**Review Article** 

# A Review on Ayurvedic Medicinal Herbs as Remedial Perspective for COVID-19.

# Rajendra Gyawali<sup>1\*</sup>, Prem Narayan Paudel<sup>2</sup>, Dipak Basyal<sup>3</sup>, William N. Setzer<sup>4</sup>, Saroj Lamichhane<sup>5,6</sup>, Madan Kumar Paudel,<sup>5</sup> Shaphal Gyawali<sup>7</sup>, Prajwal Khanal<sup>8</sup>

<sup>1</sup>Department of Pharmacy, Kathmandu University, Dhulikhel, Nepal

<sup>2</sup>Department of Chemical Science and Engineering, Kathmandu University, Dhulikhel, Nepal

<sup>3</sup>Department of Pharmacy, Tribhuvan University, Maharajgunj, Kathmandu, Nepal

<sup>4</sup>Department of Chemistry, The University of Alabama in Huntsville, USA

- <sup>5</sup>Research and Development Department, Phytomax Care Pvt Ltd, Bharatpur 10, Chitawan Nepal.
- <sup>6</sup> Mediplus Health Care Center Pvt Ltd, Banasthali, Kathmandu, Nepal
- <sup>7</sup>Nepal Medical College, Kathmandu University, Jorpati, Kathmandu, Nepal

<sup>8</sup>Kathmandu Medical College, Kathmandu University, Sinamangal, Kathmandu, Nepal

\*Corresponding author: Dr Rajendra Gyawali: Email: ragyawali@gmail.com, Contact: +977 9851246558

#### ABSTRACT

**Introduction**: Recent outbreaks in a new type of coronavirus, novel coronavirus (COVID-19) disease causing respiratory infection have significantly hampered the public health. Traditional herbs provide enormous scope to bring out viable alternatives against viral diseases, considering non-availability of suitable drug for emerging viral diseases. The present review on plants and related phytochemicals will provide a viable options for controlling viral diseases particularly COVID-19 by maintain the immune system in current pandemic.

**Methods:** The methodological activities involved during a literature review were; (1) designing the review concept, (2) conducting the review on review papers, research papers, bulletins, official websites, (3) analysis of previous publications and (4) writing up the review paper. Major well-known bibliometric information sources studied are the Web of Science, Scopus, Mendeley and Google Scholar. Several keywords like name of plants, immunomodulatory, antiviral, coronavirus, COVID-19, Ayurvedic herbs, traditional medicine were chosen to obtain a large range of papers to be analyzed. The integrative literature review and paper preparation process was done from our own practical experience and influenced by various guidelines during February 2020 to May 2020.

**Results:** Herbal medicines and their active phytochemicals against some viruses including severe acute respiratory syndrome (SARS), severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) that causes COVID-19 pandemic, middle east respiratory syndrome coronavirus (MERS-COV), rhinovirus, human herpes virus (HSV-I & II), human immunodeficiency virus (HIV), coxsackievirus (CV), enterovirus 71 (EV71), hepatitis B virus (HBV), hepatitis C virus (HCV), herpes simplex virus, influenza A/H1N1 virus, coronavirus and respiratory syncytial virus (RSV) were extensively reviewed. In view of the possible benefit of herbal medicine for the prevention and control of the viral infectious diseases, Ayurvedic herbs could be useful an alternative and integrated approach to decrease the morbidity and mortality and enhance host immunity against COVID-19 attack.

**Conclusion:** Ayurvedic herbs have enough possibilities to be employed both for the prevention and treatment of COVID-19. The traditional practices and scientific evidences of such herbs and their phytochemicals against lethal viral infections *in-vivo* and *in-vitro* studies could be useful for a novel source of natural product in particular focus on COVID-19.

Key words: Ayurvedic Medicine, Antiviral herbs, Phytochemicals, Immunity boosting, SARS-CoV-2.

Access this article Online		Article Info.
Quick Response Code	Website:	How to cite this article in Vancouver Style?
	www.jkahs.org.np	Gyawali R, Paudel P, Basyal D, Setzer W, Lamichhane S, Paudel M, Gyawali S, Khanal Prajwal. A Review on Ayurvedic Medicinal Herbs as Remedial prospective for COVID-19. JKAHS 2020;3(special issue):
	DOI: https://doi.org/10.3126/jkahs.v3i0.29116 The DOI will be functional after the issue is fully published online as well as in printed version	Received: 4 April 2020 Accepted: 25 May 2020 Published Online: 26 May 2020 Conflict of Interest: None, Source of Support: None

# **INTRODUCTION**

Medicinal plants used in traditional practices provide enormous scope to bring out viable alternatives against viral diseases, considering non-availability of suitable drug candidates and increasing resistance to existing drug molecules for many emerging and re-emerging viral diseases <sup>1</sup>. Herbal medicines and purified natural products provide a resource for novel antiviral drug development and immunomodulatory herbal remedies<sup>2</sup>. From 1940 to 2014, 49% of all small molecules approved by the US Food and Drug Administration were natural products directly linked to them<sup>3</sup>. Phytoconstituents and herbal remedies are being used against coronavirus studies with the expectation to support immune system and rest the body foundation. However further studies are needed for these new compounds to be up to modern pharmacological standards<sup>4</sup>. Methanolic extracts of 41 plant species used in the traditional medicine in Nepal were investigated for in vitro antiviral activity against viruses. The extracts of Nepalese herbs Astilbe rivularis, Bergenia ciliata, Cassiope fastigiata and Thymus linearis showed potent antiherpes viral activity. The extracts of Allium oreoprasum, Androsace strigilosa, Asparagus Astilbe filicinus. rivularis. Bergenia ciliata and Verbascum thapsus exhibited strong anti-influenza viral activity. Plants Α. rivularis and B. ciliata demonstrated remarkable activity against both viruses<sup>5</sup>. Several herbs are effective against influenza virus, herpes simplex

virus, and coronaviruses<sup>6,7</sup>. The previous study on common essential oils also showed that, marjoram, clary sage and anise essential oils were most effective at reducing visible cytopathic effects of the anti-influenza (A/WS/33 virus). The current research effort on coronavirus is focusing on compounds of earlier research on severe acute respiratory syndrome (SARS) and the Middle East respiratory syndrome (MERS), which also were caused by coronaviruses<sup>8</sup>. Active compounds of oils contained linalool, suggesting that this may have anti-influenza activity<sup>9</sup>. Triterpene glycosides saikosaponins (A, B2, C, and D) isolated from medicinal plants are also effective against coronavirus<sup>10</sup>. These natural compounds effectively prevent the early stage of HCoV-22E9 infection, including viral attachment and penetration. Extracts from plants have also been documented to display anti-SARS-CoV effect from a screening analysis using hundreds of Chinese medicinal herbs<sup>11</sup>. Natural inhibitors against the SARS-CoV enzymes, such as the nsP13 helicase and 3CL protease, have been identified on myricetin, scutellarein, and phenolic phytochemicals<sup>11-13</sup>. Other anti-CoV natural medicines include the aqueous extract of a medicinal plant which exhibited several antiviral mechanisms against SARS-CoV, such as inhibiting the viral 3CL protease and blocking the viral RNA-dependent RNA polymerase activity<sup>14</sup>. Recent outbreaks in coronavirus disease have significantly hampered public health due to the lack of exact an antiviral vaccine. The whole

genome of SARS-CoV-2 has 86% similarity with SARS- $CoV^7$ . Of the natural compounds screened against COVID-19, 13 that exist in traditional Chinese medicines were also found to have potential anti-2019-nCoV activity. Recently, 125 Chinese herbs were treated and found that 26 are classically cataloged as treating viral respiratory Network pharmacology analysis infections. predicted that the general in-vivo roles of these 26 herbal plants were related to regulating viral infection, immune/inflammation reactions and hypoxia response<sup>15</sup>. There is plenty of data supporting the effectiveness of herbs in treating viral infection but it is difficult to tell exactly how well herbs perform because in most cases they are administered with modern pills and some patients in critical condition are also supported with technical life support such as artificial lungs<sup>16</sup>.

The high mutation rate of coronavirus has allowed the virus to continuously evolve to generate new strains that are resistant to the current commercially available antivirals. The structure of coronavirus is composed of RNA based proteins that contains amino and carboxyl groups located in the short NH2-terminal domain outside the virus and a long COOH terminus cytoplasmic domain inside the virion<sup>17</sup>. As the amino and carboxyl groups are functional components of this virus, it causes infection human cells of respiratory. The target to deactivate the coronavirus can be taken on the basis that, the natural compounds containing the hydroxyl (-OH) groups react chemically to deactivate the active components of the virus by esterification process.

# **METHODOLOGY**

Literature study and research were done with great accuracy to analyze the existing research activities on antiviral herbs mainly against coronavirus to identify actual efficacy to increase the quality of this review. Major well-known bibliometric information sources studied are the Web of Science, Scopus, Mendeley and Google Scholar. like name Several keywords of plants, immunomodulatory, antiviral, coronavirus, COVID-19, Ayurvedic herbs, traditional medicine were chosen to obtain a large range of papers to be analyzed. An independent approach was used to conduct the literature review. The methodological activities involved during a literature review were; (1) designing the review concept, (2) conducting the review on publications such as review papers, research papers, bulletins, official website of related authorities, (3) analysis of previous publications and (4) writing up the review. The integrative literature review and paper preparation process was done from our own practical experience and influenced by various standards and guidelines suggested in the publications literature<sup>18</sup>. A final inventory of 175 research papers and articles and online information were made after sorting and then reviewed to bring the information on antiviral activity particularly with coronavirus infection and enhance host immunity against viral attack in the context of no specific treatment for COVID-19 available at this time.

# 1) Tinospora

The botanical name of Tinospora is Tinospora cordifolia, called Amrata, Guduchi in Sanskrit and Gurjo in Nepali. Plant stolon is commonly 0.6-5 cm in diameter young stems as mentioned in Ayurvedic Pharmacopoeia of India. Applications in fever, leprosy, anemia, obesity, diabetes, goutarthritis, jaundice was described in Caraka Samhita and Ayurvedic Pharmacopoeia. The plant mainly contains alkaloids, glycosides, steroids, sesquiterpenoids, aliphatic compounds, essential oils, mixture of fatty acids and polysaccharides. The major phytoconstituent include tinosporine, tinosporide, tinosporaside, cordifolide, cordifol, heptacosanol, clerodane furano diterpene, lactone, diterpenoid furano tinosporidine, columbin,  $\beta$ -sitosterol. Berberine, palmatine, tembertarine, magniflorine, choline and tinosporin are reported from the stem of the plant<sup>19</sup>. A review shows that the plant is used for antiviral activity immunomodulating activity<sup>20</sup> and Its consumption dose is given in Ayurvedic Pharmacopoeia as 3-6 g of the drug in powder form, 20-30 g of the drug for decoction.

