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Hawthorn

Revised: December 3, 2018.

Drug Levels and Effects

Summary of Use during Lactation

Hawthorn (Crataegus species) leaves, fruit and flowers contain flavonoids and oligomeric proanthocyanidins. Some hawthorn products are standardized based on the content of these ingredients. Hawthorn's main use is for treating mild heart failure. One small, old study found a galactogogue effect with hawthorn flowers;[1] however, no scientifically valid clinical trials support this use. Galactogogues should never replace evaluation and counseling on modifiable factors that affect milk production.[2] No data exist on the excretion of any components of hawthorn into breastmilk or on the safety and efficacy of hawthorn in nursing mothers or infants. Hawthorn is generally well tolerated in adults with dizziness being the most common adverse effect. It can possibly increase the effect of anticoagulants, digoxin and hypotensive medications. Other occasional reactions include nausea, fatigue, sweating, and rash. The German Commission E states that there is no known reason to contraindicate use of the flowers or leaves during breastfeeding, but the fruit should be avoided. Other sources recommend avoiding hawthorn during breastfeeding because of a lack of studies.

Dietary supplements do not require extensive pre-marketing approval from the U.S. Food and Drug Administration. Manufacturers are responsible to ensure the safety, but do not need to *prove* the safety and effectiveness of dietary supplements before they are marketed. Dietary supplements may contain multiple ingredients, and differences are often found between labeled and actual ingredients or their amounts. A manufacturer may contract with an independent organization to verify the quality of a product or its ingredients, but that does *not* certify the safety or effectiveness of a product. Because of the above issues, clinical testing results on one product may not be applicable to other products. More detailed information about dietary supplements is available elsewhere on the LactMed Web site.

Drug Levels

Maternal Levels. Relevant published information was not found as of the revision date.

Infant Levels. Relevant published information was not found as of the revision date.

Effects in Breastfed Infants

Relevant published information was not found as of the revision date.

Effects on Lactation and Breastmilk

A group of 5 nursing mothers were given no herb for 5 days, 15 mL of a 10% infusion of Cratoegi oxyacanthi flowers orally 3 times daily for 10 days, followed by another 5-day control period from days 15 to 20. Their diet and environment were kept constant during the study period. Milk volume was measured daily and milk fat percentage was measured on days 5, 10, 15 and 20. The hawthorn flower infusion increased daily milk quantity in most nursing mothers and increased its fat content. The increase occurred towards the end of the experimental period and continued during the control period.[1] Because of the lack of randomization, blinding and controls, and small number of participants, no valid conclusion can be made from this study on the galactogogue effects of hawthorn.

References

1. Nikolov P, Avramov NR. [Investigations on the effect of Foeniculum vulgare, Carum carvi, Anisum vulgare, Crataegus oxyacanthus, and Galga officinalis on lactation]. Izv Meditsinskite Inst Bulg Akad Naukite Sofia Otd Biol Meditsinski Nauki. 1951;1:169-82. PubMed PMID: 14888359.
2. Brodribb W. ABM Clinical Protocol #9: Use of galactogogues in initiating or augmenting maternal milk production, second revision 2018. Breastfeed Med. 2018;13:307-14. PubMed PMID: 29902083.

Substance Identification

Substance Name

Hawthorn

Scientific Name

Crataegus oxyacantha Crataegus monogyna

Drug Class

Breast Feeding

Lactation

Complementary Therapies

Phytotherapy

Plants, Medicinal