

Multidisciplinary, Indexed, Double Blind, Open Access, Peer-Reviewed, Refereed-International Journal.

<u>SJIF Impact Factor = 7.938</u>, January-June 2024, Submitted in March 2024, ISSN -2393-8048

Evaluating the Efficacy of Traditional Medicine through Modern Scientific Approaches: A Critical Review

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Abstract

Traditional medicine systems, including Ayurveda, Traditional Chinese Medicine (TCM), Unani, and various indigenous practices, have been used for centuries to manage a wide range of health conditions. As global interest in natural and holistic healthcare rises, there is an increasing need to scientifically evaluate the efficacy and safety of traditional treatments. This review critically examines how modern scientific approaches—ranging from phytochemical analysis, in vitro and in vivo preclinical studies, to randomized controlled trials (RCTs), omics technologies, and network pharmacology—have been applied to assess traditional medicines. It highlights the significant challenges in this effort, including the complexity of multi-herb formulations, variability in raw materials, lack of standardization, and philosophical differences between traditional and biomedical paradigms. Case studies demonstrate both successes and limitations of current research models. The review also discusses ethical and regulatory issues, emphasizing the need for culturally sensitive, scientifically rigorous, and ethically sound methodologies. Ultimately, this paper argues for integrative frameworks that respect traditional knowledge while leveraging scientific tools to ensure safety, efficacy, and broader acceptance of traditional medicine in modern healthcare systems.

Keywords: Traditional Medicine, Scientific Validation, Herbal Medicine, Phytochemistry, Randomized Controlled Trials.

Introduction

Traditional medicine encompasses a wide range of health practices, knowledge systems, and cultural beliefs developed over generations across diverse societies. These systems—such as Ayurveda in India, Traditional Chinese Medicine (TCM), Unani, Siddha, African and Native American medicine, and numerous indigenous healing traditions—are based on holistic approaches to health, emphasizing balance in the body, mind, and environment. Despite being centuries old, traditional medicine remains an integral part of healthcare for millions worldwide, particularly in developing countries where access to modern medical infrastructure is limited. Even in industrialized nations, there has been a resurgence of interest in natural and complementary therapies, contributing to a growing global market for herbal and traditional remedies. The integration of traditional medicine into modern healthcare systems poses a significant challenge, primarily due to differences in theoretical foundations, diagnostic models, and treatment strategies. Unlike conventional medicine, which relies on empirical, reductionist, and often disease-specific approaches, traditional medicine frequently utilizes complex, individualized treatments based on holistic diagnostics and herbal formulations containing multiple bioactive compounds. While anecdotal and empirical evidence supports many traditional practices, rigorous scientific evaluation is essential to verify their efficacy, ensure safety, and gain broader acceptance among healthcare professionals and regulatory authorities.

Modern scientific methods, including phytochemical analysis, preclinical pharmacology, randomized controlled trials (RCTs), and emerging technologies such as omics and network pharmacology, offer powerful tools for assessing traditional therapies. These approaches can help identify active constituents, elucidate mechanisms of action, validate therapeutic claims, and detect potential toxicities or drug interactions. Nonetheless, the application of such methods to traditional medicine is fraught with challenges. Standardizing multi-herb formulations, aligning traditional diagnostic categories with biomedical disease models, and designing ethically sound and culturally sensitive clinical trials are complex but necessary tasks. This review aims to critically examine how modern scientific approaches have been employed to evaluate traditional medicine. It explores the strengths and limitations of various





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methodologies, highlights case studies that exemplify best practices and pitfalls, and proposes a framework for advancing evidence-based integration of traditional therapies into contemporary healthcare. By bridging traditional knowledge with modern science, it is possible to create a more inclusive, effective, and sustainable global health system.

