



Natural Standard

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Hormones may Increase Quality of Life



Hormones may be beneficial to longevity and healthy aging, two new studies suggest.

Researchers from the University of Poland found one hormone, adiponectin, at significantly high concentrations in 100-year-old women, while another study found that stimulating the body's production of growth hormone brought youthful qualities to people in their 60s to 80s.

The study analyzed 133 women from ages 20 to 102 years old, including 25 women who were 100 to 102 years old. Researchers were particularly interested in the women's levels of adiponectin.

Adiponectin, made by fat tissue, may be an important determinant of longevity. It is a peptide protein with anti-inflammatory properties that helps keep blood vessels clear of fatty deposits. Adiponectin is also thought to help regulate cholesterol and sugar.

Low levels of adiponectin may contribute to metabolic syndrome, a cluster of conditions that often occur together including obesity, high blood sugar, high blood pressure and high triglycerides, which can lead to cardiovascular disease.

The centenarian women (women aged 100 years or older) were reportedly healthier than the other women. Their adiponectin levels were significantly higher, possibly connected with metabolic status and also with getting old and longevity. Additionally, these women also had much lower levels of both insulin and the fat hormone leptin scoring better with respect to insulin resistance and total cholesterol.

In the second study, researchers at the University of Washington, Veterans Affairs Puget Sound

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Health Care System sought to determine if hormonal and functional declines were related, and if boosting growth hormone levels might help stop or reverse that decline thus slowing the aging process.

Aging, which results in a lower level of growth hormone, produces steady declines in muscle mass, strength and exercise capacity.

The study examined the effects of the growth-hormone stimulator Capromorelin® on 395 men and women aged 65 to 84 years old. Capromorelin® is an investigational medication developed by the Pfizer drug company.

All of the participants had a limitation in their physical functioning. During the year of the trial, some patients received Capromorelin®, while others were given a placebo.

The study found that Capromorelin®, at any dose, caused an increase in growth hormone production and an increase in muscle mass, improved heel-to-toe walking and better stair-climbing ability.

The study reported that after six months, people on the active drug showed improvement in walking. They continued to show improvement at 12 months when there was also a significant improvement in stair climbing in the treatment group.

For more information on hormones, please visit [Natural Standard's Complementary Practices Database](#).

References: 1) Baranowska B, Wolinska-Witort E, Bik W, et al. Evaluation of neuroendocrine status in longevity. *Neurobiol Aging*. 2006 May 11. [View Abstract](#).

2) Molitch ME, Clemmons DR, Malozowski S, et al. Evaluation and treatment of adult growth hormone deficiency: an Endocrine Society Clinical Practice Guideline. *J Clin Endocrinol Metab*. 2006 May;91(5):1621-34. [View Abstract](#).

3) Vitiello MV, Moe KE, Merriam GR, et al. Growth hormone releasing hormone improves the cognition of healthy older adults. *Neurobiol Aging*. 2006 Feb;27(2):318-23. [View Abstract](#).

Hawthorn may Lower Blood Pressure in Diabetes Patients



Hawthorn, a flowering shrub of the rose family, may lower blood pressure in diabetics, a new study suggests.

Researchers at the Hugh Sinclair Unit of Human Nutrition, School of Food Biosciences at the University of Reading in the UK investigated the effects of hawthorn for hypertension (high blood pressure) in patients with type 2-diabetes taking prescription drugs.

In the randomized controlled trial, patients received 1200mg of hawthorn extract or placebo daily for 16 weeks. At the beginning and end of the study, a well-being questionnaire was completed and blood pressure and fasting blood samples were taken. A food frequency questionnaire estimated nutrient intake.

Hypotensive drugs were used by 71 percent of the study population with an average intake of 4.4 hypoglycemic and/or hypotensive drugs. Fat intake was lower and sugar intake higher than

recommendations, and low micronutrient intake was prevalent. There was a significant group difference in blood pressure reductions with the hawthorn group showing greater reductions than the placebo group.

Although the average fat intake met current recommendations, average sugar intake was higher and there were indications of multiple micronutrient deficiencies. No herb-drug interaction was found and minor health complaints decreased over time in both groups.

