Checking for Herbal Supplements

Problem

Most patients consider herbal remedies and vitamins to be natural supplements rather than medicines. As a result, as many as 70 percent of patients who use herbal preparations neglect to mention their use to their healthcare providers. Therefore, it is very important that during any assessment, nurses identify and document all supplements patients are taking.

Consequence

Failure to identify use of herbal preparations and vitamins by the patients may result in reduced medication effectiveness, dangerous drug-herb interactions, increased bleeding and other complications related to surgery.

Solution

Here are some considerations regarding use of herbal preparations and vitamins.

- There has been a significant increase in the use of herbal remedies and other supplements because:
  - High costs of prescription medicines have driven people to look for lower-cost alternatives
  - Increased travel has exposed people to traditional and alternative remedies
  - Advertising promotes these products as “safe” and “all natural” and thus has increased their appeal.
- Herbs can be derived from flowers, shrubs, trees, algae, ferns, fungi, seaweeds and grasses.
- Herbal preparations can be used fresh, dried, in alcohol (as tinctures), steeped as teas, simmered (decoctions), or may be extracted from vinegar, syrups, vegetable glycerin, or honey.
- Echinacea, ephedra, garlic, ginkgo, ginseng, kava, St. John’s wort, and valerian are some of the more commonly used herbal medications that may pose concerns.

- A quick rule of thumb is that many herbals starting with the letter “G” may pose a perioperative hazard; direct effects include bleeding from garlic, ginger, ginkgo and ginseng.

- Cardiovascular instability can arise from ephedra, valerian, goldenseal and licorice.

- Increased sedative effects on anesthesia may result from use of kava, St. John’s wort and valerian.

- Use of ginseng increases risk of hypoglycemia.

- Much inconsistency exists in the manufacture, potency, purity and promotion of health claims regarding herbal preparations; the standards and testing requirements are not the same as for prescription drugs.

- All herbal medications should be discontinued 2 to 3 weeks prior to any elective surgical procedure.

- If a patient is unsure of what type of herbal preparation he is taking, he should be instructed to bring in all bottles for evaluation.

- In an emergency setting, a thorough drug-intake history should be obtained, including all herbal preparations and vitamins, so that proper precautions can be taken to prevent complications.

References

Avoiding Common Nursing Errors, Lisa Marcucci, MD, Editor, Lippincott Williams and Wilkins, 2010