



HORSE CHESTNUT

Used in herbal medicine to help treat chronic venous insufficiency and associated symptoms as well as varicose veins.

Product number NPN 80002656
Dosage form Capsule
Quantity 90
Recommended route of administration Oral
Dosage Graine de marronnier d'Inde (*Aesculus hippocastanum*)
..... standardisé à 20% d'aescine 375 mg

History²

The horse chestnut tree is native to the Balkans and western Asia, particularly Turkey. It was from there in 1576 that Charles de L'Écluse, a French botanist, brought some seeds back with him. The tree then spread across Europe over the next two centuries, due to its medicinal virtues and ornamental value. From a therapeutic point of view, various preparations have been developed using its leaves, seeds, or tree bark. These have been used to treat venous circulation disorders, such as heaviness and swelling in the legs, varicose veins, and also hemorrhoids.

An effective treatment

The medicinal virtues of horse chestnut have been detailed widely in the research literature. Many studies have validated the effectiveness of extracts of the plant's seeds for treating venous insufficiency, such as those listed here, non-exhaustively:

- A 2006 meta-analysis involving 543 patients (6 double-blind, placebo-controlled clinical studies) found that horse chestnut seed extracts were effective and safe for the treatment of venous insufficiency.³
- Another literature review carried out in Switzerland in 2006 involving 5 clinical trials (4 involving patients with venous insufficiency and 1 involving patients with varicose veins) corroborated the effectiveness of horse chestnut, its tolerance among treatment patients, and its safety for use.⁴
- Finally, in 2002, a meta-analysis evaluated 13 randomized controlled trials (involving 1051 patients) and 3 observational studies (involving 10725 patients). This study also corroborated the effectiveness and safety of horse chestnut seed extracts.⁵

Today the effectiveness of horse chestnut seed extracts is well established. It is recognized by the German Commission E, ESCOP and the WHO for alleviating symptoms of venous insufficiency in the legs: pain, heaviness, swelling, nocturnal cramps, and itching.



Therapeutic indications

- Used in herbal medicine to help treat chronic venous insufficiency and associated symptoms as well as varicose veins.

RECOMMENDED DOSAGE

Adult, 2 capsules per day, which provide 750 mg of *Aesculus hippocastanum* extract standardized at 20% aescin.

Aesculus hippocastanum

USDA Classification¹

Kingdom: Plantae
Division: Magnoliophyta
Class: Magnoliopsida
Order: Sapindales
Famili: Hippocastanaceae
Genus: *Aesculus* L.
Species: *Aesculus hippocastanum* L.





Medicinal ingredient

Horse chestnut seed (*Aesculus hippocastanum*)
standardized at 20% escin 375 mg

Non-Medicinal ingredients

ellulose, magnesium stearate and hypromellose

Precautions and warnings

- Consult a health care practitioner if symptoms persist or worsen.
- Consult a health care practitioner before using if you are pregnant or breastfeeding.

Known undesirable effects

- Some people can experience headaches, dizziness, stomach irritation, or itching.

REFERENCES

¹ *Aesculus hippocastanum* L. – horse chestnut. USDA Plants Database. Available online at: <http://plants.usda.gov/core/profile?symbol=AEHI> (accessed 04.03.2015)

² *Fiche Marronnier d'Inde*. Passeport Santé. Available online at: http://www.passeportsante.net/fr/Solutions/PlantesSupplements/Fiche.aspx?doc=marronnier_inde_ps (accessed 04.03.2015)

³ Pittler MH, Ernst E. **Horse chestnut seed extract for chronic venous insufficiency**. Cochrane Database of Systematic Reviews. Issue 11. Art. No : CD003230. 2012

⁴ Suter A, Bommer S, Rechner J. **Treatment of patients with venous insufficiency with fresh plant horse chestnut seed extract: a review of 5 clinical studies**. *Adv ther.* 23(1):179-90. 2006

⁵ Siebert U, Brach M, Sroczynski G, Berla K. **Efficacy, routine effectiveness, and safety of horsechestnut seed extract in the treatment of chronic venous insufficiency. A meta-analysis of randomized controlled trials and large observational studies**. *Int Angiol.* 21(4):305-15. 2002

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