

Journal of Modern and Ayurvedic Medical Science

ISSN 2279-0772 [ONLINE]

Volume: Volume 4 ,Number 1 |Publication Date: Thursday, January 01, 2015 Published by Mpasvo [article url http://www.ajmams.com/viewpaper.aspx?pcode=4f339dcf-6d78-4e61-b301-20edc526a8c3

PUBLISHED PAPER'S TITLE : A REVIEW ON ACTIVE PRINCIPLE OF PLANT EXTRACTS IN RELATION TO WOUND HEALING

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Asian Journal of Modern and Ayurvedic Medical Science (ISSN 2279-0772) Vol.4,no.1, January- June 2015. [©The Author 2015]

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Review Paper

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A REVIEW ON ACTIVE PRINCIPLE OF PLANT EXTRACTS IN RELATION TO WOUND HEALING

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Declaration

The Declaration of the author for publication of Research Paper in Asian Journal of Modern and Ayurvedic Medical Science (ISSN 2279-0772) Awadhesh Kr. Pandey ,Prof. M. Sahu ^{and} Pathak Meenakshi S.N the authors of the research paper entitled A Review on Active Principle of Plant Extracts in relation to Wound Healing declare that ,we take the responsibility of the content and material of my paper as we ourself have written it and also have read the manuscript of our paper carefully. Also, we hereby give our consent to publish our paper in ajmams , This research paper is our original work and no part of it or it's similar version is published or has been sent for publication anywhere else.we authorise the Editorial Board of the Journal to modify and edit the manuscript. we also give our consent to the publisher of ajmams to own the copyright of our research paper.

Received November 10, 2014;Accepted November 15, 2014 ,Published January 1,2015

ABSTRACT

India has a rich tradition of plant-based knowledge on healthcare. A large number of plants/plant extracts/decoctions or pastes are used by people in India for treatment of cuts, wounds, and burns. The present review thus attempts to analyze the ancient and modern knowledge for treatment of cuts and wounds.

Pharmacological reports available on Indian medicinal plants employing various wound healing models and its underlying molecular mechanism, wherever available, has also been briefly reviewed.

This pharmacological validation on Indian medicinal plants is very limited and a large number of plants used in tribal and folklore with enormous potential have not been validated for their wound healing activity.

This review therefore attempts to bridge the lacunae in the existing literature and offers immense scope for researchers engaged in validation of the traditional claims and development of safe and effective and globally accepted herbal drugs for cuts and wounds.

Keywords: Wounds, healing, plant extracts, active principle, Ayurveda



Introduction

Wounds are major concerns for the patients as well as Clinician . They affect a large number of patients and seriously influence their quality oflife. Current estimates indicate that nearly 6 million people suffer from chronic wounds worldwide. There are very few Indianstudies on the epidemiology of prevalenceof chronic wounds. The chronic wounds in the community was reported as 4.5 per1000 population whereas that of acute wounds was nearly doubled at 10.5 per 1000 population (Gupta et al., 2004).

Both Traditional and Western systems f medicine forwound healing suffer from lack of resources and awareness .Research on wound healing agents is one of the developing areas in modern biomedical sciences. Manv traditional practitioners across the world particularly in countries like India with ancientmedical practices have valuable information of many unknown wild plants used by them for treating wounds and burns. Several drugs made of plant, mineral or animal origin are described in Ayurveda for their healing properties under the term 'Vranaropaka'. Besides the classical systems of Indian Medicine, the folk and the tribalmedicine also employ a number of plants and animal products or treatment of cuts, wounds and burns.

Pathology of wounds by Both Traditional and Western systems of medicine

Wounds are physical injuries that result in an opening or break of the skin. Proper healing of wounds is essential for the restoration of disrupted anatomical continuity and disturbed functional status of the skin. Healing is a complex and intricate process initiated in response to an injury that restores the function and integrity of damaged tissues. \backslash

Wound healing involves continuous cell-cell and cell-matrix interactions that allow the process to proceed in three overlapping phases viz. inflammation (0-3days), cellular proliferation (3-12 days) and remodeling (3-6months) (Glynn, 1981; Clark, 1996; Martin, 1996). Healingrequires the collaborative efforts of many different tissues and cell lineages (Martin, 1997). It involves platelet aggregation and blood clotting, formation of fibrin, an inflammatorv response to injury, alteration in the ground substances, angiogenesis and re-epithelialization. Healing is not complete until the disruptedsurfaces are firmly knit by collagen (Buffoni et al., 1993).

The basic principle of optimal wound healing is to minimize tissue damage and provide adequate tissue perfusion and oxygenation, proper nutrition and moist wound healing environment to restore the anatomical continuity and function of the affectedpart (Pierce and Mustoe, 1995).