Literature Review

Teschke and Eickhoff (2015) provide a comprehensive analysis of herbal hepatotoxicity, emphasizing the challenges in causality assessment due to confounding factors such as product quality, documentation, and diagnostic methods. They highlight that numerous herbs and supplements have been implicated in liver injury, but many reports lack rigorous evaluation, leading to potential overdiagnosis. The authors advocate for standardized quality control measures and the use of validated causality assessment tools, like the CIOMS scale, to improve the reliability of hepatotoxicity evaluations. They also propose collaborative efforts among manufacturers, healthcare providers, and regulatory agencies to enhance the safety and efficacy of herbal products.

Sahu, Saxena, and Saxena (2013) provide a comprehensive overview of the evolving role of herbal medicine in contemporary healthcare. They discuss the resurgence of interest in herbal therapies, driven by factors such as the increasing prevalence of chronic diseases, the limitations of synthetic pharmaceuticals, and a growing preference for natural remedies. The authors emphasize the importance of scientific validation of herbal products, highlighting the need for rigorous pharmacological studies to establish efficacy and safety profiles. Furthermore, they address the challenges associated with standardization, quality control, and regulatory frameworks in the herbal medicine industry. The review concludes by advocating for an integrative approach that combines traditional knowledge with modern scientific research to harness the full potential of herbal medicine in future therapeutic applications.

Newman and Cragg (2020) provide a comprehensive review of the role of natural products in drug discovery over nearly four decades. Their analysis spans from January 1981 to September 2019, encompassing all approved therapeutic agents for various diseases worldwide, and from approximately 1946 to September 2019 for all approved antitumor drugs. The authors categorize drugs into primary divisions such as "natural products" and "synthetic compounds," and introduce secondary subdivisions like "natural product mimics" and "natural product botanicals" to further classify drug entities. The review underscores the significant contribution of natural products to the development of new drugs, highlighting their continued relevance in modern pharmacology.

Safety Assessment of Herbal Medicines

The perception that herbal medicines are inherently safe because they are "natural" is widespread but often misleading. While traditional use offers some indication of safety, it does not replace the need for systematic scientific evaluation. Herbal preparations can cause adverse effects due to inherent toxicity, contamination (e.g., heavy metals, pesticides, or microbes), adulteration with pharmaceuticals, or improper identification and use of plant materials.

Safety assessment of herbal medicines involves several levels of evaluation. Preclinical toxicological studies—such as acute, sub-chronic, and chronic toxicity tests in animal models—are fundamental to understanding dose-dependent effects and identifying potential organ-specific toxicities. Additionally, genotoxicity, mutagenicity, reproductive toxicity, and carcinogenicity studies provide deeper insights into long-term safety risks.

Chemical analysis using techniques like high-performance liquid chromatography (HPLC), gas chromatography-mass spectrometry (GC-MS), and inductively coupled plasma mass spectrometry (ICP-MS) is essential for detecting harmful contaminants and ensuring consistency in herbal formulations. These tools also help in identifying and quantifying active compounds that may contribute to both therapeutic effects and adverse reactions.

In human studies, safety is assessed through well-designed clinical trials, pharmacovigilance systems, and post-marketing surveillance. Adverse event reporting systems, often lacking or underdeveloped in many countries where traditional medicine is widely used, must be





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strengthened to capture real-world safety data. Special attention is needed for herb-drug interactions, particularly in populations using both conventional medications and herbal supplements simultaneously.

Overall, ensuring the safety of herbal medicines requires a multi-layered approach that combines traditional knowledge with rigorous scientific scrutiny, regulatory oversight, and public education. This is critical not only to protect patient health but also to support the responsible integration of herbal medicines into modern healthcare systems.



Figure 1: The Major Types of Herbal Preparations

Safety and Potential Toxicity of Herbal Remedies

Herbal remedies, though widely regarded as natural and therefore safe, can pose significant health risks if not properly assessed and regulated. The assumption that long-standing traditional use equates to safety is not always valid, especially when these remedies are used outside their original cultural and clinical contexts, or in combination with modern pharmaceuticals. Several factors contribute to the potential toxicity of herbal medicines, ranging from intrinsic properties of the herbs themselves to external factors such as contamination, adulteration, and improper usage.

