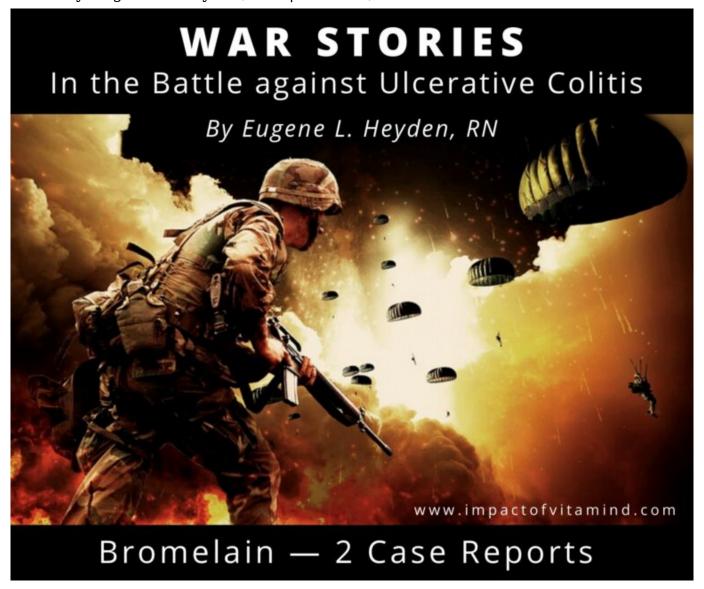
Bromelain — Two Case Reports

written by Eugene L. Heyden, RN. | March 5, 2024



By Eugene L. Heyden, RN

"Hypercoagulable state may be an important contributing factor in the pathogenesis of IBD, especially ulcerative colitis (UC)." ~ Mousavi et al., 2015

"Bromelain is widely administered for its well-recognized properties, such as its antiinflammatory, antithrombotic and fibrinolytic affects, anticancer activity and immunomodulatory effects, in addition to being a wound healing and circulatory

improvement agent." ~ Rathnavelu et al., 2016

"In addition, anecdotal evidence suggests that bromelain may be effective in treating mild ulcerative colitis. A 67-year-old woman and a 60-year-old woman, both with ulcerative colitis, reported improved conditions after self-treatment with bromelain. In both cases, improvement of disease was confirmed by endoscopic examination."

~ Orsini, 2006

The stories of these two ladies follow.

Case report: Elizabeth

Elizabeth is 67, and sick and tired of "three to four bloody bowel movements per day despite adequate doses of sulfasalazine, mesalamine, and topical steroids." Who can blame her? And word has it, she was looking for a way out. Ulcerative colitis was no fun at all. In a search for answers, she stumbled across the supplement bromelain. With no one around to say "No," Elizabeth began her little experiment to see if bromelain would relieve her symptoms. So how did things turn out?

"Within a week of taking two tablets of bromelain at each meal, she was having one formed bowel movement per day without blood or urgency. Endoscopy performed at that time revealed healed mucosa." (Kane and Goldberg, 2000)

And now Elizabeth is the stuff of legends. The pineapple is her favorite fruit.

Case report: Marlene

Marlene is 60 years old with an established history of ulcerative colitis, involving the left side of her colon. Her medical treatment included "azathioprine, 2 mg/kg of body weight, and topical mesalamine."

Fortunately, Marlene had a friend who used bromelain as a supplement to maintain her "colon health," and suggested she give it a try. "Why not?" reasoned Marlene. And after a few doses of bromelain, her diarrhea noticeably improved. An

unspecified time later, and presumably following the continuation of bromelain, an endoscopic evaluation revealed inactive disease.

Why bromelain?

I can add to the conversation by pointing out that in ulcerative colitis a coagulation and an impaired blood flow problem exists. Accordingly, tissues that are already challenged, are further challenged by low blood flow and low oxygen tissue levels. Furthermore, this problem drives inflammation a bit further (as if you don't have enough of this already), adding to the problem promotes poor circulation. Sounds like a recipe for disaster. Someone could get hurt. The answer, at least for some, may be bromelain. In closing, I leave you with the following:

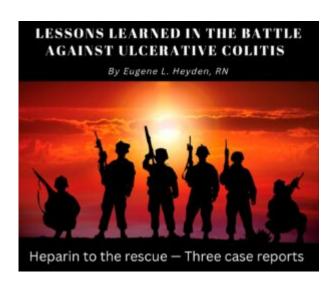
"Numerous studies indicate that bromelain inhibits intestinal inflammation by modulating the expression/activity of compounds involved in inflammation."

"The subjects of numerous studies are bromelain's immunomodulatory and antiinflammatory properties and its effect on the production/activity of cytokines involved in the inflammatory process."

"Bromelain regulates blood coagulation homeostasis by inhibiting fibrin synthesis and by increasing serum fibrinolytic activity." (Hikisz et al., 2020)



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