

Nutritional Approach To Common Urological Disorders

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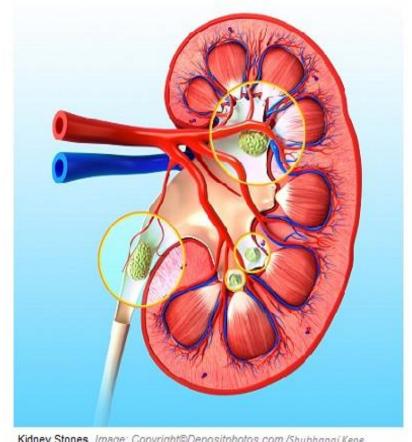
The Two Common Disorders:

- Kidney Stones.
- BPH (Benign Prostatic Hyperplasia).

Kidney Stones:

 Kidney stones are very common especially between ages 20 and 45 years old, affecting men 5 to 10 times more than women.

 The medical term for kidney stone is "nephrolithiasis".



Kidney Stones. Image: Copyright@Depositphotos.com/Shubhangi Kene

There are four types of kidney stones:

Calcium oxalate or phosphate: 70 - 75%.

 Struvite (triple phosphate, magnesiumphosphate-ammonium): 15 – 20%.

• Uric acid: 10 -15%.

• Cysteine: 1 – 5%.

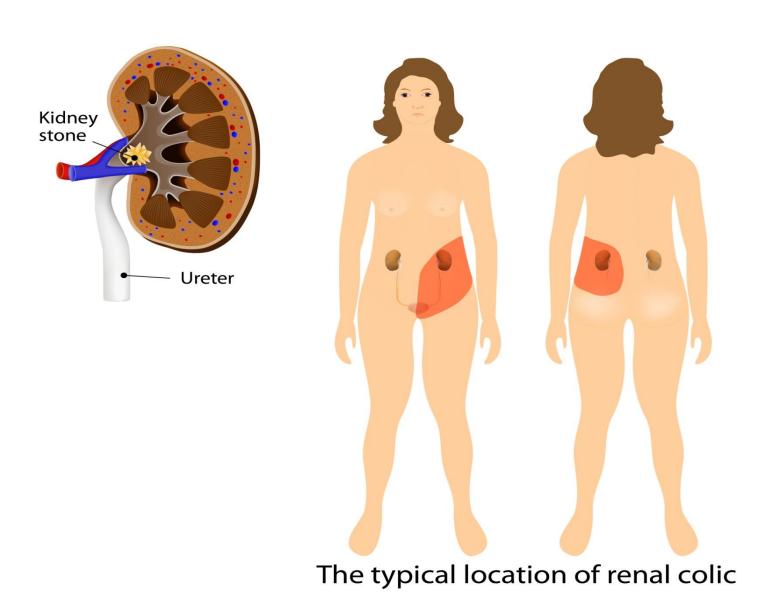
 Signs and symptoms of kidney stones may vary significantly.

 If the stones are small, they usually pass through urine by themselves (occult passage).

 And if they are big, they stuck in the kidneys and do not cause any symptoms. However, a prominent symptom is flank pain that sometimes radiates down to the belly or groin. The pain occurs when the stones start moving and it is sometimes very severe and intolerable.

 Other signs and symptoms are frequent urination, blood in urine, nausea, vomiting, and infection.

KIDNEY STONE







Risk factors:

Calcium Oxalate or Phosphate:

- High level of calcium in urine.
- High level of uric acid in urine.
- High level of oxalate in urine.
- Low level of citrate in urine.
- Dehydration.
- Consumption of too much animal-based proteins.

- Hereditary.
- Sarcoidosis.
- Hyper active thyroid gland.
- Hyper active parathyroid gland.
- Acidic diet.
- High oxalate intake.
- Vitamin D toxicity.

- Magnesium deficiency.
- Obesity.
- Prolonged immobility.
- Very high doses of vitamin C.
- Crohn's disease.
- Poor absorption.
- Poor fiber diet.

Struvite (Triple Phosphate):

- Increased calcium in urine for any reasons.
- Increased oxalate in urine for any reasons.
- Anomalies of the anatomy of the urinary tract system.
- Kidney or urinary tract infections.
- Gender: females.

Uric Acid:

- Dehydration.
- Gout.
- Increased level of uric acid in urine.
- Chemotherapy.
- Some blood diseases.
- Excess dietary purines.
- Persistently acidic urine.

Cysteine:

Increased level of cysteine in urine.

Nutritional Supports:

 Depending on the type of the stone, nutritional advice varies.

