



which comprises 4 weeks' instruction in herbal and other complementary medical practices. This is followed by a 3-month internship with a doctor of naturopathy.

Herbal medicines themselves are treated differently in Germany than in Canada. There, a herbal medicine must also be registered with the German equivalent of Canada's Health Protection Branch (HPB) before it is accepted as a therapeutic drug.

Acceptance of these "new" drugs in Germany became more formalized in the 1980s after a commission surveyed all safety and efficacy data involving herbal products being used as medicines. Based on the commission's evaluation of these data, more than 200 plant-product monographs were developed, which allow manufacturers to market products according to indications stated in the monographs. Health insurance companies generally pay for the drugs.

These moves have meant that German physicians have more confidence that the herbal medicines they prescribe are, indeed, therapeutically active and can serve as appropriate alternatives to synthetic drugs when treating milder or more chronic forms of disease.

Dr. Hans Joachim Rudolph, a Berlin-based internist and doctor of naturopathy, is confident that his holistic approach to patients' problems — part of which includes plant medicines — does work. Rudolph, who was trained in medical school when the principles of phytopharmacology, if taught at all, were soon forgotten, spent several years working in a hospital-based practice before deciding to pursue his growing interest in naturopathy.

When he did this, he also took a turn teaching the theory and application of phytopharmacology to medical students in Berlin. In one class students were taught the appropriate course of natural therapies for patients being treated in a special 80-bed hospital teaching unit. "As long as the disease being treated is not very severe, there is no doubt that these herbal drugs have therapeutic effects and they are less toxic for patients than synthetic drugs," says Rudolph.

One of his most important lessons has been that the use of natural therapies such as plant medicines creates a good rapport between physician and patient. "At certain acute stages of a disease we cannot expect too much from these plants," Rudolph stresses. "But when the disease is less active or in its chronic stages, herbal medicines can be very helpful and the results can be quite wonderful."

"It always depends on the severity of the disease," agrees Dr. Christel Schröter, a Berlin general practitioner, "but I like to start treatment with a plant medicine because many kinds of illnesses and diseases can be cured with these drugs."

In Germany, the key indicators for their use in primary care practices are colds, bronchial infections and coughs. Plant medicines are also commonly prescribed for irritable bowel syndrome, sleep disturbances, anxiety and depression. "Many people come to me because they're fed up with synthetic drugs and they want something that is more natural," explains Schröter.

Plant medicines are also safe to use in the treatment

Plant medicines gain some peer-reviewed respect

Because much of the research concerning herbal medicines is published in languages other than English, most North American physicians have heard little about the scientific evidence outlining the therapeutic efficacy of these products. "But," says Dr. Edzard Ernst, chair of the Department of Complementary Medicine at the Postgraduate Medical School, University of Exeter, "randomized, double-blind, placebo-controlled clinical trials for herbal remedies exist, and these are the data we should accept."

Some of the evidence is now finding its way into respected, world-class journals. Last year *JAMA* reported that *Ginkgo biloba*, which is widely used in Germany to treat dementia-type syndromes and symptoms of forgetfulness and poor concentration, had led to improvement in patients with Alzheimer's disease (*JAMA* 1997;278:1327-32). The study determined that patients showed clinically meaningful improvement in cognitive functioning after taking the product for a year. The

study is considered one of the first to evaluate a herbal remedy scientifically.

St. John's wort has also received significant scientific scrutiny. According to a meta-analysis of 15 placebo-controlled trials published in the *BMJ*, patients with mild to moderate depression taking this herbal remedy were 2.7 times more likely to improve relative to placebo (*BMJ* 1996;313:253-4). Symptoms typically improve after 2 to 4 weeks of treatment, and there are no sedating side effects. Improvements in sleep disturbances have also been shown to accompany improvements in mood.

Garlic, which has also been touted for its beneficial effects on the cardiovascular system, received peer-reviewed support last year when *Circulation* reported that "data strongly support the hypothesis that garlic intake had a protective effect on the elastic properties of the aorta related to aging in humans" (*Circulation* 1997;96:2649-55). It was the first study involving phyto-medicine to appear in that journal.