Session 1:
Formulation approaches in
Traditional Herbal Medicine

Naturopathic Medicine Department
Assessments

- For this subject you will have three assessments:
  1. **Individual presentation with slides.** These will be scheduled weeks 4 to 13, and summarise an appropriate herbal management strategy for a case of your choosing. You need to demonstrate good research skills and a sound understanding of the biomedical and naturopathic aspects of the case.
  
  [https://www.youtube.com/watch?v=aVckGxQvGeA&feature=youtu.be](https://www.youtube.com/watch?v=aVckGxQvGeA&feature=youtu.be)

  2. **Mid Semester Exam** with 2 case studies taken from weeks 1 to 6. Conducted in class, week 7.

  3. **Final Exam** with 2 case studies, one taken from content from sessions 7 to 13, the other a complex multifactorial case taken from content from sessions 1 to 13.
Traditional Formulation

Numerous theories have been developed in regards to herbal formulation over thousands of years of traditional herbal practice around the world.

From Multi-herb formulas such as TCM’s ‘The Ten Precious Herbs Formulation’ and drop doses of single herbs to the often emetic doses of The Eclectics.

The delivery of herbal medicine is nearly as varied as the herbs themselves. When it comes to herbal formulation and dosage there is no one set of specific guidelines. The craft of the herbalist is to amalgamate these theories into a practice that is safe and effective for their patients.

The one thing that permeates through all of these theories is the adherence to The Naturopathic Principles and The Naturopathic Order.
Holism

Our aim is to restore equilibrium on all levels within the individual organism is to achieve health. 

Priest & Priest (1982)

• The theory of Holism is perhaps the most fundamental principal of Western Herbal Medicine.

• Not only does it dictate all areas of practice from consultation and assessment, to treatment plans and herbal formulations, it is also the key concept that separates us from conventional medicine.

• As practitioners understanding the dynamism of the body and its interconnected systems, will always bring us back to the whole when developing, building and dosing herbal formulas.
Traditionally conventional medicine is based on a reductionist theory. This places emphasis on the smallest functioning parts of the organism - the molecule. Thus disease is defined in terms of chemical and molecular changes in isolated, local tissues and treatment is by purified molecular substances.

Holism Vs Reductionism: In Research

• The contradictory nature of these two theories is no more obvious than within the realm of scientific research.

• Some argue that the fundamental structures and techniques present in current systems of scientific research limit the applicability of research results in WHM practice.
‘When it comes to research we have to ask ourselves: “If the active chemical molecule is extracted from the chemical matrix of the plant will it act in a similar way? Will the therapeutic effect be the same?”

‘Research techniques that determine to isolate and remove active chemical constituents of herbal products threatens to change the definition and application of herbal medicine. This type of research can draw us away form the basic principals of holism’.

Can research be clinically relevant if it is being studied from a perspective that is theoretically contradictory? Does this increase or reduce the chances of bias?

These issues and concepts cannot be ignored and it is the challenge of the Modern Herbalist to competently interpret and analyse research in relation to these issues. To integrate the Traditional and the Scientific.

Niemeyer, Bell & Koithan (2013)
A Change In the Paradigm

• Historically, conventional science’s strength was its ability to reduce complexity to its smallest parts. It is ‘unprecedented in its understanding of the constituents of life and nature’ though it has ‘been poor in the understanding or predicting the behaviour of life and nature itself’. Bone (2013).

• This paradigm within conventional medicine is now shifting.
A Change In the Paradigm

- Chronic diseases such as Cancer, Diabetes Type II and HIV are a world wide health crisis. Epidemic scale of these diseases are challenging health systems globally.

- These diseases are complex multi system diseases, involving multiple organs and chemical pathways...individual cases display multiple sometimes seemingly unrelated symptoms, causes and prognosis.