Calcium Oxalate or Phosphate:

Restricted Foods:

- Red meats.
- Vegetables high in oxalate: spinach, rhubarb, beet, okra, collards, celery, eggplants, kale, green beans, potatoes, sweet potatoes, parsnips, green pepper, watercress, and parsley.
- Fruits high in oxalate: berries, figs, kiwi, grapefruit, and concord grapes.
- Legumes.

- Nuts and seeds high in oxalate: almonds, peanuts, Brazil nuts, hazelnuts, pecans, sesame seed, and sunflower seeds.
- High dose of Vitamin C
- Too much salt.
- Alcohol.
- Caffeine.
- Refined sugars.
- Soft drinks.
- Antacids containing aluminum.

Recommended Foods:

- Drinking plenty of water: over 2 liters a day.
- Cranberry juice.
- Foods high in magnesium: bananas, avocado, coconut, cashews, corn, barely, brown rice and oats).

Struvite (Triple Phosphate):

 Recommendations are the same of those for kidney stones of calcium oxalate or phosphate types.

Uric Acid:

Restricted Foods:

- Beef, Pork, Chicken, Turkey.
- Fish (sardines, herring, mackerel, anchovies).
- Sweetbreads (animal thymus).
- Eggs.
- Beef kidneys.
- Liver.
- Animal brain.
- Scallops, Shrimps, Mussels.
- Meat broths and gravies.

- Beans (legumes).
- Spinach.
- · Rhubarb.
- Mushroom.
- Asparagus.
- · Cauliflower.
- Beer.
- Alcohol.
- Refined sugars.

Recommended Foods:

- Water, more than 3 liters a day.
- Flaxseed.
- Celery.
- Fish (salmon, cod, halibut).
- Lime.
- Lemon.
- Vinegar.
- Soy protein.
- Dairy products (low fat).

Cysteine:

Restricted Foods:

- Acidic diet.
- Foods high in methionine: soy, dairy products, wheat, fish, lima beans, chick peas, egg whites, and all nuts except hazelnuts.

Recommended Foods:

- Water: more than 2 liters a day.
- Alkaline diet.

Recommended Supplements:

Magnesium: 200 – 400 mg a day.

Potassium citrate: 100 mg a day.

Vitamin B6: 50 mg a day.

Inositol hexaphosphate (IP-6): 120 mg a day.

Aloe vera juice: ¼ - ½ cup three times a day.

Vitamin E: 400 – 800 IU a day.

 Ammonium chloride (for struvite stones only): 300 – 600 mg a day.

Cranberry extract: 400 – 800 mg a day.

Grape seed extract: 50 -100 mg a day.

 French Maritime Pine Bark Extract: 50 – 100 mg a day.

Benign Prostatic Hyperplasia (BPH):

 Benign prostatic hyperplasia (BPH) is an agerelated and non-malignant enlargement of the prostate gland.

• It is a very common disease in men, affecting about 50% of men age over 50.

 In BPH, the prostate gland gets enlarged and compresses the urethra passing through, leading to partial obstruction of the urinary tract.

Enlarged Prostate Gland

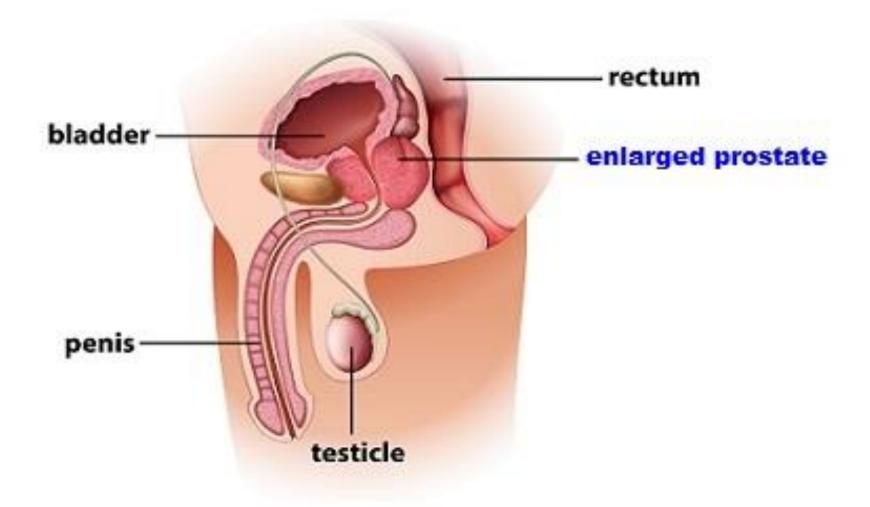
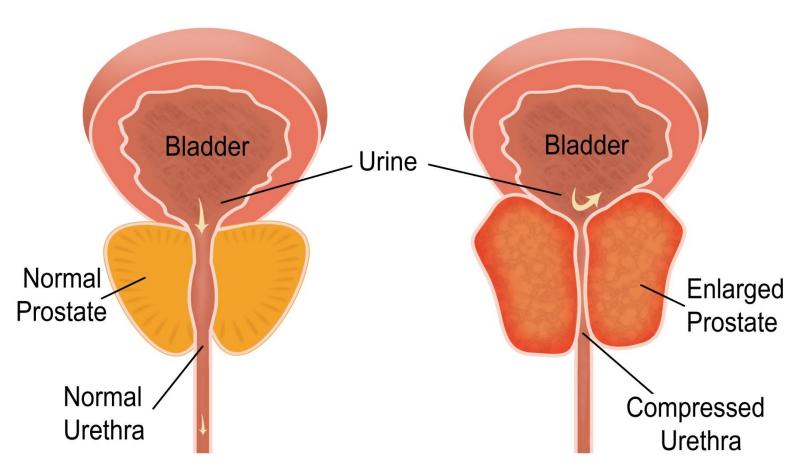


