

Skullcap

Latin Name: Scutellaria lateriflora

NERVINE

Use Whole Plant

QUALITIES

1) NUTRIENTS: Vitamin E; Volatile Oil; Tannin; Bitter

2) NERVINE; TONES and SOOTHES Nervous System; Nerve Tonic; Helps rebuild nerve endings in brain; gives feeling of Well Being

- STUDY (mood enhancing): ... in randomized, double-blind, placebo-controlled, crossover study, skullcap found to have anxiolytic and mood-enhancing effects in some individuals without a reduction in energy or cognition. They note that skullcap had good safety. (Oliff 2013)

- NERVOUS afflictions (slow but sure – take regularly over period of time for lasting effect); Neuralgia; Teething; Nervousness; Nervous Headaches; ANXIETY; Worry; Emotional Conflict; Chronic Exhaustion; Calms Nervous System without narcotic effect; often brings Natural, Relaxed Sleep

- Anti-spasmodic; Quiets Nerves; Epilepsy; Convulsions; Twitching Muscles; Tremors
- Eases Drug and Alcohol Withdrawal (Detox lessens delirium tremor effects)

3) OTHER

- DIGESTION Problems; Absorbs toxins from the bowel; Nervous Stomach

- Immune System; Upper Respiratory Infections; Fevers; Anti-Cancer (in vitro and Animal data) Apoptosis (death of cancer cells)

- Circulation; Atherosclerosis; Blood Pressure

- Diuretic; Increases Urine Flow; Astringent; Incontinence; Draws out Uric Acid; Rheumatism; Gout; Soothes Inflamed Tissue; Gingivitis; Plaque

- STUDY (gingivitis): ... to evaluate clinical and antibacterial effect of a dentifrice containing an anti-inflammatory plant extract (Skullcap) versus a placebo with experimental gingivitis model in 40 individuals. Study showed that new toothpaste formulation reduced the extent of gingivitis and plaque development. (Arweiler 2010)

- Traditionally used for Infertility

Skullcap References

Herb History and General Information

Christopher, Dr. John R., *School of Natural Healing*. Provo, Utah: BiWorld Publishers, Inc.; 1976. Also, 20th Revised and Expanded Anniversary Edition, Springville, Utah: Christopher Publications, Inc.; 1996; pp 406-412

Felter, Harvey Wickes, M.D., and John Uri Lloyd, Phr. M., Ph.D. *King's American Dispensatory*; 1898. See excerpts at <http://www.henriettes-herb.com> accessed July 23, 2014

Grieve, M. *A Modern Herbal, Vol I & II*. New York and London: Hafner Publishing Co.; 1967. See excerpts at www.botanical.com accessed July 22, 2014

Keith, Velma J. and Monteen Gordon. *The How To Herb Book*. Pleasant Grove, Utah: Mayfield Publications; 1996; p 58

Memorial Sloan Kettering Cancer Center. See www.aboutherb.com accessed July 29, 2014

Ritchason, Jack, N.D. *The Little Herb Encyclopedia*. Pleasant Grove, Utah: Woodland Health Books; 1995; pp 216-217

Studies

Arweiler NB, Pergola G, Kuenz J, Hellwig E, Sculean A, Auschill TM. Clinical and antibacterial effect of an anti-inflammatory toothpaste formulation with *Scutellaria baicalensis* extract on experimental gingivitis. *Clin Oral Investig*. 2011 Dec;15(6):909-13. doi: 10.1007/s00784-010-0471-1. Epub 2010 Oct 9. [PubMed]

Oliff, Heather S, PhD. Skullcap Has Anxiolytic and Mood-enhancing Effects in Healthy Subjects. *HerbClip*. February 28, 2014 (No. 101352-491). Austin, TX: American Botanical Council. Review of American skullcap (*Scutellaria lateriflora*): A randomised, double-blind placebo-controlled crossover study of its effects on mood in healthy volunteers by Brock C, Whitehouse J, Tewfik I, Towell T. *Phytother Res*. July 22, 2013; [epub ahead of print]. doi: 10.1002/ptr.5044

Additional info on Studies:

GINGIVITIS - ANTI-INFLAMMATORY

An evaluation of a dentifrice containing an anti-inflammatory plant extract, *Scutellaria baicalensis*, versus a placebo using an experimental gingivitis model in 40 individuals showed that the new toothpaste formulation reduced the extent of gingivitis, plaque development, and vital flora. Arweiler 2010

