

CASSIA – *CINNAMOMUM AROMATICUM*

This monograph is intended to serve as a guide to industry for the preparation of Product Licence Applications (PLAs) and labels for natural health product market authorization. It is not intended to be a comprehensive review of the medicinal ingredient.

Notes

- ▶ Text in parentheses is additional optional information which can be included on the PLA and product label at the applicant's discretion.
- ▶ The solidus (/) indicates that the terms and/or the statements are synonymous. Either term or statement may be selected by the applicant.

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Proper name(s)

Cinnamomum aromaticum Nees (Lauraceae) (USDA 2009; McGuffin et al. 2000)

Synonyms:

- ▶ *Cinnamomum cassia* Nees ex Blume (ITIS 2011; USDA 2009)
- ▶ *Cinnamomum cassia* Presl (PPRC 2010; Bensky et al. 2004; Chen and Chen 2004)

Common name(s)

- ▶ Cassia (USDA 2009; Blumenthal et al. 2000; McGuffin et al. 2000)
- ▶ Chinese cinnamon (USDA 2009; Blumenthal et al. 2000, 1998; McGuffin et al. 2000)
- ▶ Cassia cinnamon (Brinker 2010; Blumenthal et al. 2000)
- ▶ Rou Gui (Chen and Chen 2004; McGuffin et al. 2000)

Source material(s)

- ▶ Branch bark (Crawford 2009; BHC 2006; Mang et al. 2006; Khan et al. 2003; Blumenthal et al. 2000,1998)
- ▶ Stem bark (Crawford 2009; Mang et al. 2006; Khan et al. 2003; Blumenthal et al. 2000, 1998)
- ▶ Trunk bark (PPRC 2010; BHC 2006; Bensky et al. 2004; Chen and Chen 2004)

Route(s) of administration

oral

Dosage form(s)

- ▶ The acceptable pharmaceutical dosage forms include, but are not limited to capsules, chewables (e.g. gummies, tablets), liquids, powders, strips or tablets.
- ▶ This monograph is not intended to include foods or food-like dosage forms such as bars, chewing gums or beverages.

Use(s) or Purpose(s)

Statement(s) to the effect of:

Branch, stem or trunk bark:

- ▶ Helps to support/maintain healthy blood glucose levels (Davis and Yokoyama 2011; Crawford 2009; Mang et al. 2006).
- ▶ Provides antioxidants (Gruenwald et al. 2010; Roussel et al. 2009; Halvorsen et al. 2006; Shan et al. 2005).
- ▶ (Traditionally) used in Herbal Medicine for digestive disturbances/dyspeptic complaints/indigestion, such as mild spasms of the gastrointestinal tract, bloating and flatulence (BHC 2006; Blumenthal et al. 2000, 1998).
- ▶ (Traditionally) used in Herbal Medicine for loss of appetite (BHC 2006; Blumenthal et al. 2000, 1998).

Trunk bark only:

- ▶ Used in Traditional Chinese Medicine (TCM) to dispel cold, relieve pain, open channels and collaterals (PPRC 2010; Bensky et al. 2004; Chen and Chen 2004).
- ▶ Used in Traditional Chinese Medicine (TCM) to dispel cold, warm the spleen, relieve pain (PPRC 2010; Bensky et al. 2004; Chen and Chen 2004).
- ▶ Used in Traditional Chinese Medicine (TCM) to encourage production of Qi and blood (PPRC 2010; Bensky et al. 2004; Chen and Chen 2004).
- ▶ Used in Traditional Chinese Medicine (TCM) to tonify kidney yang, augment ming men (life gate) fire (PPRC 2010; Bensky et al. 2004; Chen and Chen 2004).

Note

A claim for a traditional use must include either the term “Herbal Medicine” or “Traditional Chinese Medicine”.

Dose(s)

Statement(s) to the effect of:

Subpopulation(s)

adults (≥ 19 years)

Quantity(ies)**Antioxidant:**

Up to 0.99 g bark powder, per day (Gruenwald et al. 2010; Roussel et al. 2009; Halvorson et al. 2006; Shan et al. 2005).

Appetite loss:

1-6 g bark powder, per day, not to exceed 4 g per single dose (Gruenwald et al. 2010; Al Jamal et al. 2009; Crawford 2009; Mang et al. 2006; Safdar et al. 2004; Khan et al. 2003).

Digestive disturbances/ Dyspepsia:

1-6 g bark powder, per day, not to exceed 4 g per single dose (Gruenwald et al. 2010; Al Jamal et al. 2009; Crawford 2009; Mang et al. 2006; Khan et al. 2003; Safdar et al. 2004).

Healthy glucose:

3-6 g bark powder, per day, not to exceed 4 g per single dose (Davis and Yokoyama 2011; Gruenwald et al. 2010; Crawford 2009; Mang et al. 2006).

TCMs:**Decoction**

2-5 g trunk bark, per day (PPRC 2010; Bensky et al. 2004; Chen and Chen 2004).

Powder

1-2 g trunk bark, per day (PPRC 2010; Bensky et al. 2004; Chen and Chen 2004).

Directions for use**Appetite loss:**

Take a half hour before meals.

Digestive disturbances/ Dyspepsia:

Take with food/meal (Crawford 2009).

Duration of use

Statement(s) to the effect of:

Healthy glucose:

Products providing 4-6 g cassia bark, per day:

For use beyond 6 weeks, consult a health care practitioner (Safdar et al. 2004; Khan et al. 2003).

Risk information

Statement(s) to the effect of:

Caution(s) and warning(s)

Appetite loss or Digestive disturbances:

If symptoms persist or worsen, consult a health care practitioner.

Products containing ≥ 1 g per day of cassia bark:

- ▶ If you have diabetes, consult a health care practitioner prior to use (NS 2012; Brinker 2010)
- ▶ If breastfeeding, consult a health care practitioner prior to use (Blumenthal et al. 2000; WHO 1999).

Contraindication(s)Products containing ≥ 1 g per day of cassia bark:

If pregnant, do not use (Brinker 2010; PPRC 2010; BHC 2006; Chen and Chen 2004; Blumenthal 2000, 1998).

TCMs:

If you have excess heat, yin-deficient fire, or bleeding caused by heat in the blood, do not use (PPRC 2010; Chen and Chen 2004).

Known adverse reaction(s)

Hypersensitivity/allergy may occur; in which case, discontinue use (WHO 1999; Blumenthal 2000, 1998; McGuffin et al. 1997).

Storage conditions

No statement required.

Non-medicinal ingredientsMust be chosen from the current NHPD *Natural Health Products Ingredients Database* (NHPID) and must meet the limitations outlined in the database.

Specifications

- ▶ The finished product must comply with the minimum specifications outlined in the current NHPD *Compendium of Monographs*.
- ▶ The medicinal ingredient must comply with the requirements outlined in the NHPD *Natural Health Products Ingredients Database* (NHPID).

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