HERBAL MEDICINE IN TREATING GYNAECOLOGICAL CONDITIONS VOLUME II

HERBAL MEDICINE IN TREATING GYNAECOLOGICAL CONDITIONS VOLUME II Specific Conditions and Management Through the Practical Usage of Herbs

Part 2 of Herbal Medicine in Treating Gynaecological Conditions

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INTRODUCTION

This is the second book in the series of **Herbal Medicine in Treating Gynaecological Conditions**. The first book, subtitled 'Herbs, Hormones, Pre-Menstrual Syndrome and Menopause' (Aeon Books, 2020), covered the hormonal background and herbs, with an in-depth exploration of menopause and PMS. The herbs included were those mainly thought of as 'hormonal', such as *Actaea racemosa*, *Vitex agnus-castus* etc. We refer to this first book in the present text as 'book 1'.

In this new book, subtitled 'Specific Conditions and Herbal Management', we focus on gynaecological conditions, none of which are simply 'hormonal' as multifactorial causes are the rule. We find very often that herbal books contain oversimplifications in this area, where a gynaecological condition is seen as a hormonal condition and all it needs is a hormonal herb. We hope the complexity of hormones has been untangled in the first book. Now it is time to look, as far as we can, into mechanisms and discover how these can be influenced by herbs.

This book consists of two sections: the first focuses on conditions typically seen in clinical practice and the second on herbs traditionally used in women's health. Very little research can be found on these herbs, however, but the ways in which the herbs have been traditionally used can be revealing, and this is often confirmed by what research there is.

We have tried to lay out this book in a way that is user-friendly for those in practice to find the relevant information easily.

In each chapter we start by outlining the condition, the symptoms, any relevant aetiology and pathophysiology, where we feel this aids understanding, plus any other information we think is useful for herbalists. We also touch on investigations and conventional treatment options.

In the section on herbal management we first consider broad treatment aims and strategies. We then move on to 'Key herbs used in clinical practice'. This part reflects herbs that we have used successfully in clinical practice for that condition. We have collated clinical research that corresponds directly to the way each specific herb acts in or on a particular condition.

For each of the key herbs in each section we have included only the relevant studies, along with any relevant traditional use related to the chapter's condition, as opposed to whole monographs. We delve into detail where we feel it may be enlightening or interesting and, on occasion, go down side alleys to correct popular misunderstandings.

Sometimes these herbs have direct clinical research, sometimes actions are inferred from constituents and sometimes we rely on traditional and/or our empirical experience. At the end of the chapter we include evidence from clinical trials on herbs, constituents and combinations.

Where we give herb dosages, the daily dose usually corresponds to that found in the *British Herbal Pharmacopoeia* (*BHP*) 1983, by the British Herbal Medicine Association's Scientific Committee (Bournemouth: BHMA) or Kerry Bone's 2003 book, *A Clinical Guide to Blending Liquid Herbs: Herbal Formulations for the Individual Patient* (Edinburgh: Churchill Livingstone [1st edition]).

Weekly dosages can be taken as representative within a herbal mixture, unless otherwise stated, and reflect those used in clinical practice by most herbalists, but ultimately are guided by our own experience.

In the dietary and lifestyle sections we have collated research relevant directly to each condition, to enable a practitioner to make informed, evidence-based recommendations.

The second section of the book concentrates on monographs of 'non-hormonal herbs' traditionally used in female health. These are herbs with a long tradition of use in gynaecology that were not covered in the first book.

In the text we make reference to traditional medicine, going back to our herbal roots, Hippocrates, Gerard and Culpeper, as well as looking at texts from the Eclectics. Eclectic medicine was a branch of North American medicine that made use of predominantly Native American remedies in the late 19th and early 20th centuries. They were eclectic in the sense that they integrated whatever worked in terms of herbal medicine and homeopathy. The Eclectics included doctors Milton Scudder, John King, John Felter and Finley Ellingwood, who were practising throughout the US and published a number of texts from their experiences, many focusing on gynaecology.

Our aim is to present a thoroughly researched, in-depth textbook on a herbal medicine approach to gynaecology. We hope to give an understanding of the physiological processes and deepen the reader's understanding of the herbs in the context of female health. Our passion is to integrate traditional knowledge and clinical research to better inform our practice.

Hananja and Nathalie