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A REVIEW ON NATURAL REMEDIES USED FOR THE TREATMENT OF RESPIRATORY DISORDERS

P. Smruti

GITAM Institute of Pharmacy, G. I. T. A. M. Deemed to be University, Visakhapatnam - 530045, Andhra Pradesh, India.

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Correspondence to Author: P. Smruti

GITAM Institute of Pharmacy, G. I. T. A. M. Deemed to be University, Visakhapatnam - 530045, Andhra Pradesh, India.

E-mail: smruti.potnuru@gmail.com

ABSTRACT: Respiratory disease is a medical term that refers to the pathological conditions affecting the organs and tissues that make gas exchange possible in higher organisms and includes conditions of the upper respiratory tract, trachea, bronchi, bronchioles, alveoli, pleura, and pleural cavity, and the nerves and muscles of breathing cavity. The common respiratory disorders include COPD, Asthma, Chronic Bronchitis, Emphysema and Pneumonia. Currently available drugs for the therapy of respiratory disorders produce side effects. To overcome this problem, medicinal plants and their isolated phytoconstituents are being used extensively to treat minimum side effects. This article depicts the use of herbal plants and their phytoconstituents for the treatment of respiratory disorders.

INTRODUCTION: Respiratory disorders are among the leading causes of morbidity and mortality affecting people of all ages and are a major global health problem. They involve the air passages like nasal passages, large and small airways (bronchi and bronchioles), and the lungs. Their etiopathology may be inflammatory, allergic, infectious, neoplastic, or traumatic. Both acute and chronic respiratory disorders are one of the most common reasons for hospital admissions or visit to hospitals worldwide. Bronchial asthma, COPD, pulmonary tuberculosis, pneumonia, cystic fibrosis, lung cancer, and pneumoconiosis are the most commonly seen respiratory conditions.



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A large variety of pharmacological treatment strategies are widely practiced in these conditions, and they include anti-inflammatory agents, bronchodilators, antibiotics, antiallergies, mucolytics, and antineoplastics. Airway obstruction in asthma is reversible and irreversible in COPD, in which environmental factors like smoke inhalation plays an important role. Asthma is an inflammatory disease, and the symptoms of inflammation start with T helper-2 and dendritic cells, followed by infiltration of eosinophilic cells and mast cell (MC) sensitization, which result in the release of various inflammatory mediators.

COPD is caused by inhalation of toxins and irritants for longer durations, resulting in chronic inflammation of airways and damage of alveolar structures of the lungs. This finally results in conditions like chronic bronchitis, chronic bronchiolitis, and emphysema. A cough is a sudden expulsion of air through the large breathing passages that can help clear them of fluids, foreign

particles, or microbes. Common medicinal plants that have been used as a remedy for respiratory ailments since ancient times include *Adhatoda vasica* (vasaka), *Curcuma longa* (curcumin), *Glycyrrhiza glabra* (liquorice), *Ocimum sanctum* (tulsi), *Piper longum* (pepper), *Zingiber officinale* (ginger).

Medicinal Plants:

Adhatoda vasica: Adhatoda vasica (family Acanthaceae) is a shrub used by Asian and European medical practitioners. The plant has been employed in the Indian traditional system of medicine². The leaves, roots, flowers, and bark of this plant have been majorly used in cough, cold, asthma; liquefy sputum, bronchodilator, bronchial catarrh, bronchitis, and tuberculosis. The parts of the herbal plant are commonly used in the form of decoction or powder. The juice extracted from the leaves is additionally of times used. Vasaka syrup and Vasaka liquid extract are mentioned in Indian Pharmacopoeia (1955). Many herbal preparations containing A. vasica are being used, such as Khada in India, Salus Tuss in Germany and Kan Jang and spirote in Sweden. Vasicine is an alkaloid, which is one of the major components of the plant and is responsible for most of its antioxidant, antiinflammatory and bronchodilatory activities. A derivative of vascinone is bromohexine (N-cycloNmethyl - (2 - amino - 3, 5 - dibromo -benzyl)aminehydrochloride) has been shown to have mucus liquefying or expectorant activity.

