



Botanical Safety Consortium Introduction and Updates

Cara Welch, PhD

Acting Director

Office of Dietary Supplement Programs

Food & Drug Administration (FDA)

Steering Committee Chair



**BOTANICAL
SAFETY CONSORTIUM**

Outline

Background

- Botanical Usage
- Current Challenges

Botanical Safety Consortium

- Mission & Objectives
- Initial Case Studies





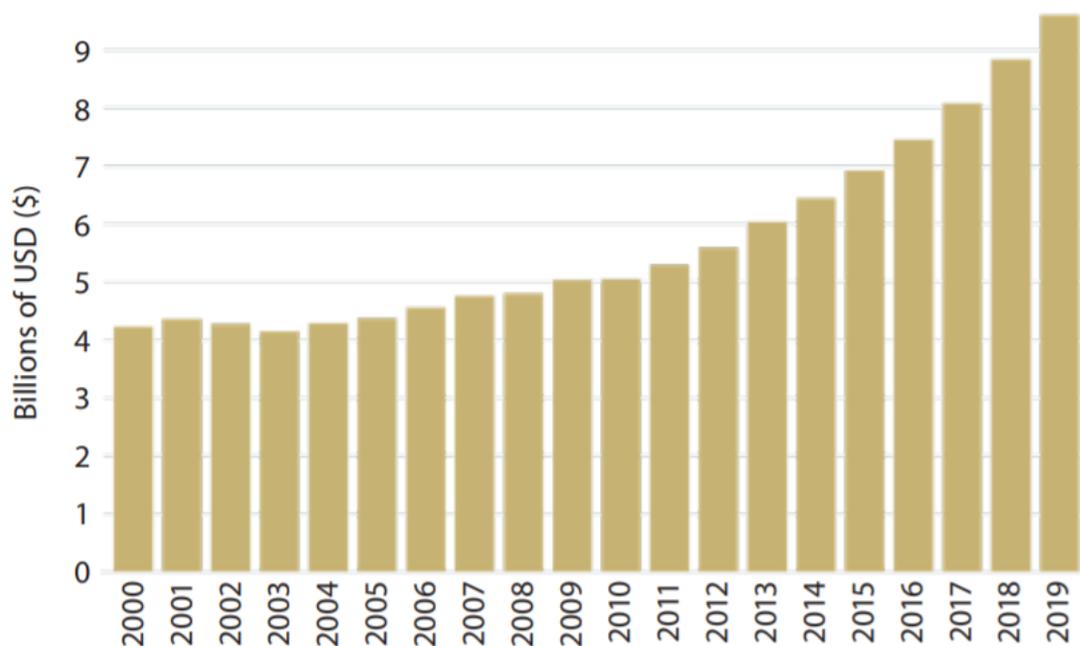
Botanicals are complex

- **Plants are chemical factories**
 - 28,187 plant species recorded as being of medicinal use*
 - Few (16%) cited in medicinal regulatory publications
 - Secondary metabolites exhibit a broad range of bioactivities
 - Many bioactive constituents from plants have been exploited by humans for use as pesticides, pharmaceuticals, poisons, or other consumer products

*[Kew Royal Botanic Gardens State of the Worlds Plants Report, 2017.](#)

Widespread botanical use

Figure 1. Total US Retail Sales of Herbal Supplements



Source: Nutrition Business Journal

US Supplement Sales Rise Sharply during First Six Months of 2020 COVID-19 pandemic boosts sales of medicinal fungi and herbs commonly used for immune health

By Tyler Smith

Clarke et al. 2015; Smith et al., 2019. *HerbalGram*; <https://www.nutritioninsight.com/news/potent-bota>

Systematic Review Article

Herbal Drug use in Sickle Cell Disease Management; Trends and Perspectives in Sub-Saharan Africa - A Systematic Review

Author(s): Michael P. Okoh*, Lukman A. Alli, Martti E.E. Tolvanen, Maxwell M. Nwegbu

Journal Name: Current Drug Discovery Technologies

Volume 16 , Issue 4 , 2019

[BMC Health Serv Res.](#) 2019; 19: 952.