Intrinsic toxicity refers to the harmful effects that may result from the natural constituents of certain plants. For example, herbs like *Aristolochia fangchi* have been associated with nephrotoxicity and even carcinogenicity due to the presence of aristolochic acids. Others, like *Pyrrolizidine alkaloid*-containing plants, have been linked to liver toxicity. In many cases, the therapeutic and toxic doses of certain herbs lie close together, making dosage precision critical. **Contamination** is another major concern. Herbal products may be contaminated with heavy metals (such as lead, mercury, or arsenic), pesticides, microbial agents, or environmental toxins during cultivation, processing, or storage. Such contamination can lead to serious health consequences, particularly with prolonged or high-dose exposure.

Adulteration—the deliberate or accidental addition of undeclared pharmaceutical drugs or other herbs—has also been reported in many commercial herbal products. These adulterants may enhance perceived efficacy but can pose significant health risks, especially if patients are unaware and concurrently using other medications. For example, herbal weight-loss products have been found to contain undeclared stimulants, and some male enhancement supplements are adulterated with synthetic phosphodiesterase inhibitors.

Another concern **is** herb-drug interactions, which can alter the pharmacokinetics or pharmacodynamics of conventional drugs. Notable examples include *St. John's Wort* (*Hypericum perforatum*), which induces cytochrome P450 enzymes and can reduce the efficacy of oral contraceptives, anticoagulants, and antiretrovirals. Similarly, *Ginkgo biloba* may increase bleeding risk when used with anticoagulants like warfarin.

Lack of standardization in herbal medicine formulations also contributes to safety issues. Variability in plant species, part used, harvesting time, preparation methods, and dosage forms can lead to unpredictable outcomes in both efficacy and safety. Without consistent quality control measures, it is difficult to ensure uniformity across different batches of herbal products. To address these concerns, safety assessment of herbal remedies must include:





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- Preclinical toxicity studies (acute, sub-chronic, chronic) in animal models,
- In vitro assays for genotoxicity and cytotoxicity,
- Chemical and microbiological testing for contaminants and active ingredients, and
- Clinical trials that monitor adverse effects and interactions.

Furthermore, pharmacovigilance systems for herbal medicines remain underdeveloped in many regions. Establishing mechanisms for reporting and analyzing adverse events is essential, especially as herbal remedies gain wider usage across diverse populations.

While herbal remedies hold therapeutic promise, their safety profiles must be rigorously evaluated using modern scientific and regulatory frameworks. Public awareness, practitioner education, and stricter quality control are critical to minimizing risk and ensuring that herbal medicines contribute safely to global healthcare.

Anticipating Adverse Effects and Toxicities: Understanding Herbal Medicine Usage

Anticipating adverse effects and toxicities in herbal medicine use requires a comprehensive understanding of how these remedies are used across diverse cultural and clinical contexts. While often perceived as natural and safe, herbal products can cause harmful effects due to intrinsic toxicity, contamination, adulteration, improper dosing, or interactions with conventional drugs. The variability in plant species, preparation methods, and lack of standardization further complicates safety assessment. Individual patient factors such as age, organ function, and concurrent medications also influence the risk of adverse effects. In many cases, herbal remedies are used without professional guidance, increasing the likelihood of misuse or harmful interactions—such as *St. John's Wort* reducing the efficacy of certain medications or *Ginkgo biloba* increasing bleeding risk. Therefore, anticipating toxicity involves integrating traditional knowledge with modern risk assessment tools, including toxicological studies, pharmacovigilance systems, and patient education. Strengthening regulatory oversight, improving product quality control, and encouraging open communication between patients and healthcare providers are essential to ensuring the safe use of herbal medicines.

Regulation and Quality Control

Regulation and quality control of herbal medicines are critical to ensuring their safety, efficacy, and consistency, yet they remain a major challenge due to the diversity of products and the lack of harmonized global standards. Unlike pharmaceutical drugs, many herbal remedies enter the market as dietary supplements or traditional products with minimal oversight, leading to issues such as contamination, adulteration, and inconsistent dosing. Effective regulation should encompass authentication of plant materials, good agricultural and collection practices (GACP), standardized manufacturing processes, quality assurance testing (for contaminants, active ingredients, and stability), and clear labeling. While organizations like the WHO, EMA, and national authorities (such as India's AYUSH or the US FDA for supplements) have developed guidelines, implementation is often weak or inconsistent across countries. Strengthening regulatory frameworks, investing in laboratory infrastructure, and fostering international collaboration are essential to improve the safety and credibility of herbal medicine globally.

