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SCREENING OF MEDICINAL PLANTS USED FOR PREVENTION AND TREATMENT NEURODEGENERATIVE DISEASES: A REVIEW

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ABSTRACT: Amyotrophic lateral sclerosis (ALS), Parkinson's disease, Alzheimer's disease, and Huntington's disease occur as a result of the neurodegeneration process. No specific treatment was found to reduce or stop neurodegenerative diseases. In conventional medicine, many plants have been used to treat neurodegenerative diseases. Natural products play an important role in the prevention and treatment of various neurodegenerative diseases, as well as neuronal dysfunction. Different studies suggest that natural products, such as polyphenolic and plant-separated alkaloids, may delay neurodegeneration and improve memory and cognitive function. Ethnopharmacological studies have provided data to identify potential new drugs in plant sources. Recently many drugs found in medicines have been isolated from plants or their origin, including anticholinesterase (Anti-ChE) isolated plant alkaloids that have been investigated in terms of their potential in the treatment of Alzheimer's disease (AD). The anti-inflammatory and antioxidant activities of plants and soluble components of plants are used to improve inflammation, anxiety, seizures, and more. Medicinal plants have beneficial properties due to the presence of complex chemical compounds to treat toxins in the nervous system. This review article explored the use of medicinal plants to treat neurodegenerative diseases.

INTRODUCTION: Neurodegeneration is the progressive loss of the neuron structure or functions in the brain. Neurons are the building blocks of the nervous system which include the brain and spinal cord. Neurons normally don't replicate or restore themselves, so when they become injured or die they cannot be replaced by the body. Many neurodegenerative diseases are caused by a genetic mutation, protein misfolding, protein degradation pathway, membrane damage, mitochondrial dysfunction.



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Neurodegenerative diseases including amyotrophic lateral sclerosis (ALS), Parkinson's disease, Alzheimer's disease, and Huntington's disease (HD) occurs as a result of neurodegeneration process ^{1, 2}. Alzheimer's disease (AD) has been hypothesized to be a protein misfolding disease caused by an accumulation of abnormally folded A-beta and tau proteins in the brain characterized by loss of neurons and synapses in involving the basal forebrain cholinergic system, amygdala, hippocampus, and several cortical areas.

Alzheimer's disease is the most common form of dementia. Alzheimer's disease develops differently for every individual. The most common symptoms are difficulty in remembering recent events, known as short-term memory loss. As the disease advances symptoms can include confusion, irritability,

aggression, mood swings trouble with language and long term memory loss progressively bodily functions are lost finally leading to death. Most of the autosomal dominant familial Alzheimer's disease can be attributed to mutations in one of three genes those encoding amyloid precursor protein (APP) presenilins ³. Alzheimer's disease (AD) affects approximately 5.4 million people in the United States, with its prevalence expected to increase dramatically over the next 20 years.

Currently, about 34 million people worldwide have Alzheimer's disease, and lifestyle factors that are modifiable in principles, such as physical inactivity and obesity are associated with a heightened risk for Alzheimer's disease. There is no cure for Alzheimer's disease, and there are no accessible treatments that stop or reverse the succession of the disease ⁴. Accessible treatments offer relatively small symptomatic advantage but remain palliative nature. Donepezil, Calantamine, Tacrine, Rivastigmine, Memantine, Piracetam. etc., are some drugs available for the treatment of Alzheimer's disease. Some medicinal plants also available for it, having neuroprotective activity ⁵. Huntington's disease (HD) is a rare inherited progressive neurodegenerative disorder resulting caused by a single mutation in the gene those codes for the protein Huntington. HD is primarily characterized by selective neuronal loss, primarily in the cortex and striatum, cognitive abnormality, psychiatric deterioration, and loss of medium spiny neurons. Nrf2 is the redox-sensitive transcription factor necessary for the synthesis of glutathione a natural antioxidant that play an imperative role in HD. BDNF also plays a significant role in the survival and activity of the neurons that die in Huntington"s disease ⁶.

The incidence of HD is much higher in European populations than in East Asia. Presently, the Maracaibo region of Venezuela has the uppermost reported worldwide prevalence at 700 cases per 100,000 people. There is no cure for Huntington's disease but different symptomatic drugs are available for it. Hence enormous progress has been made in laboratories throughout the world. There are diverse drugs that may become treatments that can relieve some symptoms and, in some, improve the quality of life in Huntington's disease. Novel advancement also takes place as the use of

genetically altered stem cells. Different models are available for Huntington"s disease like excitotoxic models, genetic models, metabolic models ^{7,8}.

