

31 January 2024 EMEA/HMPC/372839/2016 Committee on Herbal Medicinal Products (HMPC)

European Union herbal monograph on *Foeniculum vulgare* Miller subsp. *vulgare* var. *dulce* (Mill.) Batt. & Trab., fructus

Final – Revision 1

Initial assessment	
Discussion in Working Party on European Union monographs and	October 2006
European Union list (MLWP)	Octobel 2000
Adoption by Committee on Herbal Medicinal Products (HMPC) for	26 October 2006
release for consultation	20 October 2000
End of consultation (deadline for comments).	28 February 2007
Re-discussion in MLWP	May 2007
	July 2007
Adoption by HMPC	
Monograph (EMEA/263293/2006)	
Assessment Report (EMA/HMPC/137426/2006)	
List of References (EMEA/HMPC/456740/2006)	05 July 2007
Overview of comments received during the public consultation	
(EMEA/HMPC/200856/2007)	
HMPC Opinion (EMEA/HMPC/280074/2007)	
First revision	
Discussion in MLWP/HMPC	April 2016
	May 2016
	June 2016
	January 2021
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Adoption of first draft Revision 1 by HMPC for release for consultation	20 July 2022
End of consultation (deadline for comments)	30 November 2022
Discussion in HMPC	September 2022
	November 2022
Adoption of second draft Revision 1 by HMPC for release for consultation	23 November 2022
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	January 2024
Adoption by HMPC	31 January 2024

Keywords	Herbal medicinal products; HMPC; European Union herbal monographs;
	traditional use; Foeniculum vulgare Miller subsp. vulgare var. dulce (Mill.)
	Batt. & Trab.; Foeniculi dulcis fructus; Sweet fennel

BG (bulgarski): Сладко резене, плод	LT (lietuvių kalba): Saldieji pankolių vaisiai
CS (čeština): plod fenyklu obecného sladkého	LV (latviešu valoda): Saldā fenheja augļi
DA (dansk): Fennikel, sød	MT (Malti): frotta tal-busbies ħelu
DE (Deutsch): Süßer Fenchel	NL (Nederlands): Zoete Venkel
EL (elliniká): μαραθου γλυκου καρπος	PL (polski): Owoc kopru włoskiego (odmiany
EN (English): Sweet fennel	słodkiej)
ES (español): hinojo dulce, fruto de	PT (português): funcho doce, fruto
ET (eesti keel): magusa apteegitilli vili	RO (română): fruct de fenicul dulce
FI (suomi): makeafenkoli, siemen	SK (slovenčina): plod fenikla sladkého
FR (français): fenouil doux (fruit de)	SL (slovenščina): plod sladkega navadnega
HR (hrvatski): plod slatkog komorača	komarčka
HU (magyar): édeskömény termés	SV (svenska): sötfänkål, frö
IT (italiano): Finocchio dolce (o romano), frutto	IS (íslenska): Sæt fennel aldin
	NO (norsk): søt fennikel

European Union herbal monograph on *Foeniculum vulgare* Miller subsp. *vulgare* var. *dulce* (Mill.) Batt. & Trab., fructus

1. Name of the medicinal product

To be specified for the individual finished product.

2. Qualitative and quantitative composition^{1, 2}

Well-established use	Traditional use
	With regard to the registration application of Article 16d(1) of Directive 2001/83/EC
	<i>Foeniculum vulgare</i> Miller subsp. <i>vulgare</i> var. <i>dulce</i> (Mill.) Batt. & Trab., fructus (sweet fennel)
	i) Herbal substance Dry fruit
	ii) Herbal preparations
	Not applicable

3. Pharmaceutical form

Well-established use	Traditional use
	Herbal substance as herbal tea for oral use.
	The pharmaceutical form should be described by the European Pharmacopoeia full standard term.

4. Clinical particulars

4.1. Therapeutic indications

Well-established use	Traditional use
	Indication 1)
	Traditional herbal medicinal product for symptomatic treatment of mild, spasmodic gastro-intestinal complaints including bloating and flatulence.
	Indication 2)

¹ The declaration of the active substance(s) for an individual finished product should be in accordance with relevant herbal quality guidance.

 2 The material complies with the Ph. Eur. monograph (ref.: 04/2011:0825).

Well-established use	Traditional use
	Traditional herbal medicinal product for symptomatic treatment of minor spasm associated with menstrual periods.
	Indication 3)
	Traditional herbal medicinal product used as an expectorant in cough associated with cold.
	The product is a traditional herbal medicinal product for use in specified indications exclusively based upon long-standing use.

4.2. Posology and method of administration³

Well-established use	Traditional use
	Posology
	Indications 1) and 3)
	Adults and adolescents
	Single dose
	Herbal tea: 1.5 g of herbal substance in 250 ml of boiling water (steep for 15 minutes) as a herbal infusion, 3 times daily.
	Daily dose: 4.5 g
	Children between 4 and 12 years of age
	Single dose
	Herbal tea: 1.0 g of the herbal substance in 100 ml boiling water (steep for 15 minutes) as a herbal infusion, 3 times daily.
	Daily dose: 3.0 g
	For further information on the use in children between 4 and 12 years of age see section 4.4 'Special warnings and precautions for use'.
	The use is not recommended in children under 4 years of age (see section 4.4 'Special warnings and precautions for use').
	See section 6 'Pharmaceutical particulars' for content of estragole.

