

Case Histories

Acetyl-Glutathione resolves long term itching (Pruritis)

Gender, Age, Occupation, Nationality, height and weight.	<p>Ms K.H. is a single, 39 year old business woman. She is 5ft 10 tall and weighs 11 stone 4 lbs (178 cm, 70.2 kg).</p>
Presenting complaint – list and duration	<p>Ms. K.H. presented eight months previously with persistent, troubling and strong systemic itching. The itch ruled her life, dictated what she could and could not eat and drink at the many social events she attended, spoiled her sleep, made her change the colour of her bed sheets because she scratched so much in the night she bled from many different sites, and generally reduced her quality of life.</p> <p>She had been seeking my advice for this length of time (8 months), and whilst she had made some progress in terms of weight, energy and disposition to allergies and food intolerances the itching had proven very resilient.</p> <p>K.H.'s diet was very sound, consisting of wholefood, fresh veg & fruit and lean proteins. She now avoided wheat and dairy products and refined sugars most of the time. She also ate a low histamine diet (i.e. she avoided foods richest in histamine).</p>
Any Investigations	<p>We had met on 6 occasions over the 8 months and as with each patient a detailed case history was taken, including focusing on the time of the onset of the itch. There was nothing remarkable, however, to find as far we could both tell.</p> <p>She had previously visited her GP who had recommended anti-histamines, oral and in cream form, as well as a short course of steroids, the latter of which she refused. She did take the anti-histamine for a short time but it had not worked. This was the reason she sought help from Nutritional Therapy.</p> <p>After 2 months of minimal progress with the itching, we conducted an IgG food intolerance test and she consequently avoided the 5 foods identified, but this also had little benefit to the itch.</p>
Strategy	<p>Over the 8 months, K.H. had taken many supplements some of which she added herself, which all appeared to help to some degree especially to begin with but did not completely and successfully deal with the itch. These include the following, which have also proven helpful with other patients.</p> <p>Quercetin 300 (AR) – 2 with each meal B12 2000 Lozenge (BR) – 2 per day BioDoph-7 Plus (BR) – 2 with breakfast & 2 with dinner Histoplex (BR) – 3 with each meal (now no longer available) Kapparest (BR) – 2-3 with each meal NutriClear Powder (BR) – 1-2 scoops per day Hydrozyme (BR) – 1-2 with each meal Immuno-gG (BR) – 2 with each meal & 2 at bedtime Perm A Vite Powder (AR) – 1 heaped tablespoon before 2 meals a day NAC Enhanced AntiOx Formula (AR) – 2 mid morning, 2 mid afternoon</p> <p>These were taken in overlapping fashion, and for one month all together. The longer</p>

<p>Diet & Supplements: name and dose</p>	<p>time went on the less effective the supplements were, we discovered, so in rotating them she did derive some benefits.</p> <p>She had also stopped all supplements for two weeks to determine any change, and the itching got worse, as did her energy and hunger and brain function so she returned to them. She was, as you may be able to determine for yourself, quite a supplement consumer.</p> <p>She had already avoided known foods to which she had immunological reactivity and she had also eliminated other groups such as the citrus family and the nightshade family, along with the wheat and dairy. She had also avoided gluten for two full months without any discernible difference.</p> <p>She found that stress made the itching worse, and if she stayed out late and or drank any alcohol then this also made it worse. This last piece of information made me consider the liver, again, and a potential imbalance in her Phase One and Phase Two pathways of biotransformation and detoxication. It was already appreciated that itching can often result from altered liver function.</p> <p>Therefore, we decided to re-focus on her liver function.</p> <p>Three weeks ago, as I write this, I recommended one additional specific supplement to K.H.'s programme. We almost always introduced one variable at a time. This was added to the existing 7 or 8 that she was currently taking.</p> <ul style="list-style-type: none"> • Acetyl-Glutathione 100 mg (AR) – 1 tablet on empty stomach, three times a day. <p>Whilst she had taken glutathione precursors in the form of the NutriClear Powder and the NAC Enhanced AntiOx (AR), this form is understood to be more utilisable by the cells than the other oral forms.</p> <p>There are some questions in the literature and clinically about the ability to raise glutathione systemically with oral supplementation. See below for a link to an article on this subject and to see how this new form breaks this digestive related problem.</p>
<p>Duration</p>	<p>K.H. took the Acetyl-Glutathione (AR) for 4 days before there was a significant difference (reduction) in her itching. After one week, her pruritus was gone completely. It took a further week of itch-free existence for K.H. to believe that this had happened.</p> <p>She now has a diminished supplement programme overall and continue with the Acetyl-Glutathione for now. The intention will be to determine the lowest dose she needs and remain itch free.</p>
<p>Outcome</p>	<p>The resolution of K.H.'s itching has been “completely brilliant” and “amazing” and has given her a new lease of life.</p> <p>We have yet to see if she can take less than 3 x 100 mg tabs per day, but we are in process of reducing the other supplements so that she can take the fewest needed.</p>
<p>Comments</p>	<p>Itch (pruritus) is a sensation that causes the desire or reflex to scratch. Itch has resisted many attempts to classify it as any one type of sensory experience. Modern</p>

science has shown that itch has many similarities to pain, and while both are unpleasant sensory experiences, their behavioural response patterns are different.

There are many research papers linking various liver conditions (diseases) with itching but K.H. had none of these – her blood tests and liver function tests were all normal.

[Acetyl-Glutathione has been discussed on our education site](#). Glutathione (GSH) is regarded as a very valuable cell protector, via its direct effects on the quenching of reactive hydroxyl free radicals, other oxygen-derived free radicals and DNA damaging oxidative stressors and other biomolecules.

Acetyl glutathione is orally active, unlike plain glutathione, and is stable in the intestine and plasma when absorbed and delivered directly to the cells for natural de-acetylation intracellularly.

GSH supplies the key biochemical foundations for cytochrome P450 enzymatically derived detoxification in the liver, kidneys, lungs, intestinal epithelia and other organs, as well as being the component of one of the most important and abundant phase two conjugative pathways. In my opinion, this particular supplement has helped to balance these pathways and supply a much needed antioxidant support to quell free radicals that were causing this lady's annoying and frustrating itch. We have not discovered the reason for the itch but it is hoped that in time, she will need less and it may prove to be more than palliative.

This case acts as a point of principle for the efficacy of this particular oral form of glutathione.

Practitioner

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