PMCID: PMC69

Published online 2019 Dec 10. doi: [10.1186/s12913-019-4739-0](https://doi.org/10.1186/s12913-019-4739-0)

PMID: [318](https://pubmed.ncbi.nlm.nih.gov/318)

The importance of herbal medicine use in the German health-care system: prevalence, usage pattern, and influencing factors



ELSEVIER

Journal of Ethnopharmacology

Volume 215, 6 April 2018, Pages 184-190



Herbal medicine uses to treat people with epilepsy: A survey in rural communities of northern Peru

Emilie Auditeau ^{a, b}, Luz Maria Moyano ^{a, b, c}, Geneviève Bourdy ^d, Mandy Nizard ^{a, b},

Jérémy Jost ^{a, b}, Voa Ratsimbazafy ^{a, b}, Pierre-Marie Preux ^{a, b}, Farid Boumediene ^{a, b}

Challenges with botanicals

- Toxicity testing, safety evaluation, and risk assessment processes was built around and optimized for single chemicals (drug, pesticides, etc.)

Drugs

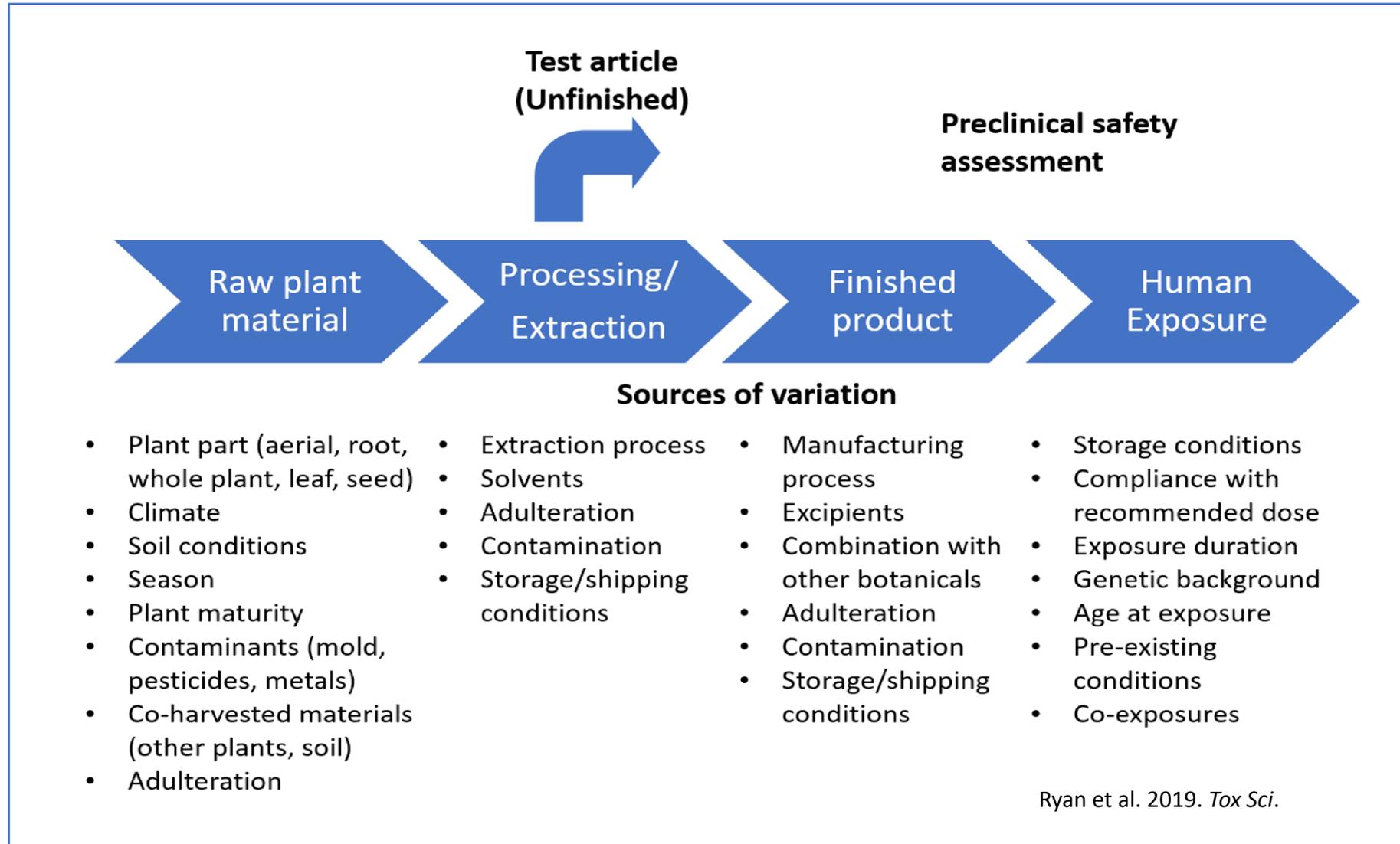
- Regulatory structure aimed at ensuring safety and efficacy
- Assumed to be harmful until proven safe
- Simple and consistent
- Biological activity is associated with the constituent

