

THE PHYTOTHERAPY DESK REFERENCE

6TH EDITION



MICHAEL THOMSEN

Phytotherapy
DESK REFERENCE

Michael Thomsen MSc, ND, DBM

Disclaimer

The information in this book is intended as a practical guide to the use of herbal extracts in clinical practice. It is not intended as a substitute for competent advice and guidance by a qualified health practitioner. The authors and publisher accept no liability for any claims arising from the use of any medicine or strategy discussed in this book.

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Introduction

About this book

This book has been designed as a reliable desk reference for the busy herbalist. It contains short, precise descriptions of 233 of the most commonly used herbs in Western Herbal Medicine. It is not designed as an exhaustive materia medica with detailed descriptions of the herbs. Practitioners not familiar with the herbs should seek additional information elsewhere.

The intention of this text is to provide practitioners with a limited number of reliable therapeutic actions with some reliable indications for each herb, with the information organised in such a way as to be a valuable clinical tool.

The short monographs also provide the main active constituents, the qualities of the herbs, known drug interactions and any caution or contraindications in addition to the recommended dosage for liquid extracts.

As a quick reference index, the herbs have been grouped together under their therapeutic actions and indications. These lists are of course not exhaustive and may be expanded with time. They do, however, include the actions and indications on which most authors agree on. Information on the herbs has come from accepted textbooks (see bibliography) and published articles.

Some references are included and more can be found in the online version at phytotherapydeskreference.com.au

Energetics

For many herbalists, the introduction of Chinese and Indian herbs into the modern practice of phytotherapy has renewed their interest in the energetics of herbs.

To further support the exploration of the energetics of herbal medicine, the qualities and occasionally tastes of the herbs have been included in the monographs.

The information on the energetics of the herbs has come primarily from Culpeper, Bensky and Holmes (see bibliography). Culpeper and others grade the degree of intensity: *Zingiber officinale* (ginger) is thus hot in the third degree, whereas *Achillea millefolium* (yarrow) is only warm in the first degree. It has not always

been possible to access such information, and any further suggestions are welcome. It is not straightforward to reconcile interpretations of the energetics of a particular herb from a variety of authors, thus for some herbs the qualities are not included. We welcome any suggestions from the reader that may help to clarify the concept of qualities or energetics of herbs.

Updated botanical names

Agropyron repens (couch grass) has been renamed *Elymus repens*.

Cimicifuga racemosa (black cohosh) has been renamed *Actea racemosa*.

Eupatorium purpureum (gravel root, sweet Joe-Pye weed) has been renamed *Eutrochium purpureum*.

Coleus forskolii (makandi) has been renamed *Plectranthus barbatus*.

Commiphora molmol (myrrh) has been renamed *Commiphora myrrha*.

Common names

When Chinese and Indian herbs were introduced into Western herbal medicine over the last few decades, their common names were often referred to by just their genus names; these include astragalus, schisandra, boswellia and withania, to name a few.

I encourage all herbalists to memorise the binomial botanical names but also pay respect to the cultures from which these medicinal plants come from and learn their common names. Of course, there are often a multitude of common names across a region. I have tried to include the major common names, especially the Chinese and Indian names. Apologies to our international readers, the common names I have chosen may not always be the ones you are familiar with.



Clinical Monographs

Phytotherapy Desk Reference

Achillea millefolium

Common names: Yarrow

Family: Asteraceae

Part used: Aerial parts

Description: Traditionally used for healing wounds, digestive problems, respiratory infections, and skin conditions. However, its popularity has recently waned. Further research is warranted as a recent study demonstrated a surprising new indication for *A. millefolium* showing that one year administration decreased the annual relapse rate in patients with multiple sclerosis (MS).

Constituents: Azulene, camphor, cineole, essential oil, flavonoids, tannins.

Primary actions: Diaphoretic, Digestive tonic, Emmenagogue.

All actions: Antihemorrhagic (uterine), Antihypertensive, Antipyretic, Antiseptic (GIT), Aromatic, Bitter tonic, Diaphoretic, Digestive stimulant, Digestive tonic, Styptic/Haemostatic.

Indications:

- Amenorrhoea, Anorexia, Blood stasis, Common cold, Digestive complaints, Dyspepsia, Fever, Hypertension, Inflammation; skin (topically), Menorrhagia, Menstrual irregularity, Muscular tension, Nose bleeds.
- **BHP:** Fever, colds, digestive complaints. Topically for slow healing wounds and inflammatory skin disorders.
- **Commission E:** Loss of appetite, dyspeptic ailments, female pelvic cramping.
- **Other uses:** Also used topically for skin disorders and as a wound closing agent.

