

EUCARBON®

Eucarbon® was developed in 1909 by the pharmacist Mag. F. Trenka and by Prof. Dr. W. Pauli.

Eucarbon® tablets contain only vegetable and mineral active ingredients and are produced with up-to-date production methods in accordance with GMP-Standards.

Eucarbon® stimulates the entire digestive system, increases colonic motility, has a mild laxative and spasmolytic effect, relieves gas pains and can also be regarded as a detoxifying agent (mild adsorbent).

Eucarbon® is a combination of anthranoid drugs (Senna and Rhubarb), Sulfur, and the mild adsorbent Vegetable Charcoal (carbo ligni) - ingredients which as single drugs/substances or in different combinations have been used as remedies for centuries in patients with intestinal complaints, mainly with constipation.

In the unique combination of this preparation the proven and generally accepted effects of the single ingredients have additional beneficial effects – presented in a standardized dosage form. It is a medicinal product with mainly laxative effects. It also regulates digestion in a totally natural way and provides for regular functioning of the digestive system.

The action of the preparation is due to the content of vegetable charcoal and the stimulatory action of anthraquinones and sulfur.

Furthermore Eucarbon® has a double effect against pain:

- the essential mint and fennel oils have well-known spasmolytic and carminative effects
- The amount of gas and tension in the abdominal cavity is reduced through adsorption, thus bringing about pain relief (mechanical effect).

Composition

Active ingredients	
Fol. sennae – Senna Leaf	105,00 mg
Extractum Rhei – Rhubarb Extract	25,00 mg
Carbo Ligni – Wood Charcoal(Vegetable charcoal).....	180,00mg
Sulfur depuratum – Sublimed Sulfur	50,00 mg
(Aetherol, Menthae 0,5 mg, Aetherol, Foeniculi 0,5 mg)	

Sennae folium:

Senna leaf consists of the dried leaflets of Cassia senna L.(C. acutifolia De Lile), known as Alexandrian or Khartoum senna, or Cassia angustifolia Vahl, known as Tinnevely senna, or a mixture of the two species. It contains not less than 2,5 percent of hydroxyanthracene glycosides, calculated as sennoside B (C42H38O20; M, 863) with reference to the dried drug. The main active ingredients are anthraquinone glycosides.

The material complies with the German Monograph "Sennae folium" of the Commission E.

It is used as a laxative due to the main effects: reduced absorption of liquids and salts, increased peristaltic activity of small and large intestine, and stool softening.

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Extractum Rhei:

Rhubarb consists of dried rhizome and roots of *Rheum officinale* Baillon or of *Rheum palmatum* Linné (Fam. Polygonaceae), or of other species (excepting *Rheum Rhaponticum* Linné), or of hybrids of *Rheum*, grown in China, deprived of the periderm tissues. The *rheum* species also contain anthraquinone glycosides (3 – 7,5% anthracene derivatives) and in addition tannins and anti-oxidative agents.

The material complies with the German Monograph (14), DAB 10, ÖAB 90, Helv. VII and Ph. Eur.

It is used as a laxative as well and has the main effects as for senna. As a result the stool remains soft and the action of the bowels is made easier.

Anthraquinone-content of Eucarbon® :

Referring to the Chemical-, Pharmaceutical- and Biological Documentation of **Eucarbon®** , the total content of anthraquinone is $3,30 \pm 0,65$ mg/tablet (2,65 – 3,95 mg/tablet).

Herbal Charcoal:

Synonym: (Carbo Ligni, vegetable charcoal)

Charcoal is a fine odorless, tasteless, black powder, free from grittiness. It is made from common charcoal by repeated heating in closed containers and has a particularly detoxicating effect.

Classical experiments showed that vegetable charcoal has the potential to adsorb inorganic poisons as well as viruses, bacteria and their metabolites (bacterial toxins). It can adsorb many drugs including digoxin, yellow oleander, barbiturates, and tricyclic antidepressants. Charcoal neutralizes gases and toxins through adsorption and helps in cases of diarrhea and acute oral poisoning.

Sulfur:

Sulfur is an element of molecular weight 32. It is yellow, tasteless and odorless and usually used in the form of precipitated sulfur, which is an amorphous or microcrystalline powder.

It melts at around 118 - 120°C to form a yellow liquid, which becomes dark and viscous at around 160°C. It is soluble only to a slight extent in water and alcohol, but quite freely soluble in carbon disulfide, light petroleum and turpentine. The element is present in all living tissues.

When taken by mouth, sulfur is converted in the gut into alkali sulfides with mild disinfectant properties, stimulation of peristalsis and promotion of a mild laxative effect.

The essential mint and fennel oils have well-known spasmolytic and carminative effects.