Botanicals

- Regulatory structure aimed at ensuring access
- Assumed to be safe until proven harmful
- Complex and variable
- Biological activity is associated with the whole mixture



Inherent variation produces many potential test articles



The problems...

- Limited botanical safety assessment methods and framework:
 - Reliance on history-of-use data (food use vs supplement use)
 - *In vivo* toxicity testing to fill gaps (cost, time, and ethical concerns)
- Global botanical safety requirements are diverse and varied
 - Lack of global consensus regarding what comprises sufficient safety substantiation for a botanical
- Little toxicity data on formulated botanical products in the market
 - Existing toxicity data is often on constituents
 - Many multi-ingredient products have no toxicity data



The Botanical Safety Consortium

Applied In Vitro Toxicology, Vol. 5, No. 1 | Roundtable

Full Access

The Botanical Safety Consortium

Moderator: Amy L. Roe Participants: Joseph T. Dever, Stefan Gafner, Daniel S. Marsman, Cynthia V. Rider and Sibyl Swift

Published Online: 13 Mar 2019 | <https://doi.org/10.1089/aivt.2018.29018.rtl>

View

FDA STATEMENT

Share

Statement from FDA Commissioner Scott Gottlieb, M.D., on the agency's new efforts to strengthen regulation of dietary supplements by modernizing and reforming FDA's oversight

*I'm pleased to announce that we've recently created the Botanical Safety Consortium, a **public-private partnership** that will gather leading scientific minds from industry, academia and government to promote scientific advances in evaluating the safety of botanical ingredients and mixtures in dietary supplements.*



BOTANICAL
SAFETY CONSORTIUM

FDA Announces Convening of the Botanical Safety Consortium

Subscribe to Email Updates

Share

Tweet

LinkedIn

Email

Print

Constituent Update

November 14, 2019

The U.S. Food and Drug Administration (FDA) announced today that the Botanical Safety Consortium (BSC) has formally been convened. This milestone is the result of a [Memorandum of Understanding \(MOU\)](#) that was recently signed between the FDA, the [National Institutes of Health's National Institute of Environmental Health Sciences](#), and the [Health and Environmental Sciences Institute \(HESI\)](#). This MOU establishes the framework for the BSC.

The BSC was originally announced in the FDA's [February 2019 statement](#) on the agency's new efforts to strengthen regulation of dietary supplements through modernization and reform. The Consortium's mission is to provide a forum for scientists from government, academia, consumer health groups, industry, and non-profit organizations to work collaboratively to generate a sound scientific basis for integrating existing safety data and the latest toxicology tools to evaluate botanical safety in dietary supplements. With the execution of the MOU, specific guidelines for membership and participation in the BSC will be established by early 2020.