According to Ayurveda, Vrana (wounds or ulcers) is the discontinuation oflining membrane that after healing leaves a scar for life closely resembling the modern definition. Similarly, inflammation is considered to be an early phase in the pathogenesis of wounds termed Vranashotha. Different types of wounds are mentioned in Ayurveda due to trauma, such as Chinna Bhinna (cut wound), (perforated wound), Viddha (punctured wound), Kshata (lacerated wound), Picchita (contusion), and Ghrista (abrasion wound).

Etiological factor causing wound have striking similarities as described in Ayurvedic and Modern medicine (Fig. 1). Classical management of wounds according to Sushruta Samhita follows 60 therapeutic steps, starting with an aseptic dressing of the affected part and ending with the rehabilitation of the normal structureand function. These therapeutic measures were aimed not only to accelerate the healing process but also to maintain the quality and aesthetics of the healing.

People of developed countries are seeking alternative to modern therapies of wound healing like antibiotics, corticosteroids, etc. obviously due to its side effects. In chronic wounds inseparable aspects, pathogenesis two failure toheal, have intensified and search of herbal drugs as wound healing agents.

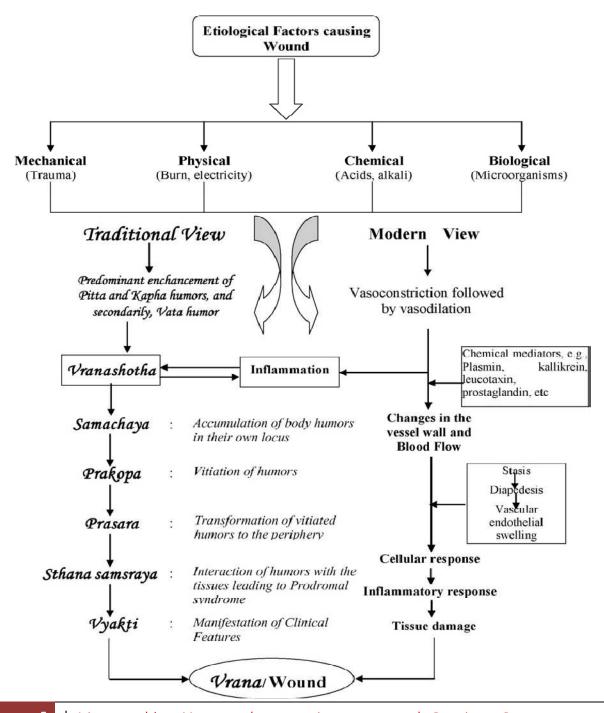


Fig. 1. Comparative representation of etiopathogenesis of wound in Ayurvedic and Modern medicine.

Important pharmacologically validated plants for their wound healing activity on different model.

In the current review, we have presented such plants which are extensively used in both traditional and folk systemsof medicine of India and have been reported in ethnobotanical literature for use in the healing of wounds.We have also indicated the same along with the part that have been reported to be used in the healing of the wound. The part used becomes all the more important because of the fact that providing while the ethnopharmacological evidence towards these plants, researchers must ensure that they use that particular part mentioned in traditional medicines rather than randomscreening.

- 1. Aegle marmelos Methanolic extract of plant (stem bark) on Excision and incision wound model (Jaswanth et al. (2001)
- 2. Areca catechu Betel nut extract and its two consitutents arecholine and polyphenols on Excision, Incision and dead space wound model (Padmaja et al. (1994)
- 3. Argemone mexicana Ethanolic extract on Excision, incision and dead space wound model (Patil et al. (2001)

4. Aloe vera (Heggers et al., 1996; Davis et al., 1989),

5. Azadirachta indica Pure neem oil and neem ointment onIncised and dead space wound model in bovine calves (Bhardwaj and Sharma (1997)

- 6. Bryophyllum pinnatum Leaf, alcoholic and water extracts on Excision, incision and dead space wound model (Khan et al. (2004)
- 7. Butea monosperma Alcoholic bark extracton Excision wound model (Sumitra et al. (2005)

8. Calotropis procera Latex on Excision wound model (Rajesh et al. (2005)

9. Carica papaya Latex on excision wound model (Mikhalchik etal., 2004),

- 10. Cassia fistula Alcoholic leaf extract on Excision wound model (Senthil Kumar et al. (2006)
- 11. Centella asiatica Ethanolic extract on Incision, excision, and dead space wound model (Suguna et al. (1996), Shetty et al. (2006)
- 12. Cinnamomum zeylanicum Ethanolic extract of bark on Excision, incision and dead space wound model (Kamath et al. (2003)