Hawthorn is more widely known for its extensive history of use in cardiovascular disease, dating back to the first century. Modern day animal and *in vitro* studies suggest that flavonoids and other pharmacologically active compounds found in hawthorn may synergistically improve performance of the damaged myocardium, and further, may prevent or reduce symptoms of coronary artery disease.

For more information on hawthorn, please visit [Natural Standard's Herbs & Supplements Database](#).

Reference: 1) Walker AF, Marakis G, Simpson E, Hope JL, et al. Hypotensive effects of hawthorn for patients with diabetes taking prescription drugs: a randomised controlled trial. *Br J Gen Pract*. 2006 Jun;56(527):437-43. [View Abstract](#).

7th Annual USTA Mind-Body Conference



The Trager Southeast Region will host the 7th Annual United States Trager Association's (USTA) Mind/Body Conference in Daytona Beach July 19-23 demonstrating the Trager Approach's peaceful touch and ease-of-movement.

The keynote presentation, "The Trager Approach and the Changing Face of Mind/Body Medicine," will be held on Thursday, July 20 from 8-9:30p.m. A Trager mini session will be take place at the Trager Outreach Clinic on Friday, July 21 from 4-6p.m. Both events will be held at the Plaza Resort and Spa in Daytona Beach. Donations will be welcomed at the door and will go to the Trager Southeast Scholarship Fund.

The Trager Approach, developed by Milton Trager, M.D., involves the use of gentle, non-intrusive touch with the integration of effortless movement re-education. It aims to help release deep-seated physical and mental patterns and facilitate deep relaxation, increased physical mobility and mental clarity. Proponents claim that the benefits of a Trager session may be long-lasting and cumulative, with subsequent sessions allowing for deeper and longer lasting changes.

There are two aspects of the Trager Approach. In the first, usually referred to as the table work, the client lies on a well-padded table in a safe, comfortable environment while the body is supported and gently moved within its pain-free range and natural rhythm.

The second aspect of the Trager Approach, called Mentastics, involves instruction in the use of self-care movements. Mentastics is taught both in private sessions and in group classes. Mentastics may become part of the way a person takes care of him/herself and relieves stress and tension.

To learn more about the Trager Approach or the 7th Annual United States Trager Association's Mind-Body Conference, visit the TSE regional website at www.tragerssoutheast.org or the USTA national website at www.trager-us.org, or call Beth Michelson at 352.376.5908 or Elizabeth Rohack

at 561.369.2519.

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Omega-3 Fatty Acids may Help Depressed Children



Treatment with omega-3 fatty acids, the type found in fish oils, may help children suffering from clinical depression, a new study conducted in Israel suggests.

Researchers from Beer-Sheva Mental Health Center reported that while the results of some studies in adults with major depressive disorder have suggested that omega-3 fatty acids may be an effective add-on therapy, the effects of this supplement in children with the disorder are not well-elucidated.

The trial studied 28 depressed children between the ages of 6 and 12 years old who were randomly assigned to omega-3 fatty acids or placebo.

Standardized depression scores were used to assess the children at the start of the study and throughout the 16-week trial.

Ratings were performed at the beginning or baseline and at 2, 4, 8, 12 and 16 weeks using the Children's Depression Rating Scale (CDRS), the Children's Depression Inventory (CDI) and the Clinical Global Impression (CGI). Twenty of the 28 children completed at least one month's ratings.

Seven out of 10 children in the active treatment group and none of the children in the placebo group had a reduction in depression scores of more than 50 percent. Four children in the omega-3 group attained remission or complete recovery.

Researchers reported no clinically relevant side effects. They also noted that the omega-3 fatty acid supplement used in the study was a combination of eicosapentaenoic acid and docosahexaenoic acid, which is commonly available as an over-the-counter preparation.

The study concluded that omega-3 fatty acids may have highly significant therapeutic benefits in childhood depression. Depression is a serious medical condition and should be treated only by licensed professionals.

In addition to fish oil, dietary sources of omega-3 fatty acids may include certain plant and nut oils. Fish oil contains both docosahexaenoic acid (DHA) and eicosapentaenoic acid (EPA), while some nuts (English walnuts) and vegetable oils (canola, soybean, flaxseed/linseed, olive) contain alpha-linolenic acid (ALA).

For more information on omega-3 fatty acids, please visit [Natural Standard's Herbs & Supplements Database](#).

