HEALTH AND STRESS

The Newsletter of The American Institute of Stress

Number 4

1998

THE FOUNTAIN OF YOUTH - OR HERBAL HYPE AND VITAMANIA?

KEY WORDS: nutraceutical pandemic, ephedra, herbal fen-phen, FDA controls and constraints, kava, DHEA, melatonin, vitamins C and E, herbal superstars, legislation

The odds are overwhelming that anyone reading this takes several vitamins and/or nutritional supplements every day. Sales were about \$500 million annually two decades ago, reached \$3 billion in 1990, and sky-rocketed to over \$9 billion last year. Pharmacies and supermarkets formerly devoted part of one shelf for a few vitamins and iron supplements. Today, we are more apt to be confronted by an entire wall devoted to a dazzling array of vitamins, herbal preparations, and strange chemicals, including hormones. Numerous mixtures and combinations of these are presumably even more effective in warding off cancer and heart disease, fortifying your immune system, and lengthening life.

Since it is automatically assumed that all of these are completely safe, they are usually selfprescribed. Physicians often have little knowledge of the types and dosages of supplements their patients are taking, and are rarely consulted.

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Much of the impetus for this "nutraceutical" epidemic comes from aging baby boomers and senior citizens, seduced by promises of protection from chronic diseases and regaining lost vitality and vigor. Younger individuals are also hopping on the bandwagon, hoping that certain supplements will give them more energy, or promote perpetual youth. This is especially true for those who feel their diets are lacking in fresh vegetables and fruits.

But the biggest boost came from the 1994 Dietary Supplement Health and Education Act, which was passed after a massive lobbying campaign by the health-food industry. In addition to vitamins, this legislation broadened the definition of a "dietary supplement" to include herbs and any other "natural" substance. It also mandated that all such supplements were completely exempt from regulations requiring any proof of safety or efficacy. Making medical claims are prohibited, but there is not enough manpower to enforce this. And, there is little to stop sellers from saying anything to promote sales, especially multi-level marketers on the Internet.

Essentially, anything goes. While the chemical composition of the contents of a bottle are listed on the label, the pills can contain anything. In some studies, not even a trace of the main ingredient could be found. But the FDA is prevented from removing worthless products from the marketplace. It can only act after evidence that a supplement may be harmful, which may be too late. (Continued on page 2)

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The Newsletter of The American Institute of Stress

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Around ten years ago, a large number of cases of a rare blood disorder known as eosinophilic myalgia suddenly began to spring up all over the country. Several thousand people developed permanent neurologic damage, and close to 40 deaths were documented. Public health authorities and medical detectives were puzzled, since there were no common clues, until they discovered that all had been taking L-tryptophan, a popular supplement used to imiprove mood and promote sleep. L-Tryptophan is the prime precursor of serotonin and melatonin, so therewas solid scientific support for theseuses. And since it is an essential amino acid, it was obviously safe.

The cause was eventually traced to contaminants that had been introduced during the manufacturing process overseas. After tryptophan products were removed from the shelves and sales to the public were banned, the problem vanished. But there is nothing to prevent this from happening again. Many "natural" supplements are manufactured in countries where there are no legal standards to insure safety or consistency. This could be a particular problem for products derived from animals, or others that have chemicals added to prolong shelf life or appearance. The FDA seems powerless to prevent this potential public hazard.

"Natural" Doesn't Always Mean "Safe"

"Safe" and "natural" are used together so often that many people assume they are synonymous. However, we all know that certain mushrooms and other natural plant life are poisonous. Others contain chemicals with powerful biologic effects that have resulted in the development of important drugs like quinine and aspirin.

It had been known since the 13th century that a tea brewed from the leaves of the foxglove plant, could reduce the swollen feet of patients suffering from "dropsy". However, if the tea were too strong or you drank too much, it could be fatal. Foxglove grows in abundance in England and Europe, and grazing animals also died if they consumed too much. The Latin name for this plant is digitalis purpurea, since it looked like a finger (digit) and had a purple flower. Early preparations of tincture of digitalis had the familiar skull and crossbones insignia on the label to indicate that it was a poison.

The various prescription forms of digitalis used today are chemical derivatives with specific properties that insure consistent onset and duration of action. Tinctures or dried leaf preparations are much less predictable, but would still qualify as a "natural" supplement even though they could cause fatalities. The FDA recently issued a warning to avoid dietary supplements containing plantain because of reports of serious gastrointestinal and cardiovascular reactions. Plantain is grown commercially for use in weight loss products and herbal teas. Its seeds are often used in bulk laxatives, and since it is quite safe, officials were puzzled. When the raw plantain product was analyzed, it was found to be heavily contaminated with digitalis leaf, which explained these reactions.