Albizia lebbeck: Albizia lebbeck (family Mimosaceae) is a large deciduous perennial woody tree that is being used for cold, cough, asthma, and bronchitis 3 . The aqueous extract of bark of A. lebbeck showed antiasthma tic and antianaphylactic activity in experimental studies ⁴. The flower part of the plant having lupeol, α and β amyrin, benzyl acetate, benzyl benzoate and crocetin, different sterols, triterpene, lebbekanin, saponin, saponin glycosides, crocetin lebbekanin-D, F, G & H as phytoconstituents, used in the herbal treatment of respiratory disorders. The herbal formulation of A. lebbeck, Asthocalm is mainly used for asthma.

Bryophyllum pinnatum or Kalanchoe integra: Kalanchoe integra (family Crassulaceae) has shown many pharmacological activities such as antihelmintic, immunosuppressive, wound healing,

hepatoprotective, anti-inflammatory, antidiabetic, nephroprotective, antioxidant, antimicrobial, analgesic, anticonvulsant and antipyretic activities. In respiratory disorders, boiled leaf extracts of the plant are useful in the management of acute and chronic bronchitis, pneumonia, bronchial asthma, and palpitation ⁵. Leaves of *K. integra* contain flavonoids and tannins, that are found to possess promising effects in the management of bronchial asthma. Thus, it may be a potential herb with anti-inflammatory activity for the management of airway remodeling in bronchial asthma.

Curcuma longa: Curcumin is a polyphenolic compound obtained from the plant Curcuma longa (family Zingiberaceae), known as turmeric, and has been used since age-old. Curcumin has been shown to have antiasthmatic effects in both in vivo and in vitro studies. In an OVA-induced asthma model in guinea pigs, curcumin treatment during OVA sensitization showed significant protective effects through attenuation of bronchial constriction and hyper reactivity ⁶. This indicated that curcumin had both preventive and therapeutic effects on asthma that were attributed to the suppression of iNOS and subsequent production, inhibition of no inflammatory cytokine synthesis, and down regulation of eosinophil recruitment to airway.

Glycyrrhiza glabra: Glycyrrhiza glabra (family Fabaceae), commonly known as liquorice, an herbaceous perennial and has been used as a flavoring agent in foods and medicinal remedies for thousands of years. Liquorice root has been extensively used around the world to treat cough since ancient times. It contains active compounds, which include glycyrrhizin, glycyrrhetinic acid, flavonoids, isoflavonoids, and chalcones. Glycyrrhizin and glycyrrhetinic acid are the main active components and are potent inhibitors of cortisol metabolism due to their steroid-like structures. The root of this plant has been used for cough, colds, asthma, and COPD ⁷. Glycyrrhizin is a triterpene glycoside, a major active constituent obtained from the plant G. glabra. Isoliquiritigenin, a flavonoid isolated from the G. glabra roots, relaxed the tracheal smooth muscle of guinea pigs in-vitro and in-vivo. The effects of glycyrrhetinic acid and liquiritigenin (a flavonoid of licorice root) on asthma have been tested both in-vivo and invitro.

Hedychium spicatum: Hedychium spicatum (family Zingiberaceae), asmall hardy rhizomatous perennial herb and which is mentioned as Shati in the Ayurvedic system of medicine. The extract of rhizome of this herbal plant has been reported to contain essential oils, glycosides and saccharides that are used traditionally to treat cough, asthma, and other respiratory ailments and clinically used for the treatment of asthma ⁸.

Ocimum sanctum: Ocimum sanctum (family Lamiaceae), commonly known as Tulsi, is an annual herb and has been used in the Indian traditional system of medicine. The leaves of this plant have been traditionally used for cough, colds, asthma, and bronchitis ⁹. The active constituents of O.sanctum isolated are eugenol, carvacrol, and caryophillin.

Piper longum: Piper longum (family Piperaceae) is used as an important traditional medicine in Asia and the Pacific islands. P. longum is known as a good remedy for the treatment of TB and respiratory tract infections ¹⁰.

The fruits and roots of this plant have been employed in the treatment of childhood asthma ¹¹. Piperine is a major alkaloid isolated from the *P. longum* fruits, and it possesses to inhibit the release of T helper-2-mediated cytokines, eosinophil infiltration, and airway hyper-responsiveness in an OVA-induced asthma model ¹².

Tylophora indica: Tylophora indica (family Apocynaceae) is a perennial climbing plant and has been used in the Ayurvedic system of medicine.

