Herbal Medicine Approach to Immune Dysfunction

(Part III in a series on Herbal Medicine) (Adapted from The College of Integrative Medicine Module 30 – Clinical Botanical Medicine)

Dr. Wayne Sodano DC, DABCI, DACBN, CFMP, CICP, BCTN
Board Certified Traditional Naturopathy

“Plants have been a central part of traditional medicines to cure topical and systemic infections caused by microbes, in particular bacteria. These preparations form the basis of many wound healing materials in the developing world where the plant is prepared as a crude drug or an extract that is applied topically to improve the healing wound. These preparations may have antimicrobial properties and remove the microbes by an antiseptic mechanism and/or they may promote the ability of the wound to repair itself by stimulating cellular growth.”

“There are many reasons why plants are available source of antimicrobial natural products and the most fundamental reason is that they contain intrinsically antimicrobial compounds such as carvacrol form thyme (Thymus vulgaris) which is a monoterpen and is present in the essential oil of this species.”

Herbal Strategies (i.e. phytotherapeutics) to treat infectious diseases include:

1. Minor to moderate acute infections of the respiratory, urinary and gastrointestinal mucosa
2. Minor to moderate systemic infections especially when accompanied by lymphadenopathy
3. Topical bacterial and fungal infections
4. Minor to moderate febrile infections
5. Minor to moderate chronic viral, bacterial and fungal infections
6. Management of refractory cases of chronic viral, bacterial and fungal infections especially accompanied by lowered immune resistance.
**Antibacterial / Antibiotic Agents**

**Indications**
Systemic or topical infection.

**Contraindications**
Serious infections, such as bacterial meningitis; specific to herb.

**Application**
Best taken before or with meals; medium to long-term application is recommended for extended benefits; support intestinal flora with probiotics.

<table>
<thead>
<tr>
<th>Primary Herbal Medicine(s)</th>
<th>Adult Dosage Consideration</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Allium sativum (Garlic)</td>
<td>- Barberry &gt; 15 to 40 ml/week (1:2 liquid); echinacea &gt; 25 to 60 ml/week (1:2 liquid) or 2.5 to 5.0 g/day (tablet).</td>
</tr>
<tr>
<td>- Berberis vulgaris (Barberry)</td>
<td>- Garlic &gt; 40 to 80 ml/week (1:1 fresh plant liquid) Allicin-releasing enteric-coated tablets containing 6 to 18 mg of allicin per day.</td>
</tr>
<tr>
<td>- Echinacea spp (Echinacea)</td>
<td>- Golden seal &gt; 15 to 30 ml/week (1:3 liquid) or 1.0 to 2.0 g/day (tablet).</td>
</tr>
<tr>
<td>- Hydrastis Canadensis (Goldenseal)</td>
<td>- Myrrh &gt; 10 to 30 ml/week (1:5 liquid).</td>
</tr>
<tr>
<td>- Salvia officinalis (Sage)</td>
<td>- Sage &gt; 15 to 30 ml/week (1:3 liquid) or 0.9 to 1.8 g/day (tablet).</td>
</tr>
<tr>
<td>- Scutellaria baicalensis (Baical skullcap)</td>
<td>- Thyme &gt; 15 to 40 ml/week (1:2 liquid) or 40 to 60 mg/day (tablet).</td>
</tr>
<tr>
<td>- Thymus vulgaris (Thyme)</td>
<td>- Baical skullcap &gt; 30 to 60 ml/week (1:2 liquid) or 2.4 to 3.2 g/day (Tablet).</td>
</tr>
<tr>
<td>- Commiphora molmol (myrrh)</td>
<td></td>
</tr>
</tbody>
</table>

**Antifungal Agents**

**Indications**
Fungal infections (systemic or topical).

**Contraindications**
Specific to herb.

**Application**
Best taken before meals; medium to long term.
**Primary Herbal Medicine(s)**
- Allium sativum (Garlic)
- Azadirachta indica (Neem leaf)
- Tabebuia avellanedae (Pau d’arco)
- Thuja occidentalis (Thuja)
- Thyme vulgaris (thyme)
- Topical - Calendula officinalis (Calendula)
- Melaleuca alternifolia (Tea tree oil)

**Adult Dosage Consideration**
- Garlic > 40 to 80 ml/week (1:1 fresh plant liquid)
- Allicin-releasing enteric-coated tablets containing 6 to 18 mg of allicin per day; pau d’arco > 25 to 50 ml/week (1:2 liquid) or 1.5 to 2.5 g/day (tablet)
- Thyme > 15 to 40 ml/week (1:2 liquid) or 40 to 60 mg/day (tablet)
- Thuja > 15 to 30 ml/week (1:5 liquid) or 400 to 800 mg/day (tablet)

---

### Antiviral Agents

**Indications**
Suspected mild to moderate viral infections.

**Contraindications**
Specific to herb.

**Application**
Best taken before meals; medium to long term.

**Primary Herbal Medicine(s)**
- Azadirachta indica (Neem leaf)
- Hypericum perforatum (St John’s wort)
- Melissa officinalis (Lemon balm)
- Thuja occidentalis (Thuja)

**Adult Dosage Consideration**
- Thuja > 15 to 30 ml/week (1:5 liquid) or 400 to 800 mg/day (tablet)
- Lemon balm > 20 to 40 ml/week (1:2 liquid)
- St John’s wort > 15 to 40 ml/week (1:2 liquid) or 3.6 to 7.2 g/day (tablet)

