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[Scand J Gastroenterol.](#) 2006 Jun;41(6):682-6.

## ColoPlus, a new product based on bovine colostrum, alleviates HIV-associated diarrhoea.

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### Abstract

**OBJECTIVE:** HIV-associated diarrhoea occurs in nearly all patients with acquired immunodeficiency syndrome (AIDS) in the developing countries. Diarrhoea is caused by the HIV-related immune dysfunction and is pivotal in the decrease of the helper T-cell (CD4 + ) population. Enteric pathogens in HIV-associated diarrhoea are, for example, *Cryptosporidium*, *Amoeba* and *Campylobacter* species. Bovine colostrum is the first milk the suckling calf receives from the cow. It is rich in immunoglobulins, growth factors, antibacterial peptides and nutrients. It supplies the calf with a passive immunity before its own active immunity is established. ColoPlus is a product based on bovine colostrum and is designed for slow passage through the gastrointestinal tract, as well as having a high nutritional value. The aim of the study was to investigate whether ColoPlus given orally can influence the severe diarrhoea associated with HIV infection.

**MATERIAL AND METHODS:** The study was carried out at Braithwaite Memorial Specialist Hospital, Port Harcourt, Nigeria. Thirty patients with HIV-associated diarrhoea were included in the study. The patients were treated with ColoPlus for 4 weeks in an open-labelled non-randomized study, after an observational period of one week. After a post-treatment period of another two weeks, treatment with anti-HIV drugs was started, if deemed appropriate. The effects on the frequency of stool evacuations per day, on body-weight, fatigue, haemoglobin levels and CD4+ counts before (week 1) and after treatment with ColoPlus (week 7) were measured.

**RESULTS:** There was a dramatic decrease in stool evacuations per day from 7.0+/-2.7 to 1.3+/-0.5 (+/-SD), a substantial decrease in self-estimated fatigue of 81%, an increase in body-weight of 7.3 kg per patient and an increase in CD4+ count by 125%.

**CONCLUSION:** ColoPlus may be an important alternative or additional treatment in HIV-associated diarrhoea.

PMID: 16716966 [PubMed - indexed for MEDLINE]

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JOURNAL OF MOLECULAR MEDICINE  
Volume 71, Number 1, 42-49, DOI: 10.1007/s00021-009-2

ORIGINAL ARTICLES

### *A preparation from bovine colostrum in the treatment of HIV-positive patients with chronic diarrhea*

A. Piettenberg, A. Stöhr, H. -J. Streilbrink, R. Albrecht und W. Melgel

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### Zusammenfassung

In a prospective, open, uncontrolled study 25 patients infected with the human immunodeficiency virus with chronic refractory diarrhea and either confirmed cryptosporidiosis ( $n=7$ ) or absence of demonstrable pathogenic organisms ( $n=18$ ) were treated with a daily oral dose of 10 g of an immunoglobulin preparation from bovine colostrum over a period of 10 days. Among the 7 patients with cryptosporidiosis, this treatment led to complete remission in 3 and partial remission in 2. Among the 18 patients with diarrhea and negative stool culture, complete remission of diarrhea was obtained in 7 and partial remission in 4. In the remaining 2 patients with cryptosporidiosis and the 7 patients with diarrhea but no demonstrable pathogens treatment produced no significant improvement of the diarrhea. Subsequent doubling of the Lactobin dose ( $2 \times 10$  g daily) in 8 of the nonresponders led to complete remission in one case and at least partial remission in a further 4 patients. Treatment of refractory diarrhea with 10 g immunoglobulins from bovine colostrum per day constitutes an important therapeutic approach and led to complete (40%) or partial (24%) remission of diarrhea in 64% of the patients described here.

Key words: AIDS - Diarrhea - Bovine colostrum - Cryptosporidiosis

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Original Article

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### A preparation from bovine colostrum in the treatment of HIV-positive patients with chronic diarrhea

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**Summary.** In a prospective, open, uncontrolled study, 29 patients affected with the human immunodeficiency virus with chronic refractory diarrhea and either sustained or persistent diarrhea. To the absence of detectable pathogenic organisms in the stool treated with a daily oral dose of 10 g of an immunostimulating preparation from bovine colostrum over a period of 30 days. Among the 7 patients with crypsosporidiosis, this treatment led to complete remission in 3 and partial remission in 3. Among the 22 patients with diarrhea and organic and/or immune-mediated diarrhea, this was obtained in 7 and partial remission in 4. In the remaining 7 patients with crypsosporidiosis and the 7 patients with diarrhea but no demonstrable pathogens, no improvement or complete remission of the diarrhea, subsequent doubling of the faecal flora also led to complete remission in 2 patients and to partial remission in 4. Not the remaining 5 patients led to complete remission in one case and to partial remission in 4. Thus, 4 patients. Treatment of refractory diarrhea with HIV immunostimulating bovine colostrum preparation can be an important therapeutic approach and to be completed in our patients with a remission of diarrhea in 62% of the patients described here.

**Key words:** HIV, Diarrhea, Bovine colostrum, Crypsosporidiosis

Chronic diarrhea not specifically affected by therapeutic measures can be frustrating in patients positive for human immunodeficiency virus (HIV) with advanced immune deficiency [1, 2]. Common diagnostic examinations in such persistent diarrhea include repeated stool cultures and analysis of the faecal microflora, together with serology for cultural and histological examination [3]. In the presentation of patients with diarrhea, these diagnostic procedures should be followed in the routine

diagnoses and, therefore, specific treatment. In addition, immunomodulatory and bacterial enteritis can be successfully treated in this way [2, 4–7]. If these diagnostic measures do not lead to a pathogen-specific antibiotic treatment, a therapy should be attempted. In the case of persistent clinical symptoms, one of the various possible etiologies is often the last remaining therapeutic option [8].

In everyday practice, two groups of patients with treatment-resistant diarrhea are especially prominent. These are (a) those patients with organic and/or immune-mediated diarrhea, marked clinical symptoms and (b) those with refractory crypsosporidiosis. For the latter, there is as yet no well-known therapeutic concept [1, 2]. We report here on a series of HIV-positive patients with refractory pathogenic or with sustained crypsosporidiosis who were treated with a preparation from bovine colostrum (Lactobon, Hoescht Pharm, Thevetz).

#### Patients and methods

In a prospective, open, uncontrolled study, 29 HIV-positive patients with refractory chronic diarrhea, according to the following criteria, were prospectively treated with Lactobon in the outpatient department of the Charité General Hospital and the University Clinic of Berlin. All patients had been suffering from at least three attacks of diarrhea per day, for 7 months or more. In every case of first onset, patients were subjected to different studies of investigation for *Sarcosine, Shigella, Yersinia, Escherichia, Clostridium* and *Cryptosporidium*. In addition, all patients were investigated for signs of diarrhea with culture, stool histology, immunology and stool microbial investigation was performed. The histological studies were carried out using hematoxylin-eosin-periodic acid–Schiff (H&E) and Ziehl–Neelsen methods. When no stool bacteria were cultured, the stool specimens, the etiologic diagnosis was performed by faecal serology and protein analysis, culture of culture.

Received: 2011-08-04, Accepted: 2011-10-11, Online publication: 2011-11-15

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