- The global evolution of these types of diseases has forced conventional medicine to revisit its reductionist approach and adopt a more holistic view of bodily systems and the diseases that interact within them. This transition in ideology and practice could well be a beneficial one for herbal medicine.
A Change In the Paradigm

- This ‘reductionist approach’ has been characterised over the past 150 years by the ‘silver bullet’ or ‘single drug’ approach to pharmaceutical treatment.

- This search for the next ‘blockbuster’ was for a long time the main objective of pharmaceutical and medical industry research.

- While proving unsustainable and unsuccessful in the treatment of complex system based diseases, this approach is also proving to be one of the main causes of Antimicrobial Drug Resistance (AMR).

- Single and Multi-drug resistant organisms are now a serious global concern. WHO (2014), has called AMR ‘an increasingly serious global threat to public health’.
Synergy & Multi-Drug Treatment

- A new generation of multi drug treatments are now commonly used to treat multi-system diseases. With this comes a more holistic view of disease.

- E.g., Caduet is indicated for coronary heart disease and is a combination of Amolodipine, a Calcium Channel antagonist and Atorvastatin, a HMG-CoA reductase inhibitor. Thus working as a hypotensive and lowering cholesterol, to overall reduce cardiovascular risk (Rather, Bhat & Qurishi, 2013).
What is Synergy

Synergy is defined as ‘The whole is greater than the sum of its individual parts’, and comes in different forms:

- **Reinforcement** – herbs with similar medicinal properties combine for greater efficacy. Can be an additive or synergistic effect. E.g. *Panax ginseng* and *Ginkgo biloba* synergistically improve cognitive function.

- **Potentiation** – where one herb is the principal herb, and is combined with an adjunct / auxillary herb which boosts the strength or longevity of the principal herb. E.g. use of *Piper nigrum* with *Curcuma longa*.

- **Counteraction** – defences against a herb are reduced or counteracted by another herb. E.g. non alkaloid constituents of *Mahonia aquifolium* have been found to reduce bacterial resistance to the active alkaloid constituents.

- **Restraint and detoxification** – toxic or adverse effects of a herb are mitigated by another herb. E.g. use of a carminative with purgative / laxative herb which may have otherwise caused griping.

(Che, Wang, Chow & Wai Kei Lam, 2013).
Synergistic Drug-Herb Combinations

- Bioactive plant extracts are being co-administered with antibiotics to combat microbial drug resistance, being shown to be ‘synergistic enhancers’ plant extracts are displaying benefits such as:

1. Increased efficacy
2. Reduction in undesirable effect
3. Increased stability or bioavailability of the free agents
4. Dose reduction due to facilitation of therapeutic actions

(Chanda & Rakholiya, 2011).
Table I: Antimicrobial herbs being prescribed alongside antibiotics, to treat specific infection.

<table>
<thead>
<tr>
<th>Herb</th>
<th>Solvent</th>
<th>Antimicrobial Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Rosmarinus officinalis</em> L. (Lamiaceae)</td>
<td>EO</td>
<td>Gentamicin, cephalothin, ceftriaxone, nystatin</td>
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<tr>
<td><em>Coriandrum sativum</em> L. (Apiaceae)</td>
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<tr>
<td><em>Micromeria fruticosa</em> L. (Lamiaceae)</td>
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<tr>
<td><em>Cumimum cymimum</em> L. (Apiaceae)</td>
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<tr>
<td><em>Mentha piperita</em> L. (Lamiaceae)</td>
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<tr>
<td><em>Salvadora persica</em> Wall. (Salvadoraceae)</td>
<td>ET</td>
<td>Tetracycline, penicillin</td>
</tr>
<tr>
<td><em>Salvia officinalis</em> L. (Lamiaceae)</td>
<td>AQ</td>
<td>Sodium benzoate, sodium nitrite, potassium sorbate</td>
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<tr>
<td><em>Tectona grandis</em> L. (Verbenaceae)</td>
<td>ME</td>
<td>Tetracycline</td>
</tr>
<tr>
<td><em>Terespesia populnea</em> L. (Malvaceae)</td>
<td>ME</td>
<td>Oxytetracycline</td>
</tr>
<tr>
<td><em>Vangueria spinosa</em> Roxb. (Rubiaceae)</td>
<td>ET</td>
<td>Doxycycline, ofloxacbin</td>
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*Salvadora persica* Wall. (Salvadoraceae) prescribed with Staphylococcus aureus.


