

# Can Herbal Medicine Help People with Anxiety, Panic & PTSD?

Andrew Gaeddert, BA, AHG

Everyone experiences fear and anxiety. Fear is a response to an external threat, whereas anxiety can erupt from external events and a person's own thoughts. Anxiety is a stress response that can arise suddenly, as in panic, or can occur gradually.

According to the *American Heritage Dictionary*, anxiety is a state of apprehension, uncertainty and fear resulting from the anticipation of a realistic or fantasized threatening event or situation, often impairing physical and psychological functioning. Panic is a sudden overpowering terror.

Generalized anxiety disorder pertains to persistent daily anxiety or worry that interferes with one's life. In addition, there may be three or more of the following symptoms: restlessness; fatigue; concentration problems; irritability; muscle tension; and insomnia. Three to five percent of adults have general anxiety disorder during a given year. Women are twice as likely as men to have this disorder. It has not been proven that repressed conflicts or chemical imbalances cause anxiety, although these are popular theories among mental health professionals.

Panic attacks are acute and extreme anxiety responses to a specific situation. Symptoms of a panic attack include: a sudden appearance of shortness of breath; feelings of being smothered or "closed in"; heart palpitations; shaking; fear of going crazy or losing control; feeling detached from the environment; dizziness; sweating; and chest pain. It is not uncommon for people to worry that they have a dangerous medical problem. Although panic attacks are not dangerous in and of themselves, it makes sense to seek a physician to rule out other disorders.

Posttraumatic stress disorder (PTSD) is an anxiety disorder caused by exposure to an overwhelming traumatic event experienced by combat veterans and victims of violent acts, whereby the person repeatedly re-experiences the event. Sometimes a person's symptoms don't begin until months or years after the traumatic event took place. Symptoms include intense fear, hopelessness and horror. The person re-experiences the trauma in nightmares or flashbacks. The person may have difficulty sleeping or be easily startled. Oftentimes PTSD becomes less severe over time.

## Conventional Treatments

Conventional therapies include behavior modification, in which the person is exposed to the situation that causes the fear, panic and worry. Cognitive behavioral therapy, which emphasizes self-help assignments and examining one's thoughts, can be very effective for anxiety, panic and PTSD. (Beck, Judith. *Cognitive Therapy: Basics and Beyond*. New York, NY: Guilford Press.) Psychiatrists typically recommend drugs such as SSRIs, MAO inhibitors or tricyclic antidepressants alone or in addition to counseling or behavioral therapy. Typical side-effects of medications include anxiety; fatigue; gastrointestinal symptoms/changes; insomnia; headaches or migraines; and sexual dysfunction.

## Herbal Approaches

There are several reasons why clients want herbal approaches. Some individuals are afraid of being on antidepressants and other medications for long periods of time, and therefore try herbs first. Other people have not had satisfactory results with typical conventional medications or treatment. Finally, some men and women try conventional drugs, but find their side-effects intolerable.

The best way to take herbs is to have them administered by a trained herbalist. For example, an herbalist trained in traditional Chinese medicine (TCM) will note the symptoms of anxiety and panic but will also determine the other symptoms such as nightmares; sweating during the day and at night; mood swings; digestive symptoms; muscle aches; joint pain; and sensations of hot and cold. Women may be asked about their period and any hormonal changes. A TCM practitioner may examine the patient's face and determine if the client seems especially fearful, timid or angry. Qualities of the pulse and tongue are measured. Clinicians may also pay attention to the individual's body type and speed of movement.

According to TCM, certain lifestyle habits and constitutional factors would predispose some people to suffer from panic disorders more than others. For example, without adequate sleep and mind rest such as *tai qi* and meditation, one might be more likely to suffer from panic attacks. A poor diet may lead to symptoms such as hot sensations and confusion. Although herbal antidepressants or sedatives can be administered, well-trained herbalists keep in mind constitutional factors when they select herbs. The following examples demonstrate how different patients with panic disorder and PTSD are treated differently by Chinese medicine.

### Patient Cases

Case #1: Bob has a hot energetic pattern. He suffers from posttraumatic stress disorder. He feels explosive rage at times, which by itself creates heat. Heat symptoms include his face becoming red, migraines and headache. Furthermore, Bob is always thirsty, so he drinks sodas to quench his thirst. However, they contain sugar (which is warming), and caffeine, which removes water (which is cooling). Thus, over time, Bob is getting dehydrated.

In addition, Bob drinks alcohol at night to help him relax and go to sleep. Alcohol is warming and also a diuretic. Alcohol is known to interfere with sleep, so the rest Bob gets is less than satisfactory. No wonder he wakes up irritable and groggy and needs plenty of coffee, which is heating, to get going, and the whole cycle begins again. During the day, Bob eats fast food, many fried foods, excessive amounts of meats, and sweets. Bob's pulse was rapid and his tongue was red and peeled. These all contributed to heat.