The FDA has records of 80 deaths directly attributable to certain dietary supplements, and serious side effects have been seen in thousands. The figures are quite likely much higher since the majority of cases are probably not reported. In addition, many are also not recognized, since physicians are often unaware of self prescribed supplements their patients are taking. Victims who assume that all natural supplements are safe are not likely to inform them, or to even suspect that they could be causing problems.

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Around sixteen supplements have been classified as "risky", the most dangerous one being ephedra, also sold as ma huang, epitonin, and sida cordifolio. These are taken to improve mood, increase energy, and promote weight loss. The FDA has almost 1000 reports of serious reactions to ephedra, including palpitations, heart attacks, stroke, severe nervousness, anxiety, and transient psychotic episodes. It has been implicated in sudden death in young healthy people, and is now banned in several states. Ephedra contains a plant form of ephedrine, a drug used in many cold preparations to shrink mucosal tissues and open up blocked nasal passages. Ephedrine is an amphetamine-like stimulant that can cause high blood pressure, palpitations, and nervousness. When ephedra is taken with other stimulants or "uppers" the combination can be extremely dangerous.

A few years ago, the FDA received over 100 reports of severe reactions associated with one specific "natural" weight loss product in less than a month. These included serious life-threatening conditions, such as heart attacks, rhythm disturbances, stroke, seizures, and hepatitis, as well as several deaths. Most of the victims were young and healthy and the supplement had been taken exactly as specified on the label. FDA and outside medical experts finally determined that the problems arose because the product contained a combination of Ma huang and kola nut, a source of caffeine which is also a powerful stimulant.

In November 1994, the FDA informed the company that this product posed a potential health hazard and violated federal laws designed to protect the public. There was no response or denial, so the agency then requested that they voluntarily withdraw this particular supplement. The company refused, but did indicate that they would remove the kola nut, and replace it with something else. It is not clear if this change was ever made, and apparently all the FDA can do is to keep warning the public, which they did again 3 months later.

A similar problem is surfacing with so called "natural herbal fen-phen" products. The FDA considers these to be unapproved drugs, since this name reflects intended use for the same purpose as fenfluramine, an anti-obesity drug banned here and abroad because of cardiac damage and deaths.

The main ingredients of most herbal fen-phen products are the Ma huang form of ephedra, together with St. John's Wort, ("herbal Prozac"), and 5-hydroxy-tryptophan, a close relative of L-tryptophan which is still banned for public sale. Nobody knows what the effect of these combinations might be, and efforts are underway to see if sales should be banned pending further studies.

Other herbals can be dangerous for certain individuals who may have no idea that they are at increased risk. Pennyroyal, a member of the mint family, is used to make a "slimming" tea with a refreshing, tangy, taste. It is popular with pregnant women who need to avoid caffeine and want to lose weight. According to old herbal texts, it was formerly used to induce abortion, and it has now been found to be associated with a high incidence of miscarriage during the first trimester of pregnancy.

There are a variety of other "dieter's teas" made from herbal blends that can include senna, aloe, rhubarb root, cascara, buckthorn and even castor oil. These may indeed help you lose weight by making you feel sick. Diarrhea, vomiting, obstructive bowel complaints and fainting are not uncommon. Chaparral is sold as a tea or pill to "purify" the blood and fight cancer, but can cause serious liver damage. At least 2 deaths and 10 cases of chronic hepatitis have been reported. Comfrey contains powerful alkaloids thought to have anticancer effects, and was originally used as a poultice to reduce swelling. When taken internally, it also causes liver damage. It has been banned in Canada and Germany, since animal studies suggest that it is actually carcinogenic. Sassafras oil, as American as apple pie and formerly a common flavoring for root beer, is now banned as a U.S. food additive because of similar concerns.,

We usually complain about restrictive FDA practices that stifle progress. However, the pendulum may have swung too far the other way with regard to regulating supplements and protecting the public. There is no control over manufacturing processes to prevent contamination or insure the purity and consistency of products, or even that the contents of the container agree with the ingredients listed on the label. Action can be taken only after it has been proven that products are unsafe, which could have disastrous consequences.

