title /authors	research question	methods	results	discussion/conclusions
TITLE: EFFECT OF A PROPRIETARY HERBAL MEDICINE ON THE RELIEF OF CHRONIC ARTHRITIC PAIN: A DOUBLE-BLIND STUDY AUTHORS: S. Y. MILLS, R. K. JACOBY,* M. CHACKSFTELD and M. WILLOUGHBY	Does the use of OTC herbal medicine eradicate the pain symptoms of arthritis patients? This study was an assessment of the permitted claims for symptomatic analgesia for a medicine licensed under the terms of the Medicines Act 1968 and relevant EC Directives, with efficacy claims substantiated by bibliographic evidence and traditional use. There was no attempt to demonstrate any curative effect of the herbal treatment on any particular arthritic pathology	-Double blind controlled trial -Individuals with osteoarthritic pain were recruited -Questionnaire process followed by diagnosis process -Subjects were randomly given the experimental treatment or placebo -AIMS2 questionnaire was completed at monthly intervals throughout and for 2 months prior to the trial, and a modified Ritchie Index provided clinical scores. Subjects also completed diary recordings of their use of self-prescribed analgesics and events they considered significant	-There was a small but statistically significant improvement in pain symptoms, less so in sufferers from osteoarthritis. -There were no other significant changes in any other measures nor in the use of other self-prescribed analgesics. -72 out 300 initial recruits finished the trial -There was a greater, but also not statistically significant, improvement in mood scores among those taking Reumalex than placebo -Arthritis Pain scale was chosen as the key measure.	-Symptom movement during the trial was also minimal, there being for example almost no perceptible placebo effect in any measure apart from those of tension and mood. One factor that might have led to this lack of benefit was the relatively unpleasant climatic conditions prevailing at the end of the study. -Only in the pain scales were such benefits recorded and on analysis of paired differences these were indeed shown to be statistically significant. -Improvements were nevertheless minor, and in the 2 months of observation the already low mean mobility and function scores were unaffected.
TITLE: Rose hip herbal remedy in patients with rheumatoid arthritis – a randomised controlled trial AUTHOR(S): S.N.Willicha K.Rossnagela S.Rolla A.Wagnera O.Muneb J.Erlendsonb A.Kharazmib H.Sörensena K.Wintherb	To investigate if standardised powder made from rose-hip (Rosa canina) can reduce the symptom score in patients with rheumatoid arthritis	a double-blind placebo-controlled trial, patients with rheumatoid arthritis (RA) according to ARA/ACR criteria were randomised to treatment with capsulated rose-hip powder 5 g daily or matching placebo for 6 months at two outpatient clinics in Berlin and Copenhagen. Primary outcome variable was Health Assessment Questionnaire (HAQ) at 6 months, secondary outcome included DAS-28, physician's global evaluation of disease activity, RAQoL, SF-12 and concomitant pain medication.	in a total of 89 patients (90% female, mean age 56.6+11.3 years, mean disease duration 12.8+9.6 years) HAQ-DI in the rose-hip group improved by 0.105±0.346, whereas in the placebo group it worsened by 0.039±0.253 (p adjusted=0.032). In the HAQ Patient Pain Scale no significant differences were observed between both groups. In the HAQ Patient Global Scale a trend was seen favouring rose-hip (p=0.078). The DAS-28 score yielded improvement in the rose-hip group of 0.89±1.32 and in the placebo group of 0.34±1.27 (p=0.056) indicating moderate clinical relevance. The Physicians Global Scale demonstrated more improvement in the rose-hip compared to the placebo group (p=0.012). RAQoL and SF-12 physical score improved significantly in the rose-hip group compared to placebo, whereas SF-12 mental score remained unchanged. Intake of pain medication was not different between the groups. Per-protocol analysis confirmed these results.	The results indicate that patients with RA may benefit from additional treatment with rose hip powder.

TITLE: A herbal remedy, Hyben Vital (stand. powder of a subspecies of Rosa canina fruits), reduces pain and improves general wellbeing in patients with osteoarthritis--a double-blind, placebo-controlled, randomised trial. AUTHOR(S): Rein E1, Kharazmi A, Winther K.	Does the herbal remedy Hyben Vital aid in the alleviation of the pain symptoms of osteoarthritis?	-One hundred and twelve patients with osteoarthritis were randomly allocated to treatment with either Hyben Vital 5 g daily or an identical placebo for 3 months, followed immediately by the alternative treatment. -The patients assessed changes in joint pain and stiffness after each treatment period on a 5-point categorical scale. -General wellbeing, including mood, sleep quality and energy were also assessed and recorded in a personal diary.	Group A (placebo first) showed significantly more improvement from Hyben Vital than from placebo, $p < 0.0078$ for pain and < 0.0025 for stiffness. -But Group B (Hyben Vital first) revealed a positive effect of the same order as for Hyben Vital in group A, not only from the active drug, but also from placebo (difference not significant). -An identical pattern was observed when we evaluated general wellbeing from the diary records. -When patients, on the basis of reduction in joint pain, were divided into responders and non-responders, the first 3 months of active treatment (group A) showed a response rate of 31/47 (66%) compared to that of placebo (group B) 18/50 (36%), $p < 0.0185$. -No major side effects occurred in either group. -The data indicate that Hyben Vital reduces the symptoms of osteoarthritis	-We interpret the marked differences in the responses of the two groups as indicating a strong "carryover" effect of Hyben Vital. -There were also unintended effects -reduction in pain sensation were evaluated on yes/no basis and there was a significant reduction in pain from active treatment -preference of treatment was in favour of active treatment and diary recordings on pain, general wellbeing, mood and sleeping quality were all statistically significant in favour of active treatment 3
Effects of a ginger extract on knee pain in patients with osteoarthritis	To evaluate the efficacy and safety of a standardized and highly concentrated extract of 2 ginger species, Zingiber officinale and Alpinia galanga (EV.EXT 77), in patients with osteoarthritis (OA) of the knee	Two hundred sixty-one patients with OA of the knee and moderate-to-severe pain were enrolled in a randomized, double-blind, placebo-controlled, multicenter, parallel-group, 6-week study. After washout, patients received ginger extract or placebo twice daily, with acetaminophen allowed as rescue medication. The primary efficacy variable was the proportion of responders experiencing a reduction in “knee pain on standing,” using an intent-to-treat analysis. A responder was defined by a reduction in pain of ≥15 mm on a visual analog scale.	In the 247 evaluable patients, the percentage of responders experiencing a reduction in knee pain on standing was superior in the ginger extract group compared with the control group (63% versus 50%; P = 0.048). Analysis of the secondary efficacy variables revealed a consistently greater response in the ginger extract group compared with the control group, when analyzing mean values: reduction in knee pain on standing (24.5 mm versus 16.4 mm; P = 0.005), reduction in knee pain after walking 50 feet (15.1 mm versus 8.7 mm; P = 0.016), and reduction in the Western Ontario and McMaster Universities osteoarthritis composite index (12.9 mm versus 9.0 mm; P = 0.087). Change in global status and reduction in intake of rescue medication were numerically greater in the ginger extract group. Change in quality of life was equal in the 2 groups. Patients receiving ginger extract experienced more gastrointestinal (GI) adverse events than did the placebo group (59 patients versus 21 patients). GI adverse events were mostly mild.	A highly purified and standardized ginger extract had a statistically significant effect on reducing symptoms of OA of the knee. This effect was moderate. There was a good safety profile, with mostly mild GI adverse events in the ginger extract group