Synergy Drug-Herb Combinations

- In diseases such as cancer, treatment has moved away from specifically targeting organ related tumours, to treatment via suppression and activation of different processes and pathways that are necessary for tumor survival e.g. angiogenesis, apoptosis and immune system activation. (Rather et al. 2013).

- Plant extracts are proving beneficial within this treatment with herbs such as *Withania somnifera* showing continued inhibitory effects on angiogenesis and tumour growth factors.

- Myelo-protective and immuno-stimulatory effects and reductions in tissue necrosis have been seen when extracts of *W. somnifera* are administered in combinations with chemo-therapeutic agents. Importantly the beneficial effects of *W. somnifera* have not been shown to interfere with the efficacy of the concomitantly administered chemo-therapeutic drugs. (Winters, 2006)
<table>
<thead>
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<th>Table 3</th>
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<tbody>
<tr>
<td>Natural products and medicinal extracts exhibiting synergism with anticancer agents.</td>
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<tr>
<td>Source</td>
</tr>
<tr>
<td>Cotton seeds</td>
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<tr>
<td>Sanguisorba officianalissima</td>
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<tr>
<td>Glycyrrhiza max</td>
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<tr>
<td>Anethum semitectum</td>
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<td>Glycyrrhiza max</td>
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<tr>
<td>Glycyrrhiza max</td>
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<tr>
<td>Glycyrrhiza max</td>
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<td>Rosa sp.</td>
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<tr>
<td>Euphorbia lagascaeae</td>
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<td>Acacia indica</td>
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<td>Paraax notoginseng</td>
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<tr>
<td>Epilobium angustifolium</td>
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<tr>
<td>Glea sp. Oil</td>
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<tr>
<td>Tanacetum parthenium</td>
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<td>(L.)</td>
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<tr>
<td>Vitex vinifera seeds</td>
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<tr>
<td>Tofinis japonica</td>
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<tr>
<td>Tripterygium wilfordii</td>
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<tr>
<td>Hook.</td>
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<tr>
<td>Scutellaria baicalensis</td>
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<tr>
<td>Georji</td>
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<tr>
<td>Coleus vulcanicola</td>
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<tr>
<td>A plant alkaloid</td>
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<td>Camellia sinensis</td>
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</table>
Whole Herb Synergy - Dr John Scudder

- Prominent American Eclectic herbalist, Scudder, developed the herbal theory of ‘Specific medicine’ - based on the use of a small number of fresh plant, single herb remedies to treat specific indications and conditions.

- Scudder noted that ‘Specific Remedies’ were not specific to the named disease state, but to the characteristics and patterns expressed by the body in reaction to disease.

- An example of this is the herb Quinine considered specific for Malaria. Scudder argued that is was not indicated or effective in all cases of Malaria. Scudder’s specific indication for Quinine was in cases of Malaria with ‘a soft open pulse, a moist skin, and moist cleaning tongue’. (Scudder, 1903).
Whole Herb Synergy - John Uri Lloyd

John Uri Loyd, the founder of Lloyd's pharmacies, worked under Scudder and became the sole manufacturer of 'Specific Medicines'. Lloyd was a keen early advocate for the use of whole plant extracts in comparison to refined medical substances. Both Scudder and Lloyd queried the necessity of the large doses used by their fellow Eclectics though Lloyd also went on to dismiss Scudder's drop dose theory, eventually developing his own complex theory based on semi purified extracts. Lloyd touches on both these issues in the below excerpt from 1914 Strength Vs Quality:

"Let us define strength as a dominating something that stands out boldly, and which, in toxic drugs, produces a violent or energetic action, as does the poisonous something that produces death when an overdose of a toxic drug is administered. Let us define quality as a balanced combination of other something, with just enough of the toxic agent to make a complex product that, as a whole, has wider functions than are possible if the single death-dealing substance dominates’ (Lloyd, 1914)."
Whole Herb Synergy - The Research

**Hypericum perforatum:**

- Research has shown that the administration of isolated ‘active’ constituents hypericin and pseudohypericin were found to be ‘inactive’ when given individually. When only a small amount of procyanidins (itself thought to be inactive) was combined with these constituents, therapeutic activity was detected at relatively small oral doses.

- In-vitro research has also shown that the anti-depressant actions of standardised hypericum may also be due to the co-operative, multi-targeted actions of a collection of different constituents. Results show that various possible chemical targets are involved such as pre and postsynaptic neurons, the hypothalamus and pituitary (Rather et al. 2013).  

**Valerian officinalis:**

- Similarly a combination of the identified active constituents in *V. officinalis* responsible for its sedative activity (valtrate, isovalrate, valerenone and valeric acid) have shown in combination to reduce glucose metabolism in the brain. Though when these substances were tested individually similar results were not seen (Heinrich et al. 2004).
Synergy in Herbal Combinations - The Research

- **Iberogast** is an example of a multi targeted multi-herb formulation of 9 synergistic herbs. Addressing functional dyspepsia and intestinal motility disorders by reducing inflammation and GIT hypersensitivity, reducing gastric acid secretion and effecting afferent autonomic innovation within the GIT. It has been shown to be more effective at a lower dose than conventional mono drug therapy such as Cisapride, and with fewer side effects (Rather et al. 2013).

- **Glycyrrhiza glabra** is traditionally seen as a binding herb in TCM herbal formulas. Its enhanced neuromuscular blocking activity of Paeonflorin, when combined with *Paeonia lactiflora* (30:70) in traditional Chinese fertility formulations (Heinrich et al, 2004). The combination has been shown to reduce FHS:LH ratio and ovarian testosterone production as well as stimulating ovulation (Sarris & Wardle, 2010). *G. glabra* has also been shown to reduce toxic substances such as aconite alkaloids in herbal combinations (Heinrich et al. 2004).

- **Cinnamomum verum** and *Hoelen* (gui zhi fu ling wan) is a traditional Chinese herbal multi target combination for the treatment of Endometriosis. The combination has been shown to be anti-proliferative, anti-oxidant, anti-inflammatory and sedative. Promoting circulation, reducing blood stasis, muscular spasm and inflammation. To reduce overall adhesion size, pain and spasm. (Fang et al. 2012).
Synergy in Herbal Combinations - The Research

• Ayurvedic herbalists traditionally used *Piper nigrum* as a binding herb in their formulations. Research has shown *Piper nigrum* and *Piper longum* (Long pepper) contain the alkaloid *piperine* which increases the bioavailability and absorption of a number of substances (Heinrich et al. 2004).

• In combination with *Curcuma longa*, Piperine has shown to increase serum bioavailability of *Curcuma longa* by 20 fold. This is thought to be due to the inhibition of hepatic glucoronidation and intestinal metabolism (Jurenka, 2009).

• The combination of *Ginkgo biloba* and *Panax ginseng* showed significant and sustained improvements to cognitive function in comparison to individual herbal treatment.

• The combination of *Urtica dioica* and *Prunus africana* have been shown to inhibit the actions of 5α-reductase and aromatase more significantly in combinations than singularly, resulting in lowered circulating androgens in prostatic hyperplasia (Heinrich et al. 2004).
Energetics

‘If the action of a remedy is to oppose a process of disease, evidently its selection will depend, first, upon a correct knowledge of the disease, and second, upon a correct knowledge of this opposition of remedies to it.

'Specific medication and specific medicines’.