In addition to drinking more water and fresh vegetables, we recommended that Bob reduce his alcohol, sweets and fast food intake. We recommended two tablets QID of a coptis formula consisting of coptis root (*huang lian*); lophartherum herb (*dan zhu ye*); bupleurum root (*chai hu*); rehmannia root (*sheng di huang*); tang kuei root (*dang gui*); peony root (*bai shao*); akebia trifoliata root (*mu tong*); anemarrhena rhizome (*zhi mu*); phellodendron bark (*huang bai*); gentiana root (*long dan cao*); alisma rhizome (*ze xie*); plantago seed (*che qian zi*); scute root (*huang qin*); sophora root (*ku shen*); forsythia fruit (*lian qiao*); gardenia fruit (*zhi zi*); and licorice root (*gan cao*) to clear heat; a calming formula (three tablets containing magnesium aspartate (75mg) and taurine (100mg)); an enzyme formula (300 milligrams, including amylase, cere calase, protease, catalase, alpha-galactosidase, lipase; glucoamylase, cellulase and malt diatase); and two tablets QID of an herbal formula [1,800 milligrams, including biota seed (*bai zi ren*), peony seed (*bai shao*); *dang gui*; fushen sclerotium (*fu shen*); polygala root (*yuan zhi*); zizyphus seed (*suan zao ren*); ophiopogon

tuber (*mai men dong*); codonopsis root (*dang shen*); and succinum resin (*hu po*)] for its heart yin nourishing and stress-reducing effects.

After two weeks, Bob noticed that he was more regular and he had less headaches. His pulse was slightly slower and his tongue less red. We continued on the above mentioned protocol for one month and as his heat signs were alleviated, we eliminated the coptis formula, kept him on the calming formula and added a tea containing rehmannia root (*shu di huang* & *sheng di huang*); dioscorea rhizome (*shan yao*); poria sclerotium (*fu ling*); cornus fruit (*shan zhu yu*); moutan root bark (*mu dan pi*); *ze xie*; dendrobium stem (*shi hu*); scrophularia root (*xuan shen*); and *mai men dong*, which nourishes liver and kidney yin.

Case #2: Eleanor suffered from nervous exhaustion and insomnia. She was largely housebound because she was fearful. When she went outside, she was reminded of the time she was mugged. Eleanor is said to have a cold constitution. She was sickly as a child, with bedwetting, asthma, eczema, and frequent bronchial infections. Her body type is thin; she is underweight. Eleanor does not work or do volunteer work. She has only recently been able to go out of the house twice a week to see a counselor. Previously, all trips out of the house resulted in panic attacks. Her pulse is slow and weak, her tongue is pale, and she has a pale complexion.

We recommended three tablets QID of a ginseng formula consisting of ginseng root (*ren shen*); *fu ling*; white atractylodes rhizome (*bai zhu*); *suan zao ren*; astragalus root (*huang qi*); *dang gui*; salvia root (*dan shen*); amber resin (*hu po*); *yuan zhi*; longan fruit (*long yan rou*); jurinea root (*mu xiang*); ginger rhizome (*gan jiang*); licorice root (*gan cao*); and cardamon fruit (*sha ren*) to tonify *qi* and blood, along with ginger tea, which is warming.

After two weeks Eleanor's response was good, so we added one tablet QID of a rehmannia formula comprised of *shu di huang*; *fu ling*; *mu dan pi*; *shan yao*; *shan zhu yu*; *ze xie*; eucommia bark (*du zhong*); and cinnamon bark (*rou gui*) to tonify her kidney *qi*. After three months, Eleanor was able to leave the house on a daily basis to walk and to run errands. She attributes her changes to counseling and herbs.

Case #3: Jeannette was involved in a serious auto accident, which necessitated many surgeries and the almost constant use of painkillers such as vicodin and ibuprofen. She is also taking an anti-depressant, trazadone. She has panic attacks whenever she has to drive on the freeway. Jeannette uses food to comfort herself, and she is 50 pounds overweight. She wakes up tired after 10 hours of sleep. In fact, bed is one of the places she feels safe. Once the day gets going, however, she begins to pick up energy. She is a teacher who really enjoys her work, but she has difficulty saying no, and sometimes feels on the verge of having panic attacks when she thinks of all the things she has to do. Physical symptoms include frequent diarrhea; indigestion; and bronchial and urinary tract infections. Her tongue is pale with a red tip, coated with heavy white coating. Her pulse has a slippery quality. Jeannette is said to have a damp condition.

At the beginning, we recommended three tablets QID of a formula composed of codonopsis root (*dang shen*); *bai zhu*; *fu ling*; baked licorice root (*zhi gan cao*); citrus rind (*chen pi*); pinellia tuber (*ban xia*); jurinea root (*mu xiang*); and *sha ren*, along with a digestive formula made from *fu ling*; coix seed (*yi yi ren*); shen chu herb (*shen qu*); magnolia bark (*hou po*); angelica root (*bai zhi*); pueraria root (*ge gen*); red atractylodes rhizome (*cang zhu*); *mu xiang*; pogostemon herb (*huo xiang*); oryza sprout (*gu ya*); trichosanthes root (*tian hua fen*); chrysanthemum flower (*ju hua*); halloysite (*chi shi zhi*); citrus rind (*ju hong*) and mentha herb (*bo he*), taking one tablet QID and one tablet with meals. In addition, we suggested an elimination of damp producing foods such as dairy products and orange juice.

