

Natural health product use in children: Common and important

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In the current issue of *Paediatrics & Child Health*, Beringer et al (pages 23-29) report the results of a review of medical records investigating the use of natural health products (NHPs) by children in a hospice in Ontario between 2008 and 2013. The authors have demonstrated a very high rate of use of NHPs, with three-quarters of the children receiving at least one NHP in addition to conventional therapy. This finding is higher than in previous studies investigating NHP use in Canadian children; for example, the work of Adams et al (1) which demonstrated a rate of 37% among children with chronic health problems attending specialty clinics in Ontario and Alberta. The reasons for this may lie in the nature of the patients; as the authors note, the children in this study have complex disease with limited life expectancy. These figures are also closer to those observed among adult patients with cancer, in whom up to 60% use some type of NHP (2).

An additional important finding in this study is that there were a number of potential drug-NHP or NHP-NHP interactions, which were present among 66% of all patients. Of interest, there were no clinically relevant drug-NHP interactions reported during the study period. This observation should be interpreted with some caution because under-reporting of adverse events is common in

records reviews, and adverse events may not have been as well appreciated in the setting of hospice care.

What is the take-home message of this article for the clinician? First, that use of NHPs is likely to be common among children, especially among children with complex and serious disease. Second, that some of this NHP use may have the potential for producing interactions not only with concurrent drug therapy but also with other NHPs. This highlights the importance of a careful history, with clinicians being nonjudgemental with regard to NHP use to encourage candor on the part of children and their parents. In this respect, pharmacy team members can be a vital resource, particularly with respect to medication history at the time of hospital admission or clinic visit. In addition, clinicians need to take advantage of drug information resources to ensure that they have timely and accurate information with regard to potential drug-NHP and NHP-NHP interactions.

REFERENCES

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2. Lawsin C, DuHamel K, Itzkowitz SH, et al. Demographic, medical, and psychosocial correlates to CAM use among survivors of colo-rectal cancer. *Support Care Cancer* 2007;15:557-64.

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