Clinical Studies on Bilberry (Vaccinium myrtillus)

Author/Year	Subject	Design	Duration	Dosage	Preparation	Results/Conclusion
Muth et al., 2000	Night vision and contrast sensitivity	DB, PC n=15 males, all except 2 with good vision (ages 25–47 years)	90 days	160 mg, 3x/day (25% anthocyano- sides)	Not specified	Study failed to find an effect of bilberry on night visual acuity (VA) (p>0.15) or night contrast sensitivity (CS) (p>0.35) for a high dose of bilberry taken for a significant duration. Hence, this study casts doubt on the proposition that bilberry supplementation, in forms currently available and in doses recommended, improves night VA or night CS.
Perossini et al., 1987	Retinopathy (patients with diabetic retinopathy, n=35; hyper- tensive vascu- lar retinopa- thy n=5) (stage IV excluded)	DB, PC n=40	30 days	160 mg 2x/day	Tegens [™] 160 mg capsule	Improved opthalmoscopic and angiographic patterns were demonstrated in 77–90% of the patients. Concluded to be an effective and safe treatment of diabetic and hypertensive retinopathy. (No statistics reported.)
Repossi et al., 1987	Early diabetic or hyperten- sive retinopa- thy	DB, PC n=40	l year	I60 mg 2x/day	Tegens [™] I 60 mg capsule	Improvements were observed in 50% (vs. 20% in control group). Patients with exudate deposits improved in 15% of the cases (vs. 10% control group). A lower percentage of patients (10% vs.15%) with hard exudates worsened.
Vannini et al., 1986	Nighttime vision in healthy sub- jects	DB, PC n=40 (mean age 25.5 years)	2 hours	240 mg/single dose	Myrtocyan®	Improved pupillary photomotor response, most evident 2 hours after administration; decreased total pulpillary contraction time (p<0.05); increased pupillary contraction (p<0.05).
Orsucci et al., 1983	Diabetic retinopathy in Type II dia- betes mellitus	O n=10	6 months	80 mg 3x/day	Tegens [™] 80 mg capsule	Improvement in retinal picture; reduction or disappearance of hemorrhages.
Scharrer and Ober, 1981	Diabetic retinopathy	O n=31: 2 with hemorrhages due to anticoagulants, 4 with arterial sclerosis with hemorrhages of the retina, 20 with diabetic retinopathy (Keith Wagner Stages II and III)	4 weeks	Two, 80 mg capsules 3x/day	Difrarel 100™ capsule	Reduced vascular permeability during treatment. Mitigated changes of retinal vessels and prevented alterations in the visual field. (No statistics reported.)

KEY: C – controlled, CC – case-control, CH – cohort, CI – confidence interval, Cm – comparison, CO – crossover, CS – cross-sectional, DB – double-blind, E – epidemiological, LC – longitudinal cohort, MA – meta-analysis, MC – multi-center, n – number of patients, O – open, OB – observational, OL – open label, OR – odds ratio, P – prospective, PB – patient-blind, PC – placebo-controlled, PG – parallel group, PS – pilot study, R – randomized, RC – reference-controlled, RCS – retrospective cross-sectional, RS - retrospective, S – surveillance, SB – single-blind, SC – single-center, U – uncontrolled, UP – unpublished, VC – vehicle-controlled.

Clinical Studies on Bilberry (Vaccinium myrtillus) (cont.)

	Subject	Design	Duration	Dosage	Preparation	sufficiencies, etc.) Results/Conclusion
Gatta et al., 1988	Venous insufficiency (various causes)	SB, PC n=60 (mean age 44 years)	30 days	160 mg 3x/day	Tegens™ 160	Decreased severity of edema, sensations of pressure, paresthesia, and cramp-like pain were observed in the bilberry group (p<0.01 for all outcomes).
Gentile et al., 1987, unpub- lished	Preventive bleeding due to otorhi- nolaryngologi- cal surgery	SB, PC n=181 (ages 3–76 years)	10 days prior to surgery	160–320 mg/day dosed according to clinical symp- toms	Myrtocyan®	Reduced intra- and postoperative bleeding and prevent ed subsequent hemorrhaging when treated with bilberry before surgery. (No statistics reported.)
Teglio, 1987	Venous insufficiency symptoms in pregnant women	n=51 (mean period of pregnancy 27 weeks) (mean age 30 years)	3 months	160, 240, 360 mg/day dosed according to symptom severity	Tegens™	Reduction in symptoms of pruritus (94.6%), paresthesia (87.5%), cramps (80.1%), pain (78.5%), exhaustion and heaviness (60%), and hemorrhoidal symptoms (75.5–83%).
Allegra et al., 1982	Peripheral vascular disorder	DB, PC n=47	30 days	480 mg/day	Myrtocyan®	Decreased edema, paresthesia, and pain while increasin joint mobility in patients with Raynaud's disease.
Grismondi et al., 1981	Phlebopathies induced by pregnancy	n=54 (ages 24–37 years)	60–90 days	320 mg/day started in 6th month of pregnancy	Myrtocyan®	Improvements in burning and itching (p<0.001), heaviness (p<0.001), and pain (p<0.001) were observed in bilberry users, as well as in diurnal and nocturnal cramps (p<0.01), and a reduction in edema and in capil lary fragility (p<0.001).
Ghiringhelli et al., 1977	Varicose veins of lower limbs	O n=47 (mean age 45 years)	30 days	480 mg/day	Myrtocyan®	Bilberry significantly improved symptoms such as limb edema and dyschromic skin phenomena as well as heav iness, paresthesia, and pain.
Mian et al., 1977	Ulcerative dermatitis due to post thrombo- phlebitis	O n=15	IO days	240 mg/day	Myrtocyan®	Bilberry reduced the protein content of the exudate produced by venous occlusion and stasis, a symptom o post-thrombotic and varicose veins stasis. (No statistic reported.)
Other						
Author/Year	Subject	Design	Duration	Dosage	Preparation	Results/Conclusion
Colombo, 1985	Chronic dysmenorrhea	DB, PC n=30	3 days prior to and during the cycle	320 mg/day	Myrtocyan® capsule	Bilberry significantly reduced dysmenorrhea symptoms including headache, heaviness of lower limbs, mammary tension, sickness and emesis, and pelvic and lumbosacra pain by the second month.
Cerutti et al., 1984	Side effects of copper IUD's	n=48	6 months	Two, 160 mg capsules 2x/day	Myrtocyan®	Decreased incidents of spotting and hyperpoly-menor- rhea were observed in bilberry users.
cohort, MA – mer PG – parallel gro	:a-analysis, MC – mu up, PS – pilot study	lti-center, n – number	of patients, O – ope C – reference-contr	n, OB – observationa	ıl, OL – open label, OF	– cross-sectional, DB – double-blind, E – epidemiological, LC – longitudin: R – odds ratio, P – prospective, PB – patient-blind, PC – placebo-controllec RS - retrospective, S – surveillance, SB – single-blind, SC – single-cente