

— INTRODUCTION —

# Capturing the Wisdom

Formularies are long-standing traditions in medicine. One of the earliest known such documents is the *Ebers Papyrus*, dated to 1550 BCE, which was written on a scroll of paper made from papyrus leaves. The Alexandrian School of Medicine in ancient Greece, circa 330 BCE, used handwritten herbals as their “textbooks,” which detailed the clinical use of plant-based medicines. At the advent of the Common Era, herbal formularies typically detailed actual formulas. The treasured leather-bound books were filled with pages edged in gold, and they offered exacting recipes for treating various diseases, based on a skilled herbalist’s clinical experience. As pharmaceutical medicine emerged, however, such recipe books evolved to detail the most commonly used drugs, and offerings of “recipes” went out of fashion. While the earliest formularies were entirely based on natural medicines—primarily herbs, animal secretions or tissues, and mineral-based substances—they evolved to consist primarily of pharmaceutical agents, as modern medicine evolved away from natural products and toward synthetic substances. In the present era, such “formularies” are largely drug compendiums. Many countries and governmental agencies have compiled lists of their most valuable medicines, detailing drugs approved and sanctioned by the region’s health care system. In the United States, the *United States Pharmacopeia* and the *National Formulary* (USP–NF) are published annually to this day, having evolved from earlier herbal pharmacopeias.

Herbalists have continued the tradition of producing recipe-based formularies, also known as “herbals,” and such books are often among the most esteemed and well used in their beloved collection. Nearly all budding herbalists go through a stage of collecting effective recipes from their elders, possibly starting with a recipe for a surefire method of making a perfect salve or an effective cough syrup. As they advance their clinical skills, they may collect formulas for precise clinical situations, from eyewashes to a tea that someone with nausea and

vomiting can keep down and from palatable medicines for toddlers to safe recipes that use potentially toxic herbs to ameliorate pain. In China, effective formulas may be highly guarded family secrets, passed down through generations, and may offer a lucrative livelihood for the owners. For many centuries, herbalists have prized formulas endorsed by a master clinician, and herbal formularies offering dozens of such recipes are considered treasure troves. Such information is so priceless that in ancient times, healers or scholars would travel for months to reach the location where such a book was housed and spend another month or two to copy the prized text by hand. For example, *De Materia Medica*, by Pedanius Dioscorides, is believed to have been in circulation for well over 1,400 years prior to the advent of the first commercial printing press, and individuals or professional scribes created handwritten copies. Because early European monasteries were frequently the repositories of books, monks often served as professional scribes and sometimes also acted as healers, brewers, and medicine makers due to being keepers of the wisdom housed on the premises. Traditional herbals were among the first books printed and were extremely popular in Asia, Europe, Egypt, and India. Among the essential wares of the first European immigrants to North America were their seeds—and their herbal formulary. Throughout the 1400s and up through the 1600s, such herbals contained a mix of magical and medicinal information about plants, but present-day herbals include a more scientific mix of biochemical, pharmacologic, and toxicologic information about plants. With the resurrection of herbal medicine as one arm of the alternative medicine field, herbal formularies may now include research-based evidence and mechanisms of action to serve a new generation of medical herbalists.

Having made rather arduous journeys to the Amazon basin nearly 50 times in my life to learn about plants and medicine directly from Indigenous communities, I can

understand the passion that drove ancient herbalists and physicians to go to great lengths to seek the wisdom keepers. I know that I am not alone in cherishing my books and recipe file and in holding my elders in high respect. When they are willing to share their hands-on knowledge regarding the use of plants as healing allies, I listen up!

I have taught at hundreds of medical conferences over the last several decades, addressing audiences of skilled clinicians. Over the years I have learned that many of us attend such events not to reap a bounty of new material at each lecture, but rather in hopes of gleaning a few “clinical pearls.” We may not take notes as a presenter reviews molecular pathways or pathology, but when an expert in the field offers therapeutic advice on how to better heal a patient, just watch as everyone reaches for their pencils. That’s the pearl of clinical wisdom we know we can implement in our practice as soon as we return home. Similarly, many of us scour the published studies on herbs, even if the only studies available are animal studies or cell culture investigations, seeking any shred of guidance to better treat challenging cases. When a respected colleague shares real-life experience, the information is highly valuable and provides the basis for mealtime and evening discussions when herbalists gather.