Kava Is Coming

A prime illustration of herbal hype will be coming your way very soon. The next superstar is Kava, and I predict that it will surpass Ginkgo biloba and St. John's wort despite the fact that there are few scientific studies to support either its efficacy or safety. The reason I am so convinced it will be a winner is that it is being promoted for the relief of stress, a market far bigger than memory loss and depression combined, and the timing is perfect. Careful clinical trials and double blind studies reported in peer reviewed journals have demonstrated the efficacy of both Ginkgo and St. John's wort, so that herbals have gained increasing acceptance by physicians and the scientific community, As far as the public is concerned, skillful advertising and promotional efforts have put them on a par with respected pharmaceuticals, while emphasizing that they are much safer. As a result, Americans increasingly believe that some natural products can work just as well as prescription drugs, and, as in the case of ginkgo, may succeed when conventional treatments have failed.

Ginkgo has allure because it is a relic from the ice age that contains unique compounds known as ginkgolides found nowhere else in nature. Kava enjoys a similar mystique. It is derived from the roots and stems of an obscure South Pacific plant with chemicals called kavalactones. These appear to have effects on the brain that reduce anxiety and muscle tension. One promoter describes this as follows: "A sensuous wave of muscular relaxation washed slowly through my entire body like India Ink spreading on white paper". Studies in rats show that it affects primitive portions of the brain such as the hippocampus and amygdala most strongly, and too much kava can produce an intoxicating effect. Indeed, the herb was initially popular because of its recreational aura, and local brands had names like "Rapture" and "Happy Camper". Long term use has been associated with dry, scaly skin.

This is all being played down by manufacturers to avoid any regulatory scrutiny. In 1996, 21 companies got together to form the Kava General Committee to demonstrate its safety and effectiveness in relieving anxiety. They subsidized some small studies in Germany to support this, which will also provide the scientific patina it needs.

Although no clinical trials have been conducted in the U.S. and it is illegal to promote kava for the treatment of anxiety, there are ways to overcome these obvious deficiencies. It is possible to tiptoe around regulatory restrictions by careful crafting of promotional material. Thus, although the word anxiety is studiously avoided, advertisements can show blissful scenes of island paradises that guarantee to "help you to relax naturally", or "move to another state." One company pitches the product as the answer to the "yuppies blues", hardly a medical diagnosis, but just as effective in getting the point across. And while companies can't make any medical claims, testimonials by distinguished and sincere individuals in white coats can be very convincing, and there is nothing to stop a physician, chiropractor, or pharmacist to make any extravagant statement they choose.

One company spent \$2 million on such print and broadcast ads last year, and obviously would not have done so, if they did not believe that this investment would be returned several fold. The strategy will be to promote it as an alternative to Valium and Xanax by having health professionals urge consumers to switch to kava as a safer and equally effective alternative, just as St. John's wort was advocated as a replacement for Prozac and Zoloft. As one company executive brags, "Anybody who has stress in their life is a potential consumer."

Because of its history of use for recreational purposes, most authorities feel that it should not be given to children or pregnant women. However, kids have lots of stress today, and there are plans to launch two kava-for kids products later this year. The California psychiatrist-author whose best selling book "Hypericum (St. John's Wort) and Depression" put that product on the map because of "20/20" coverage and magazine articles has been engaged to do the same for kava. His new book, "Healing Anxiety With Herbs" should be out later this year, and the publisher has already lined up a media blitz including a 12-city lecture tour, full page newspaper and magazine ads, and TV and radio interviews. Other health professionals are being hired to promote the product in talks at local health food stores and centers for senior citizens, so brace yourself for the next herbal blockbuster.

DHEA And Melatonin Concerns

As indicated in prior Newsletters, a flurry of books and prominent magazine articles trumpeting the rewards of DHEA (dehydroepiandrosterone) and melatonin quickly exhausted nationwide supplies for weeks. Both of these hormones have powerful physiologic effects, and their inclusion along with herbs and vitamins as "natural" supplements is of concern to many scientists. By definition, hormones are chemical messengers made in a gland that travel through the blood stream to exert effects on structures in other parts of the body.

