Rose of Jericho: A Word of Caution

To the Editor,

The use of traditional herbs in the developing world is based on social experience and traditional beliefs. For generations these practices have been taught and followed with the common faith that these herbs are relevant in the present time.1 Anastatica hierochuntica also known as Rose of Jericho, Resurrection plant, Genggam Fatimah,2 or very commonly in Arabic, Kaf Mariam (Mary’s hand) is found in the Sahara-Arabian deserts and widely available in Middle Eastern societies where it is consumed as a herbal tea during pregnancy.3 It is used as folk medicine during late pregnancy, particularly before delivery for the cultural belief that it eases childbirth,2 reduces uterine hemorrhage, and facilitates expulsion of a dead fetus.1 It was claimed to be highly beneficial in antepartum care. It has also been reported to have anti-oxidant,4 antimicrobial,3 and hypoglycemic properties.5 In spite of these proclaimed medicinal benefits and common usage, scientific evidence considering the therapeutic effects of Kaf Mariam is very limited and worth following up in human studies.2,4

The wide consumption of this herb by Omani women may have not raised alertness to any negative outcomes during previous times. However, with the introduction of modern drugs for labor induction, and insulin for mothers with gestational diabetes, safety concerns regarding the possibility of uterine hyperstimulation, over induction of labor, or even hypoglycemia in the mother or the fetus, dictate that this herb should be used with caution. Until proven safe, Rose of Jericho consumption during pregnancy aught to be carefully monitored by doctors and caregivers. Pregnant women need to be aware about possible risks and acknowledge their usage of this herbal tea especially upon admission for delivery. Meanwhile, the consumption of this herb among pregnant women and its clinical relevance require further evaluation.

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References