For more information on depression or related conditions, please visit [Natural Standard's Condition Center Database](#).

Reference: 1) Nemets H, Nemets B, Apter A, et al. Omega-3 treatment of childhood depression: a controlled, double-blind pilot study. *Am J Psychiatry*. 2006 Jun;163(6):1098-100. [View Abstract](#).

Black Cohosh may cause Hepatitis in Women

Black cohosh, a popular alternative to hormonal therapy in the treatment of menopausal symptoms such as hot flashes, mood disturbances, diaphoresis, palpitations and vaginal dryness, may be associated with hepatitis and sudden and severe hepatic failure, a new study states.

Researchers at the Department of Internal Medicine at the University of Utah Health Sciences Center noted that data from the Women's Health Initiative indicates that estrogen plus progesterone is associated with an increased risk of cardiovascular effects causing many patients and practitioners to look for alternative therapies, like black cohosh, to manage menopausal symptoms.

The study reports that in recent years, there have been several case reports associating this substance with hepatitis and fulminant hepatic failure. One particular case of a woman who developed hepatic failure requiring liver transplantation from the use of this herb was cited.

Several controlled trials and case series have reported black cohosh to improve menopausal symptoms for up to six months. Although these initial studies are suggestive, they have been few in number and have universally suffered from methodological weaknesses.

The mechanism of action of black cohosh remains unclear, and the effects on estrogen receptors or hormonal levels (if any) have not been fully explained.

Do not confuse black cohosh with blue cohosh (*Caulophyllum thalictroides*), which contains chemicals that may damage the heart and raise blood pressure. Do not confuse black cohosh (*Cimicifuga racemosa*) with *Cimicifuga foetida*, bugbane, fairy candles or sheng ma; these are species from the same family (Ranunculaceae) with different effects.

For more information on black cohosh and other herbs, please visit [Natural Standard's Herbs & Supplements Database](#).

Reference: 1) Lynch CR, Folkers ME, Hutson WR. Fulminant hepatic failure associated with the use of black cohosh: A case report. *Liver Transpl.* 2006 Jun;12(6):989-92. [View Abstract](#).

TOPRA looks ahead to 3rd Annual Symposium



TOPRA's 2006 Annual Symposium will be bigger and more extensive than before. The collaboration with the Dutch Medicines Board will feature three core tracks—pharmaceuticals, medical technologies and veterinary medicines.

The current list of speakers includes: Dr. Aginus A.W. Kalis, Executive Director, Medicines Evaluation Board, Netherlands; Dr. Daniel Bresseur, Chair of CHMP and Belgian Health agency, Belgium; Agnes Saint Raymond, EMEA; Tom Vanthienen, Eurochem, The Netherlands; Melanie Carr, EMEA; Nikos Dedes, Chair, European AIDS Treatment Group, Belgium; Truus Janse-de Hoog, MEB, The Netherlands; Caroline Kleinjan, Sandoz, The Netherlands; and Nick Sykes, Pfizer, UK.

Complementing the comprehensive program on popular topics in pharmaceuticals and medical technologies, TOPRA has designed a special program for professionals in veterinary regulatory affairs. Together with International Federation of Animal Health (IFAH) and EMEA, TOPRA is ensuring that this new conference 'track' is at the same high level that hundreds of professionals

know to expect from the TOPRA Annual Symposium.

The Conference will be held in Amsterdam October 2-4. An evening gala dinner will be held at the National Maritime Museum.

Booking early is recommended to ensure a place and early bird and agency discounts are available.

For further information, press credentials or comment contact: Jacob Coy or Christine MacKenzie, Cicero Consulting, 020 7665 9530 or 078 8619 70086.

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Mixing Herbal Medicines and Prescription Medications

Another study has found that some herbal medicines, particularly St. John's Wort, may alter the efficacy of certain prescription drugs, when taken together.

Researchers at the Department of Pharmacology at Vanderbilt University School of Medicine suggest that constituents in herbs may interact with nuclear receptors to enhance metabolizing enzyme and/or transporter activity leading to reduced drug concentrations.



The study cited St. John's wort as the first and most frequently reported source of induction-style herb-drug interactions.

Because this type of interaction is likely to be relevant to other herbal products, the study cautioned caregivers suggesting they be aware of the many issues and options for therapeutic management.