DHEA is a steroid manufactured in the adrenal gland from cholesterol, but very little is known about how it functions as a hormone. Not much is made until the age of seven, production spurts during puberty and peaks in the mid-20s, when DHEA becomes the most abundant hormone in circulation. After the third decade, production steadily declines, so that the average 75-year-old's level is only 20% of what it was 50 years earlier. DHEA is easily converted into other hormones, especially testosterone and estrogen, but what else it does in the body is pretty much of a mystery. Men tend to have higher levels than women at all ages, and for years it was thought to be largely a form of chemical trash left over from making other hormones. In the 1980's, when DHEA was being sold as a weight loss product, the FDA stepped in and classified it as an unproved new drug that could be obtained only by prescription. After the 1994 legislation was passed, DHEA was reclassified as a dietary supplement, which again permitted over the counter sales to the public.

News reports have described DHEA as "the mother of all hormones", and it is billed on the Internet as the "Fountain of Youth Hormone." According to claims, DHEA can help you live longer, lose weight or gain it, prevent cancer, heart disease, and Alzheimer's, and combat AIDS and other infectious diseases. These are based on experiments in which rodents were fed daily doses that seemed to prevent or delay the onset of cancer, atherosclerosis, lethal viral infections, lowered immunity, obesity, and diabetes. However, what works in animals may not apply to humans, especially since rats and mice produce only about 1/10,000 as much DHEA as we do.

There are no really long term studies in humans, and little is known about influences on other medications that may be taken. Such trials are crucial since some side effects may be irreversible. DHEA can cause increased body or facial hair and cessation of menses in premenopausal women. Since it can lower levels of HDL ("good") cholesterol, it might increase risk for heart disease, Two studies also showed higher levels in women who had developed breast and ovarian cancer. In men, daily administration of DHEA could stimulate the growth of tiny prostate malignancies that would otherwise have remained dormant, or cause prostate enlargement, making urination difficult.

Like DHEA, melatonin also appears naturally in some foods so it can be sold directly to the public as a dietary supplement that does not require FDA approval or control. Melatonin manufacturers are only limited in not being able to claim that it can cure, treat or lower the risk of a disease. However, there are ways to get around this with careful crafting of promotional material, and they can state something general like "helps promote sleep", or "provides comfort". Unlike pharmaceuticals, extensive animal or human testing is not required before being sold in the U.S. As with DHEA, there are few long term studies dealing with safety, side effects, or drug interactions. Listed doses may not be accurate, and one batch tested contained far more than the amount listed on the label. Optimal dosage is also difficult to determine, and researchers have used daily amounts ranging from 3 to 6000 mg. But the dose that appears to be most effective and safe for elderly insomniacs is .3 mg. There does not appear to be any indication for its use under the age of forty, and in younger individuals has been shown to actually increase or induce sleep dificulties.

There are potential problems with manufacturing impurities, since some melatonin products are derived from cows and pigs. Four out of six that were analyzed were found to have impurities that could not be identified. However, the only time the FDA can get involved is when melatonin products are exported to the U.K. and Switzerland, where it is sold by prescription. Several such shipments have been banned because of safety concern. Yet, there is nothing to protect U.S. consumers from the identical product.

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Side effects ranging from depression and fatigue to vasoconstriction and menstrual disturbances have been reported. There are particular concerns about its use in depressed patients, especially those who may be receiving antidepressant drugs that work by boosting serotonin. None of these possible hazards have to be listed in the product packaging, since melatonin is classified as a natural supplement, and such warnings are not required.

In order to ban over the counter sales of either melatonin or DHEA, it would be necessary to prove that they uniformly presented a risk of injury or illness to everyone under every condition of use. The burden of proof is on the FDA, and the issue of efficacy or accuracy of labeling is not relevant, even if such deficiencies can be demonstrated.

In Canada, all hormones are considered to be drugs without exception. In Great Britain, any substance which exhibits significant physiologic activity when administered comes under the same controls and restrictions as a pharmaceutical with similar effects. In the U.S., what makes something subject to FDA regulation appears to be its intended use. As long as no claim is made for diagnosing, preventing, mitigating, treating, or curing any disease, by law, it is not classified as a drug. And, if it is a natural substance that can qualify as a dietary supplement, it can be manufactured from any source, including animal carcasses. There have been concerns about the transmission of viruses, such as possible spread of mad cow disease to humans. Presumably, if a melatonin product had been derived from bovine pineal glands, one would expect this information to be listed on the label, but there is nothing to mandate or guarantee this.