The leaves and roots of the plant have been extensively used in the treatment of various inflammatory and allergic disorders like bronchial asthma, bronchitis, and whooping cough and as an expectorant ¹³. The extracts of the leaves of *T. indica* have shown antiasthmatic and antiallergic potential ^{14, 15}. It is considered as the best substitute for Ipecac.

Solanum xanthocarpum: Solanum xanthocarpum (family Solanaceae) is an annual herbaceous plant that is commonly known as Kantkari in traditional Indian medicine, having a vast range of medicinal properties. In the Ayurvedic System of Medicine, it has been listed as a drug for the treatment of

bronchitis and asthma. Juice of *S. xanthocarpum* berries has been reported to be useful for sore throat. *S. xanthocarpum* has been widely used for the treatment of respiratory diseases in the Siddha system of medicine, mainly in the southern part of India. It majorly contains alkaloids, sterols, flavonoids, saponins, and glycosides. Apigenin, the flavonoid content of this plant, has shown significant inhibition of all asthmatic allergies.

Zingiber officinale: Zingiber officinale (family Zingiberaceae) is a dietary component that is commonly known as ginger. The rhizome of this herbal plant has been extensively used in the treatment of colds, asthma, and bronchitis ⁷. The essential oil of ginger is called Gingerol, which can be subdivided into gingerols, shogaols, paradols, zingerones, gingerdiones, and gingerdiols.

Tamarindus indica: The well-known food vegetable and medicinal plant of *Tamarindus indica* Linn (family Fabaceae) used to cure asthma as traditional medicine. The phytoconstituents isolated from the pulp of *T. indica* are flavonoid, tannin, and saponin. The methanolic extract of leaves of *T. indica* shows promising activity towards asthma.

Terminalia arjuna: The fresh bark extract of Terminalia arjuna (family Combretaceae) has a potent anti-asthmatic effect by combinational preparation with some of the other medicinal plants as traditional medicine. The phytoconstituents of Terminalia arjuna includes arjunic acid, arjungenin, arjunetin and arjunoglucoside and oleanane-type triterpene glycosides.

Cinnamomum tamala: Cinnamomum (tejpatra) (family Lauraceae) has been used medicinally since ancient times and was a major medicinal plant in medieval times. It is employed for many conditions such as cough and cold, diabetes, arthritis, heart and liver health. The leaves have essential oil, which contains eugenol and phellandrene, alpha pinene, camphene, myrcene, limonene, etc.

Alpinia galangal: Alpinia galanga (family Sccitaminaceae) rhizome has been widely used as herbal medicine since ancient times. It is very similar to the health benefits of ginger. It is a good source of fibre and rich in iron, sodium, vit A, vit C and consists of phytoconstituents that include

flavonoids, emodin, quercetin, galangol, galangin, gingerol, camphor and eugenol.

Phyllanthus emblica: Phyllanthus emblica (family Phyllanthaceae) is a fruit, highly nutritious and an important source of vit C. The isolated components of this plant include phenolic compounds, tannins, phyllembelic acid, phyllembelin, rutin, curcuminoids and emblicol. It helps to eradicate the problems of cough, cold and asthma.

Essential Oils:

Anise Oil: Anise oil (Anisi aetheroleum) is obtained by steam distillation from the dry ripe fruits of *Pimpinella anisum* L., and star anise oil from *Illicium verum* Hook. The fruits contain 2-6% of essential oil. The major components of anise oil are trans-anethole (80-95%) and anisaldehyde and trans-anethole and methyl-cavicol in the star anise oil ¹⁷. Anise oil can be used for the treatment of respiratory ailments mainly as an expectorant in cough associated with cold ¹⁸.

Bitter Fennel Fruit Oil: Bitter fennel fruit oil (Foeniculi amari fructus aetheroleum) is obtained by steam distillation from the ripe fruits of *Foeniculum vulgare* Miller, ssp. vulgare var. vulgare. The main constituents of the oil are fenchone (12.0-25.0%) and trans-anethole (55.0-75.0%). The traditional herbal medicinal products of bitter fennel fruit oil are used as an expectorant in cough associated with cold ¹⁶.