Extracts of *Hypericum perforatum* L. or St. John's wort have been used traditionally for a wide range of medical conditions. The most common modern-day application of St. John's wort is the treatment of depressive disorders. Meta-analyses of small, heterogeneous studies conducted over the past two decades, and several subsequent randomized trials, have reported St. John's wort to be more effective than placebo and equally effective as tricyclic antidepressants in the short-term management of mild-to-moderate depression (1-3 months). Comparisons to selective serotonin reuptake inhibitor (SSRI) antidepressants have provided equivocal data.

Controversy has been raised by the negative results of two well-conducted trials of St. John's wort for major depression. However, one of these studies did not include a reference-agent arm (comparison only to placebo), and the other reported negative results for an SSRI (sertraline) as well as for St. John's wort in a study of patients with severe (rather than mild-to-moderate) major depressive disorder. Overall, the evidence supporting the efficacy of St. John's wort in mild-to-moderate major depression remains compelling, while the evidence for severe major depression is equivocal.

While generally well-tolerated in clinical use, there is accumulating evidence of significant St. John's wort/drug interactions, particularly when used with medications metabolized by the cytochrome P450 system. St. John's wort is not recommended in HIV/AIDS patients taking protease inhibitors or non-nucleoside reverse transcriptase inhibitors, in patients receiving immunosuppressive therapy (particularly cyclosporin), and in users of oral contraceptives, warfarin, or digoxin. St. John's wort may induce mania in individuals with an underlying mood disorder, and may result in the serotonin syndrome if used alone or with other serotonergic agents.

For more information on St. John's wort and other herbs, please visit [Natural Standard's Herbs & Supplements Database](#).

For more information on interactions, please visit [Natural Standard's Interactions Database](#).

Reference: 1) Tirona RG, Bailey DG. Herbal product-drug interactions mediated by induction. Br J Clin Pharmacol. 2006 Jun;61(6):677-81. [View Abstract](#).

Echinacea may be Ineffective in Treating Children's Colds



Echinacea may not be effective in treating upper respiratory infection (URI) symptoms in children, a new study claims.

Echinacea species are perennials which belong to the aster family (Asteraceae) and which originate in eastern North America. Traditionally used for a range of infections and malignancies, the roots and herb (above ground parts) of Echinacea species have attracted scientific interest due to purported "immune stimulant" properties.

However, the study, one of the first to consider Echinacea's effects in children rather than adults, examined over 400 patients 2 to 11 years old to determine if *Echinacea purpurea* is effective in reducing the duration and/or severity of URI symptoms in children and to assess its safety in this population.

Primary outcomes were duration and severity of symptoms and adverse events recorded by parents; secondary outcomes included peak severity of symptoms, number of days of peak severity, number of days of fever and a global assessment of severity of symptoms by parents of study children.

Overall, there was no difference in the rate of adverse events reported in the two treatment groups. Additionally, there was an increased risk of rash in patients receiving Echinacea treatment.

Oral preparations of Echinacea species are popular in Europe and the United States for prevention and treatment of URIs. In the United States, sales of Echinacea are believed to represent approximately 10 percent of the dietary supplement market.

Multiple positive trials were published before 2001, but were largely of limited methodological quality or used combination products. Three more recent high-quality studies have reported negative results in adults and children. Pending additional studies, the evidence for this use of Echinacea looks less promising than previously. If the results of ongoing trials of Echinacea are similarly negative, this will suggest a lack of efficacy. For now, the evidence remains indeterminate in adults. In children, Echinacea cannot be recommended due to the excess cases of rash.

For more information on Echinacea and other herbs, please visit [Natural Standard's Herbs & Supplements Database](#).

Reference: 1) Koenig K, Roehr CC. Does treatment with Echinacea purpurea effectively shorten the course of upper respiratory tract infections in children? Arch Dis Child. 2006 June; 91(6):535-7. [View Abstract](#).

Please join Natural Standard in welcoming several new students who will be working with us over the course of the summer: Antoinette Edmondson, Massachusetts College of Pharmacy; James Lee, Northeastern University; Jessica Clubb, Northeastern University; Molly Davis, University of Rhode Island; Petra Jancar, University of Ljubljana, Ljubljana, Slovenia; and Toni Schaeffer, Albany College of Pharmacy.

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