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Behaviors of probiotic formulations in aromatic fixed and essential oils and established therapeutic models: *In-vivo* studies of repair of dysbiosis with coconut oil and trace peppermint-lemon-patchouli essential oils and/or multi-probiotic replacement

In this research study; therapeutic effects of aromatic fixed and essential oil formulations containing probiotic bacteria on SIBO were investigated using the "Dysbiosis Based Rat SIBO Model". In dysbiosis based SIBO model rats, villous distortion and loss of crypts, epithelial shedding and necrotic changes in the apical regions of the villi, and inflammatory cell infiltrations extending to the lamina propria and submucosa were observed. No inflammatory reaction was observed in dysbiosis based SIBO model rats given 1E+10 CFU/1000 mg/ coconut oil + trace amounts of peppermint-lemon-tefarik essential oil and a multi-probiotic mixture as a treatment regimen, moreover, numerous mitotic figures, hyperplasia, increase in goblet cells, and regeneration of epithelium were observed in the villi and crypt epithelium, which are indicative of the repair stage. The ratio of Bacteroides / Firmicutes, Prevotella / Bacteroides, Faecalibacterium, Akkermansia, which were found in sufficient amounts in healthy animals, remained low during disease development. It has been

observed that these ratios were significantly improved with the application of the probiotic formulation in oil compared to the treatment applied with only oil or a mixture of probiotics only. On the other hand, *E.coli* and Clostridium ratios, which were present in small amounts in healthy animals, remained high during disease development, whereas these ratios were significantly decreased with the application of probiotics in oil, compared to the treatment applied with only oil or a mixture of probiotics only.

Speaker Biography

Hulya Kayhan is completed her graduation from the Faculty of Pharmacy in 1995; she went to London to pursue a master's degree in Pharmaceutical Technology. During her graduate studies at the University of London King's College, she took alternative therapy courses including aromatherapy and phytotherapy. Aromatherapy attracted a lot of attention and he started to concentrate his studies in this field.

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Is the blood count a good predictor that the patient really does not have anemia for blood donation?

Introduction: The assessment of the donor hemoglobin continues to be the best approach to predict rule out that the patient do not have anemia. But if we use reasoning from oldest medicines as recommended by Hippocrates, the Blood deficiency can be first in the energy level, invisible by the naked eyes and we cannot see alteration in the laboratory exam. Purpose: The purpose of this study is to demonstrate that patients with Blood deficiency, according to traditional Chinese medicine, can have normal blood count and these normal laboratorial exams do not say that the patient do not have anemia because energy alterations do not appear in the laboratory exams in the first 5 years of Blood deficiency, in the energy level.

Methods: Through one case report of female patient that went to blood donation. Her hemoglobin level was in the normal level, but she had constipation (she had bowel movement once each three days). When there is Blood deficiency in the blood vessels, there is release the Blood from the Liver, and the reserve of Blood (that is in the Liver reduced and the Blood count in the periphery of Blood vessels will be normal but the reserve of Blood, that it is in the Liver is very reduced).

Results: In traditional Chinese medicine, when the patient do not have daily bowel movement, this is a sign of Blood deficiency and can be a clinical predictor of Blood deficiency, even the laboratorial exam is normal.

Conclusion: The conclusion of this study is to demonstrate that people with normal blood count is not a good predictor of anemia and other clinical signs, including thoughts from ancient medical traditions, such as traditional Chinese medicine could be to identify patients' wit anemia, that do not have alterations in the laboratorial exams in the beginning of their Blood deficiency.

Speaker Biography

Huang Wei Ling, born in Taiwan, raised and graduated in medicine in Brazil, specialist in infectious and parasitic diseases, General Practitioner and Parenteral and Enteral Medical Nutrition Therapist. Once in charge of the Hospital Infection Control Service of the City of Franca's General Hospital, she was responsible for the control of all prescribed antimicrobial medication and received an award for the best paper presented at the Brazilian Hospital Infection Control Congress (1998). Since 1997, she works with the approach and treatment of all chronic diseases in a holistic way, with treatment guided through teachings of traditional Chinese medicine and Hippocrates.

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