John Scudder, 1903
Energetics

• Through history Traditional Healers, Doctors and Herbalists have identified the energetic states of organs and systems in relation to disease.

• From TCM’s 5 elements and Yin and Yang, to the Ayurvedic Doshas and the Four elements/qualities/temperaments in Greek/Arabic medicine.

• Establishing the Energetics of disease helps the practitioner to perceive the whole pattern of disease.

• Having an understanding of the Energetics of herbal medicine, also aids the understanding of how the herb interacts synergistically with the system as a whole.

• Understanding herbal energetics can also help reduce exacerbation of disease symptoms.

• Matthew Wood’s ‘Six Tissue States’ theory draws numerous parallels to the ancient traditions mentioned above (see tables on next three slides).
<table>
<thead>
<tr>
<th>Energetics</th>
<th>Characteristic</th>
<th>Symptoms associated</th>
<th>Pathology</th>
<th>Treatment</th>
<th>Taste</th>
<th>Action</th>
<th>Pharmacology</th>
<th>Herbal Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hot / Excitatory</td>
<td>Over stimulation, Overactivity of organ or system. Heat, redness, tenderness, swelling, restlessness and lack of concentration.</td>
<td>Heat, redness, tenderness, swelling associated with autoimmune excess and exaggeration of function. Restlessness and lack of concentration. Dark and concentrated Urine</td>
<td>Classic symptoms of inflammation. Though not usually associated with infection, more due to the exaggerated function of or over reaction and stimulation of organs and systems. Causing tissues to be inflamed. eg. Autoimmune reactions</td>
<td>Cooling</td>
<td>Sour</td>
<td>Refrigerant Sedative</td>
<td>Flavonoids, Cyanogens, Limonene, Fruit Acids</td>
<td>Food Lemon, Lime, Blueberry Herbs RoseHip Hawthorn, Wild Cherry, Elderflower/Berry Cramp Bark Yellow Dock Lemon Balm, Lime Leaf, Yarrow, Lavender.</td>
</tr>
<tr>
<td>Cold / Depressed</td>
<td>Inability to respond to stimulus, tissue depression, lack of sensation, cold extremities.</td>
<td>Inactive skin, poor digestion, fatigue, sluggishness, pale, blue, black or grey tissue showing a reduction in oxygenation.</td>
<td>The opposite to that of heat, so in this state tissues are NOT responding to stimulus, reduced perspiration, and reduction in oils.</td>
<td>Warming</td>
<td>Pungent/Spicy</td>
<td>Stimulant, Aromatic, Antiseptic</td>
<td>Terpenes, Sesquiterpenes and Triterpenes, Coumarins, Resins, Volatile Oils</td>
<td>Food Rosemary, Thyme, Sage, Basil, Horseradish, Mustard, Cabbage, Fennel, Dill, Herb Wormwood, Elecampane, Cleavers, Red Clover, Echinacea, Baptisia, Lavender.</td>
</tr>
<tr>
<td>Dry / Atrophy</td>
<td>Lack of fluids (water &amp; oil). Reducing the ability of the body to deliver nutrients and excrete waste products.</td>
<td>Dry, wrinkled, withered hardened tissue. Hair falling out, weakness, bloating, gas, constipation, hard stools, cracking of the tongue.</td>
<td>Dehydration of tissues, lack of lubrication of tissues. This prevents the transport of nutrients to tissues, causing malnutrition. Reduced secretions of the digestive system.</td>
<td>Moistening &amp; Nourishing</td>
<td>Salty &amp; Sweet</td>
<td>Moistening Nutritive</td>
<td>Mucilages, Emollients (salts), Carbohydrates, Non Alkaloidal Bitter, Steroidal Saponins,</td>
<td></td>
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<tr>
<td>Damp / Stagnation</td>
<td>Excessive fluid caught on tissue, that is not able to be removed and excreted by the body. Thickening and collecting of waste products, resulting in cold (water is cold).</td>
<td>Fluid retention, thickening of fluids and mucous. Excessive phlegm and catarrh. Thick white/yellow coat on tongue. Symptoms worse in the morning and after eating and after alcohol.</td>
<td>Inability for the body to clear metabolic waste, causing a build up. Reduced functioning of the systems of elimination, lymphatic stagnation, and lowered metabolic function. Increased toxicity, increased susceptibility to chronic infection.</td>
<td>Purifying</td>
<td>Bitter</td>
<td>Alterative, Laxative, Purgative</td>
<td>Alkaloidal Bitters, Diterpenes, Iridoid glycosides, anthraquinones,</td>
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<td></td>
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<td></td>
<td>Foods Dulse Rhubarb Herbs</td>
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<td></td>
<td></td>
<td></td>
<td>Herbs Dandelion Burdock Iris Yellow Dock Poke Root Nettle Chickweed Barberry Oregon Grape</td>
<td></td>
</tr>
</tbody>
</table>
### Damp / Relaxation