Problem Statements for the Botanical Safety Consortium

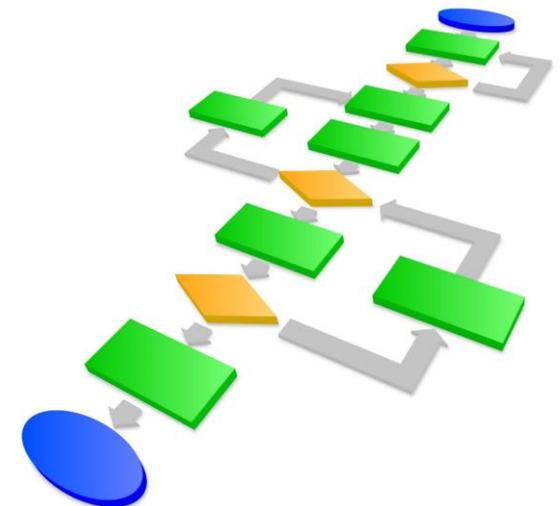
NOW

We do not know which approach methodologies can be used to evaluate botanical safety

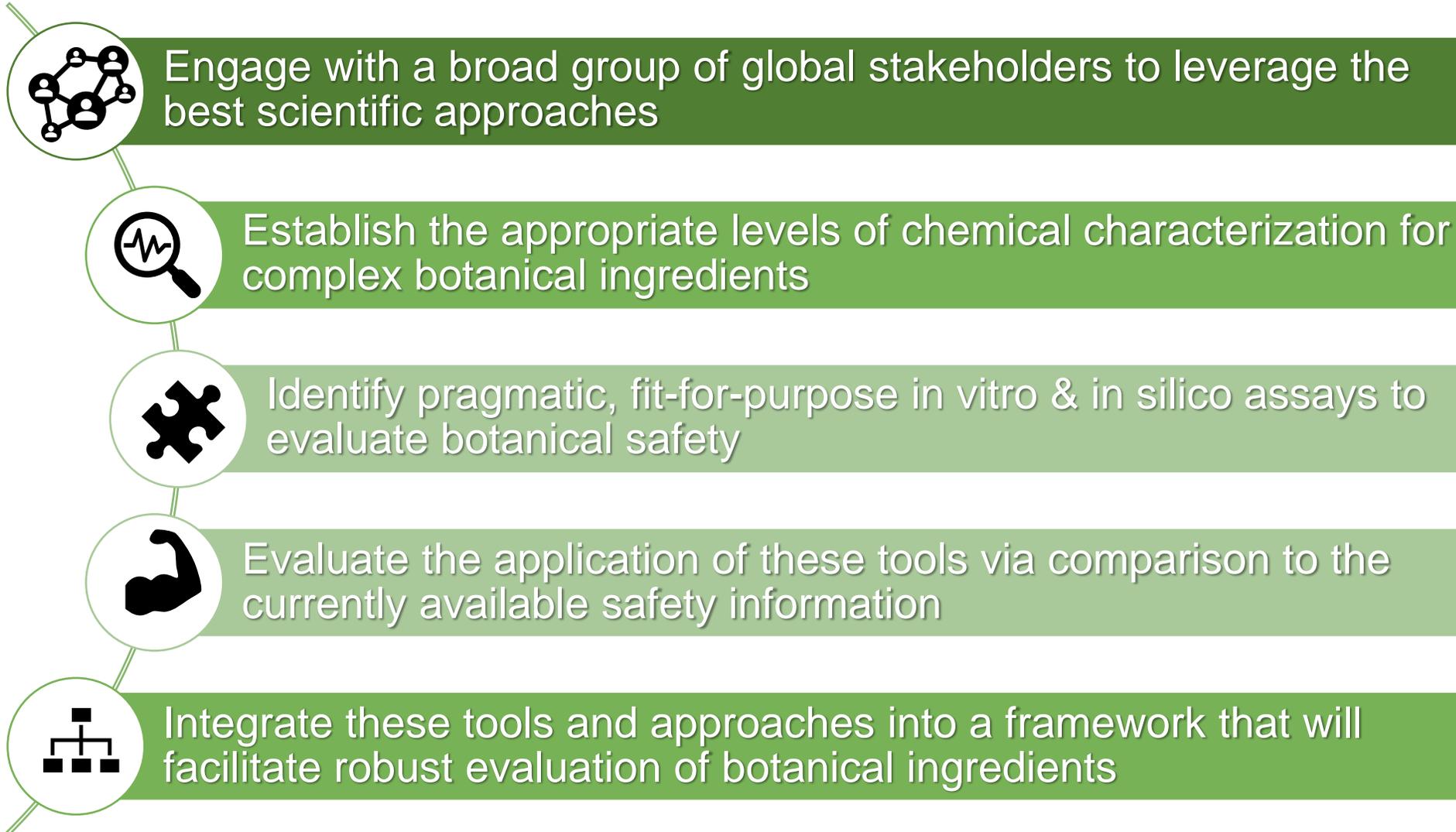


WHERE WE WANT TO BE

We need a testing strategy & framework to evaluate botanical safety



Botanical Safety Consortium Objectives



Current Charge of the Botanical Safety Consortium

To evaluate the suitability of assays for botanicals as complex mixtures





What we are NOT doing

- Making safety determination of botanical ingredients
- Making regulatory decisions
- Endorsing any particular method or product
- Testing 'off the shelf' products
- Testing individual constituents of botanicals (unless negative or positive controls)
- Looking at routes of exposure other than oral
- Performing mammalian *in vivo* studies
- Performing risk assessments
- Validating methods