Preclinical and clinical information on antiviral property of *T. cordifolia* is obtained and compared for the curative property against a broad spectrum of viral infections. *Tinospora* components have antiviral potentiality that decreases the recurrent resistance of human immunodeficiency virus (HIV) to antiretroviral therapy and improves the outcome of the therapy<sup>21</sup>. Anti-HIV effects of root extract were revealed by reduction in eosinophil

of В count, stimulation lymphocytes, macrophages and polymorphonuclear leukocytes and hemoglobin percentage thus, revealing its promising role of application in the management of the virus-related disease<sup>22,23</sup>. Concentration level of methanolic extract of Tinospora powder 100µg/ml and 50µg/ml the percentage protection against oral herpes virus (HSV-1), offered is approximately 61.43 % and 23.22 % respectively $^{24}$ . Cordifolioside 11-А hydroxymustakone, N-methyl-2-pyrrolidone, Nformylannonain, magnoflorine, tinocordiside and syringin have been reported to possess immunomodulatory activity which support to fight against viral diseases<sup>25</sup>. The  $\alpha$ -D-glucan of Tinospora activates human lymphocytes with the downstream synthesis of the pro- and antiinflammatory cytokines, in vitro benefited as novel immune stimulator drug<sup>26</sup>. Dry stem crude extracts with a polyclonal B showed macrophages activation, repair and prevention of oxidative damage of cells<sup>27</sup>. Treatment with this extract (100 mg/kg body weight for 15 days) in carbon tetrachloride intoxicated rats was found a reduction in liver serum levels of SGOT, SGPT, ALP, bilirubin suggested that the remedy for the immune functions<sup>28</sup>. In several studies also, it has been shown to possess immunomodulatory properties<sup>25, 29, 30</sup> maintains the depleted levels superoxide dismutase in liver<sup>31</sup>, antibody of production in vivo <sup>32</sup> which ultimately enhances the capacity to fight against diseases including viral disease. Identification of the mechanism of action and structural activity relationship these

natural viral inhibitors could help the development of therapeutics to battle against coronavirus infection and reduce the risks of infection by enhancing the immune system.

# 2) Licorice

The botanical name of licorice is Glycyrrhiza glabra, called Yashtimadhu in Sanskrit and Jestimadhu in Nepali. The plant is commonly used in the treatment of common cold, sore throat, vomiting, acidity, gout, weakness, joint pain, ulcer, skin-related diseases. In Ayurveda and traditional medication licorice has been effectively used in the treatment of coughs, colds, flus, bronchitis, sore throat and laryngitis while dose generally taken as 2 grams in decoction form. In the ancient Ayurvedic system, more than 1250 preparations are described containing Yashtimadhu as one of its constituents<sup>33</sup>. It is also considered as an antiviral herb in WHO publication of monographs of medicinal plants. Licorice contains more than 20 triterpenoids and nearly 300 flavonoids. The extracts have been shown to possess a lot of medicinal properties due to presence of so many bioactive components, saponins, alkaloids, triterpene, flavonoids, glycyrrhizin, glycyrrhizic acid, glabridin, liquiritin, etc.

Research has assessed the antiviral potential of active compound of licorice glycyrrhizin against two clinical isolates of coronavirus (FFM-1 and FFM-2) from patients with SARS admitted to the clinical center where the glycyrrhizin sowed inhibiting replication of the SARS-associated virus suggesting that glycyrrhizin should be

assessed for treatment of SARS virus is similar to coronavirus<sup>34</sup>. In another study, glycyrrhizin treatment inhibited the hepatitis C virus titer and caused 50% reduction of at the concentration of  $14\pm 2 \mu g/mL$  by inhibiting viral particles and their core gene expression<sup>35</sup>. Adhesion force and stress between cerebral capillary vessel endothelial cells and polymorph nuclear leukocytes were increased in herpes simplex virus infection by reducing adhesion force and stress between cerebral capillary vessel endothelial and polymorph nuclear<sup>36</sup>. Glycyrrhizin showed a significant improvement of coxsackievirus B3 (CVB3) induced myocarditis by reducing serological levels of cardiac enzymes and increasing survival rate and concluded that glycyrrhizin as a new therapeutic approach for the treatment of viral myocarditis <sup>37</sup> and also showed good immune stimulant and antiviral effects against duck hepatitis virus (DHV)<sup>38</sup>. It found that, glycyrrhizin is an effective antiviral compound against several viruses by weakening virus activity, such as inhibiting virus gene expression and replication, reducing adhesion force and stress, and reducing HMGB1 binding to DNA<sup>39,40,41,42</sup>. An independent study confirmed the antivirus activity of glycyrrhizin by plaque reduction assays and this study found that another Chinese herbal compound baicalin also had the anti-SARS activity<sup>43</sup>. Another compound of licorice  $18\beta$ -glycyrrhetinic acid also inhibited rotavirus replication, which likely occurred at steps after virus entry <sup>44</sup>. This compound reduced rotavirus yields by 99% when it was added to

infected cultures post-viral adsorption. The levels of viral proteins VP2, VP6 and NSP2 were substantially reduced<sup>45</sup>.  $18\beta$ -Glycyrrhetinic acid also showed potent anti-human respiratory syncytial virus (HRSV) activity. It inhibited HRSV mainly by internalization, stimulating interferon (IFN) secretion, and preventing viral attachment <sup>46</sup>. Glycyrrhizin and glycyrrhizic acid have been shown to inhibit the growth and cytopathology of numerous RNA and DNA viruses, including hepatitis A9 and C,<sup>46</sup> herpes zoster, HIV<sup>47</sup>. This evidences showing that active chemical constituents hold a strong promise for providing new molecules, which could be of immense medicinal applications in the drug discovery process for the research of new antiviral molecule focusing on coronavirus.

# 3) Chirata

The botanical name of the plant is Swertia chiravita (Roxb. ex Fleming) H. Karst, called Kirata, Kirataka, Kiratatikta in Sanskrit and Chiraito or Tito in Neplali. It is used in traditional medicine to treat numerous ailments and reported to have a wide spectrum of pharmacological properties<sup>48</sup>. This ethnomedicinal herb is known mostly for its bitter taste caused by the presence of different chemical constituents such as amarogentin, swerchirin, swertiamarin, and other bioactive compounds that are directly associated with human health welfare<sup>49</sup>. The plant generally taken as powder or decoction is prepared 1-3 gram powder and consumed in divided dose.

Several studies on chirata have been explored and found potential against lethal viral infections.

Crude extract (1 gm/mL) at 1:64 dilution showed antiviral properties against Herpes simplex virus type-1 (HSV-1). Infected cell cultures treated with extract at various time intervals and tested failed to show amplification up to 72 hours against Herpes simplex virus type-1<sup>50</sup>. Using tissue culture technique average plaque reduction rates active compounds mangiferin of and isomangiferin against HSV-I were 56.8% and 69.5% respectively<sup>51</sup>. Mangiferin was also found to antagonize in vitro the cytopathic effect of HIV, act as a potent biological response modifier with antiviral effect<sup>52</sup>. Swerilactones H-K exhibits potent anti-hepatitis B virus activity against HBV DNA replication with IC<sub>50</sub> values ranging from 1.53 to 5.34  $\mu$ M<sup>53</sup>. Twenty six compounds of Chirata were evaluated for anti-hepatitis B virus (anti-HBV) activities on HepG 2.2.15 cells line in vitro, some compounds had shown inhibitory activity on hepatitis B surface antigen (HBsAg) secretion. Compounds has also exhibited activity against hepatitis B e antigen (HBeAg) secretion and possessed activity against HBV DNA replication on selected basis. Lignan glycoside (+)-cycloolivil-4'-O-β-d-glucopyranoside

exhibited inhibition not only on the secretions of HBsAg and HBeAg, but also on HBV DNA replication activity<sup>54</sup>. Chirata holds the immense possibilities for research and development in Nepal for formulation of effective immunomodulatory remedy against various viruses including coronavirus. Therefore traditional medicine practice should be clubbed with scientific research facilitating modern drug discovery on coronavirus particularly COVID-19 pandemic.

# 4) Basil

The botanical name of the plant is Ocimum sanctum L, and called Surasa in Sanskrit and Tulsi in Nepali. The genus Ocimum comprises 30 species which are found in tropical and subtropical regions. In Ayurvedic medicine it is used in common colds, headaches, stomach disorders, soreness, heart sickness, a range of poisoning, and malaria<sup>55</sup>. Basil has revealed the presence of five fatty acids, carotene, minerals, vitamins and it also contains volatile substances including estragol, linalool, eugenol, methyl chavicol, camphor and tannins, flavonoids, as well as nutrients<sup>56, 57</sup>. Many in vitro, animal and human studies attest to tulsi having multiple therapeutic actions including adaptogenic, antimicrobial, anti-inflammatory, cardioprotective, and immunomodulatory effects, and safe<sup>58</sup>. The dose is generally 10 g fresh tulsi leaf aqueous extract administered as once or four equal doses daily, or tincture solution 30 drops a day were administered as three equal doses daily. Many promising basil treatments exist for viral diseases with proof of their efficacy and safety in human trials. A 2-week controlled randomized study in which young adult volunteers were provided with nutrition bars fortified with 1 g of ethanolic tulsi leaf extract found that compared to control participants, the intervention group had significantly improved VO<sub>2</sub> max, less fatigue, reduced creatine kinase, and improved immune response to viral infection as indicated by the reduced load of human herpesvirus 6<sup>59</sup>. Clinical

trials by giving daily 10 g of an aqueous extract of fresh tulsi leaves in patients with acute viral infections, with a study on patients with acute viral encephalitis reporting increased survival after 4 weeks in the tulsi group compared to a group given dexamethasone and a study on viral hepatitis reporting symptomatic improvement after 2 weeks<sup>60,61</sup>. A further study of asthmatic patients found that 500 mg of dried tulsi leaves taken three times daily improved vital capacity and provided relief of asthmatic symptoms within 3 days<sup>62</sup>. Significant increase in the levels of IFNy, IL-4 and percentages of T-helper cells and NKcells were observed after 4 weeks in the tulsi extract intervention group in contrast to the placebo group ascertain the immunomodulatory role on healthy volunteers <sup>63</sup>. This ethnomedicinal herb studied that aqueous extract of at the oral doses of 100, 200 mg/kg/day in rats enhances the production of RBC, WBC, hemoglobin and also enhanced the production of antibodies without affecting the biochemical parameters<sup>64</sup>, could support the defense to fight against flue and virus. Study of crude aqueous and ethanolic extracts yielded some compounds related to tulasi like apigenin, linalool and ursolic acid, exhibiting a broad spectrum of antiviral activities, especially against coxsackie virus B1 and enterovirus-71<sup>65</sup>. Considering the safety of basil and its availability in our backyard, this plant could be considered as an antiviral alternative, thus presenting immense scope for exploration and research in coronavirus. While promising, all of these studies conducted and our traditional literatures will determine

whether Tulsi is an effective antiviral herb and immunomodulatory remedy.

# 5) Ginger

The botanical name of ginger is Zingiber officinale Rosc, called Sunthi in Sanskrit and Aduwa in Nepali. It originated in South-East Asia and then used in many countries as a spice and condiment to add flavor to food<sup>66</sup>. From an Ayurvedic perspective, ginger is a superfood, particularly for digestion, respiration and the joints. Ginger has traditionally been used to cure common colds and throat infections and form an important constituent of Ayurvedic formulations. Ginger is widely used in Chinese, Ayurvedic and Tibb-Unani herbal medicines all over the world. since antiquity, for a wide array of unrelated ailments<sup>67</sup>. Volatile phytochemicals include mostly zingiberene, ,  $\beta$ -sesquiphellandrene, bisabolene, farnesene, β-phellandrene, cineol, citral and non-volatile pungent compounds include gingerols, shogaols, and zingerone<sup>68</sup> . Ginger can be consumed as a fresh or dried root and is often prepared in teas, soft drinks. Most clinical research has used between 250 mg and 1 g of the powdered root in capsular form, taken one to four times daily <sup>69</sup>.