- Continuous loss of fluids from the body. Due to lack of tone in tissues.
- Excessive perspiration, urination, menstruation, diarrhoea. Pale cold and clammy skin, veins show through pallor, low energy, yeast infections or vaginitis, easy vomiting in children.
- Body is unable to hold fluids and nutrients. Anemia can be present.

- Tightening
- Puckering
- Astringent
- Tannins

#### Spice
- Sumac

#### Herbs
- Ladies Mantle
- Rasberry Leaf
- Bayberry
- Agrimony

### Wind / Tension

- Physical and psychological tension. Conditions that come on suddenly and resolve suddenly, or relapse and remit.
- Alternating Constipation & Diarrhoea or Fever and Chills. Gas and Bloating that comes and goes, and symptoms that reverse normal movement - hiccups, nausea, vomiting, cold hands and feet, cold joints.
- Excessive tone of the nervous system, resulting in constriction and tension. This can be mental, physical or both.

- Relaxing
- Acrid
- Relaxant
- Acrid Bitters - Resins and alkaloids, Valerianic Acid

#### Foods
- Cabbage

#### Herbs
- Chamomile, Valerian, Passionflower
- Kava, Catnip, Calendula

(Wood, 2008)
The Naturopathic Therapeutic Order

In relation to herbal formulation and dosage, the Naturopathic Therapeutic Order helps practitioners develop appropriate sequential interventions:

1. Establish the Conditions for Health
   By addressing the Determinants of Health:
   a) Identify and remove disturbing factors (obstacles to cure)
   b) Institute a more healthful regimen

2. Stimulate the Vis Medicatrix Naturae

3. Tonify Weakened Systems

4. Correct Structural Integrity

5. Address Pathology:
   a) Natural Substances
   b) Pharmacologic or Synthetic Substances

6. Suppress or Surgically Remove Pathology
The Naturopathic Therapeutic Order

Priest and Priest (1982), also outlined a similar set of guidelines to treatment to guide the order of therapeutic treatment, focusing more on the vitality of the system being treated. These principals are also helpful when it comes to adequate dosing of herbal formulas:

1. Review the efficiency of the depurative functions and balance the circulatory and nervous systems, avoiding deep alterative changes while there remains any deficiency in the eliminative organs or in the transport systems.

2. Carefully assess any particular organ or system weakness before stimulating activity which would throw extra strain upon that system. This applies especially to the condition of the heart and lungs.

3. Assess the degree of general encumbrance in relation to the energy reserve, and avoid promoting an acute eliminative phase until the reserve has been sufficiently restored.
Building a Synergistic Herbal Formulation

• Each Phytotherapeutic substance has its strengths and weaknesses and a well designed herbal formulation is carefully crafted to accentuate the strengths and reduce the side effects.

• TCM herbal formulations are often a good example of traditional synergistic prescribing. They often establish hierarchical herbal layers to increase the overall therapeutic action of the formulation.