Eucalyptus Oil: Eucalyptus oil (*Eucalypti aetheroleum*) is obtained by steam distillation and rectification from the fresh leaves or the fresh terminal branchlets of various species of Eucalyptus rich in 1, 8-cineole. The most frequently used species are *Eucalyptus globulus* Labill., *E. polybractea* R. T. Baker and *E. smithii* R.T. Baker. Eucalyptus oil is majorly employed in the treatment of cough, cold, bronchitis and symptomatic relief of colds and catarrh of the upper respiratory tract ¹⁸.

Peppermint Oil: Peppermint oil (Menthae piperitae aetheroleum) is obtained by steam distillation from the fresh aerial parts of the flowering plant of Mentha x Piperita. The essential oil yield of peppermint is 1.2-3% and contains menthol (30-55%), menthon (14-32%), isomenthone (1.5-10%), menthyl acetate (2.8-10%), mentho-

furan (1-9%), 1,8-cineole (3.5-14%), limonene (1-5%), not more than 3% of pulegone and not more than 1% of carvone, with a higher ratio of cineole compared to that of limonene. The therapeutic use of peppermint oil includes the symptomatic treatment of digestive disorders (*e.g.* flatulence, irritable bowel syndrome) and the symptomatic treatment of coughs and colds ¹⁸.

Tea Tree Oil: Tea tree essential oil (Melaleucae aetheroleum) is obtained by steam distillation from the foliage and terminal branchlets of *Melaleuca alternifolia* (Maiden and Betch) Cheel, *M. linariifolia* Smith, *M. dissitiflora* F. Mueller and/or other species of Melaleuca.2% essential oil with the major components of monoterpenes, such as terpinen-4-ol (minimum 30%), gamma-terpinene (10-28%) and 1, 8-cineole (less than 15%). Tea tree oil can be used for the treatment of respiratory infections (*e.g.*, cold, influenza, bronchitis) ¹⁸.

Thyme Oil: Thyme oil (*Thymi aetheroleum*) is obtained by steam distillation from the fresh flowering aerial parts of *Thymus vulgaris* L., *T. zygis* Loefl. ex L. or a mixture of both species. The thyme oil contains phenols, mainly thymol and/or carvacrol and terpenoids. The therapeutic application of thyme oil includes respiratory disorders (bronchial catarrh, supportive treatment of pertussis) ¹⁸.

Animal Source: Animal-derived natural products still represent the minority of natural sources for products used for respiratory ailments. Many studies describe the use of animal-based products, such as oils, milk, and spleen as a complementary therapy for several diseases, including asthma.

Traditional medicine reports the benefits of consuming some animal parts and animal products once they can be rich in compounds such as lipids, prostaglandins, unsaturated fatty acids, enzymes, and polysaccharides, which are responsible for their pharmacological activities.

Also, animal sources are also widely cited as biocompatible and biodegradable sources, suggesting their safe use. The animal products and compounds cited can be obtained from several sources, such as mammals, amphibians, and crustaceans, demonstrating its wide range of possibilities.

Phytoconstituents: Compounds with different structures but with the same therapeutic activity are isolated from various plant species and used as an active component for the treatment of various diseases. Some of these active components are present in edible plants, and their addition to the diet would be beneficial for respiratory ailments. Various phytoconstituents obtained from several plant sources have been reported in the treatment of respiratory diseases.

Flavonoids: Quercetin is an important dietary flavonoid, which is found in various plants such as onions, apples, tea, berries, and broccoli that has antiasthmatic potential. Quercetin has reported to have antihistaminic, antiinflammatory, and MC-stabilizing activity 19, 20. Quercetin also suppressed lipopolysaccharide (LPS)-induced lung inflammation in experimental studies ²¹. Quercetin attenuated mitogen-activated protein kinases (MAPKs) and NF-Kb ²². With respect to allergies, they have specific effects on MCs involved in the allergic response ²³. Quercetin decreases eosinophil recruitment, reduces IL-5 and IL-4 levels, and inhibits NF-κB activation in BALF in OVAinduced mouse model ²⁴. It also regulates Th1/Th2 balance by enhancing IFN-γ and decreasing IL-4 levels in a mouse asthma model ²⁵.

Alkaloids: Colchicine is an alkaloid obtained from the plant Colchicum autumnale and has been reported in the treatment of pulmonary fibrosis ²⁶ and bronchial asthma ^{27, 28}. An alkaloid fraction of

the Peganum harmala plant is an effective traditional medicinal herb for the treatment of cough and asthma with potent antitussive, expectorant, and bronchodilating effects ²⁹. Warifteine is an alkaloid obtained from the plant Cissampelos sympodialis that has been reported to inhibit airway hyper-responsiveness, lung remodeling, and eosinophil infiltration in a mouse model of asthma ³⁰.

