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Complementary Medicine Interactions PART 5

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Lesley A Braun

Alfred Hospital

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Complementary Medicine Interactions

PART 5

How do herbs, nutrients and food supplements interact with drugs for weight loss, toxicity, dependence or respiratory conditions? Lesley Braun and Prof Marc Cohen provide clinical guidance from their new publication.

Assumptions made when collating the information for this chart

- The clinical significance of many interactions is still unknown as controlled trials are lacking in most cases. In these instances, interactions are based on evidence of pharmacological activity and case reports and are largely speculative.
- All information refers to oral dose forms unless otherwise specified.
- Information listed here is correct at time of writing, however new research in the area is constantly being published.
- The interaction chart is provided as a guide only and should not replace the use of professional judgment.
- Information listed here is limited to 100 monographs in *Herbs & Natural Supplements – An Evidence-Based Guide* (©Elsevier Australia, 2004).

Using this guide in practice

- Commonly used prescription and over the counter medications are organised by therapeutic class and subclass and are listed alphabetically. Herbal and natural medicines are also listed alphabetically.
- Common names have been used when referring to herbs.
- Refer back to original monograph in *Herbs & Natural Supplements – An Evidence-Based Guide* (©Elsevier Australia, 2004) for more information about a particular substance.

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Avoid	there may be insufficient information available to be able to advise using the two substances together, so avoid until more is known. The drug may have a narrow therapeutic index (NTI) and there is sufficient evidence to suggest the interaction may be clinically significant. Consider an alternative treatment that is unlikely to produce undesirable interaction effects.
Avoid long-term use unless under medical supervision	harmful effects of potential interaction can be avoided if doses are altered appropriately under medical supervision. Some of these interactions can be manipulated to the advantage of the patient. Changes to dose and regimen may be required for safe combined use.
Caution	the possibility exists of an interaction that may change effects clinically; be aware and monitor. It is prudent to tell patients to be aware and seek advice if they are concerned.
Observe	interaction may not be clinically significant at the usual recommended doses, however the clinician should be alert to the possibility of an interaction.
Beneficial interaction possible	prescribing the interacting substance may improve clinical outcomes, e.g. reducing drug requirements, complementing drug effects, reducing drug side-effects, counteracting nutritional deficiencies caused by drugs, alleviating drug withdrawal symptoms, enhancing patient well-being.

DRUG	HERB/SUPPLEMENT	POTENTIAL OUTCOME	RECOMMENDATION	EVIDENCE/COMMENTS
Nutrition				
Anorectics and weight-reducing agents				
Orlistat e.g. Xenical	Vitamin A	Reduced vitamin absorption	Separate doses by at least 4 hours and monitor vitamin status	Increased vitamin intake may be required with long-term therapy
	Vitamin D	Reduced vitamin absorption	Separate doses by at least 4 hours and monitor vitamin status	Increased vitamin intake may be required with long-term therapy
	Vitamin E	Reduced vitamin absorption	Separate doses by at least 4 hours and monitor vitamin status	Increased vitamin intake may be required with long-term therapy

Complementary Medicine Interactions – PART 5 continued

DRUG	HERB/SUPPLEMENT	POTENTIAL OUTCOME	RECOMMENDATION	EVIDENCE/COMMENTS
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Poisoning, Toxicity and Drug Dependence

Agents used in drug dependence

Methadone	St John's wort	Reduced drug effects	Avoid	Decreases serum levels
	Kava kava	Additive effects	Caution	Increased sedation theoretically possible

Detoxifying agents, antidotes

Penicillamine e.g. D-penamine)	Calcium	Reduced drug effect	Caution — separate doses by 2 hours	Combination forms insoluble complex
	Iron	Reduced drug and iron effect	Caution — separate doses by at least 2 hours. Do not suddenly withdraw iron	Sudden withdrawal of iron during penicillamine use has been associated with penicillamine toxicity and kidney damage
	Magnesium	Reduced drug effect	Caution — separate doses by 2 hours	Combination forms insoluble complex
	Zinc	Reduced drug effect	Caution — separate doses by 2 hours	Combination forms insoluble complex
	Vitamin B6 (pyridoxine)	Reduced B6 effect	Beneficial interaction possible	Drug may induce pyridoxine deficiency – increase intake with long-term therapy

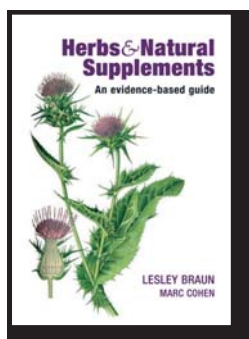
Respiratory System

Bronchospasm relaxants

Ephedrine	L-tyrosine	Increased side-effects	Observe	L-tyrosine (200 and 400 mg/kg) has been shown to increase side-effects of anorexia caused by ephedrine and amphetamine in a dose-dependent manner in rats
Theophylline	St John's wort	Reduced drug effects	Monitor for signs of reduced drug effectiveness and adjust the dose if necessary	Herb decreases drug serum levels
	Vitamin B6 (pyridoxine)	Reduced B6 levels	Beneficial interaction possible	Drug may induce pyridoxine deficiency. Increased intake may be required with long-term therapy

Expectorants, antitussives, mucolytics and decongestants

Phenylpropanolamine (found in Neo-Diophen)	Adhatoda	Increased drug effects	Observe	Results from animal studies show that <i>Adhatoda vasica</i> extract exerts considerable antitussive activity when administered orally and is comparable to codeine when cough is due to irritant stimuli
	L-Tyrosine	Increased side-effects	Observe	L-tyrosine (200 and 400 mg/kg) has been shown to increase side-effects of anorexia caused by phenylpropanolamine in a dose-dependent manner in rats ■



Australian publication

HERBS & NATURAL SUPPLEMENTS An Evidence-Based Guide

Lesley Braun, Pharmacist, Naturopath, Herbalist and Industry consultant & Senior Lecturer – Melbourne School of Natural Medicine

Marc Cohen, Professor & Head of Department of Complementary Medicine, RMIT University, Melbourne



Herbs and Natural Supplements: An Evidence-Based Guide presents evidence-based information on the 100 most popular herbs, nutrients and food supplements used across Australia and New Zealand. Organised alphabetically by common name, each herb or nutrient listed includes information such as daily intake, main actions/indications, adverse reactions, contraindications and precautions, safety in pregnancy, and more.

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