

## **pHyloGASTRO® IN THE TREATMENT OF EQUINE GASTRIC ULCER LESIONS**

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20 **Highlights**

21 1. Equine Gastric Ulcer Syndrome (EGUS) is the most common disease of the equine  
22 stomach with a high prevalence.

23 2. Nutraceutical compounds have been shown to have a positive effect on preventing or  
24 healing naturally occurring gastric ulcers.

25 3. pHyloGASTRO<sup>®</sup> is a herbal feed composed of medical herbs that act on restoring the  
26 acid-base balance.

27 4. pHyloGASTRO<sup>®</sup> seems to be an effective feed additive for the improvement of gastric  
28 lesions.

29 5. We believe that the 6-week treatment period, recommended by the manufacture, is too  
30 short, since often gastric mucosal lesions did not completely heal in our treated group.

31

32 **Abstract**

33 Equine Gastric Ulcer Syndrome (EGUS) is the most common disease of the equine  
34 stomach with high prevalence of both squamous and glandular disease reported in various  
35 populations.

36 The aim of this study was to evaluate the effectiveness of a phytotherapeutic compound  
37 (pHyloGASTRO®) in the therapy of EGUS.

38 **Materials and methods.** The study was performed as a randomised double-blinded single  
39 centre study. The study population was composed of 19 equids which were submitted to  
40 gastroscopy before and after a six-week treatment with feed additive (10/19)  
41 (pHyloGASTRO®, 4Union B.I.O. srl, Italy) or a placebo (9/19). Severity grade was  
42 evaluated on a scale from 0-4. The variables of interest were gastric lesion score and  
43 improvement grade. Changes and comparisons of variables were performed by  
44 contingency table analyses. P level of significance was set at 0.05 in all analyses.

45 **Results.** In terms of gastric lesion scores, the treated group improved significantly  
46 compared to the placebo group.

47 **Discussion and conclusions.** pHyloGASTRO® seems to be effective in the treatment of  
48 EGUS. Further studies are needed to verify whether prolonged administration of  
49 pHyloGASTRO® could be more effective in completely healing gastric lesions.

50

51 **Key words**

52 Equids, EGUS, treatment, nutraceutical compounds, pHyloGASTRO®

53

## 54 1. Introduction

55 Gastric ulceration is the most common disease of the equine stomach with a high  
56 prevalence of both squamous and glandular disease reported in various populations [1-3].  
57 The term Equine Gastric Ulcer Syndrome (EGUS) was first adopted by the EGUS Council  
58 in 1999 and includes a complex of pathological conditions characterized by the presence  
59 of ulcers in the terminal portion of the oesophagus, in the proximal (squamous) and distal  
60 (glandular) parts of the stomach, and in the proximal part of the duodenum of equids [4].  
61 Recently various authors [5-7] and the European College of Equine Internal Medicine  
62 (ECEIM) Consensus Statement [8] have provided a new nomenclature of EGUS and  
63 proposed updated guidelines regarding pathophysiology, diagnosis, and treatment [5,8].  
64 Many drugs have been investigated and are available for the treatment and management  
65 of EGUS [8-11]. The proton pump inhibitor omeprazole has been found to be very efficient  
66 in both treating and preventing gastric ulcers in horses [8]. Other drugs such as histamine<sub>2</sub>  
67 antagonists or gastric mucosal protectors have shown less efficacy than omeprazole in the  
68 treatment of EGUS [8,11,12].

69 Along with pharmacological therapies, nutraceutical compounds appear to have a positive  
70 effect on preventing or healing naturally occurring gastric ulcers [13-20]. Thus, interest in  
71 more natural products has been growing. The purpose of this study was to evaluate the  
72 effect of the feed additive pHyloGASTRO<sup>®</sup> (Union B.I.O. srl, Italy) on the treatment of  
73 spontaneously occurring gastric ulcers of the squamous mucosa in a population of equids.  
74

## 75 2. Methods

### 76 2.1 Materials

77 The study population was composed of 19 equids (ten Standardbred trotting horses and  
78 nine Amiata donkeys). The equids were equal regarding distribution of gender and breed.  
79 None of the animals showed clinical signs of EGUS, were athletes and were used for  
80 reproduction. Inclusion criteria: 1) all the equids were affected by gastric ulcers at  
81 gastroscopy; no changes in the feeding and environment during the study period were  
82 made.

### 83 2.2 Study design

84 The study was performed as a randomised double-blinded single centre study and the  
85 protocol was approved by the Ethical Committee of the University of Pisa [no. 9069/2014].  
86 Group allocation and blinding: once enrolled into the study, horses were randomly  
87 allocated to a dose group by pulling their names out of a hat. One investigator (F.B.) was

88 responsible for randomisation while another investigator (S.B.) remained blinded to the  
89 group allocation until scoring was completed and recorded.