Polyphenols: Resveratrol is a dietary polyphenol found in the skin and seeds of grapes. Resveratrol has been shown to have anti-asthmatic potential. It modulates Th1/Th2 balance and the expression of Th2 regulatory transcription factor GATA-3 and decreased levels of the Th-2 cytokines, IL-4 and IL-5, inbronchoalveolar lavage of sensitized animals ³¹. It also acts as a mucolytic agent and inhibits mucus overproduction when administered to mice suffering from allergic airway disease. Resveratrol has been shown to inhibit airway inflammation and hyper-responsiveness in OVAinducedasthma in the mouse by reducing eosinophil/neutrophil infiltration and the levels of IL-4 and IL-5 in plasma and BALF. Naringenin chalcone obtained from tomato is a polyphenol effective in inhibiting eosinophilic recruitment around the airways in a murine model of allergic asthma. Naringenin alleviates airway inflammation and reactivity by decreasing the serum total IgE level and IL-4 and IL-13 levels in BALF and inhibiting NF-KB activity ³².

TABLE 1: PLANTS AND OTHER SOURCES USED IN THE TREATMENT OF RESPIRATORY DISORDERS

S. no.	Source	Phytoconstituents	Uses
1	Abutilon indicum	luteolin, chrysoeriol, luteolin 7-O-beta-glucopyranoside, chrysoeriol 7-O-	Expectorant and anti-
		beta-glucopyranoside, apigenin 7-O-beta-glucopyranoside, quercetin 3-O-	inflammatory
		beta-glucopyranoside and quercetin 3-O alpha-rhamnopyranosyl (1> 6)-	
		beta-glucopyranoside 33 β -sitosterol 34 p -b-D Glucosyl oxybenzoic acid, p -	
		Hydroxybenzoic and caffeic acid 9 alantolactone and Isoalantolactone ³⁵	
2	Adhatoda visica	9-acetamido-3,4 dihydropyrido-(3,4-b)-indole 0-ethyl-z-D-galactoside	Tuberculosis, bronchitis,
	Justicia gendarussa	sitosterol P-D-glucoside and deoxyvasicinone ³⁶	expectorant
3	Ailanthus excelsa	quassinoid, dehydroexcelsin, glaucarubol sitosterol, 2,6	Asthma and bronchitis
		dimethoxybenzoquinone	
		malanthin, vitexin. glaucarubin and excelsin ailanthinone, glaucarubinone	
		and glaucarubol 15-isovalerate 13,18-	
		dehydroglaucarubol 15-isovalerate alkaloids.	
		3S,24S,25-trihydroxyttirucall-7-ene excelsin, glaucarubine, ailanthinone,	
		glaucarubinone and	
		glaucarubolone, Tetracyclic Triterpenes ³⁷⁻⁴²	
4	Albizia lebbeck	catechins, kaempferol, quercetin, lupeol, α-amyrine, Albizia saponins A, B,	Cough
		and C, triterpenoids, glycoside and albizinin saponins	
		kaempferol and quercetin 3-O+rhamnopyranosyl (1 4 6)-p glucopyranosyl,	
		Galactopyranosides ⁴³⁻⁴⁷	
5	Asystasia gangetica	Terpenoid ⁴⁸	Antiasthmatic

Thymol, carvacol, terpenoids

CONCLUSION: Herbal plants play an important role in the prevention and treatment of various respiratory disorders and infections. The traditional systems of medicine are found to be effective in treating respiratory disorders, and their scientific evaluation has proven the efficacy of plants in the management of several such conditions. The use of herbal plants is being practiced since ancient times. Most of the plants and some other sources containing phytoconstituents have been isolated

and checked for their effectiveness towards respiratory disorders. These finds lead to go for further clinical trials against respiratory disorders with less side effects. The above-mentioned plants may produce effectiveness with less adverse effects due to the biological source of constituents. From the above information, phenolic compounds, terpenoids, and sterol are a significant class of phytoconstituents used in the herbal treatment of respiratory ailments.

Thymi aetheroleum

27

Bronchial catarrh, supportive treatment of pertussis

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