

Synergism, Antagonism or Additivity of Dietary Supplements

Christopher J. Borgert, Ph.D. ^{1,2}
Kathleen Cullen Findley, MST, PharmD. ^{1,3}

¹Applied Pharmacology & Toxicology, Inc.
Gainesville, FL

²Department of Physiological Sciences, College of Vet. Med.
University of Florida, Gainesville, FL

³Veterans Administration Medical Center, Gainesville, FL

Drug–Dietary Supplement Interaction Literature Sources

- Case Reports
- Clinical Studies
- Laboratory Studies

Problems Inherent in Published Literature

McInnes & Brodie 1988. Drug interactions that matter.
Drugs 36: 83-110.

- Literature over-populated.
- Case-Reports: relevant but anecdotal.
- Lab/Clinical Study: controlled, but questionable relevance & general applicability.
- Terminology used ambiguously; incorrectly.
 - ◊ “interaction,” “synergism,” “potentiation”
 - ◊ “No-Interaction” concept sorely lacking
- Data quality poorly evaluated.

Data Evaluation

- Clinical & Laboratory Studies
Data Quality Assessment Depends on Objectives

Prediction & Clinical Management

- Validate interaction.
 - »Generalize & define patient conditions.
- Direction & type of interaction.
- Magnitude of interaction.
- Variance / confidence intervals.
- Mechanism of interaction.
- Incidence (post-marketing surveillance).

Interactions

Synergism

More response /
less drug *than*
expected.

- Extrinsic, *NOT* Intrinsic
 - *Dependent Upon the “Expected” Effect.
 - *Highly Dependent Upon Dose *AND* Ratios.
- Quantitative, *not* Qualitative.
- Dose-Response, *not* Mechanism
- Mathematical, *not* Biological

Antagonism

Less response /
more drug *than*
expected.

What is “Expected” ?

2 Classical Models for Non-Interaction

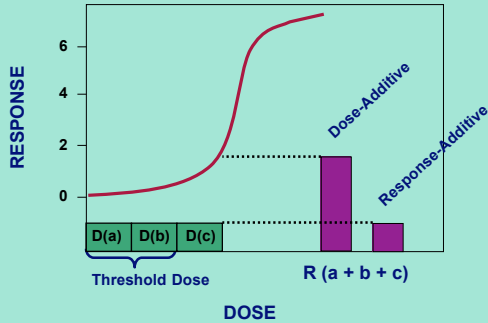
Loewe Additivity [Dose Additivity]

- No self-interaction
- Agents act as simple dilutions (potency)
- Sum doses & potencies of each agent
- $D_A/D_A + D_B/D_B = 1$

Bliss Independence [Response Additivity]

- Statistical independence
- Relative effect of A not influenced by B
- Sum effects of each agent
- $E_{A+B} = E_A + E_B - (E_A \times E_B)$

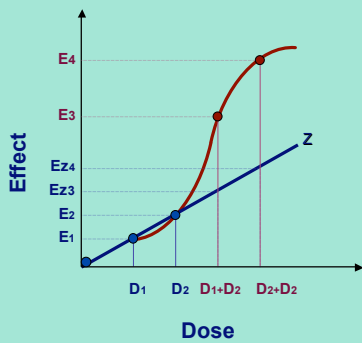
Impact of the No-Interaction Model



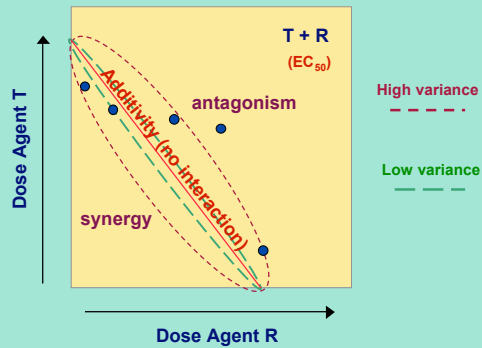
Criteria for Evaluating Interaction Studies

1. Dose-response curves for the mixture components should be adequately characterized.
2. An appropriate "no-interaction" hypothesis should be explicitly stated and used as the basis for assessing synergy and antagonism.
3. Combinations of mixture components should be assessed across a sufficient range to support the goals of the study.
4. Formal statistical tests should be used to distinguish interaction from non-interaction.
5. Interactions should be assessed at relevant levels of biological organization.

