Hepatitis

Hepatitis is a liver disease that can result from long-term alcohol abuse, infection, or exposure to various chemicals and drugs. Because hepatitis is potentially very dangerous, a healthcare professional should be involved in its treatment.

**Lifestyle changes that may be helpful:** Avoiding alcohol is the most obvious way to avoid the liver damage it causes.

Excessive intake of acetaminophen can damage the liver and should be avoided. Other painkillers may also have this effect; however, acetaminophen is the most common. People with hepatitis should ask their physician whether any medication they are taking poses a risk to the liver. A variety of other prescription drugs can damage the liver, as can niacin (vitamin B3).

Good hygiene is necessary to avoid spreading the infection for individuals with hepatitis resulting from a viral infection. The hepatitis A virus can be spread very easily through food, so people with hepatitis should wash their hands very carefully after using the restroom and should not handle food at work. The hepatitis viruses B and C are both transmitted by blood and sexual contact.

**Nutritional supplements that may be helpful:** Taking 3 grams per day of phosphatidyl choline (found in lecithin) was found to be beneficial in one investigation of people
with chronic hepatitis B. Signs of liver damage on biopsy were significantly reduced in this study when the participants took phosphatidyl choline.

Proteins from the thymus gland, an important part of the immune system, have a beneficial effect in people with chronic hepatitis B. Initial studies done in Poland used injected thymus proteins with good results. Further studies using a variety of thymus extracts by mouth have found that they can improve blood tests measuring liver damage as well as improve immune cell numbers. Preliminary evidence also suggests these extracts can help patients with hepatitis C. The standard recommendation for supplementation is 200 mg three times each day of crude extracts or 40 mg three times each day of purified proteins.

Vitamin E levels have been shown to be low in people with hepatitis as well as those who go on to develop liver cancer from long-standing infection. Vitamin E levels in the liver may be decreased in some people with hepatitis. A study in children with viral hepatitis using 300 IU per day did not find any benefit. In adults, 1,200 IU per day has been shown to reduce liver damage to some extent.

Vitamin C in the amount of 2 grams per day was reported in an uncontrolled study to prevent hepatitis infection by blood transfusion. A repeat of the study comparing 2 grams vitamin C with placebo did not find any protective benefit. An older study suggested that injections of vitamin C may be helpful in treating viral hepatitis.
Vitamin B12 has been reported in older investigations to help some people with hepatitis;14 15 this has not been confirmed in modern studies. Vitamin B12 injections are likely to be most beneficial, though 1,000 mcg (taken orally) each day can also be supplemented.

Catechin, a bioflavonoid, has helped people with viral hepatitis,16 though not all studies have found a benefit.17 A typical amount used in successful trials is 500–750 mg three times each day. Although catechin is found in several plants, none contain sufficient amounts to reach the level used in the trial; thus, catechin supplements are needed.

**Are there any side effects or interactions?** Refer to the individual supplement for information about any side effects or interactions.

**Herbs that may be helpful:** Silymarin, the flavonoid extracted from milk thistle, has been extensively studied for treating all types of liver disease. For acute hepatitis, double blind studies have shown mixed results.18 19 A combination of silymarin and phosphatidyl choline was reported to help sufferers of chronic viral hepatitis. One small pilot study found that at least 420 mg of silymarin was necessary each day.20 A controlled investigation found that silymarin decreased liver damage.21 Silymarin has generally been shown to treat hepatitis B and C equally well, though at least one study has not found silymarin effective for hepatitis C.22
For alcoholic hepatitis, use of 140 mg silymarin three times per day has been shown to prolong survival time compared with placebo in a double blind trial.23 Even when the damage from the alcohol has caused diabetes, 140 mg three times per day of silymarin is beneficial.24 Complete recovery in terms of signs of liver damage in biopsies has also been shown to occur when silymarin is given to those with alcohol-induced hepatitis.25 More recently, the ability of silymarin to prolong survival in people with alcoholic cirrhosis has not been confirmed in a double blind study.26 However, there was a tendency for people in this study who were also infected with hepatitis C to do better on silymarin.

Phyllanthus (*Phyllanthus amarus*), an Ayurvedic herb, has been studied primarily in carriers of hepatitis viruses, as opposed to those with chronic active hepatitis. Up to 500 mg four times a day of powdered root has not rid people of the hepatitis B virus,27 though other investigations have reported mixed results.28 29 A West Indian species, *Phyllanthus urinaria* (not widely available in the United States or Europe), has achieved much better results than Indian *Phyllanthus amarus*.30 Thus, the specific plant species used may be important for therapeutic effect.

One of the active constituents in licorice, glycyrrhizin, is commonly used in Japan as an injected therapy for hepatitis B and C.31 32 Glycyrrhizin also blocks hepatitis A virus from copying itself in test tubes.33 It is unknown if oral licorice extracts high in glycyrrhizin are effective. Because glycyrrhizin can cause high blood pressure and other
problems, it should only be taken on the advice of a doctor of natural medicine.

Preliminary human research demonstrates some efficacy for the mushroom reishi in treating chronic hepatitis B, although this use still needs to be confirmed.34

Shiitake formulations that contain the powdered mycelium of the mushroom before the cap and stem grow (called LEM) may help decrease chronic hepatitis B infectivity, as measured by specific liver and blood markers.35

Modern Chinese research suggests that compounds called lignans in schisandra regenerate liver tissue damaged by harmful influences, such as viral hepatitis and alcohol. These lignans lower blood levels of serum glutamic pyruvic transaminase (SGPT), a marker for infective hepatitis and other liver disorders.36

**Are there any side effects or interactions?** Refer to the individual herb for information about any side effects or interactions.

**References:**


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