Clinical Practice Guideline: **Bach Flower Remedies**

Date of Implementation: **February 9, 2006**

Product: **Specialty**

POLICY

American Specialty Health – Specialty (ASH) clinical committees have determined that Bach Flower Remedies have insufficient evidence to establish clinical effectiveness, are not professionally recognized, do not have an established benefit:risk profile, pose a health and safety risk through a substantial risk of substitution harm, and are considered to be scientifically implausible. For more information, see ASH policy *Techniques and Procedures Not Widely Supported as Evidence Based – CPG 133*.

PROCESS AND DEFINITIONS

When developing, reviewing, and approving clinical policy, ASH peer-review committees consider whether the technique/procedure:

- Is established as clinically effective by:
  - Scientific information published in an acceptable peer-reviewed clinical science resource, and
  - The consensus opinion of the Evidence Evaluation Committee (EEC) when available;
- Is professionally recognized by:
  - Inclusion in the educational standards accepted by the majority of the professions' educational institutions,
  - Wide acceptance and use of the practice, and
  - Recommendations for use made by healthcare practitioners practicing in the relevant clinical area;
- Poses a health and safety risk; and
- Is plausible or implausible
  - A belief, theory, or mechanism of health and disease that can be explained within the existing framework of scientific methods, reasoning and available knowledge is considered plausible.
  - A treatment intervention or diagnostic procedure that requires the existence of forces, mechanisms, or biological processes that are not known to exist within the current framework of scientific methods, reasoning and available knowledge is considered implausible.

Substitution harm (indirect harm): Compromised clinical outcomes caused by:

- Utilizing a specific diagnostic or therapeutic procedure when the safety, clinical effectiveness, or diagnostic utility is either unknown or is known to

be unsafe, ineffective, or of no diagnostic utility, *instead of* a diagnostic or therapeutic procedure known to be safe, be clinically effective, or to have diagnostic utility; or

- The utilization of a diagnostic or therapeutic procedure that is substantially less effective or safe than another procedure with established safety, and clinical effectiveness or utility.

Labeling effects (non-specific harm): The harm that results from identifying in a patient a condition or a finding that is not clinically valid.

Safe: The terms "safe" and "safety," are used only with specific reference to the absence of direct harm. Direct harm would include any injury to a patient caused by the mechanical, thermal, biological, chemical, pharmacological, electrical, electromagnetic, or psycho-dynamic properties of a diagnostic or therapeutic procedure, and as such, the procedure would be considered unsafe.

Direct harm: Any injury to a patient caused by the mechanical, thermal, biological, chemical, pharmacological, electrical, electromagnetic, or psycho-dynamic properties of a diagnostic or therapeutic procedure.

Benefit versus risk profile: The relative effectiveness or utility of a therapeutic intervention or diagnostic procedure versus its potential for direct harm.

- Positive (benefits outweigh risks),
- Negative (risks outweigh benefits), or
- Equivocal (available information is inconclusive).

Description/ Background

Treatment with Bach Flower Remedies is a therapeutic system that uses specially prepared plant infusions to balance physical and emotional disturbances. The formulary for this technique includes 39 remedies, 38 made of single flower tinctures and the 39th a combination of five (5) of the 38 (known as rescue remedy) was developed to treat emotional states and personality types.

Dr. Edward Bach was a microbiologist at the Royal London Homeopathic Hospital in the early part of the 20th century. He tested different flowering plants to address such states as anxiety, fear of the unknown, hopelessness, and the inability to say "no." Dr. Bach reportedly would suffer these states himself and then test different plants until he found the one that would address this state. According to Dr. Bach, all human disease and suffering are rooted in emotional imbalances. He identified 38 flower remedies which, he believed, could treat most illnesses.

The 38 remedies are divided into seven (7) therapeutic groups according to the following emotions: depression, fear, lack of interest in the present, loneliness, over concern for the welfare of others, oversensitivity, and uncertainty. Bach associated each of these emotions with flowers to be used as remedies.

The remedies are produced by placing freshly picked sun-exposed flowers in spring water with brandy added for preservation. The prescription of these remedies by specialized therapists is highly individualized and intuitive. According to Bach, the remedies work not through their pharmacological actions but through their "energy." Thus there are similarities with homeopathic theory, even though many homeopaths deny any connection.

Evidence and Research

According to Ernst (2001), there are numerous anecdotal reports about therapeutic successes. He states that very few controlled clinical trials exist and these are inconclusive, and contain methodological weaknesses. A randomized, placebo-controlled, double-blind trial tested Five-Flower remedy for examination stress in 100 university students. Its results show no significant differences in outcome compared with placebo. A similar randomized controlled trial (RCT) found that 61 students responded positively to both Bach flower remedies and placebo, and its authors concluded that Bach flower remedies are an "effective placebo for test-anxiety, which do not have a specific effect." Ernst (2010) performed a systematic review that included five randomized studies of Bach remedies. Of the four studies that also were placebo controlled, none showed any effectiveness of the remedies. The author concluded that the most reliable studies showed no difference between the effectiveness of the Bach remedies and placebo. Thaler, et al (2009) performed a systematic review of the literature on the use of Bach flower remedies for the treatment of psychological conditions and pain management. The four controlled trials that met inclusion criteria involved patients treated with Bach flower remedies for test anxiety and ADHD. There was no difference in effectiveness of the remedies compared with placebo. The analysis did not locate any prospective studies of the remedies for treatment of pain. Of the four controlled trials one reported adverse events in the remedy group: two participants with headaches and one with a skin eruption. The placebo group also reported three adverse events: vomiting before an examination, hayfever and depressed mood. One controlled trial reported an adverse event of unspecified type; one trial reported no adverse occurrences and the other trial did not report on adverse events at all. Two case series were mentioned in the study but not included in the analysis; one reported no adverse issues and the other did not report at all. The author concluded that, based on the adverse events reporting, Bach remedies are probably safe.

References

Dr. Edward Bach Centre. (2004, July 29). Retrieved March 22, 2015, from www.bachcentre.com.

Ernst, E. (Ed.). (2001). The desktop guide to complementary and alternative medicine: An evidence-*based approach.* London: Mosby.

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Thaler K, Kaminski A, Chapman A, Langley T, Gartlehner G. Bach Flower Remedies for psychological problems and pain: a systematic review. BMC Complement Altern Med. 2009 May 26;9:16. doi: 10.1186/1472-6882-9-16.

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