90 Ulcers were diagnosed by gastroscopy performed under sedation after 12 hours of fasting  
91 and 4 hours of water deprivation as reported in the literature [21]. Severity grade was  
92 evaluated on a scale from 0-4 as proposed by others [4]. Gastroscopy was always  
93 performed by the same operator (S.B.), as indicated by others [22]. For the examination, a  
94 300 cm scope (Karl Storz, Germany) and a portable processor (Gastropack, Karl Storz,  
95 Germany) were used. The images were stored on a DVD recorder. The stomach was  
96 insufflated with air through an air-flow system attached to the biopsy channel of the scope  
97 until the internal stomach folds appeared flattened. Feed material adhering to the non-  
98 glandular mucosa was flushed away with sterile water in order to visualize the entire non-  
99 glandular portion of the stomach, including the greater curvature, the lesser curvature, and  
100 the dorsal fundus. The number and degree of ulcers were recorded in accordance with the  
101 Equine Gastric Ulcer Council (EGUC) recommendations [4].

102 Equids were divided in two groups: the “placebo group” was composed of 9/19 animals  
103 (median age 10 years); the “treated group” was composed of 10/19 animals (median age 8  
104 years). The two treatment groups were clinically equal regarding distribution of gender and  
105 breed. The “treated group” was treated with pHyloGASTRO<sup>®</sup> (Union B.I.O. srl, Italy) at a  
106 dose of 60 ml per equid BID PO for 6 weeks, while the “placebo group” was treated BID  
107 with a similar-looking same-volume placebo for 6 weeks. Both pHyloGASTRO<sup>®</sup> and  
108 placebo were administered using a feeding device. The administration was always  
109 performed by the same operator (C.G.). pHyloGASTRO<sup>®</sup> is composed of medical herbs  
110 (*Althaea officinalis*, *Aloe barbadensis*, *Hoedeum vulgar*, *Malva sylvestris*, *Glycyrrhiza*  
111 *glabra*, *Echinacea angustifolia*, *calendula officinalis*, *Clay ventilated*) powered by *Matrix*  
112 *UB*<sup>®</sup> (the aqueous extract of *Olea europaea*, a phyto-active enhancer). The medical herbs  
113 previously reported showed antiinflammatory, cytoprotective, antioxidant, mucus healing,  
114 and acid-base balance restoring activities (table 1) [23-38]. A clinical examination was  
115 carried out daily for each animal to monitor gastro-intestinal side effect. All the equids were  
116 submitted to a gastroscopy after the 6-week treatment.

### 117 2.3 Statistical analysis

118 The variables of interest were gastric lesion score and improvement grade. Changes and  
119 comparisons on variables were performed by contingency table analyses. Significance  
120 was set at 0.05 in all analyses. All the analyses were performed using a GraphPad Prism  
121 6.0 (USA).

122

### 123 **3. Results**

124 All the equids in the study were affected by gastric ulcers in the non-glandular mucosa  
125 (Equine Squamous Gastric Disease, ESGD) [5,8]. No health problems or side effects  
126 (diarrhoea, stipsis, disorexia or anorexia, colic) related to treatment with pHyloGASTRO®  
127 were observed during the all study period. The feed additive was readily accepted by all  
128 the pHyloGASTRO®-treated horses in the same manner as the placebo.

129 Before treatment, the “treated group” equids showed 2/10 grade 1, 6/10 grade 2, 1/10  
130 grade 3, while no equids showed grade 4; the “placebo group” equids showed 3/9 grade 1,  
131 3/9 grade 2, 3/9 grade 3, while no equids showed grade 4. The pre-treatment distribution  
132 of gastric lesion scores was not significantly different between the two groups.

133 After 6 weeks of treatment, the “treated group” showed 2/10 equids with grade 0, 7/10  
134 with grade 1, 1/10 with grade 3, while no animals showed grades 2 and 4; the “placebo  
135 group” showed 2/9 with grade 0, 2/9 with grade 1, 3/9 with grade 2, and 2/9 with grade 3,  
136 while no animals showed grade 4. Outcomes for both “placebo” and “treated” groups are  
137 reported in table 2.

138 The “treated group” improved significantly compared to the “placebo group” (p=0.04).  
139 Concerning the improvement score of the gastric lesions, equids treated with  
140 pHyloGASTRO® showed a significantly (p=0.0001) higher improvement than equids  
141 treated with the placebo (Table 3).

142 No differences were found between the two groups considering complete healing of gastric  
143 lesions vs improvement.

144

### 145 **4. Discussion**

146 EGUS is a complex disease, which for nearly 30 years has been recognized as a highly  
147 prevalent condition both in training and at rest horses [5,8,11]. A new nomenclature of  
148 EGUS along with updated guidelines regarding pathophysiology, diagnosis, and treatment  
149 have recently been proposed [5-8]. In particular, the European College of Equine Internal  
150 Medicine (ECEIM) committee recognizes that the terminology for EGUS needed  
151 clarification and proposes the nomenclature of Equine Squamous Gastric Disease (ESGD)  
152 and Equine Glandular Gastric Disease (EGGD) [15].