The codonopsis formula mentioned in the previous paragraph tonifies *qi*, drains dampness and clears phlegm. The digestive formula removes food stagnation and drains dampness. After two weeks, Jeannette reported more energy and less indigestion, and that her "head felt clearer." After two weeks, we substituted the codonopsis formula for a stronger acting *qi* formula (consisting of ailanthes [*chun bai pi*]; baked astragalus [*huang qi*]; white ginseng [*ren shen*]; *bai zhu*; red atractylodes [*cang zhu*]; *fu ling*; *shan yao*; lotus seed [*lian rou*]; euryale [*qian shi*]; cimicifuga [*shen ma*]; charcoaled ginger [*gan jiang*]; fried bupleurum [*chai hu*]; cardamon [*rou dou kou*]; baked licorice [*zhi gan cao*]; and *shen qu*). After two months, she rarely had diarrhea. She had greater energy and was more able to tolerate stress as her body felt stronger. After six months, she was off vicodin and had lost 10 pounds as she no longer had as many bad food cravings.

Herbs work best when combined with a general health program, which includes a good diet, adequate rest, stress reduction, and daily exercise to one's constitution. For example, seniors or persons incapacitated by anxiety and other disorders may need gentle exercise such as walking, gardening, swimming or water aerobics. More robust individuals may find more vigorous activity more effective. Making adequate time to eat, or saying prayer or thanks before eating, all help promote the calm lacking in so many people's lives.

Can herbs be combined with drugs? In our clinic, clients frequently take herbs and drugs. For example, clients may take sleep medication at night but use herbs during the day for other discomforts due to anxiety, panic or other symptoms. Some of our clients with anxiety disorders are on various prescribed medicines for hypertension, anti-anxiety drugs, pain medication, etc. However, if they are having side-effects from the medication, we can usually help our clients reduce them. If clients and their mental health professionals think it wise, we can incorporate an herbal program to assist them in reducing medication use. Herbalists should be comfortable treating patients on medication. If your practitioner is reluctant, it's best to seek a referral and find someone who is experienced in this area. To avoid herbal drug interactions, it is important to take herbs and drugs two hours apart.

It is important to find an herbalist who can recommend herbs in a way such that you will take the herbs. For example, some clients prefer teas, alcohol extracts or pills. It is not uncommon to start out with teas or alcohol extracts and switch to pills as they are easier to take long term. As herbs are not drugs, it is common to drink several cups a day of infusions, 8-16 ounces of brewed decoction, or nine or more pills per day. Some herbalists may even recommend herbal baths or bathing with aromatherapy, which can have immediate benefits.

What if you cannot find an herbalist to work with? Although there are many over-the-counter herbs sold for anxiety, they should be used cautiously with medications. Perhaps the safest are lavender essential oils that can be applied topically to the inner wrists and added to a bath, and a gentle herbal/flower essence medicine that can be added to water and sipped on throughout the day.

In our experience, the following popular herbs work best when combined with professionally prescribed constitutional tonic herbs. Like foods, herbs work best when used in combination. The well-known herbal antidepressant St. John's wort has been found to interact with a variety of pharmaceutical drugs, so it is best used by clients who are not taking medications. In a few cases, it has also caused a photosensitive skin reaction. Ginkgo leaf is used to promote blood flow. Lately it has been used to help alleviate the side-effects of sexual dysfunction caused by antidepressants. Clients need to take ginkgo for at least six weeks to observe clinical benefits. It has been reported to interact with blood thinning medications, including aspirin and coumadin. Kava kava has natural sedative and muscle relaxant properties. Clinical studies have demonstrated it to be safe and effective. It should only be used under professional supervision if clients are taking sedating drugs, and should not be used before driving or operating heavy machinery as a general precaution.

Constitutional tonics include the ginseng formula given to Eleanor; *qi* and blood tonic for clients with anxiety, fatigue, pallor and difficulty falling asleep; the calming formula given to Bob for heart yin deficiency with anxiety, dryness or heat, and waking up frequently at night; the strong-acting *qi* formula given to Jeannette for loose stools, and fatigue; and the rehmannia formula given to Eleanor for fear, coldness, low back pain and frequent urination. Schisandra formulas or Griffonex 5-HTP can be used before bed to help clients enjoy more restful sleep.

Herbal therapy, when appropriately used, can offer many benefits to clients fully from anxiety and panic disorders. Botanicals are often more suitable than drugs for highly sensitive patients and individuals who have previous herb experience. They should be combined with techniques such as cognitive behavioral therapy. Whenever possible, use herbs under the direction of a professional herbalist.

AUGUST 2002