Pathways to Healing

by Elaine Zablocki

Pharmacist Looks at Herbal Remedies

Darrell T. Hulisz, RPh, PharmD, an associate professor in the Department of Family Medicine at Case Western Reserve University School of Medicine, has a sharp grasp of scientific methods and clinical research. As a clinical pharmacist, he fields questions from patients who want to use natural healing methods, and he applies stringent analytical tools when he considers various herbal medicines.

At the same time, he is enthusiastic about herbal research that's under way. "There is some emerging data that is really exciting," he says. "There is preliminary evidence on the potential effectiveness of butterbur for migraine headache, and black cohosh for menopause symptoms. There are quite a few herbal medicines that I think are likely to pan out once well-done studies become available."

Hulisz warns that there are limitations on the information currently available about many herbs. "There are so many variables with botanicals that it makes standardization very difficult for people like me who tend to think very concretely about medicinals. How was it grown, which species was used, what part of the plant was used? Studies have shown there are many different forms of ginseng, and some marketed ginseng isn't labeled accurately. In addition, some of the clinical studies have small sample sizes, short duration, generally not a lot of blinding or placebo-controlled studies. That limits the value of those studies."

After taking these limitations into account, Hulisz still recommends a number of herbs in specific situations when patients ask for natural remedies. "There is adequate evidence for using echinacea for the common cold, but the trick is that it has to be started early on, with the first sign of symptoms," he says. He notes that echinacea is closely related to ragweed, so people who are allergic to ragweed should not take echinacea. Also, echinacea is not recommended for people who have progressive or autoimmune disorders, such as AIDS, tuberculosis, multiple sclerosis, collagen disorders, and diabetes.

Garlic is used therapeutically by many consumers to prevent heart disease by controlling high cholesterol and high blood pressure. Garlic can reduce the ability of blood to clot and inhibits platelet aggregation; this could present problems for people who are using blood-thinning medications or who have platelet disorders. Use garlic with caution if you are planning to have surgery or dental work. "The lack of standardization of garlic products and formulations makes it difficult to recommend a dose or specific product," Hulisz says. "To lower blood cholesterol levels, patients may benefit from taking 600 to 1200 mg of garlic powder daily in divided doses, or up to 4 g of raw garlic daily."

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He considers ginger a useful remedy in three different clinical scenarios: motion sickness, nausea and vomiting during chemotherapy, and nausea and vomiting during pregnancy. "Clinical trials show the greatest evidence of efficacy when the entire root is used. The root has the volatile oils," he notes. "Let me be clear there are pharmaceutical drugs that are more effective, but for someone who is interested in a natural alternative, there is data to support the use of ginger root. A pregnant woman should discuss this first with her doctor." He cautions that ginger can make heartburn worse, and that it should not be used together with anticoagulant medications.

For information on additional herbs, Hulisz recommends a National Center for Complementary and Alternative Medicine (NCCAM) website that offers one-page fact sheets on many herbal remedies: http://nccam.nih.gov/health/herbsataglance.htm.