Peppermint & Fennel essential oils:

The essential oils of peppermint & fennel are aromatic carminative that relieve flatulence. In addition peppermint oil exerts a muscle relaxant activity that alleviates intestinal colic. On the other hand the essential oils have a cholerectic effect & disinfectant properties.

All active and inactive substances are subject to Pharmacopoeia specification with the exception of vegetable charcoal, which deviates from European Pharmacopoeia specification.

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Indications

1-Constipation:

Associated symptoms	Symptoms of complications
<ul style="list-style-type: none"> ▶ Flatulence ▶ Bloating ▶ Abdominal pain ▶ Feeling of incomplete evacuation 	<ul style="list-style-type: none"> ▶ Anorexia ▶ Overflow diarrhea ▶ Confusion ▶ Nausea and vomiting ▶ Urinary dysfunction

Causes of Constipation:

Nutritional Factors	
<p>The consumption of food with poor dietary fiber content, which results in insufficient filling of the intestine. Furthermore, intake of readily absorbed food with a reduced water-binding capacity or the lack of exercise may lead to constipation.</p>	
Caused by diseases	Caused by treatment
<ul style="list-style-type: none"> ● Abdominal tumours ● Hypercalcaemia ● Intra-abdominal or pelvic disease ● Spinal cord compression ● Cauda equina syndrome ● Depression 	<ul style="list-style-type: none"> ● Antidepressants ● Analgesics ● Opioids ● Antiemetic's ● Anticholinergic ● Aluminum salts ● Non-steroidal anti-inflammatory drugs
Associated with debility	Concurrent disorders
<ul style="list-style-type: none"> ● Weakness ● Inactivity or bed rest ● Poor nutrition ● Poor fluid intake ● Confusion ● Inability to reach the toilet 	<ul style="list-style-type: none"> ● Hemorrhoids ● Anal fissure ● Endocrine dysfunction ● Changes in the intestinal wall due to a tumor or ● Chronic inflammation (e.g. Diabetes mellitus) <p>functional and organic disturbances of the nervous system, such as Parkinson's disease</p>

2-Irritable Bowel Syndrome

Irritable bowel syndrome (IBS) is a benign relapsing chronic disorder, characterized by recurrent abdominal pain and altered bowel function. It is estimated that 9 to 22% of the general population has clinical symptoms of IBS (25) but only about 5% seek medical care. IBS is the most common diagnosis made by gastroenterologists and accounts for approximately 50% of all referrals.

It contributes significantly to disability, days off work or school and health care costs; 69 to 85% of the patients report that they experienced difficulties in carrying out their daily activities.

Patients complain of general symptoms of abdominal pain (most frequently located in the lower left quadrant), abdominal cramping, changes in bowel habits / stools (e.g., stools may be soft-formed with pencil-size diameter), flatulence and / or abdominal distension with the onset of symptoms usually weeks or months prior to seeking medical attention.



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The cause of IBS is still unknown and abnormalities in gut motility fail to explain the diverse features of IBS. Symptoms of IBS may be related to stress, to depression, anxiety or other psychological manifestations, and food intolerance (most commonly lactose and gluten) or enteric infections. IBS is considered as a complex disease whereby clinical and therapeutically management is particularly difficult.

3-Radiological Examinations

Intestinal gas in excess impairs the quality of abdominal ultrasonic and X-ray investigations. Thus it is important to cleanse the bowel of its contents thoroughly before sonographic or radiological procedures such as barium enema or urography.

Standard regimens for emptying of the bowel prior to radiographic or sonographic examinations are laxatives and diet for 24 hours, occasionally supplemented by oral ingestion of an electrolyte polyethylene glycol solution or by an enema.

Especially for the elderly, the bowel preparation providing optimum cleansing of the bowel with the least associated discomfort and inconvenience for the patient must be found.

4-Further Indications

In some countries **Eucarbon®** is used as well in pregnant women suffering from constipation, gas, hemorrhoids and anal fissures, in post-surgery situations for bedridden patients, in cases of constipation under the prescription of neuroleptics as well as in cases of bad breath caused by constipation.

Standard Regimens For Emptying Of The Bowel Prior To Radiographic Or Sonographic Examinations

Abstinence of foods which produced gases

eggs - soda water - vegetable and fruit

Breakfast	Dinner	Supper
<ul style="list-style-type: none">• Half a loaf• Honey or jam• Tea or coffee without milk	<ul style="list-style-type: none">• Pasta or rice• Potato• Chicken or beef boiled	<ul style="list-style-type: none">• one bowl of soup

Period from 12 to 5 p.m.

Are advised to drink half a liter of water

From 5 pm to 10 pm

Are advised to drink half a liter of water

Bedtime

Are advised to drink liters of water

Pre-test

Advised to take the drug prescribed for you by your doctor

Eucarbon Tablets

From 6 to 8 tablets a day before the examination directly

