BIOFORCE CONFERENCE ON PHYTOTHERAPY RESEARCH

Herbal medicines' potential for adverse effects needs better pharmacovigilance

The Second Bioforce conference on phytotherapy research was held in Glasgow on 27 and 28 March with input from a number of pharmacists. Dr Steven Kayne reports

Herbal medicines have a potential for adverse effects that is not yet effectively covered by pharmacovigilance procedures, the conference was told.

Dr JO BARNES (lecturer in phytopharmacy, Centre for Pharmacognosy and Phytotherapy, School of Pharmacy, University of London) said that herbal medicines are widely perceived by the public to be safe despite evidence for the occurrence of adverse effects, including important interactions with conventional medicines. Adverse effects could also arise from problems with the pharmaceutical quality of unlicensed herbal medicines, from intrinsically toxic constituents, as a side effect related to the desired pharmacological effect, as a result of excessive ingestion, or through inappropriate use by specific patient groups such as pregnant women.

Many herbal medicines have a long history of traditional use, but lack formal investigation of their efficacy, toxicity and safety profiles. Despite the potential risks, pharmacovigilance for herbal medicines is still in the early stages of its development in the United Kingdom. Established pharmacovigilance methods used for conventional medicines, such as prescription event monitoring, have major limitations with regard to monitoring the safety of herbal medicines.

Spontaneous reporting schemes such as the Medicines Control Agency's yellow card scheme for adverse drug reaction reporting are currently the main method used for monitoring the safety of herbal medicinal products. Reports for both licensed and unlicensed herbal products are requested from health care professionals. It is likely that the scheme will be extended to herbal practitioners in the future.

In an observation study, MARGARET RITCHIE (Department of Molecular and Cellular Pathology, University of Dundee) and colleagues provided evidence of a herb/drug interaction between a phytoestrogen supplement and contraceptive medication in pre-menopausal women. Investigation of herb/drug interactions and the dissemination of the findings were essential to assist all health care professionals involved in the provision of care and advice.

Evidence base needed

Acquiring an evidence base for complementary and alternative medicine is vital for a variety of reasons, said Dr STEVEN KAYNE (community pharmacist, Glasgow).

Drawing a distinction between outcome measures based on efficacy and those based on effectiveness, Dr Kayne explained that existing orthodox methods of assessing therapeutic outcomes seek to provide evidence of efficacy and are based on randomised clinical trials under ideal conditions. However, such trials have inadequacies when applied to complementary disciplines, and evidence from this source does not always reflect day-to-day usage. It is therefore more appropriate to investigate the effectiveness of complementary interventions, based on patient oriented outcome measures rather than their efficacy. In order to convince licensing authorities to accept indications for use, based on observational data, new measures were currently being developed at Glasgow Homoeopathic Hospital, he said.

Pharmacy training

During a session devoted to pharmacy training, CLARE DOUGLAS, a pharmacist working with Bioforce in Irvine, Ayrshire, said that the Royal Pharmaceutical Society's Code of Ethics required pharmacists to keep up to date and undertake appropriate training before undertaking specialist services such as homoeopathy and herbalism. It was important that the public were given the right advice so that they could make informed decisions.

Zulu folk medicine

In a presentation on South African medicinal plants used in Zulu folk medicine, John A. O. OJEWOLE, from the Department of Pharmacology, School of Pharmacy & Pharmacology, Faculty of Health Sciences, University of Durban-Westville, told the audience that plants constitute an important aspect of the daily lives of many South Africans and form an important part of their cultural heritage. Despite the technological advancement in modern medicine, many people in South Africa still rely on traditional healing practices. There are an estimated 200,000 indigenous traditional healers in the country, and about 80 per cent of South Africans consult these healers and use medicinal plants for their daily primary healthcare needs, usually in addition to using modern biomedical services. Traditional healers in South Africa are most commonly known in Zulu language as "inyanga" and "isangoma"

Echinacea

Despite the widespread use of echinacea in the treatment and prophylaxis of human illnesses, there is relatively little scientific literature investigating the nature of interactions of the plant components with the human body, reported SALLY CASSELLA and Dr JOHN CASSELLA (division of biological sciences, School of Health and Community Studies, University of Derby). Much more research is required to identify the complex mechanisms involved.