BSC Current Working Groups: Thematic Focus

Toxicity Endpoints

Hepatotoxicity

Cardiotoxicity

Neurotoxicity

Genotoxicity

DART

Systemic Toxicity

Exposure and TK

ADME

Botanical-Drug
Interactions

Analysis

Chemical Analysis

Data Analysis

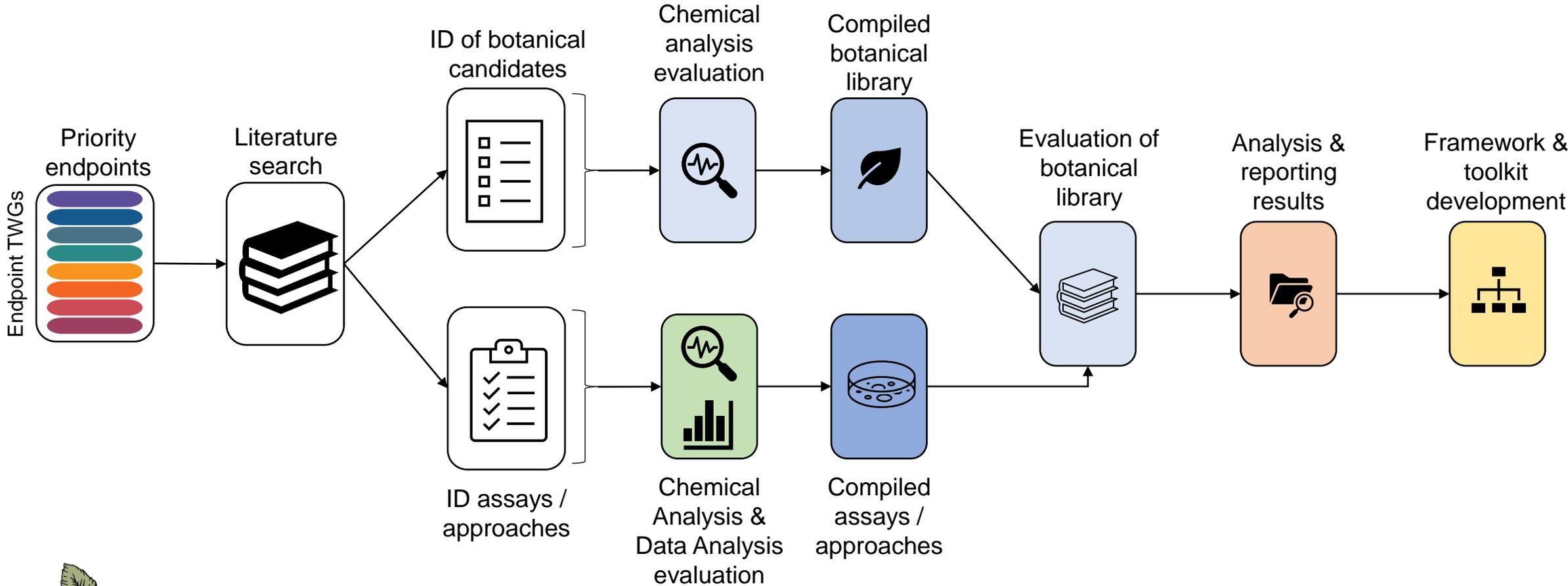
In vitro – in vivo
extrapolation

Foundational Work

Literature Review

Pharmacognosy

Strategy Details



Ongoing stakeholder communication & engagement



Assays

In Silico
Methods

Assays for
screening

Assays for
Mechanistic
Follow-Up

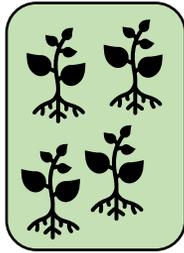
A photograph of laboratory glassware on a reflective surface. On the left is a clear Erlenmeyer flask containing a small green plant with several leaves. To its right is another clear Erlenmeyer flask containing a clear liquid, with a thermometer placed inside it. The thermometer has a red liquid column. The background is a blurred laboratory setting with blue and white tones.

Assay Guidelines

- Established and reproducible
- Relevant for key mechanisms for botanical-induced toxicity
- Suitable for botanicals as complex mixtures
- Accessible for use by many groups
- Available at a reasonable cost

Botanical Candidate Selection Process

Nomination of Botanical candidates



- In vivo evidence (rodent)
- Clinical evidence (human)
- In vitro evidence
- Used in susceptible populations?
- Known toxic constituents

- Genotoxicity
- Hepatotoxicity
- Drug-botanical Interactions
- DART
- Systemic Toxicity
- Cardiotoxicity
- Neurotoxicity

Chemical Analysis Evaluation



- Identification of product
- Authentication of botanical
- Contaminants
- Nutrient Analysis / Mass balance
- Constituent Identification
- Marker quantification
- Material stability
- Dosing solution

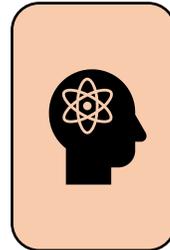
Literature Collection



- Gather information from authoritative sources
- Create literature reviews for uses and toxicity data

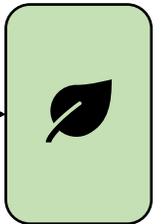
Pharmacognosy

Advisory Information



- ID of source / supplier
- Adverse events / effects
- Indications for use
- Recommended doses
- Type(s) of products / preparations
- Contaminants & adulterants
- Nomenclature / naming convention