Parkinson's disease (PD) is the second most chronic progressive neurodegenerative disorder characterized by the clinical feature are resting tremor, bradykinesia, righty and postural instability caused by early prominent death of dopaminergic neurons in the Substantia nigra pars compacta (SNpc) and widespread occurrence of alphasynuclein (aSyn), an intracellular protein. PD is also related to non-motor symptoms, which may lead to motor symptoms by more than a decade. These non-motor symptoms become difficult symptoms in the later stages of PD 9. The incidence and prevalence of PD increase with advancing age, with a prevalence of 160/100000 in Europe rising to 4% of the population over 80. Currently, the mainstay of PD management is pharmacological therapy; however, these symptomatic therapies have the most important limitations in advanced disease. Numerous disabling features increase later in the course of the disease, including non-motor symptoms, dopamine resistant motor symptoms, and motor complications of long-term dopamine therapy. Although there have been significant advances in the medical and surgical treatment for PD, ultimate disease-modifying therapy is lacking. However, researchers are optimistic that they will be able to identify the potential targets for disease modification 10, 11

Amyotrophic lateral sclerosis (ALS) is an adultonset fatal devastating neurodegenerative disease that results in progressive obliteration of neurons of the spinal cord and motor neurons of the cortical brain leading to fatal paralysis. Patients typically die from respiratory failure within 3 years of symptom onset. The incidence of ALS in Europe is 2–3 cases per 100,000 individuals in the general population, and the generally lifetime risk of developing the disease is 1:400. ALS is familial in 5% of cases and shows a Mendelian pattern of inheritance ¹². ALS is recognized to overlap with front temporal dementia. Multiple cell types and mechanisms likely involved in are which makes the progress of pathogenesis, conventional drug therapies difficult. The cause of ALS is not yet elucidated; however, mutations in genes SOD1. C9orf72. TDP-43, FUS/TLS.

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angiogenin, and others have been associated with ALS. Riluzole remains the only efficient drug and extends the average survival of patients by 3–6 months. Optimal treatment is based on symptom organization and protection of the quality of life,

provided in a multidisciplinary setting. The discovery of further successful disease-modifying therapies remains a critical need for patients with this devastating condition ¹³.

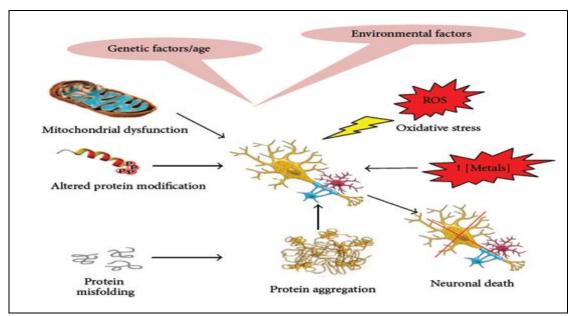


FIG. 1: DIFFERENT FACTOR ASSOCIATED WITH NEURODEGENERATIVE DISEASE

There is no drug to cure neurodegenerative diseases, but in Ayurveda, there are such remedies that slow down the disease. Ayurveda system is one of the world's oldest medical systems. It originates in India more than 3000 years ago and remains one of the country's traditional health care systems. Its concepts about health and disease are to promote the use of herbal compounds, to eliminate the root cause of the disease by restoring balance and also prevent the recurrence of the imbalance ¹⁴. Herbal medicine has existed world with the long recorded history and they were used in ancient Chinese, Greek, Egyptian and Indian medicine for various therapies purposes. The world health organization (WHO) estimated that 80% of the world's population still uses herbal medicines

for their health care. In Ayurveda, single or multiple herbs are used for the treatment. The "Sarangdhar Ayurveda literature dominates the concept of polyherbalism to achieve greater therapeutic efficacy. According Avurveda, neuro-degenerative disease is imbalance of Vata Pitta and Kapha 15. It was found that herbal medicinal drugs have great importance for the treatment of various diseases. It was also found that out of total medicinal drugs, 50% are natural in origin also, according to Ayurveda, there is great importance to natural drugs ¹⁶.In the present review study, it was aimed to highlight the following information of different plants are useful in the treatment of neurodegenerative diseases like AD, PD, HD and ALS.

