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> FILE: Shingles Herpes Infection Varicella Zoster Virus

> > HC 070352-295

Date: December 30, 2005

RE: Use of Herbs to Treat Shingles – A Review

Yarnell E, Abascal K. Herbs for treating herpes zoster infections. *Alternative & Complementary Therapies*. June 2005;131-134.

Varicella zoster virus (VZV) causes chicken pox and shingles. It can remain dormant in nerve ganglia and reemerge at any time. With children being vaccinated against chicken pox, the number of cases of VZV-induced disease should decline. However, many people are still susceptible to developing shingles and its complication, postherpetic neuralgia (PHN). Noting that conventional treatments for shingles and PHN are unsatisfactory, the authors focus on botanical therapies, pointing out that diet, lifestyle, nutritional supplements, and other modalities are often combined with herbs for best outcomes.

Because VZV activation is associated with depressed cellular immune function (as seen with aging or in patients with transplanted organs, cancer, or AIDS) and with stress from various causes, the authors believe it is logical that herbs that support cellular immune function and counteract stress would help prevent shingles and PHN.

Adaptogens, also called immunomodulators, are the major category of herbs that help support immune function. Some commonly used adaptogens are Asian ginseng (*Panax ginseng*) root, American ginseng (*Panax quinquefolius*), eleuthero (*Eleutherococcus senticosus*) root, schisandra (*Schisandra chinensis*) fruit, ashwagandha (*Withania somnifera*) root, astragalus (*Astragalus membranaceus*) root, and various medicinal mushrooms such as shiitake (*Lentinula edodes*). The authors could not locate any research specifically documenting the efficacy of these herbs for addressing VZV. However, they do note that they have previously discussed the research on using immunomodulating herbs for herpes simplex reemergence,¹ which may have some implications for VZV reactivation.

The authors report on two clinical trials of the antiviral properties of herbs in which a topical 5percent cream of the leaf of the Thai herb *bi phaya yaw (Clinacanthus nutans)* was used to treat shingles. In both studies, healing speed and symptom reduction were significantly better in the treated groups compared with the placebo groups. In vitro studies have shown this herb to possess antiherpes simplex activity, as well as immunomodulating properties. Licorice (*Glycyrrhiza glabra*) root and Chinese licorice (*Glycyrrhiza uralensis*) root both contain the triterpenoid saponin glycyrrhizin. Evidence from studies on the antiviral effect of glycyrrhizin suggests that it prevents penetration of viral particles into cells.² The authors found no clinical trials on the efficacy of oral licorice or Chinese licorice for treating shingles. Extracts of the juice of elder (*Sambucus* spp.) fruit and black currant (*Ribes nigrum*) fruit both showed anti-VZV activity in vitro.³ The authors suggest that these fruits be studied in humans to determine if they are effective as anti-VZV treatments. The authors consider three herbs to be useful for their antiviral properties, as suggested by historical treatments and extrapolation from anti-herpes simplex protocols: St. John's wort (*Hypericum perforatum*) flowering tops; chaparral (*Larrea tridentata*) leaf, flower, and seed; and lemonbalm (*Melissa officinalis*) leaf. Noted as inflammation-modulating herbs are turmeric (*Curcuma longa*) rhizome, calendula (*Calendula officinalis*) flower, and licorice, which can be combined topically and internally to help relieve symptoms.

The most widely studied herbal remedy for PHN is the topical application of the hot principle of cayenne (*Capsicum* spp.) fruit. A large, double-blinded trial involving 143 patients with PHN lasting from 6 months to more than 12 months found that topical application of 0.075 percent capsaicin significantly reduced pain severity compared with the total lack of activity of the placebo.⁴ Other herbal substances that show potential for relieving the pain of PHN are resin spurge (*Euphorbia resinifera*) and rose-scented geranium (*Pelargonium* spp.) volatile oil. A combination of internal immune support, internal antivirals, internal inflammation modulators, and topical antivirals and topical inflammation modulators is usually used to treat shingles. The specific details of each patient's case determines which herbs and other treatments are most useful, say the authors.

"More research is needed on some botanicals and it is important to follow patients carefully when they use certain preparations as these may cause discomfort or allergic reactions. Practitioners should combine herbal treatments with supplements and other healing modalities to advance healing in patients with the painful, potentially debilitating conditions that result from VZV," conclude the authors.

-Shari Henson

References

¹Yarnell EL, Abascal K. Herbs for treating herpes simplex infections. *Alternative & Complementary Therapies*. 2005;11:83-88.

²Lin JC. Mechanism of action of glycyrrhizic acid in inhibition of Epstein-Barr virus replication in vitro. *Antiviral Research*. 2003;59:41-47.

³Suzuntani T, Ogasawara M, Yoshida I, et al. Anti-herpes virus activity of an extract of *Ribes nigrum* L. *Phytotherapy Research*. 2003;17:609-613.

⁴Watson CP, Evans RJ, Watt VR, Birkett N. A randomized vehicle-controlled trial of topical capsaicin in the treatment of postherpetic neuralgia. *Clinical Therapeutics*. 1993;15:510-523.

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