

## NATURAL HEALTH PRODUCT

### ECHINACEA – *ECHINACEA PURPUREA*

This monograph is intended to serve as a guide to industry for the preparation of Product Licence Applications (PLAs) and labels for natural health product market authorization. It is not intended to be a comprehensive review of the medicinal ingredient.

#### Notes

- Text in parentheses is additional optional information which can be included on the PLA and product label at the applicant's discretion.
- The solidus (/) indicates that the terms and/or statements are synonymous. Either term or statement may be selected by the applicant.

**Date** December 18, 2018

#### Proper name(s), Common name(s), Source material(s)

Table 1. Proper name(s), Common name(s), Source material(s)

Proper name(s)	Common name(s)	Source material(s)		
		Proper name(s)	Part(s)	Preparation(s)
<i>Echinacea purpurea</i>	<ul style="list-style-type: none"><li>► Eastern purple-coneflower</li><li>► Echinacea</li><li>► Purple coneflower</li></ul>	<i>Echinacea purpurea</i>	Herb top	<ul style="list-style-type: none"><li>► Dried</li><li>► Juice</li></ul>
			<ul style="list-style-type: none"><li>► Root</li><li>► Herb top and root</li></ul>	Dried

References: Proper name: USDA 2018; Common names: Blumenthal et al. 2000, McGuffin et al. 2000, 1997; Source materials: Barnes et al. 2007, ESCOP 2003.

#### Route of administration

Oral

#### Dosage form(s)

This monograph excludes foods or food-like dosage forms as indicated in the Compendium of Monographs Guidance Document.

### Acceptable dosage forms by age group:

**Children 2 years:** The acceptable dosage forms are limited to emulsion/suspension and solution/liquid preparations (Giacoia et al. 2008; EMEA/CHMP 2006).

**Children 3-5 years:** The acceptable dosage forms are limited to chewables, emulsion/suspension, powders and solution/liquid preparations (Giacoia et al. 2008; EMEA/CHMP 2006).

**Children 6-11 years, Adolescents 12-17 years, and Adults 18 years and older:** The acceptable dosage forms for this age category and specified route of administration are indicated in the Compendium of Monographs Guidance Document.

### Use(s) or Purpose(s)

- ▶ Traditionally used in Herbal Medicine to help relieve cold symptoms (Moerman 1998; Grieve 1971; Remington and Wood 1918).
- ▶ Traditionally used in Herbal Medicine to help relieve symptoms of upper respiratory tract infections (Moerman 1998; Grieve 1971; Remington and Wood 1918).
- ▶ (Traditionally) used in Herbal Medicine to help fight off infections, especially of the upper respiratory tract (Hoffmann 2003; Mills and Bone 2000; Grieve 1971; Remington and Wood 1918).
- ▶ Supportive therapy in the treatment of upper respiratory tract infections (e.g. common colds) (Goel et al. 2004; Schulten et al. 2001; Brinkeborn et al. 1999; Hoheisel et al. 1997; Bräunig et al. 1992).
- ▶ Helps to relieve the symptoms and shorten the duration of upper respiratory tract infections (Goel et al. 2004; Schulten et al. 2001; Brinkeborn et al. 1999; Hoheisel et al. 1997; Bräunig et al. 1992).

The following combined use(s) or purpose(s) is/are also acceptable:

Traditionally used in Herbal Medicine to help relieve symptoms of colds and upper respiratory tract infections (Goel et al. 2004; Schulten et al. 2001; Brinkeborn et al. 1999; Moerman 1998; Hoheisel et al. 1997; Bräunig et al. 1992; Grieve 1971; Remington and Wood 1918).

### Note

Claims for traditional use must include the term “Herbal Medicine”, “Traditional Chinese Medicine”, or “Ayurveda”.

### Dose(s)

### Subpopulation(s)

As specified below.

## Quantity(ies)

Methods of preparation: Dry, Powder, Non-Standardised Extracts (Dry extract, Tincture, Fluid extract, Decoction, Infusion)

### HERB TOP

Table 2. Dose information for *Echinacea purpurea* herb top per day

Subpopulation(s)		Dried herb top (gram/day)	
		Minimum	Maximum
Children <sup>1</sup>	2-4 years	0.4	1.0
	5-9 years	0.6	1.5
	10-11 years	1.3	3.0
Adolescents <sup>1</sup>	12-14 years	1.3	3.0
	15-17 years	2.5	6.0
Adults <sup>2,3</sup>	18 years and older	2.5	6.0

<sup>1</sup> Children and adolescent doses were calculated as a proportion of the adult dose (JC 2018). The use of *Echinacea purpurea* herb top in children is supported by the following references: McIntyre 2005; Bove 2001; Schilcher 1997.