### **About This Book**

This text is the first in a set of five comprehensive volumes aimed at sharing my own clinical experience and formulas to assist herbalists, physicians, nurses, and allied health professionals to create effective herbal formulas. The information in this book is based on the folkloric indications of individual herbs, fused with modern research and my own clinical experience.

This volume and the others that will follow are organized to reflect logically related organ systems. I begin with digestion and elimination, drawing inspiration from the old medical term *emunctory*, which refers to an organ of elimination and can be applied to the bowels, the urinary system, and the skin. Digestion and elimination are considered the foundation of health. Optimizing the health and function of the emunctories will benefit many other organ systems and ameliorate many health problems outside of these emunctory organs themselves—from allergic reactivity to infectious illness to hormone balance to musculoskeletal inflammation and more.

Each volume offers specific herbal formulas for treating common health issues and diagnoses within

the selected organ system, creating a text that serves as a user-friendly reference manual as well as a guide for budding herbalists in the high art of fine-tuning an herbal formula for the person, not just for the diagnosis. Each chapter includes a range of formulas to treat common conditions as well as formulas to address specific energetic or symptomatic presentations. I introduce each formula with brief notes that help to explain how the selected herbs address the specific condition. At the end of each chapter, I have provided a compendium of the herbs most commonly indicated for a specific niche, a concept from folklore simply referred to as *specific indications*. These sections include most herbs mentioned in the corresponding chapter and highlight unique, precise, or exacting symptoms for which they are most indicated. Please note that these listings do not encompass *all* the symptoms or indications covered by the various herbs, but rather only those symptoms that relate to that chapter—the indications for GI symptoms, indications for biliary issues, indications for skin complaints, and so on. You’ll find certain herbs repeated in the specific indications section of all four system chapters in the book, but in each instance, the description will feature slightly different comments. Readers are encouraged to refer back and forth between the various chapters to best compare and contrast the information offered.

### **The Goals of This Book**

My first goal in offering such extensive and thorough listings of possible herbal therapies is to demonstrate and model how to craft herbal formulas that are precise for the patient, not for the diagnosis. It is my hope that after studying formulas in this book and following my guidelines for crafting a formula, readers will assimilate this basic philosophic approach to devising a clinical formula. As readers gain experience and confidence, I believe they will find that they rely less and less on this book and more and more on their own knowledge and insight. That’s what happened to me over the years as I read the research and folkloric herb books and familiarized myself with the specific niche-indication details of a wide range of healing plants. I now have this knowledge in my head, and devising an herbal formula for a patient’s needs has become second nature, and somewhat intuitive. But from talking with my herbal students over several decades of teaching, I have come to understand that creating herbal formulas is one of the most challenging leaps between simply absorbing information and using it to treat real, live patients. Students often feel

inept as they try to sift through all their books, notes, and knowledge and struggle to use “information” to devise a single formula that best addresses a human being’s complexities. Thus, I felt that it was high time that I created a user-friendly book to help students refine formulation skills and to help all readers develop their abilities to create sophisticated, well-thought-out formulas.

Another goal I aim to achieve through this set of herbal formularies is to create an easy-to-use reference that practitioners can rely on in the midst of a busy patient day. In this “information age,” it is not hard to track down volumes of information about an herb, a medical condition, or even a single molecule isolated from a plant. The difficulty lies in remembering and synergizing it all. While this text doesn’t pretend to synergize the “art” of medicine in one source, I believe it will help health professionals quickly recall and make use of herbal therapies they already know or have read about by organizing them in a fashion that is easy to access quickly.

Naturopathic physicians are a varied lot. Add in other physicians and allied health professionals, and the skill sets are varied indeed. I rely on my naturopathic colleagues to inform me about the latest lab tests, my allopathic colleagues to inform me about new pharmaceutical options, and my acupuncture colleagues to inform me on what conditions they are seeing good results in treating. This text allows me to share my own area of expertise. I have included a large number of sidebars that feature some of the more in-depth research on the herbs and individual molecular constituents, helping to provide an evidence-based foundation for the present era of medical herbalism.

I realize that not all clinicians specialize in herbal medicine, even naturopathic physicians. I hope that this formulary will serve as a handy reference manual for those who can benefit from my personal experience, formulas, and supportive discussions.

