

NLM Citation: Drugs and Lactation Database (LactMed®) [Internet]. Bethesda (MD): National Institute of Child Health and Human Development; 2006-. Black Cohosh. [Updated 2021 May 17]. **Bookshelf URL:** https://www.ncbi.nlm.nih.gov/books/



Black Cohosh

Revised: May 17, 2021.

CASRN: 84776-26-1

Drug Levels and Effects

Summary of Use during Lactation

Black cohosh (*Cimicifuga racemosa*, formerly *Actaea racemosa*) root was thought to have mild estrogenic activity based on its triterpene content, which is standardized based on 27-deoxyactein. However, recent studies have found no estrogenic activity.[1,2] It is primarily used for postmenopausal symptoms and has been used to promote labor.[3-8] Currently, it has no specific uses during breastfeeding, although historically it was supposedly used by native American women as a galactogogue.[9] No data exist on the safety and efficacy of black cohosh in nursing mothers or infants. In general, there is a low frequency of adverse reactions, but dizziness, nausea, headache, rash, vomiting, and rarely, hepatitis and allergic reactions have been reported. [3,10,11] Some sources recommend against its use during breastfeeding because of the lack of safety data and its potential estrogenic activity,[10] while others do not contraindicate its use.[9]

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.

Disclaimer: Information presented in this database is not meant as a substitute for professional judgment. You should consult your healthcare provider for breastfeeding advice related to your particular situation. The U.S. government does not warrant or assume any liability or responsibility for the accuracy or completeness of the information on this Site.

Attribution Statement: LactMed is a registered trademark of the U.S. Department of Health and Human Services.

Effects in Breastfed Infants

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

Effects on Lactation and Breastmilk

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

References

- 1. Liske E, Hanggi W, Henneicke-von Zepelin HH, et al. Physiological investigation of a unique extract of black cohosh (*Cimicifugae racemosae* rhizoma): a 6-month clinical study demonstrates no systemic estrogenic effect. J Womens Health Gend Based Med. 2002;11:163–74. PubMed PMID: 11975864.
- 2. Ruhlen RL, Haubner J, Tracy JK, et al. Black cohosh does not exert an estrogenic effect on the breast. Nutr Cancer. 2007;59:269–77. PubMed PMID: 18001221.
- 3. Dennehy C, Tsourounis C, Bui L, et al. The use of herbs by California midwives. J Obstet Gynecol Neonatal Nurs. 2010;39:684–93. PubMed PMID: 21044150.
- 4. Zhang AL, Story DF, Lin V, et al. A population survey on the use of 24 common medicinal herbs in Australia. Pharmacoepidemiol Drug Saf. 2008;17:1006–13. PubMed PMID: 18816875.
- 5. Dugoua JJ, Seely D, Perri D, et al. Safety and efficacy of black cohosh (*Cimicifuga racemosa*) during pregnancy and lactation. Can J Clin Pharmacol. 2006;13:e257–61. PubMed PMID: 17085773.
- 6. Allaire AD, Moos MK, Wells SR. Complementary and alternative medicine in pregnancy: A survey of North Carolina certified nurse-midwives. Obstet Gynecol. 2000;95:19–23. PubMed PMID: 10636495.
- 7. Tesch BJ. Herbs commonly used by women: an evidence-based review. Am J Obstet Gynecol. 2003;188(5 Suppl):S44–55. PubMed PMID: 12748451.
- 8. Low Dog T. The use of botanicals during pregnancy and lactation. Altern Ther Health Med. 2009;15:54–8. PubMed PMID: 19161049.
- 9. McKenna DJ, Jones K, Humphrey S, et al. Black cohosh: efficacy, safety, and use in clinical and preclinical applications. Altern Ther Health Med. 2001;7:93–100. PubMed PMID: 11347288.
- 10. Hardy ML. Women's health series: Herbs of special interest to women. J Am Pharm Assoc (Wash). 2000;40:234–42. PubMed PMID: 10730024.
- 11. Mahady GB, Low Dog T, Barrett ML, et al. United States Pharmacopeia review of the black cohosh case reports of hepatotoxicity. Menopause. 2008;15:628–38. PubMed PMID: 18340277.

Substance Identification

Substance Name

Black Cohosh

Scientific Name

Cimicifuga racemosa

CAS Registry Number

84776-26-1

Drug Class

Breast Feeding

Lactation

Black Cohosh 3

Complementary Therapies

Phytotherapy

Plants, Medicinal