Compiled Botanical list for testing



Additional discussions on feasibility / labs / suitability for assays

Botanical Case Studies

Standardized Common Name	Scientific Name	Plant part(s)
Aristolochia fangchi	<i>Aristolochia fangchi</i> Y.C. Wu ex L.D. Chou & S.M. Hwang	Root
Ashwagandha	<i>Withania somnifera</i> (L.) Dunal	Root
Asian Ginseng	<i>Panax ginseng</i> C.A. Mey.	Root
Blue cohosh	<i>Caulophyllum thalictroides</i> (L.) Michx.	Root and Rhizome
Comfrey	<i>Symphytum officinale</i> L.	Root or leaf
Ephedra	<i>Ephedra sinica</i> Stapf	Aerial parts
Green Tea	<i>Camellia sinensis</i>	Leaf
Goldenseal	<i>Hydrastis canadensis</i> L.	Root and Rhizome
Kava	<i>Piper methysticum</i> G. Forst.	Root and Rhizome
Kratom	<i>Mitragyna speciosa</i> (Korth.) Havil.	Leaf
Milk thistle	<i>Silybum marianum</i> (L.) Gaertn.	Seed
Usnea lichen	<i>Usnea</i> spp.	Whole Plant
Yohimbe	<i>Pausinystalia johimbe</i> (K. Schum.) Pierre ex Beille	Bark



Asian Ginseng

***Panax ginseng* C.A. Mey**

- Very robust history of use
- Comprehensive animal toxicology studies
- Many human clinical studies also available

- **NEGATIVE** control for assays



Milk Thistle

Silybum marianum (L.) Gaertn.

- Very robust history of use
- Comprehensive animal toxicology studies
- Many human clinical studies also available
- **NEGATIVE** control for assays



Aristolochia fangchi

Y.C. Wu ex L.D. Chou & S.M. Hwang

- Contains aristolochic acid (AA); many other *Aristolochia* species are used worldwide
- Human case reports, clinical studies, and adverse event reporting have clearly demonstrated:
 - Kidney damage [aristolochic acid nephropathy (AAN)] – end-stage renal failure
 - Bladder cancer (upper tract urothelial carcinoma)
- AA-DNA adducts are biomarkers of exposure
- Restricted / banned use in many regulatory jurisdictions



Ashwagandha Root Extract ***Withania somnifera* (L.) Dunal**

- Multiple case reports describing hepatotoxicity and one for cardiotoxicity
- Clinical trial data in humans pointing towards safe use
- In vitro evidence for alternation of developmental pathways in human cells



Blue cohosh

Caulophyllum thalictroides (L.) Michx.

- Not recommended for use in 1st trimester of pregnancy due to cardioactivity, teratogenic and embryotoxic risk
- Surveys & case publications re: human use during pregnancy point to caution needed (AHP, 2012; Romm, 2009)
- Demonstrated teratogenicity and embryotoxicity of constituents in animal models
 - Quinolizidine alkaloids (N-methylcytisine, taspine, anagyrine)
 - Livestock “crooked-calf” disease linked to anagyrine
 - In vitro studies in human cells with constituents; embryotoxicity plausible (Kennelly et al., 1999)
 - Fish model studies have shown teratogenicity (Wu et al., 2010)
- Nicotinic activity of N-methylcytisine linked to cardiac effects in animal studies (though at concentrations much higher than seen in products)

AHP, 2012: <https://herbal-ahp.com/collections/frontpage/products/blue-cohosh-root-rhizome>

Kennelly et al., 1999: <https://doi.org/10.1021/np9901581>

Romm, 2009: <https://elischolar.library.yale.edu/ymtdl/88/>

Wu et al., 2010: <https://doi.org/10.1021/tx100205a>



Comfrey

Symphytum officinale (L.)

- Contains pyrrolizidine alkaloids (PA) (Mei et al., 2005, 2010)
 - Hepatotoxicity (humans, livestock, & laboratory animals)
 - Sinusoidal obstruction syndrome (SOS) / veno-occlusive disease
 - PAs metabolized to pyrrole metabolites with alkylating properties
 - Damage hepatic endothelial cells and cause sinusoidal obstruction → liver damage
 - Carcinogenicity
 - Hepatocellular adenomas and haemangioendothelial sarcomas (rat)
 - Mutagenic in rat liver
 - Tumorigenicity from PA genotoxicity
- Safety concerns have led to restrictions on oral use
 - Restricted / banned oral use in many regulatory jurisdictions