### Creating Energetically Fine-Tuned Formulas

Much like a homeopathic *materia medica*—another term from folklore referring to collected information on individual medical materials, in this case, the plants themselves—this set of formularies aims to demonstrate to clinicians how to choose herbs based on *specific indications* and clinical *symptoms* and *presentations*, rather than on diagnoses alone. For example, I do not offer a single one-size-fits-all formula for dermatitis. Instead, I’ve compiled more than a dozen specific dermatitis

formulas, such as a Tincture for “Prickly Heat” and Itchy Skin in Hot Weather, a Tea for Chronic Eczema, Dermatitis, and Hives, and a Tincture for Dry Skin Concomitant with Hypothyroidism. Along with the formulas, I provide targeted lists to help readers begin to craft their own formulas. Budding herbalists can draw inspiration from lists such as “Herbs for Skin Eruptions of the Hands and Feet,” “Herbs for ‘Wet’ Atopic Dermatitis,” and “Herbs for Itching Skin.” I include supportive research on herbs that helps to explain why a particular herb is chosen for a particular formula as well as end-note citations that provide details of specific studies for those interested. I also provide findings from research on individual herbs that are essential to the treatment of the various conditions featured in a chapter. To make the text as useful as possible for physicians and other clinicians, I also offer clinical pearls and special guidance from my own experience and that of my colleagues—the tips and techniques that grab attention at medical conferences year after year.

### The Information Sourced in This Book

The source of the information in these volumes is based on classic herbal folklore, the writings of the Eclectic physicians, modern research, and my own clinical experience. Because this book is designed as a guide for students and a quick reference for the busy clinician, the sources and research are not rigorously cited, but enough so as to make the case for evidence-based approaches. When I offer a formula based on my own experience, I say so. I also make note of formulas I’ve created that are more experimental, due to lack of research on herbs for that condition or my lack of clinical experience with it.

My emphasis is on Western herbs, but I also discuss and use some of the traditional Asian herbs that are readily available in the United States. In some cases, formulas based on Traditional Chinese Medicine (TCM) are featured due to a significant amount of research on the formula’s usage in certain conditions. I readily admit that TCM creates formulas *not* for specific diagnoses, but rather for specific energetic and clinical situations. However, I have included such formulas, perhaps out of context, but with the overall goal of including evidence-based formulas, with the expectation that readers and clinicians can seek out further guidance from TCM literature or experienced clinicians where possible. In reality, TCM is a sophisticated system that addresses specific presentation, and I have borrowed from this system where I thought such formulas might be of

interest or an inspiration to readers. I admit that listing just one formula for a certain condition based on the fact there have been numerous studies on it is somewhat of a corruption of the integrity of the TCM system, which is aimed at precise patterns and energetic specificity. Nonetheless, I chose to do so with the goal of creating a textbook to help busy clinicians find information quickly, while still encouraging individualized formulas for specific presentations.

While I have endeavored to create herbal formulas to address as many different conditions and presentations as possible, this text purposefully avoids addressing specific types of digestive, liver, and renal cancers because to do the topic justice would require a textbook all its own. And frankly, there is not yet the evidence to cite, nor do I have the clinical experience in dozens of such cases to feel I could pose enthusiastic herbal formula suggestions. One exception in this volume is skin cancers, which are covered briefly in chapter 5. Some skin cancers are slow-growing and accessible, and the topical use of herbal therapies can be an important consideration in treating squamous cell lesions and actinic keratosis. Liver and bladder cancers are also mentioned due to the growing volume of research on complementary herbal therapies, although the information is not intended to replace an expert's care.

### How to Use This Book

Each chapter in this book details herbal remedies to consider for specific symptoms and common presentations of various diagnoses. Don't feel that you must be a slave to following the recipes exactly. When good cooks create a food recipe, they are always at liberty to alter the recipe to create the flavor that best suits the intended meal—the big picture. The formulas listed should not be thought of as *the* formulas to make, but rather as a guide and example, inviting the clinician to tailor a formula for each individual patient.

To create an herbal formula unique to a specific person, the clinician should first generate a list of actions that the formula should perform (intestinal carminative, biliary antispasmodic, urinary antimicrobial, and so on), and then generate a list of possible herbal *materia medica* choices that perform the desired actions. If these ideas are new to you, you may want to begin by reading chapter 1, “The Art of Herbal Formulation,” before you start generating lists.

Look to the formulas in chapters 2 through 5 that address specific symptoms for guidance and inspiration.

