTER



EXMYKEHL® D5 drops
1x 2-10 daily in the evening increase slowly

EXMYKEHL® D3 suppositories
1x 1 daily in the evening

SANUVIS® tablets
3x 1 daily

OKOUBASAN® D2 tablets
Up to 6x 1 daily

In addition:

For viral gastroenteritis*:
QUENTAKEHL® D5 drops
1x 2-10 daily at midday, increasing slowly

For infections with protozoa*:
USNEABASAN® mother tincture
Acute: up to 6x 5 drops daily;
chronic: 1-3x 5 drops daily.

* According to § 7 IfSG, many of the viral pathogens and diseases of gastroenteritis as well as the detection of cryptosporidiosis are notifiable. Although naturopaths are not obliged to register, they are not permitted to treat the diseases in accordance with Section 24 IfSG.



Trading forms:

NOTAKEHL® D5 drops

10 ml bottle (also available in other dosage forms)

Dosage

Adults and adolescents from 12 years: 1-2x 5 drops daily

EXMYKEHL® D5 drops

10 ml Tropfflasche (also available in other dosage forms)

Dosage

Adults and adolescents from 12 years: 1-2x 5 drops daily.

EXMYKEHL® D3 suppositories

10 suppositories (also available in other dosage forms)

Dosage

Adults and adolescents from 12 years: 1x 1 suppository daily

SANUVIS® tablets

80 tablets

Dosage

Adults and adolescents from 12 years: 3x 1 tablet daily with sufficient liquid

QUENTAKEHL® D5 drops

10 ml bottle (also available in other dosage forms)

Dosage

Adults and adolescents from 12 years: 1-2x 5 drops daily

USNEABASAN® Mother Tincture

30 ml bottle

Dosage

Adults and adolescents from 12 years of age:

acute: up to 6x 5 drops daily

chronic: 1-3x 5 drops daily

OKOUBASAN® D2 tablets

80 tablets

Dosage

Adults and adolescents aged 12 and over: acutely every half to full hour, maximum 6x 1 tbl. daily with sufficient liquid