• Rather than a random group of herbs, the herbs are selected and proportioned to perform different roles and increase the efficacy of the formula…
Synergistic Herbal Formulation
The Emperor

- Also known as The Chief.

- The most important or indicated herb in the formula.

- Chosen primarily to address the major presenting symptoms and is the most specific herb to the condition being treated. This herb is usually given the highest dosage in the formulation.
Synergistic Herbal Formulation

The Minister

- Also known as The Deputy.
- The Minister herbs can be an adjunct herb to the Emperor. Reinforcing and supporting the actions of the Emperor herb.
- Alternatively it helps to address minor symptoms of the condition being treated.
- Warming herbs are often used as assistant herbs, helping to open the channels of the body, promoting peripheral dilation aiding blood flow, to promoting the delivery of active constituents to target tissues. Increasing bio-availability and absorption, and also to reduce pain associated with cold, e.g. Black Pepper and Cayenne Pepper.
- Diaphoretic herbs (Elder, Yarrow, Peppermint, Hyssop) are common Minister Herbs often used to promote sweating, open pores and expel pathogens - these actions all help to support the Emperor herb.
Synergistic Herbal Formulation
The Assistant

• Assistant has 3 main functions:

• 1. **The Helpful Assistant** - Reinforce the effects of the chief or deputy ingredient, or directly treat a less important aspect of the disease, e.g. Adrenal/Nervine Tonics or anxiolytics in an Adaptogen mix. To support underlying pathologies or reduce exacerbating symptoms.

• 2. **The Corrective Assistant** - Moderating or eliminating the toxicity or harshness of the chief or deputy ingredients. Or tempering the more drastic effects of the high dose herbs (ginger in a liver mix to counteract nausea).

• 3. **The Harmonising Assistant** - Balancing the temperature/energetics of a mix. For example balancing a bitters (energetically cold) mix with a warmer herb such as Angelica, Chamomile, Ginger so that it does not excessively cool digestion.

• This becomes more important if the condition being treated is exacerbated by temperature, if the climate is extreme or the patient is climactically sensitive.
Synergistic Herbal Formulation
The Servant

- Also known as the Envoy, Messenger, Guide or Conductant.
- Helps direct the essence of the herbal formula to the target areas, channels, organs and tissues of the body.
- To harmonise and integrate the actions of the other ingredients. These herbs are traditionally known as binding herbs, e.g. *G. glabra* is a traditional binding herb.

Note - One herb may cover more than one role in the herbal formula.
Dosing Herbal Formulas

- Understanding of the nature, sensitivity, needs and vitality of the patient you are treating and the herbs you are using is integral to assessing the dosage forms and ranges in which you wish to treat.

- Smaller doses or ‘drop doses’ are generally thought to be more ‘energetic’ doses. Used to stimulate the innate regulatory mechanisms of the body. This is sometimes referred to as ‘nudging’.

- The larger the dose given (sometimes called a ‘material dose’) the more ‘pharmacological’ it becomes. With the body producing a physiological reaction to the chemical constituents of the herb.

- Once again it is in the hands of the herbalist to choose the most appropriate dosage and dosage form for their patients. But how to know which to choose?
Dosing Herbal Formulas

In relation to dosage, Scudder (1903) writes in *Specific Medicines and Medications* -

"As a rule, *the dose of medicine should be the smallest quantity that will produce the desired result*. The proper dose, or that which gives the best result, is very much smaller than one who has been used to the large doses of indirect medicine would suppose possible... The dose will vary in different cases, and with different practitioners... I am satisfied that the size of the dose does not make such difference as has been thought, and that the essential element of success is to get the *right* remedy."
Dosing Herbal Formulas