Traditional practices show that ginger has powerful antiviral effect. Research data also support that ginger and its constituents are useful as antiviral natural products. In ancient cultures, medical practitioners focused on herbs for promoting the immune systems of body. In many countries ginger and its products raise the immune system<sup>70</sup>. It is effective in hepatitis C virus (HCV) infection where viral clearance is affected<sup>71,72,73</sup>. Ginger enhances resistance to infectious disease by increasing non-specific and specific immune mechanisms thereby helps to reduce the losses caused by diseases. Mild, moderate and severe nausea was significantly lower in the ginger than the placebo group when randomized clinical trial ginger efficacy for the prevention of antiretroviralinduced nausea and vomiting was investigated<sup>74</sup>. Administering 120 mg of ginger extract daily for up to 21 days increases the number of days without ventilator support, the amount of nutrients consumed and reduces the time spent in intensive care units in people with the sudden respiratory system a failure<sup>75</sup>. There have been numerous studies on the efficacy of these compounds as agents<sup>76,77</sup>. Zingiberene antiviral and its phytoconstituents has biological activities such as and antigestation<sup>78</sup>. antifever. antivirus Components of ginger rhizomes are reported to contain potent compounds capable of suppressing allergic reactions and might be useful for the treatment and prevention of allergic diseases<sup>79</sup>. We therefore speculate that the phytochemicals or crude extract of ginger can be effective against different viruses and may be useful in coronavirus either directly inhibiting them or by boosting the immune system and required for specific mechanistic information.

# 6) Turmeric

The botanical name of turmeric is *Curcuma longa L*., called Haridra in Sanskrit and Haledo/Besar in Nepali. In Ayurvedic medicine, turmeric is a well-documented treatment for various respiratory conditions, runny nose, cough, and sinusitis<sup>80</sup>. The plants contain several secondary metabolites including curcuminoids, sesquiterpenes, and curcumin being the principal component of the yellow pigment and the major bioactive substance<sup>81</sup>. A review shows that curcumin as a multifaceted compound against human papilloma virus infection<sup>82</sup>. Turmeric powder mixed with black pepper is boiled in half cup water and taking with honey is beneficial in flue and cough.

The antiviral effect of active compound of turmeric, curcumin against hepatitis viruses has been investigated by several groups 83, 84, 85, inhibits hepatitis viruses gene expression and replication<sup>86</sup>. Several studies tested the effect of curcumin on different Influenza A virus, HIV and hepatitis C virus to inhibit virus uptake, replication and particle production<sup>87,88,89</sup>. A subsequent study confirmed this effect and explained it by curcumin's ability to modulate the features of lipid bilayers<sup>90</sup>. Curcumin treatment reduces lung inflammation due to influenza A virus infection in mice<sup>88, 89</sup>. Several studies found that low micro molar, not cytotoxic amounts of curcumin dampened HSV-1 and HSV-2 infectivity in vitro and in vivo 91,92,93. Curcumin formulations could potentially be used to prevent sexuallytransmitted HPV infections or to treat cervical dysplasia caused by the virus<sup>94</sup>. The use of curcumin against respiratory syncytial virus infections revealed<sup>95</sup>. Studies revealed that curcumin blocks the entry of chikungunya virus<sup>96</sup>. Curcumin was also evaluated for activity against severe acute respiratory syndrome-associated

coronavirus (SARS-CoV) activities using a cellbased assay exhibited strong anti-SARS-CoV effects<sup>97</sup>. Because it has been known for many years to have excellent therapeutic potential against various diseases, it may also help to improve the health immune system in recovery from coronavirus and a good candidate on antiviral activities.

# 7) Garlic

The botanical name of garlic is *Allium sativum* L, called Lashunam in Sanskrit and Lasun in Nepli. S-allylcysteine, sallylmercaptocysteine, allixin, and selenium are antioxidant compounds of garlic. Volatile garlic oil consists of the diallyl, allylmethyl, and dimethyl mono- to hexa- sulfides <sup>98</sup>. Ancient Chinese and Indian medicine recommended garlic to aid respiration. Ayurvedic practitioners most often use garlic as tea, powder, juice and medicated oil. Ayurveda recognizes garlics effect on the respiratory system, rejuvenating herb along with several other uses.

The few studies on antiviral property of garlic extract showed *in-vitro* activity against influenza A and B (Fenwick and Hanley, 1985), cytomegalovirus <sup>99, 100</sup>, rhinovirus, HIV, herpes simplex virus-1<sup>101</sup>, herpes simplex virus-2<sup>102</sup>, viral pneumonia, and rotavirus. Allicin, diallyl trisulfide and ajoene have all been shown to be active<sup>102, 103</sup>. Ajoene acts by inhibiting the integrin-dependent processes in HIV infections<sup>104</sup>. Allyl alcohol and diallyl disulfide have also proven effective against HIV-infected cells<sup>105</sup>. The investigation revealed 24 occurrences of the common cold in the garlic given group compared

with 65 in the placebo group, resulting in fewer days of illness in the garlic group compared with the placebo group<sup>106</sup>. The growth of histamineproducing bacteria was inhibited by garlic and turmeric extracts at a 5% concentration<sup>107</sup>. Garlic has long been claimed as possessing qualities that aid in the prevention of various illnesses, including colds and flu, and scientific evidence supporting such claims is limited. Though the exact mechanism of all ingredients and their longterm effects on virus is not fully understood but traditional medicine and ethnobotanical practices supporting that garlic extracts are taken as immunobooster and manage defense against diseases can be useful in viral illnesses.

# 8) Ashawagandha

The botanical name of Ashawagandha is Withania somnifera (L.) Dunal, also called Ashvagandha in Sanskrit and Ashwagandha in Nepali. The roots of the plant are categorised as rasayanas, which are reputed to promote health and longevity by augmenting defense against disease, arresting the ageing process, revitalising the body in debilitated conditions, increasing the capability of the individual to resist adverse environmental factors and by creating a sense of mental wellbeing. The biologically active chemical constituents are alkaloids including ashwagandhine, cuscohygrine, anahygrine, tropine etc, steroidal compounds, including ergostane type steroidallactones, withaferin A, withanolides A, withasomniferin-A, withasomidienone, withasomniferols A-C. withanone etc. Other constituents include saponins containing an additional acyl group like sitoindoside VII and VIII, and withanolides<sup>108</sup>.

The studies on withania as immunomodulator has been extensively supporting as a better alternative to fight against the devastating fungal Significant increases in hemoglobin disease. concentration, red blood cell count, white blood cell count, platelet count, significant increase of antibody, and body weight, enhancement in phagocytic activity of peritoneal macrophages confirm the immunomodulatory activity of withania extract in indigenous medicine<sup>109-113</sup>. It possesses the power of combating disease caused by Herpes Simplex Virus among African tribes<sup>114</sup>, and influenza virus<sup>115</sup>. Studies support the fact that holds important place as a potent antiviral agent and hence, plays a significant role in inhibiting viral disease.

# 9) Moringa

The botanical name is Moringa oleifera Linn, called as Drumstick tree, Horseradhish tree or Miracle tree in English, Shobhanjana in Sanskrit and Sheetal Chini in Nepali<sup>116</sup>. It is native to the sub-Himalayan tracts India. Pakistan, of Bangladesh and Afghanistan<sup>117</sup>. Various parts of this plant such as the leaves, seed, bark, fruit and flowers has been advocated for nutritional, medicinal and industrial uses<sup>116, 118, 119</sup>. According to Ayurveda, the leaves of the moringa tree prevents 300 diseases and combat malnutrition, especially among infants and nursing mothers<sup>117,</sup> <sup>120</sup>. In Siddha medicines, seeds of moringa are used to treat erectile dysfunction <sup>121, 122</sup>. In African traditional medicine, the plant is popularly used against AIDS and related secondary infections associated with HIV<sup>123,124</sup>. Moringa consists of mainly flavonoids, isothiocyanates glycoside, glucosinolates, sterols, terpenoids, and proteins, minerals<sup>116, 125, 126</sup>.

The isothiocyanate glycoside and flavonoids have tremendous antimicrobial and antiviral properties <sup>116, 119, 127-133</sup>. Unfortunately, many of these reports of efficacy in human beings are not supported by placebo-controlled, randomized clinical trials. Moringa leaves has been reported antiviral activity against Equine herpes virus (doublestranded DNA virus), Herpes simplex virus (Double stranded DNA virus), Epstein bar virus (double-stranded DNA virus)<sup>134</sup>, Newcastle Disease Virus<sup>135, 136</sup>, Hepatitis virus (Ds DNA virus)<sup>137</sup>, Rhinovirus (+ sense ss RNA virus) 138 , HIV (Retro RNA virus)124 , Smallpox (DNA), Foot and mouth disease virus (FMDV) (+ sense ss RNA virus), Infectious bursal disease virus, Bovine herpes virus type-1<sup>139</sup>, Chikungunya virus. Poliovirus type-1<sup>130</sup> and Duck plague virus<sup>139</sup>. It has been reported that quercetin derivatives found in MO target the initial stages of the virus replication cycle of porcine epidemic diarrhea virus (PEDV)<sup>140</sup>. So it is quite evident that moringa leaves have broad-spectrum antiviral activity, good for immunity and fighting viruses and the isolated bioactive compound could be used as novel drug candidate or lead compound for antiviral drug discovery.

# **10)** Nepalese Pepper

The botanical name of Nepalese pepper is Zanthoxylum armatum DC, also called as

Tejowati in Sanskrit and commonly called Timur in Nepali. The fruits are very useful for cold & cough, tonsillitis, headache and toothache in Ayurvedic medicinal system. The various studies have reported that the different parts of this plant like leaves, fruits, stem, bark and seeds possessed alkaloids (Berberine, Dictamine and g & b-Fagarine), steroids (β-Sitosterol-β-D glucoside), phenolics, lignins (Asarinin and Sesamin), coumarins (Bergapten and Xanthyletin), terpenoids (Linalool, Limonene, α & β-Phellandrene, Myrcene, p-Cymene, Camphene and  $\beta$ - Amyrin) and flavonoids (Vitexin and Tambulin) as major biologically active chemical constituents <sup>141-143</sup>.

Therefore, the presence of such bioactive constituents in different parts of timur has associated to show several pharmacological and biological activities like antimicrobial, antiviral. Previous studies have shown that Timur possesses an eminent in-vitro antiviral activity against several viruses. The extracts (methanol) of fruits have been utilized to show good efficacy against Herpes simplex virus type 1(HSV-1) and influenza virus A<sup>5</sup>. The extract (aqueous) of the leaves exhibited antiprotozoal effect <sup>144</sup>. Linalool as a one of the major compounds in oil is considered to be antiviral, antibacterial and immune system stimulant<sup>145</sup>. Similarly in another study the linalool showed the bronchodilator and antiasthmatic properties (Downregulates the in histamine and OVA-induced allergens in guinea pigs and mice<sup>146</sup>.

