

Recommendation of Herbal Remedies by Psychiatrists

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Abstract

A survey was conducted among psychiatrists to reveal trends in their recommendations of herbal remedies for psychiatric illnesses. Specific questions addressed the percentage of patients to which three herbals (St. John's Wort, Ginkgo, and Valerian) were recommended, indications for their usage and, when applicable, reasons why herbals were not recommended. The responses (24% response rate) showed that most psychiatrists surveyed did not recommend herbal products (for legal reasons, effectiveness and unfamiliarity issues; not for safety reasons); and those that did recommend herbals did so to only a minority of their patients. Indications were fairly herb-specific, with St. John's Wort used mainly for depression, Ginkgo for cognitive problems, and Valerian for insomnia.

Introduction

There is an ever-increasing body of literature on herbal remedies for psychiatric ailments¹ as well as rapidly growing public interest and expanding market for herbal products.² Herbal remedies are used to treat a variety of medical ailments, including many psychiatric disorders. Pharmacists,^{3,4,5} physicians^{6,7,8} and the public^{9,10,11} have been surveyed for their opinions on herbal product use for various ailments. However, information on actual recommendation of herbal remedies by psychiatrists to patients has not been documented. It is of interest to know if psychiatrists feel comfortable recommending herbal remedies and, if so, which of these remedies were recommended along with primary indications for their use. We also felt that it might be useful to know the reason that some psychiatrists do not recommend herbal rem-

edies. We attempted to obtain some of this data by directly surveying psychiatrists listed in the ABPN Directory (1999 edition). Data from 187 responses (24% response rate) to a pilot survey of board certified psychiatrists in New Jersey (employed mainly in an outpatient setting) were analyzed.

Thirty-eight percent of the responders recommended herbal remedies to their patients. Thirty percent recommended St. John's Wort, 25% recommended Ginkgo, 13% recommended Valerian, and 8% recommended other herbal products. Note that since some of the responders recommended more than one herbal product, the sum of the individual percentages exceeds 38%.

Of those who recommended St. John's Wort, the vast majority (97%) recommended it to one quarter or less of their total patient population; indications were depression (95%) or anxiety (5%). Of those that recommended Ginkgo, the vast majority (92%) recommended it to one quarter or less of their patients; indications were dementia/memory loss (63%) or sexual problems (33%). All of the psychiatrist responders who recommended Valerian did so to one quarter or less of their patients; main indications were insomnia (67%) or anxiety (33%).

Sixty-two percent of the responding psychiatrists did not recommend herbal products to their patients. These responders were asked to rank from 1 (most important) to 4 (least important) the following reasons why they did not recommend St. John's Wort, Ginkgo or Valerian:

- A. Uncomfortable with your current knowledge of the herbal product;
- B. Felt that the herbal product is unsafe;
- C. Didn't believe the herbal product would work as well as conventional medicine;
- D. Concern over legal issues that may result from using an unconventional medication, or

1. Jersey City Medical Center, 50 Baldwin Avenue, Jersey City, NJ 07304

2. Caldwell College, 9 Ryerson Avenue, Caldwell, NJ 07006

E. Other.

An average ranking was computed for each reason the herbal product was not recommended, and the mean of these average rankings was calculated. A reason was considered unimportant if its average ranking was more than one standard deviation above the mean of the average rankings, and this was the case with reason (b). Reasons a, c, and d fell within one standard deviation and clustered around the 2 mark (1.3 to 2.3); we considered these reasons important as to why psychiatrists did not recommend herbal products to their patients.

In summary, this survey revealed that most responders do not recommend herbal products to their patients because of unfamiliarity or legal issues, or because they believe the herbal products are less effective than conventional medications; the safety of herbal products doesn't seem to be an issue. Also, the minority that do recommend herbal products (mainly St. John's Wort, Ginkgo, and Valerian) to their patients do so to 25 % or less of their total patient population, and each herbal product had one main indication for its use. Larger, nationwide surveys may reveal more information regarding psychiatrist's attitudes towards herbal remedies for psychiatric conditions.

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