---

### Immune Modulators

**Indications**
Recurrent infectious disease due to weakened immune system; weakened immune system

**Contraindications**
Specific to herb; individuals receiving immunosuppressant therapy

**Application**
Best taken before meals; medium to long term.
<table>
<thead>
<tr>
<th>Primary Herbal Medicine(s)</th>
<th>Adult Dosage Consideration</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Echinacea spp. (Echinacea root)</td>
<td>- Echinacea root &gt; 25 to 60 ml/week (1:2 liquid) or 2.5 to 5.0 g/day (tablet).</td>
</tr>
<tr>
<td>- Eleutherococcus senticosus (Siberian ginseng)</td>
<td>- Korean ginseng &gt; 7 to 40 ml/week (1:2 liquid) or 300 to 500 mg/day (tablet).</td>
</tr>
<tr>
<td>- Panax ginseng (Korean ginseng)</td>
<td>- Siberian ginseng &gt; 15 to 55 ml/week (1:2 liquid) or 2.5 to 6.3 g/day (tablet).</td>
</tr>
<tr>
<td>- Withania somnifera (Withania, Ashwagandha)</td>
<td>- Withania (Ashwagandha) &gt; 20 to 50 ml/week (1:1 liquid) or 2.9 to 4.8 g/day (tablet).</td>
</tr>
</tbody>
</table>

### Immune Suppressants
Dampen immune response (for autoimmune diseases, hay fever, asthma, eczema, urticaria, chronic skin disorders)

#### Indications
Over active immune system

#### Contraindications
Specific to herb; caution with weakened immune systems

#### Application
Best taken before meals; medium to long term.

<table>
<thead>
<tr>
<th>Primary Herbal Medicine(s)</th>
<th>Adult Dosage Consideration</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Albizia lebbeck (Albizia)</td>
<td>- Albizia &gt; 25 to 60 ml/week (1:2 liquid) or 2.4 to 4.0 g/day (tablet)</td>
</tr>
<tr>
<td>- Hemidesmus indicus (Hemidesmus)</td>
<td>- Hemidesmus &gt; 25 to 60 ml/week (1:2 liquid) or 1.5 to 2.5 g/day (tablet)</td>
</tr>
<tr>
<td>- Tylophora indica (Tylophora)</td>
<td>- Tylophora &gt; 5 to 15 ml/week (1:1 liquid) for the first 10 to 14 days of each month - dispense separately from other liquid herbs</td>
</tr>
</tbody>
</table>

©2015 All Rights Reserved. Wayne Sodano DC, DABCI, DACBN, CFMP, BCTN - Integrative Medicine Health Services, LLC / www.CollegeofIntegrativeMedicine.org - Reproduction in whole or part is prohibited without written permission.
Lymphatics

Herbal medicines that improve lymphatic flow and increase lymphatic detoxification

**Indications**
Lymphatic congestion / stagnation; detoxification

**Contraindications**
Specific to herb; caution with individuals with lymphatic cancer

**Application**
Best taken before meals; medium to long term.

<table>
<thead>
<tr>
<th>Primary Herbal Medicine(s)</th>
<th>Adult Dosage Consideration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baptista tinctoria (Wild indigo)</td>
<td>Baptista &gt; 15 to 40 mL/week (1:2 liquid)</td>
</tr>
<tr>
<td>Calendula officinalis (Calendula)</td>
<td>Calendula &gt; 10 to 30 mL/week (1:2 liquid); blue flag &gt; 20 to 40 mL/week (1:2 liquid)</td>
</tr>
<tr>
<td>Echinacea ssp. (Echinacea)</td>
<td>Clivers (Galium aparine) &gt; 25 to 50 mL/week (1:2 liquid) or 1.0 to 2.0 g/day (tablet)</td>
</tr>
<tr>
<td>Iris versicolor (Blue flag)</td>
<td>Echinacea &gt; 25 to 60 mL/week (1:2 liquid) or 2.5 to 5.0 g/day (tablet)</td>
</tr>
<tr>
<td>Galium aparine (Cleavers)</td>
<td>Poke root &gt; 1 to 5 mL/week (1:5 tincture)</td>
</tr>
<tr>
<td>Phytolacca decandra (Poke root)</td>
<td></td>
</tr>
</tbody>
</table>

---

Poor immunity and recurrent infections

Individuals with poor immunity and/or recurrent infections should receive treatment selected from the following groups:

1. **Immune-enhancing herbs:**
   - Echinacea
   - Astragalus *
   - Picrorrhiza *
   - Andrographis
   - Phytolacca

   *Astragalus should not be prescribed during acute episodes and Picrorrhiza and Astragalus should not be prescribed if the patient is constitutionally cold.

---

©2015 All Rights Reserved. Wayne Sodano, DC, DABCI, DACBN, CFMP, BCTN - Integrative Medicine Health Services, LLC / www.CollegeofIntegrativeMedicine.org - Reproduction in whole or part is prohibited without written permission.
2. Tonic and adaptogenic herbs:
   - Panax*
   - Eleutherococcus*
   - Withania

   Panax and Eleutherococcus should not be

3. Bitter herbs:
   - Artemisia absinthium - Especially where the patient appears anemic or undernourished. Exercise caution if the patient is also constitutionally cold or counter the cooling effect with warming herbs.

Sample Echinacea Protocol

Echinacea alone, either the root of E. angustifolia or E. purpurea, has helped countless patients with poor immunity in doses equivalent to 2.5 - 7.5 g/day (5 - 15 ml of a 1:2 preparation)

1. Take 5 ml dose each day (2.5 g) as a maintenance dose (take this twice this dose for maintenance if immunity is poor.)
2. If infection threatens, double or triple the daily maintenance dose until the treat passes.
3. If infection takes hold, maintain the higher dose until the infection is completely gone and then return to normal daily dose.

References

ii Ibid.
iv Ibid. p. 142.