- Practitioners should always dose to the illness and the constitution of the patient. Identifying constitutional strengths and weaknesses in patients is important for the formulation of herbal mixes but also integral for adequate dosage.
- **When to use larger or more frequent doses**: when the amount of herbs in a mix means that pharmacological doses cannot be reached with average doses, or in acute bacterial illness, in acute stress. It is important to assess the vitality of the patient - is the infection an acute in chronic presentation? In which case more supportive measures may be needed.
- **When to use smaller doses**: in children, the elderly, the frail and the constitutionally weak, or encumbered, chronic illness.
- Always remember the main aim being to restore a state of homeostasis and to assist the recuperative forces by treating the individual as a whole rather than just the diseased part of the body.
Dosage

‘Less of the plant was needed when it was being used to treat internal, central functions, but more was needed when treating those that lie in the periphery, farther from the governing heat and intelligence of the core of the body.’

Nicholas Culpepper (n.d)
Therapeutic Strategies.

- As Naturopaths and Herbalists we are focused on ‘Global Treatment Strategies’. Ill health and disease encompasses all parts of the patients experience therefore our treatment strategies should do the same. This Multi-Target style of treatment helps to not just reverse disease but also aims to instill optimum wellness. With this in mind it is always beneficial to re-examine the application of our Naturopathic Principles.
Application of Naturopathic Principles to Herbal Medicine Practice

- **Vis Medicatrix Naturae:**
  - Utilisation of herbs to promote, regulate & maintain the Vital Force:
    - herbal beverages – teas, juices, smoothies
    - fresh & dried herbs/spices added to meals
    - hydrotherapy, balneotherapy – baths, washes, wraps, compresses
  - Utilisation of herbs & herbal products whose vitality level/VF is as high as possible (e.g. organic, local, fresh).
Application of Naturopathic Principles to Herbal Medicine Practice contd.

- **Tolle Causam:**
  - Identification of contributing factors that may be contributing to patient’s health condition.
  
  - Consider both the *disease* (signs & symptoms/pathophysiology) and the *illness* (patient’s experience of that disease) – investigate patient’s condition of health, overall wellbeing & their relationship to it.

  - Utilisation of herbs to address underlying causes/contributing factors to current health condition (e.g. constitutional weaknesses/susceptibilities).
Application of Naturopathic Principles to Herbal Medicine Practice contd.

- **Primum non nocere:**
  - The level of health intervention should be appropriate to the patient’s needs at the time (refer to the Therapeutic Order).
  - Utilisation of herbs & herb products that are as close as possible to the natural state & less likely to cause adverse reactions or harmful effects/side-effects.
  - Consideration of the possible interaction of herbs selected with other medications patient may be taking.
Application of Naturopathic Principles to Herbal Medicine Practice contd.

- **Docere:**
  
  - Informing the patient of sound lifestyle practices (diet, exercise, rest/relaxation, etc).
  
  - Inspiring the patient to make positive, healthy lifestyle changes.
  
  - Informing and inspiring patients about the benefits of herbs in the promotion, maintenance and restoration of health and wellbeing:
    
    - Growing herbs for personal use
    - Incorporating herbs in daily diet
    - Using medicinal herbs (as prescribed by appropriate health professional)
Application of Naturopathic Principles to Herbal Medicine Practice contd.

• **Tolle Totem:**
  - Utilisation of treatment strategies that address each aspect of the patient as an individual (physical, psychological, emotional, social, spiritual) – may require referral if outside scope of practice.
  - Remember to consider both the disease & the illness when determining an individualised treatment strategy.
  - Consider where herbs or plant products may be indicated in treating the whole person
    - Flower essences, essential oils
    - Dietary, topical, infusions
Application of Naturopathic Principles to Herbal Medicine Practice contd.

- **Preventare:**
  - Implementation of a health care & wellness strategy that incorporates herbs and other botanical agents to maintain health & wellbeing, and reduce the risk of susceptibility to disease (Levels 1, 2 & 3 on the Therapeutic Order).
References


References


Scudder, J.M. (1903). *Specific dedication and specific medicines*. Cincinnati, OH: The Scudder Bros Co,


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