TABLE 1: LIST OF MEDICINAL PLANT USE IN TREATMENT OF NEURODEGENERATIVE DISEASES

S. no.	Plant Name	Family	Part Used	Use in neurodegenerative diseases	Ref.
2	Acorus Calamus	Acoraceae	Dried Rhizome	AD, PD	19,20
3	Aframomumn melegueta K. Schum	Zingiberaceae	Seed	AD	21
4	Allium sativum	Amaryllidaceae	Rhizome	PD	22
5	Alpinia Officinarum	Zingiberaceae	Rhizome	AD	22
6	Alpinia galangal	Zingiberaceae	Rhizomes	AD	24
7	Angelica sinensis	Umbelliferae	Root	AD, PD	25, 26, 27
8	Artemisia vulgaris	Asteraceae	Leaves	AD	28
9	Bacopa Floribunda wetts.	Scrophuliaceae	Aerial parts	AD	29, 30, 31

10	Bacopa Monnieri	Plantaginaceae	Aerial parts	HD, PD AD	32, 33, 34
11	Bergenia ciliata	Saxifragaceae	Rhizome	AD	35, 36
12	Calendula Officinalis	Asteraceae	flower	HD, AD	37,38
13	Camellia sinensis Kuntze	Theaceae	Leaves	HD, AD, PD	39, 40
14	Carica papaya Linn	Caricaceae	Leaves and root	AD	41
15	Cassia obtusifolia	Fabaceae	Seed	PD, AD	42, 43
16	Cassica occidentalis	Fabaceae	Seed	HD, AD	44, 45
17	Celastrus Paniculatus	Celastraceae	Seed Oil	HD, AD	46, 47
18	Centella Asiatica	Appiaceae	Aerial Parts	AD, HD	48, 49
19	Chaenomeles speciosa	Rosaceae	Fruit juice	PD, AD	50, 51
20	Chrysanthemum morifolium Ramat	Asteraceae	Flower	PD	52
21	Citrus sinensis	Rutaceae	Fruit	PD, AD	53
22	Cocos nucifera Linn	Arecaceae	Fiber	AD	54, 55
23	Coffee Arabica L.	Rubiaceae	Seeds	AD, PD	56, 57, 58
24	Cola acuminata	Sterculiaceae	seeds	AD	59, 60
25	Convolvulus pluricaulis	Convolvulaceae	Root	AD, HD	61, 62
26	Crataegus pinnatifida	Rosaceae	Fruits	AD, PD	63, 64
27	Crocus Sativus	Iridaceae	Dried stigma and	AD, PD	65, 66
			Part of the style		
28	Curcuma longa	Zingiberaceae	Rhizome	AD, PD	67, 68, 69
29	Dalbergia Sissoo	Fabaceae	Leaves	HD, AD	70, 71
30	Detarium Microcarpum Guill	Caesalpiniaceae	Fruits	AD	72, 73
31	Elaeis guineensis Jacq.	<u>Arecaceae</u>	Fruits	AD	74
32	Elettaria cardamomum	Zingiberaceae	Dried seeds, Oil	AD	75
33	Evolvulus Alsinoideslin	Convolvulaceae	Whole plant	AD	76, 77
34	Ficus capensis Thunb	Moraceae	Leaves	AD	78,79
35	Ficus religiosa Linn	Moraceae	Leaves	HD, PD, AD	80, 81, 82
36	Galanthus nivalis	Amaryllidaceae	Crude drug	AD	83
37	Garcinia kola Heckel	Clusiaceae	Seed	HD, AD, PD	84, 85, 86
38	Gastrodia elata blume	Orchidaceae	Root	AD, PD	87, 88
39	Ginkgo Biloba	Ginkgoaceae	Leaves	AD, PD	89, 90
40	Huperzia serrata	Lycopodiaceae	moss	AD, PD	91, 92
41	Hypericum perforatum	Clusiaceae	Root	AD, PD	93, 94
42	Ilex paraguariensis	Aquifoliaceae	Leaves	AD, PD	95, 96, 97
43	Indigo naturalis	Apiaceae	Plant based	AD	98
			powder		99, 100
44	Lavandula angustifolia	Lamiaceae	Aerial part, Oil	PD, AD	99, 100 101
45	Lawsonia inermis Linn.	Lythraceae	Leaves	AD	102, 103
46	Lipidium Meyenii Walp.	Brassicaceae	Dried	AD, PD	102, 103
			Hypocotyls		104 105
47	Luehea Divaricata Mart.	Malvaceae	Leaves	HD, AD	104, 105 106, 107
48	Lycium Barbarum	Solanaceae	Berries	AD, PD	108, 109
49	Lycopersicon esculentum	Solanaceae	fruits	PD, AD	110
50	Lycoris chejuensis	Amaryllidacea	Whole plant	AD	111
51	Lycoris longituba Linn.	Amaryllidaceae	Whole plant	AD	112, 113, 114
52	Magnolia Officinalis Rehd	Magnoliaceae	Bark	AD, PD	115, 116
53	Melissa officinalis	Lamiaceae	Aerial part	PD, AD	117,118,119
54	Monordica Charantia	Cucurbitaceae	Fruits	HD, PD, AD	120,121
55	Morinda Citrifolia	Rubiaceae	Fruits	HD, AD	122,123
. 56	Morus alba	Moraceae	Whole Plant	PD, AD	124, 125
57	Mucuna pruriens	Fabaceae	Seeds	PD, AD	126, 127
58	Musa Sapientum linn.	Musaceae	Stem	AD	128
59	Myristica fragrans	Myristicaceae	Seed kernel	AD	129
60	Narcissus confuses	Amaryllidacea	Crude drug	AD	130, 131
61	Nardostachys jatamansi	Valerianaceae	Whole plant	AD, PD	132, 133
62	Nicotiana tabaccum	Solanaceae	Leaves	AD, PD	134, 135, 136
63	Nigella sativa	Ranunculaceae	Seed Oil	PD, AD	137, 138, 139, 140
64	Panax ginseng	Araliaceae	Roots	AD, HD, PD	141, 142
65	Petroselinum crispum	Umbelliferae	Leaves, root,	AD	, . + 72
	DI	T	stem	AD	143
66	Physostigma vennosam Balf	Leguminosae	Beans Emits and seeds	AD	144
67	Picralima nitida Staff	Apocynaceae	Fruits and seeds	AD	145
68	Piper betel Linn	Piperaceae	Leaf	AD,	146, 147, 148
69	Piper methysticum frost	Piperaceae	Whole plant	AD, PD	

