



## Peony

Revised: December 3, 2018.

## Drug Levels and Effects

### Summary of Use during Lactation

Peony (*Paeonia* sp.) root contains paeoniflorin which is thought to be the primary ingredient that decreases serum prolactin. Other ingredients include albiflorin, benzoylpaeoniflorin, liquiritin, flavonoids, proanthocyanidins, tannins, terpenoids, triterpenoids, and complex polysaccharides. Peony has no specific lactation-related uses. It is most commonly used to treat heart disease, menstrual irregularities, uterine fibroids, arthritis, and cough, although data supporting these uses is poor. No data exist on the excretion of any components of peony into breastmilk or on the safety and efficacy of peony in nursing mothers or infants. Peony is generally well tolerated, but can occasionally cause gastrointestinal upset, and allergic skin reactions, especially when applied topically. Peony can lower serum prolactin, so it might suppress lactation; therefore, it is probably best to avoid peony during breastfeeding.

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 traditional, nonstandardized decoction of peony and licorice roots called Shaoyao-Gancao-Tang in Chinese and Shakuyaku-Kanzo-To in Japanese was studied in women with elevated serum prolactin caused by long-term (>6 months) ingestion of risperidone. Patients received either bromocriptine 5 mg daily for 4 weeks followed by 4 weeks of 22.5 grams daily of the peony-licorice decoction, or the same drugs in the reverse order. Evaluation of serum prolactin found that both treatments reduced serum prolactin by 21 to 28% from baseline at 4 and 8 weeks.[1] The prolactin level in a mother with established lactation may not affect her ability to breastfeed.

## References

1. Yuan HN, Wang CY, Sze CW et al. A randomized, crossover comparison of herbal medicine and bromocriptine against risperidone-induced hyperprolactinemia in patients with schizophrenia. *J Clin Psychopharmacol.* 2008;28:264-370. PubMed PMID: 18480682.

## Substance Identification

### Substance Name

Peony

### Scientific Name

*Paeonia lactiflora* *Paeonia officinalis* *Paeonia suffruticosa*

### Drug Class

Breast Feeding

Lactation

Complementary Therapies

Phytotherapy

Plants, Medicinal