None of the above should be misconstrued as implying that DHEA and melatonin supplements are without merit. As indicated in prior Newsletters, there is ample theoretical evidence and several animal studies to suggest that both may have great therapeutic potential when properly used in certain demographic groups. However, like all substances with physiologic activity, they can produce effects that would be undesirable for some individuals. In addition, since safety issues have not been thoroughly explored, many feel that it is inappropriate for them to be considered as "natural" supplements and that they should be regulated like other hormones.

Vitamania And Antioxidant Obsessions

In general, vitamins and most popular herbals are safe when taken as directed. The problem is that many people assume that more must mean better. Some take many times the suggested dosage of several vitamins daily, often in conjunction with a concoction of herbal preparations, hormones, and chemicals like chromium picolinate, superoxide dismutase, and anything else that is promoted as a powerful antioxidant. There is little doubt that most of the manifestations of aging such as gray hair, wrinkled skin, osteoporosis, atherosclerosis, and malignant changes are due to the unopposed action of free radicals that antioxidants can block.

However, it is important to recognize that there are different kinds of free radicals and different kinds of antioxidants. Some of these interfere with the activity of others, and loading up with synthetic antioxidants may suppress the body's production of its own free radical fighters. Vitamin C is the most widely used vitamin antioxidant, and massive doses are often advocated to prevent colds, cancer and heart attacks. Linus Pauling, its greatest proponent, often took 18 or 20 grams daily, thousands of times more than the recommended dose. It is not generally appreciated that large amounts of vitamin C taken with iron, a frequent constituent of popular multivitamin-mineral supplements can have a reverse effect, and actually cause oxidative damage. Increased intake of vitamin E, the next most popular antioxidant, can interfere with blood clotting, and has been associated with an increased risk of stroke due to bleeding in patients taking anticoagulants. Beta carotene is a common supplement, but when taken in conjunction with other antioxidant vitamins, appeared to diminish their effects, and was associated with higher cancer rates than controls receiving placebos.

This is difficult to explain, since numerous reports show that people with high beta-carotene diets and levels have less cancer. It may be that these foods contain other important carotenoids that are not found in synthetic supplements. Similarly, most of the vitamin E in supplements is in the form of alpha tocopherol. But gamma tocopherol may be an even morepowerful free radical fighter, and some studies suggest that alpha tocopherol can suppress its antioxidant effects.

Are Vitamins E and C Panaceas?

Vitamin E has been called "The Golden Capsule" because of the wide range of benefits it has been proven to provide. The most impressive results are in coronary heart disease. Two Harvard studies of 135,000 health professionals found that those taking over 100 IU daily had one-fourth to one-third the risk ofheart attack. In a Cambridge University trial of 2000 heart disease patients in the U.K., half took 400 or 800 IU daily or a dummy. At the end of 18 months, the incidence of non-fatal heart attacks was reduced by an amzing 77 percent, a record far superior to aspirin or cholesterol-lowering drugs.

Vitamin E can help prevent coronary artery disease and atherosclerosis by multiple mechanisms. The most important appears to be blocking the oxidation of LDL and the inflammatory reaction in arterial walls that leads to the development of obstructive plaque. It also inhibits the formation of clots that trigger heart attacks and strokes.

However, its protective effects have been found to extend far beyond this. Research studies suggest that gallstones, cataracts, asthma, osteoporosis, diabetes and male infertility should be added to the list, and especially prevention of neuro-degenerative disorders. Dutch scientists recently reported that in a study of over 5000 individuals, only vitamin E intake showed a protective effect against the development of Parkinson's disease. In another two year study of Alzheimer's disease, vitamin E slowed down progression by six or seven months, and significantly fewer patients required institutionalization, compared to those receiving conventional drugs or placebos. Protection against colon and lung cancer have been demonstrated, but in a very recent report of thousands of smokers, vitamin E supplementation reduced prostate cancer deaths by an amazing 42 percent.

Senior citizens who took 200 IU vitamin E daily for eight months had a dramatic boost in T-cell measures of immune function and 30 percent fewer infections. There was a sixfold jump in antibody production following the administration of hepatitis B vaccine compared to those taking placebos. Improved immune system function may explain why mortality rates from all causes is 43 percent lower in older people taking vitamin E. While adverse side effects are rare, patients taking anticoagulants or with a history of bleeding problems should observe caution.