Cautions: Avoid in known sensitivity to plants of the Asteraceae (Compositae) family. Arbutin is a mandatory component of *Achillea millefolium*.

Contraindications: Varieties with a high level of thujone are contraindicated in pregnancy.

Qualities: Dry 1st degree, warm 1st degree

Typical dosage: 20–40 ml per week

Actaea racemosa

Synonym or related species: *Cimicifuga racemosa*

Common names: Black cohosh, squawroot, snakeroot

Family: Ranunculaceae

Part used: Rhizome

Description: Key herb for menopausal symptoms, premenstrual syndrome and dysmenorrhoea. Standardised, clinically tested powdered extracts are available as single preparations.

Constituents: Triterpene glycosides (acetein, cimicifugoside, racemoside), isoflavones, aromatic acids (isoferulic acid, salicylic acid), tannin, resins

(cimicifugin), ranunculin, fatty acids, tannins, starch, sugars.

Primary actions: Anti-inflammatory, Selective oestrogen receptor modulator (SERM), Uterine tonic.

All actions: Anti-inflammatory, Antiandrogenic, Anticancer, Antirheumatic, Antispasmodic/Spasmolytic, Antitussive, CNS depressor, Emmenagogue, Hypothalamic-pituitary-ovarian (HPO) regulator, Sedative, Selective oestrogen receptor modulator (SERM), Uterine tonic, Vasodilator.

Indications:

- Arthritis, Bronchitis, Depression, Dysmenorrhoea, Endometriosis, Fibroids, Hypertension, Menopause, Menopause; symptoms, Neuralgia, Osteoarthritis, Pertussis, Polycystic ovarian syndrome, Rheumatism, Rheumatoid arthritis, Tinnitus.
- **BHP:** Rheumatism, rheumatoid arthritis, intercostal myalgia, sciatica, whooping cough, chorea, tinnitus aurium, dysmenorrhoea, uterine colic. Specific indications: muscular rheumatism, rheumatoid arthritis.
- **Commission E:** Menopausal symptoms, premenstrual syndrome and dysmenorrhoea.
- **ESCOP:** Climacteric symptoms such as hot flushes, profuse sweating, sleep disorders and nervous irritability.
- **WHO:** Treatment of climacteric symptoms such as hot flushes, profuse sweating, sleeping disorders and nervous irritability. Treatment of premenstrual syndrome and dysmenorrhoea.

Cautions: Black cohosh has recently become suspected of being hepatotoxic. The Therapeutic Goods Administration (TGA) reviewed the safety of black cohosh in 2005. The TGA has concluded that the incidence of liver reaction appears to be very low, considering the widespread use of black cohosh. Following the safety review, the TGA decided that medicines containing black cohosh must carry the following label statement: 'Warning: black cohosh may harm the liver in some individuals. Use under the supervision of a healthcare professional.' – TGA, 2007

Evidence

Black cohosh has recently become suspected of being hepatotoxic. The suspicion is based on 69 cases of black cohosh-induced liver disease. A review of the publications of these cases, however, has found them to be of poor quality with major inconsistencies in the data being presented, based on the same patients. Other issues include uncertainty of the black cohosh product used, insufficient adverse event definition, and lack of temporal association and dechallenge, missing or inadequate evaluation of alcohol use, comorbidity, re-exposure test, and alternative diagnosis. The review concluded that the presented data do not support the reported black cohosh

This updated and expanded 6th edition of *The Phytotherapy Desk Reference* is a reliable and popular desk reference for the busy herbalist. With some fascinating new herb additions, this book contains precise descriptions for a total of 233 of the most used herbs in Western Herbal Medicine.

Within its pages, the book allows practitioners quick access to reliable therapeutic actions and indications for each herb, and the information has been organised to be an extremely accessible and valuable clinical tool.

Each herb also has a short monograph with the primary active constituents, the qualities of the herbs, known drug interactions and any cautions and contradictions, as well as the recommended dosage for liquid intake. This desk reference is also a valuable tool for students, with its concise information and easy access when studying.

Designed for ease of use in a busy practise, this book is wire bound so it stays open on the correct page. Popular with both students and practitioners, users can instantly locate indications, therapeutic actions and herb-drug interactions whilst with a patient.

Michael Thomsen is a Naturopath and Herbalist with over 30 years' experience. Originally from Denmark, Michael completed studies in Naturopathy and Herbal Medicine in Sydney, graduating in 1986. He has a Master of Science from the Graduate School of Integrative Medicine, Swinburne University and is currently completing a PhD at Sydney University Medical School.

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