(These formulas are grouped within the chapter by a general diagnosis, such as “Formulas for Constipation” or “Formulas for Dermatitis.”) Regard the lists and formulas I have provided as starting points and build from there. In my commentary on the individual formulas and in sidebars that focus on specific herbs, I offer further guidance as to whether the formula or individual herbs are safe in all people, possibly toxic in large doses, intended for topical use only, or indicated only in certain cases of that particular symptom. Once herb and formula possibilities have been identified, the reader should then review the “Specific Indications” section at the end of the chapter to narrow in on choices of which herbs would be *most* appropriate to select and to learn more about how those herbs might be used. Herbalists can narrow down long lists of herbal possibilities to

## Unity of Disease (Totality of Symptoms)

The concept that any given health issues a person may experience are actually one disease, as opposed to a number of disparate diagnoses to be treated individually, is a core tenet of naturopathic medicine and the philosophical underpinning of holistic medicine in general. Any one symptom does not provide the full story, and just because you can label the symptoms with a Western diagnosis and offer the established therapy for that diagnosis does not mean you are really helping a person to *heal*. A careful consideration of the sum totality of all symptoms is important to reveal underlying patterns of organ strength or weakness, excess or deficiency states, nervous origins versus nutritional origins, and, of course, a complex overlap of all such issues. The most effective therapies will address *all* issues in their entirety and involve an understanding of the entire energetic, mental, emotional, nutritional, hereditary, situational, and other processes creating a complex web of cause and effect—the unity of any given individual's “dis-ease.”

just a few *materia medica* choices that will best serve the individual. In many cases, the reader/clinician will be drawing upon herbal possibilities from a number of chapters and organ systems as the clinical presentation of the patient dictates. Thus, you are not making a formula by throwing together all the herbs listed as covering that symptom or symptoms, but you are studying further and narrowing down the list of possibilities to consider based on the sum totality of all the symptoms. In some cases, you will rule out herbs on the list for a particular symptom after reading the specific description of that herb at the end of the chapter. In some cases, you might decide to put one herb in a tea and another in a tincture due to flavor considerations. In other cases, you might decide that you will prepare only a topical remedy. And in other urgent situations, you might come up with a topical, a pill, an herbal tea, *and* a tincture to address the situation as aggressively as possible. Aim to select the best choices, and avoid using too many herbs in one formula. Larger doses of just a few herbs tend to work better than smaller doses of many herbs, which can confuse the body with a myriad of compounds all at once. The use of three, four, or five herbs in a formula is a good place to start; this approach also makes it simpler to evaluate what works when the formula is effective as well as what is poorly tolerated, should a formula cause digestive upset or other side effect.

As you work with this book, you will discover that there is some overlap of information among the various chapters. For example, in chapter 5, “Creating Herbal Formulas for Dermatologic Conditions,” you’ll find a list of herbs appropriate for dermatitis due to underlying digestive and liver symptoms, and in chapter 2, “Creating Herbal Formulas for Gastrointestinal and Biliary Conditions,” I’ve included a list of herbs appropriate for constipation associated with skin eruptions.

### Learning from the Formulas in This Book

In reviewing the formulas in this book, notice how specific herbs are combined with foundational herbs to create different formulas that address a variety of energetic presentations. There are a handful of all-purpose immune modulators, all-purpose alterative herbs, and all-purpose anti-inflammatories that can be foundational herbs in many kinds of formulas. Such foundational herbs can be made more specific for various situations by combining with complementary herbs that are energetically precise. Notice how the herbs are formulated to be somewhat exacting to address specific symptoms and make a formula be warming, drying, cooling, or moistening and so on. Also, note how acute formulas may have aggressive dosages and include some strong herbs intended for short-term use, while formulas attempting to shift chronic tendencies are dosed two or three times a day and typically include nourishing and restorative herbs intended for long-term use. Also notice how some potentially toxic herbs are used as just a few milliliters or even a few drops in the entire 2-ounce formula. These dosages should not be exceeded, and if this is a clinician’s first introduction to potentially toxic herbs, further study and due diligence are required to fully understand the medicines and how they are safely used. Don’t go down the poison path without a good deal of education and preparation. I am able to prepare all of the formulas in these texts upon request, but I can only offer those containing the “toxic” herbs (*Atropa belladonna*, *Aconitum*, *Gelsemium*, *Hyoscyamus*, and so on) to licensed physicians.

It is my sincere hope that this book helps you in your clinical work and efforts to heal people.

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