The virtues of vitamin C are equally impressive, and protective effects range from herpetic infections and the common cold, to cardiovascular disease and cancer. Benefits have also been claimed in chronic fatigue, stroke, diabetes, migraine, multiple sclerosis, throbocytopenic purpura, Parkinson's disease, backache, sudden infant death syndrome, recovery from poisons, cataracts, Paget's disease, polio, schizophrenia, AIDS hepatitis, and most recently, Alzheimer's. Although largely anecdotal, even studies that seem to have scientific backing are rarely believed by most physicians.

The medical community has a long history of bias with respect to both vitamin E and C. Four decades ago, the Shutes, who were respected cardiologists in Canada, were ridiculed when they reported that their cardiac patients seemed to improve remarkably with high doses of vitamin E. Evidence that large doses of vitamin C were effective in treating a variety of infections and toxic states dates back over 60 years, but Linus Pauling and others were severely castigated for proposing mega doses for colds and other disorders. Investigators who failed to confirm their results never understood the importance of tailoring dosages to constantly changing requirements. Dosage is a key issue, and is extremely difficult to determine for vitamin C, since it depends on numerous factors. It is essential to emphasize that doses should be given at least twice daily to maintain blood levels, which also helps minimize bowel complaints when more than one or two grams daily are needed.

Vitamin C has also been shown to potentiate the effects of vitamin E, and toxicity is rarely a problem for either. In one study, 2000 IU of vitamin E daily were given for two years, and dosages as high as 3200 IU a day have caused few side effects. Around 400 IU seems to protect against cardiovascular disease, but you would need to consume 20,000 calories daily to obtain that from diet. And it would take more than 200 oranges daily to satisfy the vitamin C requirements of many individuals. A physician should always be consulted before taking large doses of any vitamin, especially if drugs are being prescribed for some medical problem.

Current And Future Trends

The best selling herbal products in 1997 and per centage change from the previous year are as follows: Ginseng - \$78 million, up 14%, Garlic - \$67.6 million, up 1.7 %, Ginkgo Biloba - \$66 million, up 140%, Echinacea - \$14 million by itself, but much more in combination products, St. John's Wort - \$13.5 million, up 11,450%!, Saw Palmetto - \$13.3 million, up 423%, Echinacea/Goldenseal - \$13.3 million, up 164%, Pycnogenol/Grape Seed - \$9 million, up 162%, Goldenseal - \$6.6 million, up 33.1 percent, Evening Primrose - \$6.4 million, minimal change. These figures were compiled based on U.S. sales in health food stores, pharmacies, supermakets,etc, for the 52 week period ending Sept. 7. When the total sales figures for 1997 became available (Jan1 to Dec. 31) sales for Ginkgo Biloba were found to be \$92 million, St. John's Wort was \$47.8 million, and Echinacea for colds had jumped to \$22.2 million in little more than 3 months. These increases obviously reflect vigorous promotional activities and further spurts can be anticipated for 1998. Since sales for kava were only \$2.95 million last year, \$2 million would not have been budgeted for advertising if manufacturers were not convinced that they would recoup this many times over. A recent Gallup Poll survey showed that herb usage increased almost 70 percent last year, three fifths of consumers took two or more herbal products daily, and the vast majority of these also took additional vitamin and mineral supplements as well.

Last November, a Commission on Dietary Supplement Labels urged the FDA to set up a mechanism to classify herbs as non prescription drugs. Companies would have to show proof of efficacy and safety, but in return, could make medical claims, rather than be limited to the current vague language. This Presidential panel also urged that the FDA investigate how other countries have addressed this issue. Germany is one of the leaders in the field, with its Commission E that conducts careful studies on composition, indications, side effects, dosages, interactions with other drugs, etc. This has allowed many herbals to gain reimburse-

ment from insurance companies. In Canada, each dietary supplement is regulated as a drug, and over 160 supplements currently available here have been banned. Billions are at stake, since the establishment of any regulatory process would drive all small manufacturers out of business. Separate bills have already been introduced in the House and Senate, and a massive campaign is in the offing to preserve the status quo. The public needs protection from potentially harmful products and unsupported claims. But it is also important to preserve freedom of choice for supplements that are safe and might have merit. The fireworks have just started to go off and 1998 should be interesting, so stay tuned! Paul J, Rosch. M.D., F.A.C.P.



"I think you've crossed the line, Alfonse, from seasoning to herbal medicine."

ISSN # 1089-148X

HEALTH AND STRESS

Editor-in-Chief

The Newsletter of
The American Institute of Stress

124 Park Ave., Yonkers, New York 10703

Non-Profit Organization U.S. Postage PAID Yonkers, NY Permit No. 400