# 11) Cinnamon

The botanical name of Cinnamon is Cinnamomum zeylanicum, also called Thwak in Sanskrit and Dalchini in Nepali. Cinnamon has also been traditionally used as tooth powder and to treat toothaches, dental problems, oral microbiota, and bad breathe<sup>147</sup> and also as a spice and flavoring agent, as mouth refreshing effects. Cinnamon consists of a variety of resinous compounds, including cinnamaldehyde, cinnamate, cinnamic acid, and numerous essential oils<sup>148</sup>. The spicy taste and fragrance are due to the presence of cinnamaldehyde and occur due to the absorption of oxygen<sup>149</sup>. The presence of a wide range of essential oils, such as trans-cinnamaldehyde, acetate, cinnamyl eugenol, L-borneol, caryophyllene oxide, b-caryophyllene, L-bornyl acetate, E-nerolidol,  $\alpha$ -cubebene,  $\alpha$ -terpineol, terpinolene, and  $\alpha$ -thujene, has been reported<sup>150</sup>. It was investigated the inhibitory effect of one of the principal constituents of essential oil derived from Cinnamon called trans-cinnamaldehyde. Inhalation of trans-cinnamaldehyde caused virus yield reduction by 1 log in bronchoalveolar lavage fluid on day 6 after infection, compared with that of the untreated control group <sup>151</sup>. Cinnamon components have antiviral potentiality that is nanoparticles applications recently extended to the development of antivirals to inhibit viral infections. The extract of the barks of Cinnamomum showed inhibitory activity against the H7N3 virus in infected Vero cells<sup>152</sup>. Another study showed that cinnamon essential oil and powder had antiviral activity while blended with

other essential oils<sup>153</sup>. The evidences and identification of the mechanism of action and structural activity relationship of these active natural viral inhibitors chemical compounds could help the immense medicinal development of therapeutics against coronavirus infection and reduce the risks of infection by enhancing the immune system. Cinnamon leaves and bark was able to inhibit the propagation of human rotavirus 32.4% and 33.9% respectively<sup>154</sup>.

# 12) Indian Gooseberry

The botanical name of indian gooseberry is Phyllanthus emblica, also known as Amalaki in Sanskrit and Amala in Nepali. It is one of the popular medicinal plants in folklore medicine, Ayurveda and Unani<sup>155</sup>. It is also mentioned in Rigveda, which is supposed to be the oldest repository of human knowledge<sup>156</sup>. According to Ayurveda system of medicine it increases defense against diseases <sup>157</sup>. The fruit is a rich source of Vitamin C and commonly used to make pickles, jellies<sup>158</sup>. preserves and The major phytochemicals are ascorbic acid, flavonoids, ellagic acid, gallic acid, chebulanin, and chebulagic acid <sup>159, 160</sup>. The polyphenols found especially tannins and flavonoids are key components for major bioactivities<sup>161</sup>.

A plethora of research on the antiviral activity of the fruits of this plant show that, a polyphenolic compound 1,2,4,6-tetra-O-galloyl-  $\beta$ -D-glucose (1246TGG) isolated from fruit showed in-vitro

inhibition of Herpes simplex virus type 1 (HSV-1) and type -2(HSV-2) infection. The mechanism of inhibition was possibly due to inactivation of extracellular viral particles and inhibition of viral biosynthesis in host cells <sup>162</sup>. 1246TGG also decreased the levels of HBsAg and HBeAg levels in HepG2.2.15 cell culture supernatant, showing promising anti-hepatitis B virus (HBV) activity<sup>163</sup>. Phyllaemblicin B, a sesquiterpenoids glycoside found in fruits inhibited Coxsackie virus B3 (CVB3)-mediated cytopathic effects on HeLa cells with an IC50 value of 7.75  $\pm$  0.15 µg/mL showing anti-Coxsackie B virus activity <sup>164,165</sup>. 1mg/ml concentration of aqueous and hexane extract of fruit showed 91% and 89% Anti HIV reverse transcriptase activity respectively <sup>166</sup>. The sesquiterpenoid glycoside dimer, Phyllaemblicins G6 isolated from roots showed potential antihepatitis B virus (HBV) activities, with IC50 of  $8.53 \pm 0.97$  and  $5.68 \pm 1.75 \ \mu M$  towards the HBV surface antigen (HBsAg) and HBV excreted antigen (HBeAg) secretion, respectively<sup>167</sup>. The fruit extract showed dose-and time-dependent down-regulation Activator Protein-1 (AP-1) activity and suppression of human papillomavirus (HPV) transcription that resulted in growth inhibition of cervical cancer cells<sup>168</sup>. It is necessary to assess the usefulness of this herb by isolating and identifying the bioactive antiviral principle(s) and understand their mechanism of action. Indian gooseberry seems likely safe for most people when consumed in amounts found in foods, can be used as a supplement to maintain the immune system and fight against viral sickens.

# WAY FORWARD

Herbal medicines and purified natural products provide a rich resource for novel antiviral drug development<sup>169</sup>. Ayurvedic herbs have enough possibilities to be employed both for the prevention and treatment of COVID-19<sup>170</sup>. Similarly Traditional Chinese Medicine (TCM) has also been employed in COVID-19 cases suggesting as remedies <sup>171</sup>. TCM can cure COVID-19 pneumonia, and also shows that the role of TCM in blocking the progress of COVID-19 pneumonia <sup>172</sup>. The herbs described in Avurveda and TCM are reviewed for the reason that these are known to be broad-spectrum antivirals and protease inhibitors as well as they also boost the immunity to fight against flu-like diseased live COVID-19. These herbs either in a single form or in combination consumed for centuries in tribal therapy as well as in alternative medicine are largely based on good results till date, when subjected to rigorous scientific investigation. Many governments of Asian countries are also advising their population to consume herbal medicines to maintain the immune system and to reduce the infection risk from COVID-19. The scientific evidence further support the herbal consumption for some of the viral infectious diseases to maintain the overall immune health of people who are infected with COVID-19. Researchers suggested that if this approach of herbal therapy brought into practice and validated, the rapid immunological response of such herbs or extracts could be effective and timely in the fight against COVID-19. The

extensive utilization of Ayurvedic and TCM herbal formulations, current use of herbs in daily practices, scientific data on antiviral properties, immune response studies, and general hygiene measure by using such natural resources can be taken as a preliminary data so that larger randomized multicenter clinical trials of further studies may be designed for SARS-CoV-2. Researchers would bring a new SARS-CoV-2based vaccine but while waiting for a specific vaccine, a herbal consumption approach for immunotherapies could represent an option to fight against SARS-CoV-2<sup>14,15,22,173</sup>. As efforts are underway to find treatment for COVID-19, caution must be taken against misinformation about the effectiveness of certain remedies<sup>174</sup>. One of ways of holistic management of health for the prevention of respiratory illness of any kind, is to make a decoction of the selected herbs, allow it to cool until just warm, and add honey just before drinking. Above mentioned herb are also described for the treatment of several disease in Charak Samhita, an oldest and the most authentic record on Ayurveda<sup>175</sup>. In the Charak Samhita, there is a specific chapter on 'krimi' i.e. infections. In the chapter, there is a description of Sleshma Krimi to treat the respiratory system related illnesses.

# CONCLUSION

We conclude that the research on several Ayurvedic herbs, which also are locally available in Nepal possesses antiviral properties. In the context of treatment vaccine of COVID-19 could be years away, herbal medicines could be useful for the prevention of COVID-19 infection and symptomatic management. The traditional practices and scientific evidence of the above described herbs and their phytochemicals against lethal viral infections *in-vivo* and *in-vitro* studies supports the natural product for drug discovery particularly against coronavirus.

# REFERENCES

1. Ganjhu RK, Mudgal PP, Maity H, Dowarha D, Devadiga S, Nag S, Arunkumar G. Herbal plants and plant preparations as remedial approach for viral diseases. Virus disease. 2015; 26(4):225–236.

#### Google Scholar | PMC | CrossRef | Full Text

2. Lin LT, Hsu WC, Lin CC. Antiviral natural products and herbal medicines. J Tradit Complement Med. 2014; 4(1):24–35.

Google Scholar | PMC | CrossRef | Full Text

3. Newman D J, Cragg GM. Natural products as sources of new drugs from 1981 to 2014. J. Nat. Prod. 2016; 79: 629–661.

Google Scholar | CrossRef | Full Text

4. Lee JY, Abundo MEC, Lee CW. Herbal Medicines with Antiviral Activity against the Influenza Virus, a Systematic Review. The American Journal of Chinese Medicine. 2018; 46(8):1663-1700.

#### <u>Google Scholar | CrossRefm | Full Text</u>

5. Rajbhandari M, Mentel R, Jha PK, Chaudhary RP, Bhattarai S, Gewali MB, Karmacharya N, Hipper M and Lindquist U. Antiviral activity of some plants used in Nepalese traditional medicine. Evid.-Based Complent. Altern. Med. 2009; 6 (4), 517–522.

Google Scholar | PMC | CrossRef | Full Text

6. Hudson J, Vimalanathan S, Kang L, Amiguet VT, Livesey J, and Arnason JT, Characterization of antiviral activities in Echinacea root preparations, Pharmaceutical Biology, 2005; 43(9); 790–796.

#### Google Scholar | CrossRef | Full Text

7. Chan JF, Kok KH, Zhu Z, Chu H, To KK, Yuan S, Yuen KY. Genomic characterization of the 2019 novel humanpathogenic coronavirus isolated from a patient with atypical pneumonia after visiting Wuhan. Emerg Microbes Infect. 2020; 9: 221-236

#### Google Scholar | CrossRef | Full Text

8. Belouzard S, Millet JK, Licitra BN, Whittaker GR. Mechanisms of coronavirus cell entry mediated by the viral spike protein. Viruses. 2012; 4(6):1011–1033. Google Scholar | CrossRef | Full Text 9. Choi HJ. Chemical Constituents of Essential Oils Possessing Anti-Influenza A/WS/33 Virus Activity. Osong Public Health Res Perspect. 2018; 9(6):348–353. PMC

10. Cheng PW, Ng LT, Chiang LC, Lin CC. Antiviral effects of saikosaponins on human coronavirus 229E in vitro. Clin Exp Pharmacol Physiol 2006; 33:612-6.

#### Google Scholar | PMC | CrossRef | Full Text

11. Lee SY, Chen C, Zhang HQ, Guo HY, Wang H, Wang L, et al. Identification of natural compounds with antiviral activities against SARS-associated coronavirus. Antivir Res 2005; 67:18-23.

#### Google Scholar | PMC | CrossRef | Full Text

12. Ryu YB, Jeong HJ, Kim JH, KimYM, Park JY, Kim D, et al. Biflavonoids from Torreya nucifera displaying SARS-CoV 3CL(pro) inhibition. Bioorg Med Chem 2010; 18:7940-7. Google Scholar | PMC| CrossRef | Full Text

13. Yu MS, Lee J, Lee JM, Kim Y, Chin YW, Jee JG, et al. Identification of myricetin and scutellarein as novel chemical inhibitors of the SARS coronavirus helicase, nsP13. Bioorg Med Chem Lett 2012; 22:4049-54.

#### Google Scholar | PMC | CrossRef | Full Text

14. Lau KM, Lee KM, Koon CM, Cheung CS, Lau CP, Ho HM, et al. Immunomodulatory and anti-SARS activities of *Houttuynia cordata*. J Ethnopharmacol 2008; 118:79-85. <u>Google Scholar | PMC | CrossRef | Full Text</u>

15. Zhang DH, Wu KL, Zhang X, Deng SQ, Peng B. *In silico* screening of Chinese herbal medicines with the potential to directly inhibit 2019 novel coronavirus. J Integr Med. 2010; 18(2):152-158.