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BENIGN PROSTATIC HYPERPLASIA

NORMAL PROSTATE

ENLARGED PROSTATE



The exact cause of hyperplasia is unknown.

 However, age-related hormone imbalance could be a key contributing factor.

 It is believed that dihyrdotestosterone (DHT), an active metabolite of testosterone, has an important role in the process.

The signs and symptoms of BPH are related to the compression of the urethra, and they include

- decreased caliber and force of the urinary stream
- increased frequency of urination
- dribbling
- hesitancy
- incomplete emptying of the bladder

- burning feeling with urination
- nocturia (increased nighttime urination)
- urinary tract infections

Restricted Foods:

- Saturated fats.
- Trans-fats.
- Sugar and sweets.
- Processed foods.
- Alcohol.
- Coffee.
- Caffeinated beverages.
- Soft drinks.

 Foods high in tryptophan. Tryptophan may increase the secretion of prolactin. This hormone increases the uptake of testosterone by the prostate, which may aggravate the enlargement.

 Black pepper. It may aggravate symptoms of BPH.

Recommended Foods:

- Drinking plenty of water: at least 2 liters a day.
- Whole grains.
- Foods high in fiber.
- Legumes.
- Flaxseeds.
- Pumpkin seeds.
- Foods high in zinc: legumes, sunflower seeds, and pumpkin seeds.

- Cold water fish.
- Garlic.
- Fresh fruits and vegetables: 6 to 8 servings a day.
- Foods high in lycopene: gac, tomato, watermelon, and grapefruit.

Food high in bioflavonoids: berries.

 Foods high in amino acids glycine and alanine. These two amino acids reduce symptoms of BPH.

 Soy products. They contain phytosterols, which improve symptoms of BPH. Reishi mushroom. It contains ganoderic acid, a phytonutrient that reduces the conversion of testosterone into dihydrotestosterone (DHT) by inhibiting the enzyme 5-alphareductase.

Recommended Supplements:

- Omega 3 fatty acids: 2 -3 grams a day. It reduces inflammation.
- French Maritime Pine Bark Extract: 100 200 mg a day. It reduces inflammation and improves blood circulation.
- Grape seed extract: 50 100 mg a day.
- Zinc: 50 100 mg a day.

- Saw Palmetto: 320 640 mg a day. Saw palmetto inhibits conversion of testosterone into dihydrotestosterone (DHT).
- Beta-sitosterol: 60 -120 mg a day.
- Rye pollen extract (cernilton): 500 1000 mg a day. Cernilton reduces inflammation, improves symptoms of BPH, and blocks the growth of prostate cells.
- Pygeum africanum (containing 13% total sterols): 100 – 200 mg a day.

 Nettle root extract: 120 – 240 mg a day. It reduces symptoms of BPH.

Glycine: 500 – 1000 mg a day.

 Alanine: 500 - 1000 mg a day. Along with glycine and glutamic acid, alanine may reduce symptoms of BPH.

 Multivitamins – Multiminerals: A high potency product.

Miscellaneous Suggestions:

 Exercise: studies show that there is a link between an increased physical activity and a decreased risk of developing BPH.

Liver detoxification.

Colon cleansing.

Homework:

• 1) Describe the dietary changes in people with kidney stones of oxalate type.

• 2) Describe few supplements that might be useful in a case of enlarged prostate.