<sup>2</sup> Adult dose supported by the following reference: Mills and Bone 2000.

<sup>3</sup> Includes pregnant and breastfeeding women.

### ROOT

Table 3. Dose information for *Echinacea purpurea* root per day

Subpopulation(s)		Dried root (gram/day)	
		Minimum	Maximum
Children <sup>1</sup>	2-4 years	0.15	0.8
	5-9 years	0.23	1.1
	10-11 years	0.45	2.3
Adolescents <sup>1</sup>	12-14 years	0.45	2.3
	15-17 years	0.90	4.5
Adults <sup>2,3</sup>	18 years and older	0.90	4.5

<sup>1</sup> Children and adolescent doses were calculated as a proportion of the adult dose (JC 2012). The use of *Echinacea purpurea* root in children is supported by the following references: McIntyre 2005; Bove 2001; Schilcher 1997

<sup>2</sup> Adult dose supported by the following references: Mills and Bone 2000; Bräunig et al. 1992

<sup>3</sup> Includes pregnant and breastfeeding women

## HERB TOP and ROOT

Table 4. Dose information for *Echinacea purpurea* preparations containing a combination of herb top and root per day

Subpopulation(s)		Dried herb top and root (gram/day)	
		Minimum	Maximum
Children <sup>1</sup>	2-4 years	0.5	0.9
	5-9 years	0.8	1.4
	10-11 years	1.5	2.8
Adolescents <sup>1</sup>	12-14 years	1.5	2.8
	15-17 years	3.0	5.5
Adults <sup>2,3</sup>	18 years and older	3.0	5.5

<sup>1</sup> Children and adolescent doses were calculated as a proportion of the adult dose (JC 2012). The use of *Echinacea purpurea* in children is supported by the following references: McIntyre 2005; Bove 2001; Schilcher 1997.

<sup>2</sup> Adult dose supported by the following reference: Mills and Bone 2000.

<sup>3</sup> Includes pregnant and breastfeeding women.

## Method of preparation: Juice

## HERB TOP

Table 5. Dose information for the juice of *Echinacea purpurea* herb top per day

Subpopulation(s)		Juice of herb top (milliliter/day)	
		Minimum	Maximum
Children <sup>1</sup>	2-4 years	0.7	1.7
	5-9 years	1.0	2.5
	10-11 years	2.0	5.0
Adolescents <sup>1</sup>	12-14 years	2.0	5.0
	15-17 years	3.9	10.0
Adults <sup>2,3</sup>	18 years and older	3.9	10.0

<sup>1</sup> Children and adolescent doses were calculated as a proportion of the adult dose (JC 2018). The use of *Echinacea purpurea* herb top in children is supported by the following references: McIntyre 2005; Bove 2001; Schilcher 1997.

<sup>2</sup> Adult dose supported by the following references: Schulten et al. 2001; Hoheisel et al. 1997.

<sup>3</sup> Includes pregnant and breastfeeding women.

## Direction(s) for use

Take at the first sign of infection (Goel et al. 2004; Schulten et al. 2001; Brinkeborn et al. 1999; Hoheisel et al. 1997).

## Duration(s) of use

Consult a health care practitioner/health care provider/health care professional/doctor/physician for use beyond 8 weeks (ESCOP 2003; Blumenthal et al. 2000).

## Risk information

### Caution(s) and warning(s)

- ▶ Consult a health care practitioner/health care provider/health care professional/doctor/physician if symptoms persist or worsen.
- ▶ Consult a health care practitioner/health care provider/health care professional/doctor/physician prior to use if you have a progressive systemic disease such as tuberculosis, collagenosis, multiple sclerosis, AIDS and/or HIV infection or an auto-immune disorder (Brinker 2010; EMA 2010; McGuffin et al. 1997).
- ▶ Consult a health care practitioner /health care provider/health care professional/doctor/physician prior to use if you are taking medications to suppress the immune system (immunosuppressive medications) (Brinker 2010; Mills and Bone 2005).

### Contraindication(s)

No statement required.

### Known adverse reaction(s)

#### *Preparations containing herb top*

Stop use if hypersensitivity/allergy occurs (MHRA 2018; EMA 2010; Kligler 2003; WHO 1999).

### Non-medicinal ingredients

Must be chosen from the current Natural Health Products Ingredients Database (NHPID) and must meet the limitations outlined in the database.

### Storage conditions

No statement required.

### Specifications

- ▶ The finished product specifications must be established in accordance with the requirements described in the Natural and Non-prescription Health Products Directorate (NNHPD) Quality of Natural Health Products Guide.
- ▶ The medicinal ingredient must comply with the requirements outlined in the NHPID.

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