³ For guidance on herbal substance/herbal preparation administered as herbal tea or as infusion/decoction/macerate preparation, please refer to the HMPC 'Glossary on herbal teas' (EMA/HMPC/5829/2010 Rev.1).

Well-established use	Traditional use
	Indication 2)
	Adults and adolescents
	Single dose
	Herbal tea: 1.5 g of herbal substance in 250 ml of boiling water (steep for 15 minutes) as a herbal infusion 3 times daily.
	Daily dose: 4.5 g
	The use in children under 12 years of age is not recommended (see section 4.4 'Special warnings and precautions for use').
	See section 6 'Pharmaceutical particulars' for content of estragole.
	Duration of use
	Indications 1), 2) and 3)
	Adults and adolescents
	Not to be taken for more than 2 weeks.
	Indications 1) and 3)
	Children between 4 and 12 years of age
	For short-term use in mild transitory symptoms only (less than one week).
	If the symptoms persist during the use of the medicinal product, a doctor or a qualified health care practitioner should be consulted.
	Method of administration
	Oral use.

4.3. Contraindications

Well-established use	Traditional use
	Hypersensitivity to the active substance or to Apiaceae (Umbelliferae) family (aniseed, caraway, celery, coriander and dill) or to anethole. Hypersensitivity to mugwort pollen, due to cross- reactivity with fennel.

Well-established use	Traditional use
	Indications 1) and 3)
	The use in children between 4 and 12 years of age is not recommended if the daily intake of estragole exceeds the guidance value of 1.0 μ g/kg bw, unless justified by a risk assessment based on adequate safety data (see section 5.3 `Preclinical safety data').
	The use is not recommended in children under 4 years of age due to the lack of adequate data.
	Indication 2)
	The use in children under 12 years of age has not been established due to lack of adequate data.
	If the symptoms worsen during the use of the medicinal product, a doctor or a qualified health care practitioner should be consulted.

4.4. Special warnings and precautions for use

4.5. Interactions with other medicinal products and other forms of interaction

Well-established use	Traditional use
	None reported.

4.6. Fertility, pregnancy and lactation

Well-established use	Traditional use
	Safety during pregnancy and lactation has not been established (see sections 5.3 'Preclinical safety data' and 6 'Pharmaceutical particulars' regarding preclinical safety data related to the content of estragole).
	In the absence of sufficient data, the use during pregnancy and lactation is not recommended.
	There is evidence that <i>trans</i> -anethole is excreted in human breast milk.
	No fertility data available.

Well-established use	Traditional use
	No studies on the effect on the ability to drive and use machines have been performed.

4.7. Effects on ability to drive and use machines

4.8. Undesirable effects

Well-established use	Traditional use
	Allergic reactions to fennel, affecting the skin or the respiratory system may occur. The frequency is not known.
	If other adverse reactions not mentioned above occur, a doctor or a qualified health care practitioner should be consulted.

4.9. Overdose

Well-established use	Traditional use
	No cases of overdose have been reported.

5. Pharmacological properties

5.1. Pharmacodynamic properties

Well-established use	Traditional use
	Not required as per Article 16c(1)(a)(iii) of
	Directive 2001/83/EC.

5.2. Pharmacokinetic properties

Well-established use	Traditional use
	Not required as per Article 16c(1)(a)(iii) of Directive 2001/83/EC.

5.3. Preclinical safety data⁴

Well-established use	Traditional use
	Not required as per Article 16c(1)(a)(iii) of Directive 2001/83/EC, unless necessary for the safe use of the product.

⁴ Where herbal preparations from *Foeniculi dulci* fructus are used, the total exposure to estragole should be considered from a safety standpoint.

Well-established use	Traditional use
	A fennel aqueous extract was tested in an Ames test on <i>Salmonella typhimurium</i> strains TA98, TA100 and turned out as negative. Results from studies carried out in laboratory animals showed a weak mutagenic activity of anethole.
	Several studies have shown the carcinogenic effects of estragole and some of its metabolites in mice (liver tumours) and displayed suggestive but indirect evidence of carcinogenicity in rats. Estragole is considered a genotoxic carcinogen in rodents (see section 6 'Pharmaceutical particulars' for further details).
	An aqueous extract of fennel seeds given daily to 24 female BALB/c mice from day 6 to day 15 of pregnancy showed a dose-dependent teratogenic effect. The embryotoxic effect resulted in morphological changes, skeletal disorders, and cellular alterations.
	Adequate tests on reproductive toxicity have not been performed.

6. Pharmaceutical particulars

Well-established use	Traditional use
	In the general population exposure to estragole should be kept as low as practically achievable.
	In pregnant and breast-feeding women, the daily intake of estragole has to be below 0.05 mg per person per day.
	In children below 12 years of age, the daily intake of estragole has to be below 1.0 μ g/kg bw.
	For further details see "Public statement on the use of herbal medicinal products containing estragole" (EMA/HMPC/137212/2005 Rev 1).

7. Date of compilation/last revision

31 January 2024