MENOSMART Monograph

MENOSMART is a comprehensive formula designed to manage menopausal symptoms including hot flashes, sleep disturbances, irritability, loss of concentration, night sweats, vaginal atrophy or dryness and leg cramps.

Dong Quai (*Angelica sinensis*)
Native to Eastern Asia and China, dong quai’s use in traditional Chinese medicine spans 2,000 years (Chang H-M 1986).

In a recent six-month randomized, double-blind, placebo-controlled study, Dang Gui Buxue Tang (a 1:5 combination of *Angelica sinensis* and *Astragalus membranaceus*) was shown to reduce the frequency of mild, moderate and severe hot flashes in 103 symptomatic women (Haines 2008).

In another randomized, placebo-controlled study of 55 postmenopausal women who were orally administered five tablets of Climex (*Angelica sinensis* and *Matricaria chamomilla*) daily for 12 weeks, a significant difference was found in the relief of insomnia and fatigue. The effects materialized in the treatment group within the first month of taking the tablets (Kupfersztain 2003).

Chasteberry (*Vitex agnus-castus*)
Vitex has been traditionally used for the treatment of menstrual abnormalities, PMS, and menopausal complaints. This safe, well-tolerated herb indirectly stimulates progesterone production via its effect on the pituitary and luteinizing hormone, and also inhibits the excessive production of prolactin (Sliutz 1993; Böhnert 1997).

In a three-month, randomized, double-blind, placebo-controlled trial, a combination of Vitex, black cohosh, dong quai, milk thistle, red clover and American ginseng reduced hot flashes and night sweats by 73% and 69% respectively (Rotem 2007). Menopausal women have also reported relief from symptoms after using two essential oils from Vitex (Chopin 2003).

Another study noticed improvement in women’s self-assessment of irritability, mood alteration, headache, breast fullness and other menstrual symptoms, including bloating (Schellenberg 2001).

Black Cohosh (*Cimicifuga racemosa*)
Very thoroughly researched and with a long history in traditional medicines, black cohosh is clinically proven to relieve menopausal symptoms (Blumenthal 2000; Bradley 1992; Frei-Kleiner 2005; Raus 2006; Wuttke 2006). It effectively reduces hot flashes, night sweats, fatigue and insomnia (Kronenberg 2002; Philp 2003; Pockaj 2004), offering a viable option to synthetic hormone replacement therapy (Ankli 2008).

In an open-label observational study of 6141 women, black cohosh was found to reduce neuro-vegetative symptoms. In combination with St John’s wort, it alleviated climacteric mood symptoms (Briese 2007).

Results of a second study with 100 peri- and postmenopausal women using hormone replacement therapy (HRT) in combination with dietary supplements (soy (29%), ginkgo biloba (16%) and black cohosh (10%)) showed enhanced improvement in vaginal dryness, libido and mood compared with those women who used HRT alone (Kam 2002).

Non-estrogenic (Lupu 2003) and safe for breast cancer patients (Walji 2007), black cohosh also has inhibitive effects on breast cancer cell growth (Bodinet 2004; Einbond 2004). Evidence for hepatotoxicity is inconclusive (Teschke 2009).

Gamma-oryzanol (*Ferulic acid*)
Following administration of gamma-oryzanol Fine Particule 1.5 g (gamma-oryzanol 300 mg included) for four to eight weeks to 40 subjects suffering from climacteric disturbances, 90% of the cases showed improvement as well as reduced levels of total cholesterol and triglycerides (Ishihara 1982).

In a second study involving 13 women, 11 of them reported an improvement in menopausal symptoms at 300 mg of ferulic acid daily (Ishihara 1984).
Hesperidin
A deficiency of hesperidin, a bioflavonoid, in the diet has been linked to abnormal capillary leakiness as well as pain in the extremities causing aches, weakness and night leg cramps (Garg 2001). Hesperidin has been shown to influence adiponectin expression, which plays an important role in glucose and lipid metabolism with antiatherogenic and anti-inflammatory properties (Liu 2008).

In a one-month clinical study, 94 menopausal women with hot flashes received 900 mg hesperidin, 300 mg hesperidin methyl chalcone and 1,200 mg vitamin C; 53% of the women experienced complete relief from hot flashes, and 34% experienced a reduction (Smith 1964).

Sage (Salvia officinalis)
Native to the Mediterranean, sage has traditionally been used to aid digestion, treat flatulence, soothe hoarseness and coughs. The German Commission E lists sage tea as a treatment for excessive perspiration (Blumenthal 2000) and, in the United Kingdom, medical herbalists treat menopausal women with hot flashes and night sweats using sage.

In one 4-week open study involving 80 women suffering excessive perspiration, 40 women took 400 mg of aqueous dried sage extract (equivalent to 2.6 grams of dry leaf), and the other 40 women drank sage leaf tea using 4.5 g leaf daily. In both groups, perspiration dropped more than 50%. Those in the aqueous dry extract group had a stronger effect (Anonym 2001).

In another clinical study, 30 women taking 120 mg sage leaf extract reported effective relief of hot flashes. Hot flashes and night sweats disappeared for 20 women; the other 10 experienced great symptom improvement, all without side effects. These researchers concluded that sage’s action mechanism is not hormone related as the participants’ circulating hormone levels did not change (De Leo 1998).

Recommended dose: Adult women, take two capsules twice per day. Two with breakfast and two before bed. Or as directed by a healthcare professional.
REFERENCES


Wuttke W, Raus K, Gorkow C. Efficacy and tolerability of the Black cohosh (Actea racemosa) ethanolic extract BNO 1055 on climacteric complaints. Maturitas 2006;55 Supplement 1:S583-S591