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RE: Evidence Supports Role of Chaste Tree Berry in Managing Menopausal Symptoms


Chaste tree berry (*Vitex agnus-castus*) has been widely used for female reproductive problems, including anovulatory cycles, infertility, and hyperprolactinemia. Recently, its use has expanded to include the treatment of menopause-related complaints. These authors review the evidence for this application of chaste tree berry based on pharmacological studies and clinical research.

The authors point out that a lack of consistency exists in the use of terminology relating to menopausal stages. Some studies reviewed in this article have adopted the recommended definition of natural menopause as having occurred after 12 consecutive months of amenorrhea for which there is no other obvious pathological or physiologic cause. Other studies use six months of amenorrhea as denoting entry to the postmenopausal stage; and others do not define it at all. Late perimenopause is commonly defined as menses within the preceding 12 months but not the preceding three months, in conjunction with the coexistence of symptoms.

Menopausal symptoms vary among women. Most symptoms reported during perimenopause can be attributed to estrogen excess (breast tenderness, menorrhagia, migraine, nausea, shorter cycle length) or deficiency (vasomotor symptoms, breast tenderness, and vaginal dryness) and often fluctuate. Rates of psychological distress are also found to peak during perimenopause. Dysfunctional uterine bleeding and hot flashes usually increase during the menopausal transition.

The authors outline the current understanding of the endocrinology of menopause and the etiology of its associated symptoms, including an explanation of the etiology of hot flashes and night sweats and a discussion of the association between depressed mood and hormone levels.
Chaste tree berry contains essential oil, flavonoids, iridoid glycosides, and dopaminergic diterpenes. Mild D2 receptor agonistic properties have been demonstrated, resulting in inhibition of latent hyperprolactinemia.\(^1\)\(^{-3}\) Chaste tree berry has also demonstrated activity as an agonist at the \(\mu\), and potentially the \(\kappa\), opioid receptor\(^4\)\(^\text{,5}\) and has been found to effect a dose-dependent increase in melatonin secretion.\(^6\) These actions may be of relevance to the etiology of menopausal symptoms and are discussed by the authors.

The authors report that chaste tree berry as a sole agent for menopausal treatment does not appear to have been tested in oral dosage form in a clinical study. Through a search of PubMed and EMBASE, they did locate several studies on the essential oil and multicomponent formulations containing Vitex in the treatment of menopausal symptoms. They cite two studies that report benefits for menopausal symptoms from the steam-distilled essential oil of the fruit and leaves. Three randomized controlled trials (RCTs) and one pilot study on multicomponent formulations containing chaste tree berry reported mixed results for the treatment of menopausal symptoms.

As a component of the menopause herbal formulation Phyto-Female Complex (SupHerb; Netanya, Israel), chaste tree berry was found to be significantly superior to placebo in an RCT on menopausal hot flashes and night sweats in 50 healthy peri- and postmenopausal women.

The Herbal Alternatives for Menopause (HALT) study investigated three different herbal regimens compared with hormone replacement therapy and placebo over 12 months. No significant differences in frequency and intensity of hot flashes and night sweats were reported between any of the herbal interventions and placebo at any of the three-month time points, with one exception. At 12 months, placebo significantly outperformed the multibotanical-plus-soy-counseling intervention for symptom intensity. A major limitation of this study was the recruitment of women with mild symptoms.

A pilot study of a combination botanical containing 15 herbs in eight women suggested a potential benefit of a combination botanical for improving moderate menopausal symptoms.

A 16-week RCT conducted by the authors on a combination of St. John’s wort (\textit{Hypericum perforatum}) and chaste tree berry with 100 late-perimenopausal and postmenopausal women found no significant effect for the herbal combination over placebo on vasomotor symptoms, Greene Climacteric scores of overall menopausal symptoms, or depressed mood. However, both groups showed significant improvements on all of these outcome measures.

It is possible, say the authors, that the practice of using chaste tree berry for menopausal symptoms relates to its benefits for PMS-like symptoms reported by some women during perimenopause.

The authors conclude that the emerging pharmacological evidence supports a role for chaste tree berry in the management of menopause-related symptoms. Further research may be appropriate into its possible role in alleviating the PMS-like symptoms associated with perimenopause. "Evidence from rigorous scientific RCTs is needed to clarify the efficacy and safety of Vitex as a sole agent in the management of menopause-related symptoms," say the authors.
References

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