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Note: - AD - Alzheimer's disease, PD - Parkinson's disease, HD- Huntington"s disease

Orchidaceae

Fabaceae

Apocynaceae

Vitaceae

Vitaceae

Solanaceae

Zingiberaceae

Seed

Seed

Aerial part

Fruit

Seed

Roots

Rhizomes

CONCLUSION: Neurodegenerative diseases appear to share several common multifactorial degenerative processes that contribute to neuronal death, leading to functional impairments in the fields of AD, PD, HD, and ALS. No treatment is available to slow or stop neurodegenerative diseases like AD, PD, HD, and ALS. The Food and Drug Administration has approved five drugs that temporarily improve symptoms. The effectiveness of these drugs varies crossways the population. None of the treatments available today alters the underlying path of this terminal disease. Plantderived bioactive compounds, also of directly being developed as drugs. Natural products will continue be enormously significant as sources of

Vanilla planifolia

Vicia faba

Vinca minor

Vitis Vinifera

Vitis vinifera Linn.

Withania Somnifera

Zingibar Officinale Roscoe

106

107

108

109

110

111

112

medicinal agents. Thus natural products have emerged as promising hope in the drug discovery programs in neurodegenerative diseases. In the future, more emphasis should be given to finding neurodegenerative new targets for therapies. **Targets** for new neurodegenerative diseases therapies to be emphasized include preventing building up of amyloid plaques, preventing building up of paired helical segments and preventing brain cell dysfunction and death. In this paper, we reviewed various medicinal plants which show the use of neurodegenerative diseases treatment were collected from the different investigations and were reported above as we can say these medicinal plants are responsible for

AD, PD, HD

PD

AD

AD, PD

AD

HD, PD

AD, HD, PD

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208

209, 210, 211

212

213, 214

215

216, 217,

218, 219, 220,

treating neurodegenerative diseases like AD, PD, HD, and ALS under several investigators studied.

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