

CHINESE MEDICAL CENTER BV



神州醫藥中心

Amsterdam, 11 January 2000

Dear customer,

I should like to comment on an article which appeared in Spiegel Online on the 4th of January 2000 under the alarming title "The Health Dangers of Chinese Natural Herbs." Not only is the article alarming, it is also patently untrue. The case referred to is the so-called Belgian Chinese Herb Nephropathy: in 1991 nearly 100 Belgian women got irreversible renal interstitial fibrosis after taking a slimming cocktail containing Acetozolamide, Diethylpropion, Fenfluramine, Belladonna extract, Cascara powder and the Chinese natural herbs Aristolochia "Guang Fang Ji" and Magnolia bark "Hou Po." This case was officially attributed to the herb Aristolochia "Guang Fang Ji," and is a perfect example of the absence of methodology that characterizes the assessment of plant toxicity: true, it does unite the interests of those so clearly and violently opposed to Traditional Chinese Herbal Therapy. Spiegel Online states that 30 of these patients have died, which is untrue: none has died.

The epidemiological data do not implicate Aristolochia as the source of nephrotoxicity: it is a reasonable assumption that the plant was administered to at least 15.000 patients. About 100 (0,66%) were struck with the nephropathy, and, remarkably, all of the victims were treated at the same doctor's surgery during the same 4-month period in 1990. They were treated with a "homemade" solution of multi-injection (mesotherapy), most likely compromising a serotonine derivative or a serotonine enhancer. One conclusion forces itself on us: only those patients who were exposed to two sources of serotonine (by direct injection and indirectly via dextenfluramine in the cocktail inhibiting the re-uptake of serotonine) showed fibrosis. Only the association of the two could explain the nature of the lesions and their high incidence in such a limited number of patients. Furthermore, the oncogenic properties of serotonine and the clastogenic potential of dextenfluramine may provide a clue to explain the presence of dysplasia in the urothelium and the outbreak of transitional cell carcinoma as established in the victims. It is noteworthy that one Belgian doctor prescribed the slimming cocktail with the same ingredients, with higher amounts of Aristolochia and Magnolia, but without mesotherapy, to 1.500 patients: none of them reported any adverse effects, as neither did the thousands of people who took this herb as an ingredient of a herbal tea during the two decades prior to this incident.

The experts at least acknowledge that the herbs were used out of their TCM context and by doctors who were totally unfamiliar with TCM. This letter is not a plea for unrestricted use of Aristolochia or any herbs, for that matter: it is our own conviction that Aristolochia is a powerful amphoteric

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herb whose use should be monitored qualified therapists. The so-called toxicity of Magnolia and Stephania is a matter too innane to waste words on, and even Aristolochia can be a safe plant when kept out of the hands of all except qualified and knowledgeable therapists. It does not take scientific philosophy to see that a methodology to assess herb toxicity is hardly existent and probably not even strived for by academic pharmacology. Apart from the obvious melevolence shown by the medical establishment, this sad case once more reveals that the herbalists' criticism on reductionist pharmacology is justified, and all the worn-out phrases of the herbalists appear to be, not clichés, but very relevant:

1. Toxicity is related to dosage; the toxicity of a substance may be attributed directly to this substance, but will more often be related to its metabolites.
2. The action of the whole is more than the action of an isolated active constituent, and the action of a single molecule is not only incongruent, but often the opposite of the action of the whole. Synergies, buffering-substances, repair-enzymes have an unclear but tangible influence on the overall effect. Together with lack of interest, there is an insurmountable financial barrier for this type of research since the number of double blind studies skyrockets exponentially for every molecule added. As a result, herbalists pertinently observe that the safest way to use herbs is within their traditional framework, preparation and decoction modes, etc. The minor risks that remain can easily be anticipated by qualified herbalists. No law can replace "common sense" and education.
3. The linear extrapolation from animal experiment to the human organism is untenable, and many more parameters should be considered in assessing toxicity, among them some healthy guidelines from humoral medicine (e.g. PH and Na-Ka balance of the interstitial fluid, lymphatic, hormonal, cellular and neural parameters and, most interestingly, circadian fluctuations influencing toxicity).

It is not surprising that western pharmacology is alarmed at the growing number of people who are determined to seek alternatives to western medicine, alternatives which truly work and which are much less expensive: around 50.000 per day use some form of traditional Chinese medicine daily in Germany. That Spiegel Online chooses to report in such an alarmist fashion is not only biased, unfair, and misleading, it can only be justified as scientific nonsense.

Sincerely,

Dong Zhi Lin
Director