BACKGROUND: Approximately two thirds of women who reach menopause develop menopausal symptoms, primarily hot flashes. Hormone therapy long was considered the first-line treatment for vasomotor symptoms. However, given the results of the Women's Health Initiative (WHI), many women are reluctant to use exogenous hormones for symptomatic treatment and are turning to botanicals and dietary supplement (BDS) products for relief. Despite the fact that there is limited scientific evidence describing efficacy and long-term safety of such products, many women find these natural treatments appealing. Perimenopausal and postmenopausal women are among the highest users of these products, but 70% of women do not tell their healthcare providers about their use. Compounding this issue is the fact that few clinicians ask their patients about use of BDS, largely because they have not been exposed to alternative medical practices in their training and are unfamiliar with these products.

METHODS: This paper reviews the botanicals and dietary supplements commonly used in menopause (such as black cohosh, red clover, and soy products) as well as the available data on efficacy and safety. We searched the MEDLINE database from 1966 to December 2004 using terms related to BDS and menopausal symptoms for perimenopausal or postmenopausal women. Abstracts from relevant meetings as well as reference books and websites on herbal supplements were also searched. Randomized, controlled trials (RCTs) were used if available; open trials and comparison group studies were used when RCTs were not available.

RESULTS AND CONCLUSIONS: The evidence to date suggests that black cohosh is safe and effective for reducing menopausal symptoms, primarily hot flashes and possibly mood disorders. Phytoestrogen extracts, including soy foods and red clover, appear to have at best only minimal effect on menopausal symptoms but have positive health effects on plasma lipid concentrations and may reduce heart disease. St. John's wort has been shown to improve mild to moderate depression in the general population and appears to show efficacy for mood disorders related to the menopausal transition. Other commonly used botanicals have limited evidence to demonstrate safety and efficacy for relief of symptoms related to menopause.