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Abstract

It was the aim of the study to evaluate the clinical and antibacterial effect of a dentifrice containing an anti-inflammatory plant extract (SB) versus a placebo (PLA) using an experimental gingivitis model. Forty subjects (20 per group) discontinued all oral

hygiene measures for four teeth for a period of 21 days using a shield (to generate a possible gingivitis) while they could brush the other teeth normally. After brushing, the shield was removed and teeth were treated with the randomly assigned toothpaste slurry for 1 min. Löe and Silness gingival index (GI), Silness and Löe plaque index (PI), and biofilm vitality (VF%) were assessed at days 0, 14, and 21, respectively. Subjects of the PLA group developed a GI of 0.82 ± 0.342 (day 14) and 1.585 ± 0.218 (day 21), while the data of the SB group were significantly reduced (0.355 ± 0.243 and 0.934 ± 0.342 , $p < 0.001$). While PI was significantly reduced at all follow-up appointments, reductions in VF reached the level of significance only at day 21. The results suggest that the new toothpaste formulation was able to significantly reduce the extent of gingivitis, plaque development, and vital flora.

MOOD-ENHANCING

Oliff 2014

Skullcap (*Scutellaria lateriflora*) has been used traditionally to treat anxiety, stress, and related disorders. While there is some supporting experimental and human evidence, definitive results from high-quality clinical trials evaluating skullcap for anxiety are lacking. Hence, the purpose of this randomized, double-blind, placebo-controlled, crossover study was to evaluate the effect of skullcap on mood.

Healthy subjects ($n = 31$, aged 18-75 years) were recruited via advertisements for participation in this study conducted in New Cavendish, London. Inclusion criteria were persistent stress, anxiety, mood swings, irritability, poor sleep, or difficulty in coping; however, non-anxious participants were also eligible. Exclusion criteria were alcohol or recreational drug dependence; known hypersensitivity to any herbal medicines; use of medication (other than the contraceptive pill) affecting the central nervous system (CNS) within the past month; a history of psychiatric disorders; any serious medical condition; moderate-high depression (Hospital Anxiety and Depression Scale [HADS-D] scores ≥ 9); very severe anxiety (initial scores > 40 on Beck's Anxiety Inventory [BAI]); pregnancy or lactation; or abnormal blood alanine aminotransferase (ALT) level (a liver enzyme).

Subjects took either placebo or 350 mg freeze-dried skullcap aerial parts (Eclectic Institute, Inc.; Sandy, Oregon) 3x/day for 14 days. Freeze-dried stinging nettle (*Urtica dioica*) leaf capsules (300 mg) were chosen as the placebo as it has no known effects on the CNS and were similar in appearance, taste, and smell to the skullcap capsules. The skullcap capsules contained freeze-dried aerial parts, not a standardized extract...

Following a 7-day washout, the subjects were crossed over to the other treatment. At baseline and at the end of each treatment period, subjects completed the BAI and the Profile of Mood States (POMS) standard questionnaire. In addition, blood pressure and pulse were recorded, and blood was drawn to measure ALT. The subjects were also asked to complete a diary recording any positive or negative experiences.

The study was well blinded, with subjects not noticing any difference in taste, smell, or appearance between treatments. At baseline, 11 subjects had minimal anxiety (BAI scores 0-7), 14 were mildly anxious (BAI scores 8-15), 3 were moderately anxious (BAI scores 16-25), and 3 had severe anxiety (≥ 26). Hence the anxiety level in the study population was relatively low (81% had BAI scores ≤ 15). Despite randomization (group 1, starting with placebo followed by skullcap intervention and group 2 with treatments in

the reverse order), by chance, all 6 subjects with the highest BAI scores were assigned to the same group. Therefore, there was a significant difference between groups at baseline.

Compared with baseline, subjects taking skullcap had a significant improvement on BAI ($P = 0.003$) when compared to placebo treatment. The results of the POMS indicated that skullcap did not cause a reduction in energy or cause fatigue. Evaluating the total mood disturbance with the POMS, there was no between-group difference; however, skullcap treatment significantly decreased symptoms compared with baseline ($P < 0.001$), while the placebo treatment did not significantly change from baseline. The symptom diaries revealed that 5 of 26 subjects had resolution or improvement in chronic conditions (irritable bowel syndrome, mastalgia, dysmenorrhea, hay fever, and eczema) during skullcap treatment but not during placebo treatment.

...The authors conclude that skullcap has anxiolytic and mood-enhancing effects in some individuals without a reduction in energy or cognition. They note that skullcap had good safety. ... —Heather S. Oliff, PhD