Ephedra (Ma-huang)

Ephedra sinica Stapf

- Contains ephedrine-type alkaloids with demonstrated cardiovascular and CNS stimulating effects (ephedrine & pseudoephedrine)
 - Sympathomimetic
 - Stimulation of α -, β 1-, and β 2-adrenergic receptors
- Human case reports, clinical studies, and adverse event reporting show CV (hypertension, palpitation, cardiac arrest) and cerebral (stroke, seizures) effects.
- Restricted / banned use in many regulatory jurisdictions



Green Tea Extract (GTE)

Camellia sinensis

- GTEs may contain hepatotoxic solvent residues, pesticide residues, pyrrolizidine alkaloids and elemental impurities
- GTE catechin profiles vary significantly with manufacturing processes.
- Published adverse event case reports associate hepatotoxicity with EGCG intake amounts from 140 mg to ~1000 mg/day
- *“Do not take on an empty stomach. Take with food. Do not use if you have a liver problem and discontinue use and consult a healthcare practitioner if you develop symptoms of liver trouble, such as abdominal pain, dark urine, or jaundice (yellowing of the skin or eyes).”*
- Metabolism/ BDI interactions

Goldenseal Root

Hydrastis canadensis L.



- Contraindicated in pregnancy unless otherwise directed by a qualified health professional expert in the use of this substance (AHPA)
- Contains berberine, a potent bilirubin displacer and metabolism inhibitor
- Evidence of in vitro inhibition of human P450 3A4 enzymes
- Carcinogenicity in animal and in vitro studies
 - Positive in rats - hepatocellular adenoma
 - Some evidence in male mice
 - Negative for mutagenicity in Ames test
 - Negative in in vivo micronucleus test



Kava Root

***Piper methysticum* G. Forst.**

- Due to their tranquilizing, sedative, and anxiolytic properties, kava is widely used all over the world for recreational and medicinal purposes
- Cultivar can greatly change the chemical constituents
- Kava-related liver disease is a well-defined clinical entity that occurred in a few patients worldwide



Kratom

***Mitragyna speciosa* (Korth.) Havil.**

- Kratom is a natural psychoactive preparation
- Illegal in some countries (Australia, Malaysia, and Thailand) but legal in others
- Hepatotoxicity reports mostly linked to long-term kratom consumption or to its excessive intake.

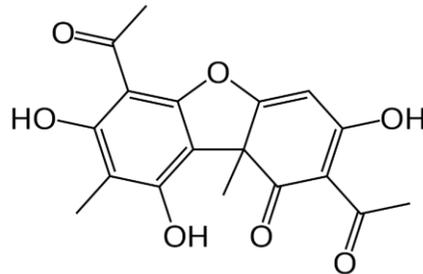


Usnea Lichen

Usnea spp.

- Usnic acid produce by *Usnea* spp. is primarily marketed as a dietary supplement to promote weight loss
- Signals for reproductive toxicity in the National Toxicology Program Study

Usnic Acid
CARN 125-46-2



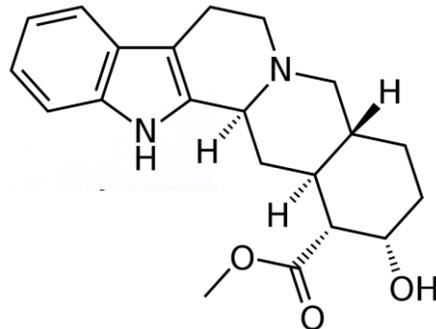
Yohimbe

Pausinystalia johimbe (K. Schum.) Pierre ex Beille



Yohimbé
(Rinde)

Yohimbine
CASRN 146-48-5



- Yohimbine and yohimbe extracts cause dilation of blood vessels, resulting in vasocongestion.
- Potential carcinogenicity from yohimbine based on read-across to reserpine



- Website: www.botanicalsafetyconsortium.org
- Email: botanicalsafety@hesiglobal.org