#### Google Scholar | PMC | CrossRef | Full Text |

16. Dudani T and Saraogi A, Use of Herbal Medicines on Coronavirus, Acta Scientific Pharmaceutical Sciences, 2020; 4.4: 61-63.

#### Google Scholar | Full Text |

17. Rottier PJM. The coronavirus membrane protein. In: Siddell S G, editor. The Coronaviridae. New York, N.Y: Plenum Press; 1995.

18. Liberati A, Altman DG, Tetzlaff J, et al. The PRISMA statement for reporting systematic reviews and metaanalyses of studies that evaluate health care interventions: explanation and elaboration. PLoS Med. 2009;6(7):e1000100.

# Google Scholar | CrossRef | Full Text

19. Singh SS, Pandey SC., Srivastava S, Gupta VS, Patro B, Chemistry & medicinl properties of *Tinospora cordifolia*. Indian Journal of Pharmacology 2003; 35: 83-91.

#### Full Text

20. Sharma P, Dwivedeea BP, Bisht D, Dash AK, Kumara D. The chemical constituents and diverse pharmacological importance of *Tinospora cordifolia*. 2019; 5(9) e02437. Google Scholar | CrossRef | Full Text

21. Gupta GD, Sujatha N, Dhanik A, Rai NP , Clinical Evaluation of Shilajatu Rasayana in patients with HIV

# Infection. Ayu. 2010; 31(1):28-32.

#### PMC | CrossRef

22. Saha S, Ghosh S. *Tinospora cordifolia*: One plant, many roles. Anc Sci Life. 2012; 31(4):151–159.

#### Google Scholar | PMC | CrossRef | Full Text

23. Akhtar S, Use of *Tinospora cordifolia* in HIV infection. Indian J Pharmacol. 2010; 42(1):57. DOI: 10.4103/0253-7613.62402

#### Google Scholar | PMC | CrossRef | Full Text

24. Pruthvish R and Gopinatha SM. Antiviral prospective of *Tinospora cordifolia* on HSV-1. Int.J.Curr.Microbiol.App.Sci (2018) 7(1): 3617-3624.

#### Google Scholar | CrossRef | Full Text

25. Sharma U, Bala M., Kumar N, Singh B., Munshi RK, Bhalerao S. Immunomodulatory active compounds from *Tinospora cordifolia*. Journal of Ethnopharmacology. 2012; 141:918–926.

## Google Scholar | CrossRef | Full Text

26. Koppada R, Norozian FM, Torbati D, Kalomiris S, Ramachandran C, Totapally BR, Physiological effects of a novel immune stimulator drug, (1,4)- $\alpha$ -D-glucan, in rats. Basic Clin Pharmacol Toxicol. 2009; 105(4):217-21.

# Google Scholar | CrossRef | Full Text

27. Raghu R, Sharma D, Ramakrishnan R, Khanam S, Chintalwar GJ, Sainis KBMolecular events in the activation of B cells and macrophages by a non-microbial TLR4 agonist, G1-4A from *Tinospora cordifolia*. Immunol Lett. 2009; 123(1):60-71.

#### Google Scholar | CrossRef | Full Text

28. Bishayi B, Roychowdhury S, Ghosh S, Sengupta M. Hepatoprotective and immunomodulatory properties of *Tinospora cordifolia* in CCl4 intoxicated mature albino rats. The Journal of Toxicological Sciences. 2002; 27(3):139-146. <u>Google Scholar | CrossRef | Full Text</u>

29. Manjrekar PN, Jolly CI, Narayanan S. Comparative studies of the immunomodulatory activity of *Tinospora cordifolia* and *Tinospora sinensis*. Fitoterapia. 2000; 71:254–257. <u>Google Scholar | CrossRef | Full Text</u>

30. Panchabhai TS, Kulkarni UP, Rege NN. Validation of therapeutic claims of *Tinospora cordifolia*: a review. Phytotherapy Research. 2008; 22:425–441.

# Google Scholar | CrossRef | Full Text |

31. Alsuhaibani S, Khan MA. Immune-Stimulatory and Therapeutic Activity of *Tinospora cordifolia*: Double-Edged Sword against Salmonellosis. J Immunol Res. 2017;2017: 1787803.

# Google Scholar | PMC | CrossRef | Full Text

32. Ranjith MS, Ranjitsingh AJ, Gokul Shankar S, Vijayalaksmi GS, Deepa K, Sidhu HS. Enhanced phagocytosis and antibody production by *Tinospora cordifolia*: A new dimension in Immunomodulation. Afr J Biotechnol. 2008; 7:81–85.

# Google Scholar | CrossRef | Full Text

33. K Anagha, D Manasi, L Priya, Meera M. Scope of *Glycyrrhiza glabra*(Yashtimadhu) as an Antiviral agent: A Review, Int.J.Curr.Microbiol.App.Sci, 2014; 3(12): 657-665 Google Scholar | Full Text

34. Cinatl J, Morgenstern B, Bauer G, Chandra P, Rabenau H, Doerr HW. Glycyrrhizin, an active component of liquorice roots, and replication of SARS-associated coronavirus. Lancet. 2003; 14; 361(9374):2045-6.

Google Scholar | CrossRef | Full Text

35. Ashfaq UA, Masoud MS, Nawaz Z, Riazuddin S. Glycyrrhizin as antiviral agent against Hepatitis C Virus. J Transl Med. 2011; 9:112-116.

#### Google Scholar | PMC | CrossRef | Full Text |

36. Huang W, Chen X, Li Q, Li P, Zhao GN, Xu MM. Inhibition of intercellular adhesion in *Herpex simplex* virus infection by glycyrrhizin. Cell Biochem Biophys. 2012; 62:137–140. Google Scholar | CrossRef | FullText

37. Zhang HC, Song YX, Zhang ZC. Glycyrrhizin administration ameliorates coxsackievirus B3–induced myocarditis in mice. Am J Med Sci. 2012; 344:206–210.

#### Google Scholar | CrossRef | Full Text

38. Soufy H, Yassein S, Ahmed AR, Khodier MH, Kutkat MA, Nasr SM. Antiviral and immune stimulant activities of glycyrrhizin against duck hepatitis virus. Afr J Tradit Complement Altern Med. 2012; 9:389–395.

#### Google Scholar | PMC | CrossRef | Full Text

39. Laconi S, Madeddu MA, Pompei R. Autophagy activation and antiviral activity by a licorice triterpene. Phytother Res. 2014; 28:1890–1892.

#### Google Scholar | CrossRef | Full Text

40. Michaelis M, Geiler J, Naczk P, Sithisarn P, Ogbomo H, Altenbrandt B. Glycyrrhizin inhibits highly pathogenic H5N1 influenza A virus–induced pro-inflammatory cytokine and chemokine expression in human macrophages. Med Microbiol Immunol. 2010; 199:291–297. <u>Google Scholar</u> | <u>PMC| CrossRef</u> | <u>Full Text</u>

41. Moisy D, Avilov SV, Jacob Y, Laoide BM, Ge XY, Baudin F. HMGB1 protein binds to influenza virus nucleoprotein and promotes viral replication. J Virol. 2012; 86:9122–9133. <u>Google Scholar | PMC | CrossRef</u> | <u>Full Text</u>

42. Smirnov VS, Zarubaev VV, Anfimov PM, Shtro AA, Effect of a combination of glutamyl-tryptophan and glycyrrhizic acid on the course of acute infection caused by influenza (H3H2) virus in mice. Vopr Virusol. 2012; 57:23–27.

#### Google Scholar | Full Text

43. Chen F, Chan KH, Jiang Y, Kao RY, Lu HT, Fan KW, Cheng VCC, Tsui WHW, Hung IFN, Lee TSW, Guan Y, Peiris JSM, Yuen KY, *In vitro* susceptibility of 10 clinical isolates of SARS coronavirus to selected antiviral compounds. J Clin Virol. 2004; 31:69-75.

#### Google Scholar | PMC | CrossRef | Full Text

44. Hardy ME, Hendricks JM, Paulson JM., Faunce NR. 18βglycyrrhetinic acid inhibits rotavirus replication in culture. Virol J. 2012; 9:96.

#### Google Scholar | PMC | CrossRef | Full Text

45. Yeh CF, Wang KC, Chiang LC, Shieh DE, Yen MH, Chang JS. Water extract of licorice had anti-viral activity against human respiratory syncytial virus in human respiratory tract cell lines. J Ethnopharmacol. 2013; 148:466–473.

#### Google Scholar | PMC | CrossRef | Full Text

46. Rossum TGV, Vulto AG, Hop WC, et al. Intravenous glycyrrhizin for the treatment of chronic hepatitis C: a double-blind, randomized, placebo-controlled phase I/II trial. J Gastroenterol Hepatol 1999; 14:1093-1099. Google Scholar | CrossRef | Full Text

47. Hattori T, Ikematsu S, Koito A, Matsushita S, Maeda Y, Hada M, Fujimaki M, Takatsuki K., Preliminary evidence

for inhibitory effect of glycyrrhizin on HIV replication in patients with AIDS. Antiviral Res 1989; 11:255-261.

# <u>Google Scholar</u> | <u>CrossRef</u> | <u>Full Text</u>

48. Kumar V, Van Staden J. A Review of *Swertia chirayita* (Gentianaceae) as a Traditional Medicinal Plant. Front Pharmacol. 2016; 12; 6:308.

#### PMC | CrossRef | Full Text

49. Joshi P., Dhawan V. *Swertia chirayita*—an overview. Curr. Sci. 2005; 89, 635–640. <u>Google Scholar | Full Text</u>

50. Verma H, Patil PR, Kolhapure RM, Gopalkrishna V. Antiviral activity of the Indian medicinal plant extract, *Swertia chirata* against herpes simplex viruses: a study by in-vitro and molecular approach. Indian J. Med. Microbiol. 2008; 26, 322–326.

#### Google Scholar | Full Text

51. Zheng MS, Lu ZY 1990. Antiviral effect of mangiferin and iso-mangiferin on herpes simplex virus. Chinese Med. J. 103, 160–165.

#### Google Scholar | Full Text

52. Guha S, Ghosal S, Chattopadhyay U. Antitumor, immunomodulatory and anti-HIV effect of mangiferin, a naturally occurring glucosylxanthone. Chemotherapy 1996; 42, 443–451.

#### Google Scholar | CrossRef | Full Text

53. Geng CA, Zhang XM, Ma YB, Luo J, Chen JJ, Swerilactones L-O, secoiridoids with C<sub>12</sub> and C<sub>13</sub> skeletons from *Swertia mileensis*. J Nat Prod. 2011; 74 (8): 1822– 1825. <u>Google Scholar</u> | <u>CrossRef</u> | <u>Full Text</u>

54. Zhou NJ, Geng CA, Huang XY, Ma YB, Zhang XM, Wang JL, Chen JJ. Anti-hepatitis B virus active constituents from Swertia chirayita. Fitoterapia 2015; 100, 27–34.

# Google Scholar | CrossRef | Full Text

55. Kulkarni KV and Adavirao BV, A review on: Indian traditional shrub Tulsi (*Ocimum sanctum*): The unique medicinal plant. Journal of Medicinal Plants Studies, 2018; 6(2): 106-110

#### Google Scholar | PMC | CrossRef | Full Text

56. Singh V, Amdekar S, and Verma O. *Ocimum Sanctum* (Tulsi): Bio-pharmacological Activities. Webmed Central Pharmacol. 2010; 1:WMC001046.

