

HERBCLIP[™]

FILE: • Asthma

Post Office Box 144345 Austin, Texas 78714-4345 Phone 512/926-4900 Fax 512/926-2345 Email: abc@herbalgram.org www.herbalgram.org

Mark Blumenthal *Editor*

Wayne Silverman, PhD Underwriting Coordinator

Betsy Levy Densie Webb, PhD Leela Devi, MSN, RN Risa Schulman, PhD Susie Epstein Ginger Webb Summary Writers

Karen Newton Database Manager

Kara Dinda, MS Susan McFarland *Co-coordinators*

Dawnelle Malone Research Assistant

The American Botanical Council provides this summary and the enclosed article as an educational service. By providing this article, ABC does not warrant that the data is accurate and correct, nor does distribution of the enclosed article constitute any endorsement of the information contained or of the views of the authors.

ABC does not authorize the copying or use of the original articles. Reproduction of the summaries is allowed on a limited basis for students, colleagues, employees and/or customers. Other uses and distribution require prior approval.

DATE: August 15, 1999

HC 053197

RE: Review of Natural Remedies for Asthma

Broadhurst, C. Leigh, Ph.D. Natural Asthma: Clearing the way to breathe freely. *Nutrition Science News.* April 1999, Vol. 4, No. 4, pp 200-201, 204, 206, 208, 210.

The incidence of asthma in both children and adults has doubled since 1980. The causal factors of asthma may be genetic, dietary and/or environmental. Asthma is a chronic inflammatory condition of the airway. People with asthma have inflamed, hyperactive airways that produce excessive bronchial mucous. Repeated asthma attacks scar the airway and create a biological environment where damaging immune cells proliferate. Eventually, asthma creates permanent damage to the airway, increasing susceptibility to inflammation and decreasing its overall functional ability. The author examines single botanicals, combination herbal remedies, supplements and dietary changes to treat asthma in this article. The author emphasizes the importance of persons with asthma consulting their medical practitioner before making changes to their treatment regimen.

Ginkgo (*Ginkgo biloba*) leaves contain ginkgolides, which inhibit plateletactivating factor. Placebo controlled trials have shown that oral doses of ginkgolides significantly reduce bronchial constriction.

Coffee and tea's caffeine is chemically related to asthma drug theopllylline (also found in tea). A placebo controlled study indicated that 7mg of caffeine per kg of body weight improved lung function and prevented excercise-induced bronchial constriction.

Onion (*Allium cepa*) contains active ingredients (isothiocyanates, thiosulfinates and quercetin). Lab tests show that extracts of onion block the enzymes that produce inflammation changes.

Licorice (*Glycyrrhiza glabra*), is antiviral, expectorant, demulcent, antiinflammatory and immune stimulant. Licorice slows the breakdown of corticosteroids, which prolong antiinflammatory effects of cortisol. Precautions: persons with hypertension. Should avoid prolonged use or use of large amounts of licorice, unless under professional guidance. Ephedra (*Ephedra sinica*), or Ma huang contains ephedrine, which acts as a bronchodilator and decongestant. Contraindications for persons with hypertension, heart disease, glaucoma, anorexia, hyperthyroidism, diabetes, pregnancy or lactating women.

Tumeric (*Curcuma longa*) contains curcumin, which has antiinflammatory, antiviral, antioxidant and anti-tumor activity. In vitro studies show that curcumin inhibits inflammatory changes.

Most persons with asthma also have allergies. Environmental pollutants can result in asthma-causing allergens or irritants. Foods such as citrus, dairy, soy, wheat and yeast as well as food additives are often found to create allergic reactions for asthmatics. Food allergies are diagnosed in two categories: immediate onset and delayed-onset food allergies. Nutritional deficiencies also exacerbate asthma. The author recommends persons with asthma take the following daily supplements:

Antioxidants: 400 IU vitamin E and 100 mcg selenium to counter free radical damage. Vitamin C for its antihistamine and immune stimulant effects, take 1 g with bioflavonoids 3x/day. N-acetyl cysteine (NAC) thins bronchial mucous, 200 - 500 mg 3x/day.

- Fish oil: 2-4 g is an antiinflammatory.
- Magnesium: 400 800 mg, helps relax the bronchial tubes and smoothe muscle of the esophagus.

• Multivitamins/minerals: 25 - 75 mg B complex, 400 - 800 mcg folic acid, 15 - 20 mg zinc and 400 mcg chromium picolinate, 250 mg B5 (Pantothenic acid).

• Other supplements: 10 - 20 g glutamine powder for candida and food allergies and 500 mg 2x/day quercetin which is both antihistaminic and antiallergenic.

Herbs can relieve the inflammatory changes that occur with asthma due to antioxidant phytochemicals' properties. The author contends that conventional treatments for asthma, the use of inhalers, do nothing to reduce inflammation and could have life-threatening side effects. The following two herbal treatments for asthma have been shown to effectively treat asthma:

A Middle Eastern traditional extract blend, adminstered with honey, contains black cumin (*Nigella sativa*), chamomile (*Matricaria recutita*), cinnamon (*Cinnamomum cassia*), cloves (*Syzygium aromaticum*), rosemary (*Rosmarinus officinalis*), sage (*Salvia officinalis*), spearmint (*Mentha spicata*), thyme (*Thymus vulgaris*) and other herbs. Black cumin seed, rosemary and thyme inhibit the contraction of smoothe tracheal muscle. Chamomile, cinnamon,

cloves, rosemary, spearmint and thyme are high in antioxidants and also contain lipoxygenase inhibitors. Lipoxygenase produce leukotrienes, biochemicals that sustain inflammatory conditions once triggered.

A second herbal treatment for asthma comes from Asia and is known as Saiboku-To. It is used clinically for asthma and contains 10 herbs including ginger (*Zingiber officinale*), Korean ginseng (*Panax ginseng*), magnolia (*Magnolia obovata*), Baikal scullcap (*Scutellaria baicalensis*) and licorice (*Glycyrrhiza glabra*). A study in Japan of 40 asthma sufferers resulted in a significant reduction in their use of steroidal asthma medications while also taking Saiboku-To. The most effective herbs in this blend are most likely Baikal scullcap and magnolia, so the author recommends trying 500 - 1,000 mg of each three times a day. —*Susie Epstein*

Enclosure: Reprinted with permission from the April 1999 issue of Nutrition Science News, a publication of New Hope Natural Media, a division of Penton Media, Inc. in Boulder, CO.

Bin #161