153 The pharmacology products most commonly used for the treatment of gastric ulcers in  
154 horses focus on blocking gastric acid secretion and increasing stomach pH, which creates  
155 a permissive environment for physiological ulcer healing [8,10-11]. However, the research

156 for methods to treat or prevent gastric ulcers effectively without requiring the continued  
157 administration of costly pharmaceutical agents together with issues regarding withdrawal  
158 times or side effects is a new trend not only in human medicine, but also in veterinary  
159 medicine.

160 In order to meet this growing need for more natural products, this study aimed to evaluate  
161 the effectiveness of pHyloGASTRO<sup>®</sup> in the treatment of EGUS in adult equids. Our results  
162 showed an easy administration and ingestion of pHyloGASTRO<sup>®</sup> by the treated horses,  
163 with no health problems or side effects related to the treatment. A total of 44.4% of the  
164 “placebo” horses and 80% of the “treated” horses showed an improvement or a complete  
165 healing of the ulcers.

166 The improvement in the degree of ulceration score in the “placebo” group was similar  
167 compared to previous studies [17]. An improvement in placebo-treated patients has been  
168 reported in humans [39-41] and some studies have been published in veterinary medicine  
169 [42-43].

170 Also the improvement in the degree of ulcerations in the “treated” group is in line with a  
171 previous study [17], which investigated the effect of a nutraceutical compound and found  
172 an improvement of 77.8% of the horses treated.

173 Comparing the two groups, statistical calculations revealed a significant reduction in  
174 gastric mucosal lesions in the “treated” horses compared to the “placebo” group after six  
175 weeks of administration of the nutraceutical feed. This is in line with findings reported in  
176 previous papers where different nutraceutical compounds were tested [14-15,17,19-20].

177 Concerning the gastric lesion scores, equids treated with pHyloGASTRO<sup>®</sup> improved more  
178 significantly ( $p=0.0001$ ) than equids treated with the placebo. Our results are in line  
179 findings reported in the literature [17,19-20].

180

## 181 **5. Conclusions**

182 pHyloGASTRO<sup>®</sup> seems to be an effective feed additive for the improvement of gastric  
183 lesions. However, the treatment period of six weeks, recommended by the manufacture,  
184 seems too short, since the gastric mucosal lesions had often not completely healed in the  
185 treated group. Thus, further studies are needed to verify whether a prolonged  
186 administration of pHyloGASTRO<sup>®</sup> could be more effective in obtaining a complete healing  
187 of gastric lesions. A limitation of the study could be the lack of a group treated only with the

188 *Matrice UB*<sup>®</sup> solution. The addition of this group could lead to understanding whether the  
189 improvement to EGUS lesions was due to medical herbs, to *Matrice UB*<sup>®</sup> or both.  
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<b>Medical herbs</b>	<b>Mechanism of action</b>	<b>Literature</b>
<i>Althaea officinalis</i>	Antiinflammatory, cytoprotective	[23,24]
<i>Aloe barbadensis</i>	Antiinflammatory, cytoprotective, mucus healing	[23]
<i>Hordeum vulgare</i>	Cytoprotective, mucus healing, acid-base restoring	[25]
<i>Malva sylvestris</i>	Anti ulcerogenic activity	[26-28]
<i>Glycyrrhiza glabra</i>	Gastric healing	[29-31]
<i>Echinacea angustifolia</i>	Oxidant-antioxidant balance	[32]
<i>Calendula officinalis</i>	Antiulcer, antiinflammatory effect	[33]
<i>Clay ventilated</i>	Ulcer healing	[34]
<i>Olea europea</i>	Gastroprotective agent, antioxidant activity	[35-38]

310 Table 1 – Mechanism of action of medical herbs that are compounds of  
311 pHyloGASTRO® (Union B.I.O. srl, Italy).

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<b>PLACEBO GROUP</b>	
<b>Pre-treatment lesion score</b>	<b>Post-treatment lesion score</b>
3	3
1	0
2	2
3	3
1	0
1	1
2	1
3	2
2	2
<b>TREATED GROUP</b>	
<b>Pre-treatment lesion score</b>	<b>Post-treatment lesion score</b>
3	3
1	1
3	1
2	1
1	0
2	0
2	1
2	1
2	1
2	1

325 Table 2 – Pre and post treatment lesion score outcome in “placebo” and “treated” groups.

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		Improved			No change	P
		-3	-2	-1	0	
Start vs 6 weeks	Control group	0	0	4/9	5/9	0.0001
Start vs 6 weeks	Treated group	0	2/10	6/10	0/10	

328 Table 3 – Change in gastric lesion scores before and after 6-week period between  
329 “control” and “treated” groups.

330