#### Google Scholar | Full Text

57. Joshi RK. Chemical composition and antimicrobial activity of the essential oil of *Ocimum basilicum* L. (sweet basil) from Western Ghats of North West Karnataka, India. Anc Sci Life. 2014; 33(3):151–156.

# Google Scholar | PMC | CrossRef |

58. Jamshidi N, Cohen MM. The Clinical Efficacy and Safety of Tulsi in Humans: A Systematic Review of the Literature. Evid Based Complement Alternat Med. 2017; 2017:9217567.

#### Google Scholar | PMC | CrossRef | Full Text |

59. Venu Prasad MP. Antifatigue and Neuroprotective Properties of Selected Species of Ocimum L. A thesis of Doctor of Philosophy in Biochemistry submitted to Department of Biochemistry, University of Mysore, 2014. Google Scholar

60. Rajalakshmi S., Sivanandam G., Veluchamy G. Role of Tulsi (*Ocimum sanctum* Linn.) in the management of Manjal Kamalai (viral hepatitis) Journal of Research in Ayurveda and Siddha. 1986;9(3-4):118–123.

#### **Google Scholar**

61. Das S, Chandra A, Agarwal S, Singh N. *Ocimum sanctum* (tulsi) in the treatment of viral encephalitis (A preliminary clinical trial) Antiseptic. 1983; 80: 323–327.

#### Google Scholar | Full Text

62. Sharma G. Anti-asthmatic efficacy of *Ocimum sanctum*. Sachitra Ayurved. 1983; 35:665–668.

#### Google Scholar

63. Mondal S, Varma S, Bamola VD, Naik SN, Mirdha BR, Padhi MM, Mehta N, Mahapatra SC. Double-blinded randomized controlled trial for immunomodulatory effects of Tulsi (*Ocimum sanctum* Linn.) leaf extract on healthy volunteers. Journal of Ethnopharmacology. 2011; 136(3):452–456.

#### Google Scholar | CrossRef | Full Text

64. Jeba CR, Vaidyanathan R, Rameshkumar G. Immunomodulatory activity of aqueous extract of *Ocimum sanctum* in rat. International Journal on Pharmaceutical and Biomedical Research. 2011; 2:33-38.

# Google Scholar | Full Text

65. Chiang LC, Ng LT, Cheng PW, Chiang W and Lin CC, Antiviral activities of extracts and selected pure constituents of *Ocimum basilicum*. Clin. Exp. Pharmacol. Physiol., 2005; 32(10):811-816.

#### Google Scholar | CrossRef | Full Text

66. Park EJ, Pizzuto JM. Botanicals in cancer

chemoprevention. Cancer Metast Rev. 2002; 21:231–255. Google Scholar | CrossRef

67. Ali BH, Blunden G, Tanira MO, Nemmar A. Some phytochemical, pharmacological and toxicological properties of ginger (*Zingiber officinale* Roscoe): A review of recent research. Food Chem Toxicol. 2008; 46:409–420. Google Scholar | CrossRef | Full Text

68. Jolad SD, Lantz RC, Solyom AM, Chen GJ, Bates RB, Timmermann BN. Fresh organically grown ginger (*Zingiber officinale*): Composition and effects on LPS-induced PGE2 production. Phytochemistry. 2004; 65:1937–54.

# Google Scholar | CrossRef | Full Text

69. Ernst E, Pittler MH. Efficacy of ginger for nausea and vomiting: a systematic review of randomized clinical trials. Br J Anaesth. 2000; 84:367–371.

#### Google Scholar | CrossRef | Full Text

70. Barta I, Smerak P, Polivkova Z, Sestakova H, Langova M, Turek B, J Bártová. Current trends and perspectives in nutrition and cancer prevention. Neoplasma. 2006; 53:19– 25.

#### Google Scholar | Full Text

71. Newall CA, Anderson LA, Phillipson JD Herbal Medicines: A Guide for Healthcare Professionals. London: Pharmaceutical Press. 1996.

#### Google Scholar | Full Text

72. Chaiyakunapruk N, Kitikannakorn N, Nathisuwan S, Leeprakobboon K, Leelasettagool C. The efficacy of ginger

for the prevention of postoperative nausea and vomiting: a meta-analysis. Am. J. Obstet. Gynecol , 2006; 194(1):95-99. Google Scholar | Full Text

73. Kubra IR, Murthy PS, Rao LJ. *In vitro* antifungal activity of dehydrozingerone and its fungitoxic properties. J. Food Sci. 2013; 78(1):64-69.

#### Google Scholar | CrossRef | Full Text

74. Dabaghzadeh F, Khalili H, Dashti-Khavidaki S, Abbasian L, Moeinifard A., Ginger for prevention of antiretroviralinduced nausea and vomiting: a randomized clinical trial. Expert Opin Drug Saf. 2014; 13(7):859-866.

# Google Scholar | CrossRef | Full Text

75. Shariatpanahi ZV, Taleban FA, Mokhtari M, Shahbazi S. Ginger extract reduces delayed gastric emptying and nosocomial pneumonia in adult respiratory distress syndrome patients hospitalized in an intensive care unit. J Crit Care. 2010; 25(4):647-650.

#### Google Scholar | CrossRef | Full Text

76. Denyer CV, Jackson P, Loakes DM, Ellis MR, Young David AB. Isolation of antirhinoviral sesquiterpenes from ginger (*Zingiber officinale*), J Nat Prod; 1994; 57(5), 658-662.

#### Google Scholar | CrossRef | Full Text

77. Chrubasik S, Pittler MH, Roufogalis BD Zingiberis rhizome: a comprehensive review on the ginger effect and efficacy profiles. Phytomedicine. 2005; 12:684-701. Google Scholar | CrossRef | FullText

78. Liu Y, Liu J, Zhang Y. Research Progress on Chemical Constituents of *Zingiber officinale* Roscoe. *Biomed Res Int*. 2019;2019:5370823. Published 2019 Dec 20. doi:10.1155/2019/5370823

#### Google Scholar | PMC | CrossRef | Full Text

79. Ghayur M. N, Gilani A. H, Janssen L. J. Ginger attenuates acetylcholine-induced contraction and Ca2<sup>+</sup> signalling in murine airway smooth muscle cells. Can J Physiol Pharmacol. 2008; 86(5): 264–271.

#### Google Scholar | CrossRef | Full Text

80. Araujo CC, Leon LL. Biological activities of *Curcuma longa* L. Mem Inst Oswaldo Cruz. 2001; 96:723–728. Google Scholar | Full Text

81. Omosa LK, Midiwo JO, Kuete V. Curcuma longa, in Therapeutic Potential Against Metabolic, Inflammatory, Infectious and Systemic Diseases, ed. Kuete V. (Cambridge, MA: Academic Press), 2017.

#### **Google Scholar**

82. Teymouri M, Pirro M., Johnston TP, Sahebkar A. Curcumin as a multifaceted compound against human papilloma virus infection and cervical cancers: a review of chemistry, cellular, molecular, and preclinical features. Biofactors 2017; 43 331–346. <u>Google Scholar</u> | <u>CrossRef</u> | <u>Full Text</u>

83. Kim H J, Yoo HS, Kim JC, Park CS, Choi M S, Kim M, Choi H, Min JS, Kim YS, Yoon SW, Ahn JK. (2009). Antiviral effect of Curcuma longa Linn extract against hepatitis B virus replication. J. Ethnopharmacol. 2009; 5; 124(2):189-96. Google Scholar | CrossRef | Full Text

84. Anggakusuma, CCC, Schang LM, Rachmawati H, Frentzen A, Pfaender S, Behrendt P, Brown RJ, Bankwitz D,

Steinmann J, Ott M, Meuleman P, Rice CM, Ploss A, Pietschmann T, Steinmann E. Turmeric curcumin inhibits entry of all hepatitis C virus genotypes into human liver cells. Gut 63 1137-1149.

#### Google Scholar | CrossRef | Full Text

85. Wei ZQ, Zhang YH, Ke CZ, Chen HX, Ren P, He YL, Hu P, Ma DQ, Luo J, Meng ZJ. Curcumin inhibits hepatitis B virus infection by down-regulating cccDNA-bound histone acetylation. World J. Gastroenterol. 2017; 23:6252-6260.

# Google Scholar | CrossRef | PMC | Full Text

86. Rechtman MM, Har-Noy O, Bar-Yishay I, Fishman S, Adamovich Y, Shaul Y, Halpern Z, Shlomai A. Curcumin inhibits hepatitis B virus via down-regulation of the metabolic FEBS PGC-1α. coactivator Lett. 2010; 584(11); 2485-2490.

#### Google Scholar | CrossRef | Full Text

87. Dai J, Gu L, Su Y, Wang Q, Zhao Y, Chen X, Deng H, Li W, Wang G, Li W. Inhibition of curcumin on influenza A virus infection and influenzal pneumonia via oxidative stress, TLR2/4, p38/JNK MAPK and NF-κB pathways. Int. Immunopharmacol. 2018; 54:177–187.

#### Google Scholar | CrossRef | Full Text

88. Han S, Xu J, Guo X, Huang M. Curcumin ameliorates severe influenza pneumonia via attenuating lung injury and regulating macrophage cytokines production. Clin. Exp. Pharmacol. Physiol. 2018; 45, 84-93.

#### Google Scholar | CrossRef | Full Text

89. Praditya D, Kirchhoff L, Brüning J, Rachmawati H, Steinmann J, Steinmann E. Anti-infective Properties of the Golden Spice Curcumin. Front Microbiol. 2019; 10:912. Google Scholar | PMC | Full Text

90. Chen TY, Chen DY, Wen HW, Ou JL, Chiou SS, Chen Wong ML, Hsu WL, 2013. Inhibition of enveloped JM, viruses infectivity by curcumin. PLoS One 2013; 8(5):e62482. 10.1371/journal.pone.0062482

#### Google Scholar | PMC | Full Text

91. Bourne KZ, Bourne N., Reising SF, Stanberry LR. Plant products as topical microbicide candidates: assessment of in vitro and in vivo activity against herpes simplex virus type 2. Antiviral Res. 1999; 42:219-226.

#### Google Scholar | CrossRef | Full Text

92. Kutluay SB, Doroghazi J, Roemer ME, Triezenberg S J. Curcumin inhibits herpes simplex virus immediate-early gene expression by a mechanism independent of p300/CBP histone acetyltransferase activity. Virology 2008; 373:239-247.

#### Google Scholar PMC | CrossRef | Full Text

93. Looker KJ, Magaret AS, May MT, Turner KME, Vickerman P, Gottlieb S L, Newman LM,. Global and regional estimates of prevalent and incident herpes simplex virus type 1 infections in 1012. PLoS One. 2015; 28; 10(10):e0140765

#### Google Scholar | PMC | CrossRef | Full Text

94. Gattoc L, Frew PM, Thomas SN, Easley KA, Ward L, Chow HS, Ura CA, Flowers L. Phase I dose-escalation trial of intravaginal curcumin in women for cervical dysplasia. J. Clin. Trials 2017; 9: 1–10.