13. Curcuma longa Powder of the tuberous Rhizome (Mehra et al., 1984),

14. Cyperus rotundus Extract of tuber on Excision, incision and dead space wound model (Puratchikody et al. (2006)

15. Datura alba Alcoholic leaf extract on Burn rat wound model (Priya et al. (2002)

16. *Euphorbia neriifolia* Aqueous extract of latex on Excision wound model (Rasik et al. (1996)

- 17. *Glycyrrhiza glabra* Ethanolic extract of root on Excision wound model (Kishore et al. (2001)
- 18. Gmelina arborea Alcoholic extract of leaf Excision on incision and dead space wound model(Shirwaikar et al. (2002)
- 19. *Moringa oleifera* Ethyl acetate extract of dried leaf on Excision, incision and dead space wound model (Udupa et al. (1994a,b), Hukkeri et al. (2006)
- 20. Nelumbo nucifera Methanol extract of rhizomes on Excision, incision and dead space wound model (Mukherjee et al. (2000b)
- 21. Ocimum sanctum Ethanolic extract of leaves on Excision, incision and dead space wound model(Udupa et al. (2006)
- 22. Oxalis corniculata Alcohol and petroleum ether extracts of whole plant on Excision, incision and dead spacewound model (Taranalli et al. (2004)

23. Phyllanthus emblica (Suguna et al., 2000),

24. Plumbago zeylanica(Reddy et al., 2002),

25. Pterocarpus santalinus (Biswas et al.,2004),

25. Terminalia arjuna (Chaudhari and Mengi, 2006) and

26. Terminaliachebula(Suguna et al., 2002)

have been extensively reported in Ayurveda systems of medicines for their wound healing potential.

The Active Principles isolated from different plants

responsible for wound healing.

Tanninsfrom*Terminaliaarjuna*(Chaudhari and Mengi, 2006),

Oleanolic acid from *Anredra diffusa* (Letts et al., 2006),

Polysaccharidesfrom *Opuntia ficusindica* (Trombetta et al., 2006),

Gentiopicroside, sweroside and swertiamarine from *Gentianalutea* (Ozturk et al., 2006),

Shikoninderivatives(deoxyshikonin,acetylshikonin,hydroxy-isovalerylshikoninand5,8-Odimethylacetylshikonin)fromOdimethylacetylshikonin)fromOnosmaargentatum(Ozgen etal., 2006),

Asiaticoside, asiatic acid, and madecassic acid from*Centalla asiatica* (Maquart et al., 1999; Shukla et al., 1999a,b;Hong et al., 2005),

Quercetin, isorhamnetin and kaempferol from*Hippophae rhamnoides* (Fu et al., 2005),

Curcumin from *Curcumalonga* (Jagetia and Rajanikant, 2004),

Oleo-resin from*Copaifera langsdorffi* (Paiva et al., 2002),

Proanthocyanidinsand reseveratrol from grapes (Brakenhielm et al., 2001; Khannaet al., 2002),

Acylated iridoid glycosides from *Scrophularianodosa* (Stevenson et al., 2002),

Phenolic acids (protocatechuic,*p*-hydroxybenzoic, *p*-coumaric, ferulic and vanillic acids) from*Chromolaena odorata* (Phan et al., 2001),

Glycoprotein fractionfrom *Aloe vera* (Choi et al., 2001),

(+)-epi-alpha-bisabolol

from *Peperomia galioides* (Villegas et al., 2001),

Fukinolic acid andcimicifugic acids from *Cimicifuga* sps. (Kusano et al., 2001)

Xyloglucan from *Tamarindus indicus* (Burgalassi et al.,2000).

CONCLUSION

There are a number ofplants which are used traditionally in wound healing have not been evaluated. Most pharmacological of the reports ofplant/plant extracts screens the organic soluble extracts of thedried plant for their ability to heal wounds in rats and mice, but the major concern is that the most traditional claimsof the plants as wound healing agents involves application offresh plants as pastes in water. This is a major problem when Active principle of wound healing is being validatedin the organic solvent extract of dry plant material and aqueous extract of the fresh plants, the chemicalconstituents in both cases will be very different.

Thus, this review will help researchers of wound healing to understand Plant ,Extracts from Its different part, isolation of Active principle and therebystrengthening the pharmacological claims and building theglobal acceptance of the wound healing agents of plant origin.

Also there is a lack of concerted effort on the part of researchers to study the concept of synergism in wound healing.Synergistic approach of the potential plants highlighted in thecurrent review may be combined judiciously in the development of a globally acceptable healing formulation, wound which ifvalidated properly and proven scientifically can act as substitute or may even replace the modern wound healing agents. Thus, the major aim of the current review is to identify and project the plants especially of Indian origin which have the potential to become the modern drug substitute.

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