Borgert et al., 2001. Human & Ecological Risk Assessment, 7(2): 259-306.



Isobologram



Algorithm for Applying Criteria

| | |
|-------------------------------|-----|
| Fails Criterion | 0 |
| Partially Satisfies Criterion | 0.5 |
| Satisfies Criterion | 1.0 |

| Criterion | 1 | 2 | 3 | 4 | 5 | T | C |
|-----------|---|---|---|---|---|-----|-----|
| Score | X | X | X | X | X | Sum | 0-1 |

- Does not weight individual criteria.
- Does not evaluate clinical relevance.
- Apply cautiously to mechanistic & p'kinetic studies.
- Challenging for whole animal or clinical studies.

Applying the Criteria Ginkgo

Steinke et al., 1993: Ginkgolides A + B synergistically inhibit platelet aggregation.

1. Full dose-response characterization of ginkgolides A and B.
2. Dose-addition defined as no-interaction hypothesis.
3. Tested 7 combinations at 50% inhibitory effect.
4. Applied formal statistical procedure to test differences between observed and expected (dose-additive) effects (Concave Isobole).
5. Assessed interaction at interpretable level of biol. organization.

| Criterion | 1 | 2 | 3 | 4 | 5 | T | C |
|-----------|---|---|---|---|---|---|---|
| Score | 1 | 1 | 1 | 1 | 1 | 5 | 1 |

Applying the Criteria Kangen Karyu (KGK)

Makino et al., 2002 (lab study in rats)

- KGK increases warfarin AUC at 2 g/kg, but not at 0.5g/kg in rats.
- KGK has no effect on PT at any dose tested in rats.
- 0.2g/kg and 0.5 g/kg + 1mg/kg warfarin increased bleeding time above warfarin alone by 20% and 25%, respectively.
- "Since KGK and warfarin *synergistically* exhibit anti-thrombotic effects, their combination would be therapeutically valuable."

| Criterion | 1 | 2 | 3 | 4 | 5 | T | C |
|-----------|---|---|-----|---|---|-----|-----|
| Score | 0 | 0 | 0.5 | 0 | 1 | 1.5 | 0.3 |

•KGK alone inhibits platelets; increases bleeding time in mice.

Applying the Criteria American Ginseng

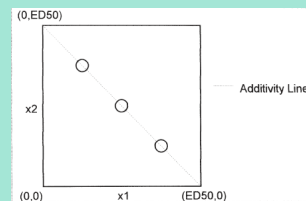
Duda et al. 1999: American ginseng and breast cancer therapeutic agents *synergistically* inhibit MCF-7 cancer cell growth.

| Rx | Cell Survival | Expected Effect (?) | |
|------------------|---------------|---------------------|----------------|
| TAM (1E-6M) | 87% | (.87) x (.80) | (.13) + (.20) |
| TAM (1E-5M) | 10% | | |
| AG (60mg) | 90% | .696 survival | .33 cell death |
| AG (80mg) | 85% | | |
| AG (100mg) | 80% | .67 survival | |
| TAM + AG (100mg) | 75% | | |

| Criterion | 1 | 2 | 3 | 4 | 5 | T | C |
|-----------|----|---|---|---|---|---|-----|
| Score | .5 | 0 | 0 | 0 | 0 | 0 | 0.1 |

Observations / Recommendations / Challenges

- **Synergism / antagonism useful information for specific drug combination therapies.**
 - Apply sound methodologies - difficult but still important for clinical study designs.
 - Magnitude, direction and variability of interaction may be important for appropriate clinical management.
- **Focus on clinical significance of interactions**
 - Intra-individual variations in drug levels with fluctuations in diet, sleep, stress, activity level, etc.
- **Efficient Study Designs Needed for Clinical Studies.**
Price, Borgert, Simon & Wells. 2002. HERA 8(2): 305-326



Price et al. 2002.
HERA 8(2): 305-326