Google Scholar | CrossRef | Full Text

95. Yang XX, Li CM, Huang CZ. Curcumin modified silver nanoparticles for highly efficient inhibition of respiratory syncytial virus infection. Nanoscale, 2016; 8:3040-3048. Google Scholar | CrossRef | Full Text

96. Mounce BC, Cesaro T, Carrau L, Vallet T, Vignuzzi M. Curcumin inhibits Zika and chikungunya virus infection by inhibiting cell binding. Antiviral Res. 2017; 142 148–157. Google Scholar | CrossRef | Full Text

97. Wen CC, Kuo YH, Jan JT, et al. Specific plant terpenoids and lignoids possess potent antiviral activities against severe acute respiratory syndrome coronavirus. J. Med. Chem. 2007; 50:4087-4095.

#### Google Scholar | CrossRef | Full Text

98. Lawson LD, Bauer R. Garlic: a review of its medicinal effects and indicated active compounds. In: Phytomedicines of Europe. Chemistry and Biological Activity. Series 69 1. Washington DC: American Chemical Society; 1998; 176-209.

#### Google Scholar | Full Text

99. Meng Y, Lu D, Guo N, Zhang L, Zhou G. Anti-HCMV effect of garlic components. Virol Sin. 1993; 8:147–150.

#### Google Scholar | PMC

100. Nai-Lan G, Cao-Pei L, Woods GL, Reed E, Gui-Zhen Z, Li-Bi Z, Waldman RH. Demonstration of antiviral activity of garlic extract against human cytomegalovirus in vitro. Chin Med J. 1993; 106:93-96.

#### Google Scholar | Full Text

101. Tsai Y, Cole LL, Davis LE, Lockwood SJ, Simmons V, Wild GC. Antiviral Properties of Garlic: In vitro Effects on Influenza B, Herpes Simplex and Coxsackie Viruses. Planta Med. 1985; 51(5):460-461.

#### Google Scholar | CrossRef | Full Text

102. Weber ND, Andersen DO, North JA, Murray BK, Lawson LD, Hughes BG. In vitro virucidal effects of Allium sativum (garlic) extract and compounds. Planta Med. 1992; 58:417-423.

#### Google Scholar | CrossRef | Full Text

103. Hughes BG, Lawson LD. Antimicrobial effect of Allium sativum L. (garlic) Allium ampeloprasum (elephant garlic), and Allium cepa L. (onion). garlic compounds and commercial garlic supplement products. Phytol Res. 1991; 5:154-158.

#### Google Scholar | CrossRef | Full Text

104. Tatarintsev AV, Vrzhets PV, Ershov DE, Shchegolev AA, Turgiev AS, Karamov EV, Kornilaeva GV, Makarova TV, Fedorov NA, Varfolomeev SD. The ajoene blockade of integrin-dependent processes in an HIV-infected cell system. Vestn Ross Akad Med Nauk. 1992;ll-12:6-10.

#### Google Scholar

105. Shoji S, Furuishi K, Yanase R, Miyazaka T, Kino M. Ally1 compounds selectively killed human immunodeficiency virus (type 1)-infected cells. Biochem Biophys Res Commun. 1993; 194:610-621.

#### Google Scholar | CrossRef | Full Text

106. Lissiman E, Bhasale AL, Cohen M. Garlic for the common cold. Cochrane Database Syst Rev. 2012; 14;(3):CD006206.

PMC | CrossRef | Full Text

107. Paramasivam S, Thangaradjou T, Kannan L. Effect of natural preservatives on the growth of histamine-producing bacteria. J Environ Biol. 2007; 28:271–274. Google Scholar | Full Text

108. Elsakka M, Grigorescu E, Stanescu U, Stanescu U, Dorneanu V. New data referring to chemistry of *Withania somnifera* species. Rev Med Chir Soc Med Nat Iasi.1990; 94:385–387.

#### Google Scholar

109. Ziauddin M, Phansalkar N, Patki P, Diwanay S, Patwardhan B. Studies on the immunomodulatory effects of ashwagandha. J. Ethnopharmacol. 1996; 50(2): 69-76. Google Scholar | CrossRef | Full Text

110. Dhuley JN, Effect of some Indian herbs on macrophage functions in ochratoxin A treated mice. J. Ethnopharmacol. 1997; 58(1): 15-20.

#### Google Scholar | CrossRef | Full Text

111. Rasool M, Varalakshmi P. Immunomodulatory role of *Withania somnifera* root powder on experimental induced inflammation: An in vivo and in vitro study. Vascul. Pharmacol. 2006; 44(6): 406-410.

#### Google Scholar | CrossRef | Full Text

112. Gautam M, Diwanay SS, Gairola S, Shinde YS, Jadhav SS, Patwardhan B, Immune response modulation to DPT vaccine by aqueous extract of *Withania somnifera* in experimental system. Int. Immunopharmacol. 2004; 4(6): 841-849.

#### Google Scholar | CrossRef | Full Text

113. Davis L, Kuttan G. Immunomodulatory activity of *Withania somnifera*. J. Ethnopharmacol. 2000; 71(1-2): 193-200.

#### Google Scholar | CrossRef | Full Text

114. Kambizi LG, Goosen BM, Taylor MB, Afolayan AJ. Anti-viral effects of aqueous extracts of Aloe ferox and Withaniasomnifera on herpes simplex virus type 1 in cell culture. South African Journal of Science. 2007; 103(9-10):359-60.

#### Google Scholar Full Text

115. Cai Z, Zhang G, Tang B, Liu Y, Fu X, Zhang X. Promising anti-influenza properties of active constituent of *Withania somnifera* Ayurvedic herb in targeting neuraminidase of H1N1 influenza: computational study. Cell biochemistry and biophysics. 2015; 72(3):727-39.

#### Google Scholar | CrossRef | Full Text

116. Kumar A, Naaz F, Kushwaha A, Chaudhary P, Srivastav P. Present review on phytochemistry, neutraceutical, antimicrobial, antidiabetic, biotechnological and pharmacological characteristics of *Moringa oleifera* Linn BMR Phytomed 2016;2(1):1-7.

#### Google Scholar | Full Text

117. Sujatha BK, Patel P. *Moringa Oleifera*–Nature's Gold. Imperial J Interdisciplinary Res. 2017; 3(5):1175-9.

#### Google Scholar | Full Text

118. Gupta S, Jain R, Kachhwaha S, Kothari SL. Nutritional and medicinal applications of Moringa oleifera Lam.— Review of current status and future possibilities. Journal of Herbal Medicine. 2018; 1; 11:1-1.

Google Scholar | CrossRef | Full Text

119. Chukwuebuka E. *Moringa oleifera* "the mother's best friend". International Journal of Nutrition and Food Sciences. 2015; 21;4(6):624-30.

#### Google Scholar | Full Text

120. Mishra G, Singh P, Verma R, Kumar S, Srivastav S, Jha KK, Khosa RL. Traditional uses, phytochemistry and pharmacological properties of *Moringa oleifera* plant: An overview. Der Pharmacia Lettre. 2011; 3(2):141-64. Full Text

121. Posmontier B. The medicinal qualities of *Moringa oleifera*. Holistic nursing practice. 2011 25(2):80-87. <u>Google Scholar | CrossRef | Full Text</u>

122. Chattopadhyay D, Mukherjee S, Bag P, Ghosh S, Samanta A, Chakrabarti S. Ethnomedicine in antiviral drug discovery, International Journal of Biomedical and Pharmaceutical Sciences. 2009; 3(1), 1-25.

### Google Scholar | Full Text

123. Nasr-Eldin MA, Abdelhamid A, Baraka D. Antibiofilm and Antiviral Potential of Leaf Extracts from *Moringa oleifera* and Rosemary (*Rosmarinus officinalis* Lam.). Egyptian Journal of Microbiology. 2017;1; 52(1):129-139. <u>Google Scholar | Full Text</u>

#### <u>300gle Scholar | Full Text</u>

124. Nworu CS, Okoye EL, Ezeifeka GO, Esimone CO. Extracts of *Moringa oleifera* Lam. showing inhibitory activity against early steps in the infectivity of HIV-1 lentiviral particles in a viral vector-based screening. African Journal of Biotechnology. 2013; 12(30): 4866-4873.

#### Google Scholar | Full Text

125. Patel P, Patel N, Patel D, Desai S, Meshram D. Phytochemical analysis and antifungal activity of *Moringa oleifera*. International Journal of Pharmacy and Pharmaceutical Sciences. 2014;6(5):144-7.

## Google Scholar | Full Text

126. Mahmood KT, Mugal T, Haq IU. *Moringa oleifera*: a natural gift-A review. Journal of Pharmaceutical Sciences and Research. 2010; 1; 2(11):775.

#### Google Scholar | Full Text

127. Brilhante RS, Sales JA, Pereira VS, Castelo DD, de Aguiar Cordeiro R, de Souza Sampaio CM, Paiva MD, dos Santos JB, Sidrim JJ, Rocha MF. Research advances on the multiple uses of *Moringa oleifera*: A sustainable alternative for socially neglected population. Asian Pacific journal of tropical medicine. 2017; 1; 10(7):621-630.

#### Google Scholar | CrossRef | Full Text

128. Belay K, Sisay M. Phytochemical constituents and physicochemical properties of medicinal plant (*Moringa oleifera*) around bule hora. Chem. Mater. Res. 2014; 6(7):61-71.

#### Google Scholar | Full Text

129. Nweze NO, Nwafor FI. Phytochemical, proximate and mineral composition of leaf extracts of *Moringa oleifera* Lam. from Nsukka, South-Eastern Nigeria. 2014; 9, 1(VI): 99-103.

#### Google Scholar | Full Text

130. Okoye EL, Ezeifeka GO, Esimone CO, Nworu CS. Evaluation of the antiviral activity of *Moringa oleifera* on three RNA viruses. National Summit on Moringa

Development , Organized by the Raw Material Research Development Council. 2010. <u>Google Scholar</u>

131. Goswami D, Mukherjee PK, Kar A, Ojha D, Roy S, Chattopadhyay D. Screening of ethnomedicinal plants of diverse culture for antiviral potentials. Indian Journal of Traditional Knowledge, 2016; 15(3); 474-481.

#### Google Scholar | Full Text

132. Virmani M, Kapoor S, Garg SL, Virmani N. In vitro antiviral activity of plant extracts against Infectious Bursal Disease Virus. Journal of Immunology and Immunopathology. 2009; 11(1):48-52.

#### Google Scholar | Full Text

133. Hafidh RR, Abdulamir AS, Jahanshiri F, Abas F, Abu Bakar F, Sekawi Z. Asia is the mine of natural antiviral products for public health. The Open Complementary Medicine Journal. 2009; 7; 1(1).

#### Google Scholar | Full Text

134. Biswas D, Nandy S, Mukherjee A, Pandey DK, Dey A. *Moringa oleifera* Lam. and derived phytochemicals as promising antiviral agents: A review. South African Journal of Botany. 2019, ISSN: 0254-6299.

#### Google Scholar | CrossRef | Full Text |

135. Raza A, Muhammad F, Bashir S, Anwar MI, Awais MM, Akhtar M, Aslam B, Khaliq T, Naseer MU. Antiviral and immune boosting activities of different medicinal plants against Newcastle disease virus in poultry. World's Poultry Science Journal. 2015 Sep; 71(3):523-32.

#### Google Scholar | CrossRef | Full Text

136. Al-Hadid KJ. Evaluation of antiviral activity of different medicinal plants against Newcastle disease virus. Am J Agric Biol Sci. 2016; 11(4):157-63.

