



June 12, 2008

To the Editor:

The recently published randomized controlled trial of St. John's wort (*Hypericum perforatum*) for attention-deficit/hyperactivity disorder (ADHD) in children and adolescents (*JAMA*. 2008;299(22):2633-2641) has two fundamental failings. Although lauded by Dr. Chan as an example of a how a well-designed trial can be conducted using an herbal intervention,<sup>1</sup> both the study material quality and the justification for studying its effect on ADHD were insufficient.

By the authors' own admission, the St. John's wort extract used in the study was seriously degraded by the trial's end. Though reported to be standardized to 0.3% hypericin, actual analysis of the product found it contained only 0.13% hypericin at the study's termination. It is instructive to note that funding support was provided by the National Center for Complementary and Alternative Medicine at the National Institutes of Health and that this center now has in place a policy to assure, among other product integrity issues, the stability of botanical test agent preparations during the life of the study.<sup>2</sup>

Additionally, according to the authors, the "most common" herbal treatments used by children with ADHD are St. John's wort, *Echinacea* species, and ginkgo. However, the supporting reference for the authors' assertion was a survey conducted in 2000-2001 that reported five out of 117 children had taken St.

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<sup>1</sup> Chan E. Quality of Efficacy Research in Complementary and Alternative Medicine *JAMA*. 2008;299(22):2685-2686.

<sup>2</sup> <http://grants.nih.gov/grants/guide/notice-files/NOT-AT-05-004.html> accessed May 11, 2008.

John's work over the course of their entire life without clarifying whether the use was specifically for the treatment of ADHD.<sup>3</sup>

I strongly urge the professional community that tests botanical materials for efficacy to ensure that the indications being studied are appropriately guided by basic research findings and that the quality of the herbal test materials is assured. Those researchers that meet these basic scientific requirements should then follow appropriate reporting as detailed in the elaborated CONSORT statement for herbal interventions,<sup>4</sup> which provides recommendations for reporting trials that employ herbal product interventions. Journals that publish these articles also should be aware of and follow these recommendations when reviewing articles for publication.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Steven Dentali', with a long, sweeping horizontal line extending to the right.

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(320 words)

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<sup>3</sup> Cala S, Crismon ML, Baumgartner J. A survey of herbal use in children with attention-deficit-hyperactivity disorder or depression. *Pharmacotherapy*. 2003;23(2):222-230.

<sup>4</sup> Gagnier JJ, Boon H, Rochon P, Moher D, Barnes J, Bombardier C; CONSORT Group. Reporting randomized, controlled trials of herbal interventions: an elaborated CONSORT statement. *Ann Intern Med*. 2006 Mar 7;144(5):364-7.