

Translated from *Rev Prescrire* January 2015; 35 (375): 5

Preconceptions based on drug origin

At a time when “modern” biotechnology-derived drugs receive a great deal of media attention, it might seem outdated to take an interest in herbal medicines. Drugs obtained from plants have the reputation of being innocuous, gentle in their effects, and only appropriate for the treatment of minor ailments, especially when they are derived from a widely consumed plant and come in ointment form.

Such preconceptions can make us complacent when it comes to herbal medicines and the sometimes serious adverse effects they provoke. For example, evaluation data on an ointment containing a dry extract from green tea leaves, authorised in France and a number of other countries for the treatment of anogenital warts, reveal that this drug causes severe application site reactions in about one-quarter of patients (see p. 92).

The many other examples of harms provoked by plant-derived treatments include: cytotoxicity with *colchicine*, obtained from the autumn crocus; sometimes severe irritation with *ingenol*, obtained from *Euphorbia peplus*; poisoning with *nicotine*, obtained from tobacco; and mental disorders with cannabis derivatives.

We should rid ourselves of preconceptions. All drugs, whatever their origin, must undergo rigorous evaluation to determine their effects, and particularly their adverse effects.

Plant-based drugs are no exception.

Prescrire