#### Full Text

137. Waiyaput W, Payungporn S, Issara-Amphorn J, Nattanan T, Panjaworayan T. Inhibitory effects of crude extracts from some edible Thai plants against replication of hepatitis B virus and human liver cancer cells. BMC complementary and alternative medicine. 2012; 1; 12(1):246.

#### Google Scholar | PMC | CrossRef | Full Text

138. Ashraf M, Alam SS, Fatima M, Altaf I., Khan F, & Afzal A. Comparative anti-influenza potential of *Moringa oleifera* leaves and amantadine in-vitro. Pakistan Postgraduate Medical Journal, 2017; 28(4): 127-131.

#### Google Scholar | Full Text

139. Younus I, Siddiq A, Ishaq H, Anwer L, Badar S, Ashraf M. Evaluation of antiviral activity of plant extracts against foot and mouth disease virus in vitro. Pak. J. Pharm. Sci. 2016; 29(4):1263-8.

#### Google Scholar | Full Text

140. Choi HJ, Kim JH, Lee CH, Ahn YJ, Song JH, Baek SH, Kwon DH. Antiviral activity of quercetin 7-rhamnoside against porcine epidemic diarrhea virus. Antiviral Research. 2009; 81(1):77-81.

#### Google Scholar | PMC | CrossRef | Full Text

141. Joshi S and Gyawali A. Phytochemical and biological studies on *Zanthoxylum armatum* of Nepal. J. Nepal Chem. Soc. 2012; 30, 71–77.

Google Scholar CrossRef Full Text

142. Bharti S. and Bhushan B. Phytochemical and pharmacological activities of *Zanthoxylum armatum* DC: an overview. Res. J. Pharm., Biol. Chem. Sci. 2015; 6 (5), 1403–1409.

#### Google Scholar

143. Singh OJ, Raleng I, Premchand M, and Debashree N. A review on the pharmacological profiles of *Zanthoxylum armatum* DC (Rutaceae). J. Evol. Res. Med. Pharmacol. 2016; 2 (1), 10–12.

#### **Google Scholar**

144. Goel AK, Kulshreshtha DK, Dubey MP and Rajendran SM, 2002. Screening of Indian plants for biological activity: part XVI. Indian J. Exp. Biol. 40, 812–827.

#### **Google Scholar**

145. Phuyal N, Jha PK, Prasad Raturi P, Rajbhandary S. Essential oil composition of Zanthoxylum armatum leaves as a function of growing conditions, J Ethnopharmacol. 2019, 30; 229:326-341.

#### Google Scholar | CrossRef | Full Text

146. Sharma S, Rasal VP, Joshi RK and Patil PA. *In-vivo* Evaluation of Antiasthmatic Activity of the Essential Oil of *Zanthoxylum armatum*. Indian J Pharm Sci 2018; 80(2):383-390.

#### Google Scholar | Full Text

147. Aneja K, Joshi R, Sharma C. Antimicrobial activity of dalchini (*Cinnamomum zeylanicum* bark) extracts on some dental caries pathogens. Journal of Pharmacy Research. 2009; 2(9):1387–1390.

#### Google Scholar | Full Text

148. Senanayake UM, Lee TH, Wills RBH. Volatile constituents of cinnamon (*Cinnamomum zeylanicum*) oils. Journal of Agricultural and Food Chemistry. 1978; 26(4):822–824.

#### Google Scholar | CrossRef | Full Text

149. Singh G, Maurya S, deLampasona MP, Catalan CAN. A comparison of chemical, antioxidant and antimicrobial studies of cinnamon leaf and bark volatile oils, oleoresins and their constituents. Food and Chemical Toxicology. 2007; 45(9):1650–1661.

#### Google Scholar | CrossRef | Full Text

150. Tung YT, Chua MT, Wang SY, Chang ST. Antiinflammation activities of essential oil and its constituents from indigenous cinnamon (*Cinnamomum osmophloeum*) twigs. Bioresource Technology. 2008; 99(9):3908–3913.

#### Google Scholar | CrossRef | Full Text

151. Hayashi K, Imanishi N, Kashiwayama Y, et al. Inhibitory effect of cinnamaldehyde, derived from *Cinnamomi cortex*, on the growth of influenza A/PR/8 virus in vitro and in vivo. Antiviral Res. 2007; 74(1):1–8.

#### Google Scholar | CrossRef | Full Text

152. Fatima M, Zaidi NU, Amraiz D, Afzal F. In Vitro Antiviral Activity of *Cinnamomum cassia* and Its Nanoparticles Against H7N3 Influenza A Virus, J Microbiol Biotechnol. 2016; 26(1):151-9.

# Google Scholar | CrossRef | Full Text

153. Brochot A, Guilbot A, Haddioui L, Roques C. Antibacterial, antifungal, and antiviral effects of three

essential oil blends. Microbiologyopen. 2017;6(4):e00459. doi:10.1002/mbo3.459.

#### Google Scholar | PMC | CrossRef | Full Text

154. Gonçalves JLS, Lopes RC, Oliveira DB, Costa SS, Miranda MMFS, Romanos MTV, Santos NSO, Wigg MD, In vitro anti-rotavirus activity of some medicinal plants used in Brazil against diarrhea. J Ethnopharmacol, 2005, 99:403–407.

#### Google Scholar | CrossRef | Full Text

155. Patel SS, Goyal RK. *Emblica officinalis* Geart: A comprehensive review on phytochemistry, pharmacology and ethnomedicinal uses. Res J Med Plant. 2012; 6:6-16. <u>Google Scholar | Full Text</u>

156. Dhale DA, Mogle UP. Phytochemical screening and antibacterial activity of *Phyllanthus emblica* (L.). Science Research Reporter. 2011;1(3):138-42.

#### Google Scholar | Full Text

157. Vasant BS, Bhaskarrao DA, Bhanudas SR. *Emblica officinalis*-the wonder of ayurvedic medicine. World Journal of Pharmaceutical Sciences. 2013 Oct 22; 3(1):285-306.

### Google Scholar | Full Text

158. Habib-ur-Rehman, Yasin KA, Choudhary MA, Khaliq N, Atta-Ur-Rahman, Choudhary MI, Malik S. Studies on the chemical constituents of *Phyllanthus emblica*. Natural Product Research. 2007; 21(9):775-81.

#### Google Scholar | CrossRef | Full Text

159. Hasan MR, Islam MN, Islam MR. Phytochemistry, pharmacological activities and traditional uses of *Emblica officinalis*: A review. International Current Pharmaceutical Journal. 2016;5(2):14-21.

#### Google Scholar | Full Text

160. Luo W, Zhao M, Yang B, Ren J, Shen G, Rao G. Antioxidant and antiproliferative capacities of phenolics purified from *Phyllanthus emblica* L. fruit. Food Chemistry. 2011; 126(1):277-82.

#### Google Scholar | CrossRef | Full Text

161.Yadav SS, Singh MK, Singh PK, Kumar V. Traditional knowledge to clinical trials: a review on therapeutic actions of *Emblica officinalis*. Biomedicine & Pharmacotherapy. 2017; 93:1292-302.

#### Google Scholar | CrossRef | Full Text

162. Xiang YF, Ju HQ, Li S, Zhang YJ, Yang CR, Wang YF. Effects of 1, 2, 4, 6-tetra-O-galloyl- $\beta$ -D-glucose from *P. emblica* on HBsAg and HBeAg secretion in HepG2. 2.15 cell culture. Virologica Sinica. 2010; 25(5):375-80.

#### Google Scholar | Full Text

163. Xiang Y, Pei Y, Qu C, Lai Z, Ren Z, Yang K, Xiong S, Zhang Y, Yang C, Wang D, Liu Q. In vitro Anti-Herpes Simplex Virus Activity of 1, 2, 4, 6-Tetra-O-galloyl-β-d-glucose from *Phyllanthus emblica* L.(Euphorbiaceae). Phytotherapy Research. 2011; 25(7):975-82.

#### Google Scholar | CrossRef | Full Text

164. Wang YF, Wang XY, Ren Z, Qian CW, Li YC, Kaio K, Wang QD, Zhang Y, Zheng LY, Jiang JH, Yang CR. Phyllaemblicin B inhibits Coxsackie virus B3 induced apoptosis and myocarditis. Antiviral research. 2009; 84(2):150-158. <u>Google Scholar</u> <u>CrossRef</u> <u>Full Text</u> 165. Mishra KP, Sharma N, Diwaker D, Ganju L, Singh SB. Plant derived antivirals: a potential source of drug development. J. Virol. Antivir. Res. 2013; 2:2-9.

# Google Scholar | Full Text

166. Estari M, Venkanna L, Sripriya D, Lalitha R. Human Immunodeficiency Virus (HIV-1) reverse transcriptase inhibitory activity of *Phyllanthus emblica* plant extract. Biology and Medicine. 2012;4(4):178-182.

#### Google Scholar | Full Text

167. Liu Q, Wang YF, Chen RJ, Zhang MY, Wang YF, Yang CR, Zhang YJ. Anti-coxsackie virus B3 norsesquiterpenoids from the roots of *Phyllanthus emblica*. Journal of natural products. 2009; 72(5):969-972.

#### Google Scholar | CrossRef | Full Text

168. Mahata S, Pandey A, Shukla S, Tyagi A, Husain SA, Das BC, Bharti AC. Anticancer activity of *Phyllanthus emblica* Linn.(Indian gooseberry): inhibition of transcription factor AP-1 and HPV gene expression in cervical cancer cells. Nutrition and cancer. 2013; 65(sup1):88-97.

#### **Google Scholar**

169. Cheng PW, Ng LT, Chiang LC, Lin CC. Antiviral effects of saikosaponins on human coronavirus 229E in vitro. Clin Exp Pharmacol Physiol. 2006;33:612–616.

# Google Scholar

170. Rastogi S, Pandey DN, Singh RH, COVID-19 Pandemic: A pragmatic plan for Ayurveda Intervention. J Ayurveda Integr Med. 10.1016/j.jaim.2020.04.002, 2020 <u>Google</u> <u>Scholar</u> <u>PMC</u> <u>CrossRef</u> <u>Full Text</u>

171. Ren J-I, Zhang A.-H., Wang X.-J. Traditional Chinese medicine for covid-19 treatment. Pharmacol Res. 2020;155:104743.

#### Google Scholar | PMC | CrossRef | Full Text

172. Liu CX. Pay attention to situation of SARS-CoV-2 and TCM advantages in treatment of novel coronavirus infection , 2020, 12(2): 97-103.

#### Google Scholar | CrossRef | Full Text

173. di Mauro Gabriella, Cristina S, Concetta R, Francesco R, Annalisa C. SARS-Cov-2 infection: Response of human immune system and possible implications for the rapid test and treatment. Int Immunopharmacol. 2020;84:106519.

# Google Scholar | PMC | CrossRef | Full Text

174. The World Health Organization (WHO), WHO supports scientifically-proven traditional medicine, 04 May 2020. Full Text

175. Agnivesha Maharishi, Charak Samhita Vol.1 with elaborated Vidyotini Hindi Commentary by Pt.KashinathaShastri, Edited by Dr Gangasahaya pandeya, Published by Chaukhamba Sanskrit Sansthan, Varanasi, Edition Reprint: 2006.

Full Text