Drug-Herb Interactions

Drug-herb interactions are a significant safety concern, particularly as herbal remedies are frequently used alongside conventional pharmaceuticals without proper medical supervision. Such interactions can alter the pharmacokinetics (absorption, metabolism, distribution, excretion) or pharmacodynamics (therapeutic effect, toxicity) of prescription drugs, potentially reducing efficacy or increasing adverse effects. For instance, *St. John's Wort* induces cytochrome P450 enzymes, decreasing plasma concentrations of drugs like oral contraceptives, immunosuppressants, and antidepressants, while *Ginkgo biloba* may increase bleeding risk when combined with anticoagulants. These interactions are often underreported due to limited awareness among patients and healthcare providers, as well as insufficient clinical data. Effective risk management requires active pharmacovigilance, integration of herb usage into





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warnings on product labels.

Efficacy of Herbal Medicines

The efficacy of herbal medicines is a subject of growing scientific interest, as traditional systems often claim therapeutic benefits across a wide range of health conditions. While many herbs have demonstrated promising pharmacological activity in vitro and in animal models, translating these findings into clinically proven human benefits remains challenging. Variability in formulations, lack of standardization, and limited high-quality randomized controlled trials (RCTs) contribute to inconsistent results and difficulty in drawing firm conclusions. Nonetheless, certain herbal medicines—such as *Artemisia annua* (source of artemisinin for malaria), *Salix alba* (white willow, precursor to aspirin), and *Curcuma longa* (turmeric, with anti-inflammatory effects)—have gained recognition due to validated efficacy and clear mechanisms of action. For broader acceptance, rigorous clinical research using standardized extracts, validated outcome measures, and transparent methodologies is essential. Combining traditional knowledge with modern scientific evaluation can help unlock the full therapeutic potential of herbal medicine.

Examples of Scientifically Proven Herbal Medicines

- 1. Turmeric (Curcuma longa)
- o **Traditional Use:** Widely used in Ayurveda and Traditional Chinese Medicine for inflammation, arthritis, and digestive issues.
- o **Active Compound:** Curcumin.
- o **Scientific Evidence:** Numerous clinical trials have shown that curcumin has anti-inflammatory, antioxidant, and analgesic effects. It is effective in reducing symptoms of osteoarthritis, particularly knee pain, with efficacy comparable to non-steroidal anti-inflammatory drugs (NSAIDs) but with fewer side effects.
- 2. Garlic (*Allium sativum*)
- o **Traditional Use:** Cardiovascular health, infections, and digestive problems.
- o Active Compound: Allicin.
- Scientific Evidence: Clinical studies show garlic supplements can modestly reduce blood pressure, total cholesterol, and LDL cholesterol. Its antiplatelet and antimicrobial properties are also well documented.
- 3. Ginger (Zingiber officinale)
- Traditional Use: Used in many systems for nausea, colds, arthritis, and gastrointestinal discomfort.
- o **Active Compounds:** Gingerols and shogaols.
- o **Scientific Evidence:** Proven effective in treating nausea and vomiting, especially in pregnancy and chemotherapy-induced nausea. Also shown to reduce menstrual pain and inflammation in arthritis patients.
- 4. St. John's Wort (Hypericum perforatum)
- o **Traditional Use:** Mild to moderate depression, anxiety, and sleep disorders.
- o Active Compounds: Hypericin and hyperforin.
- Scientific Evidence: Meta-analyses of randomized trials support its efficacy in treating mild to moderate depression, comparable to standard antidepressants, though it poses significant drug interaction risks.
- 5. Peppermint (Mentha piperita)
- o **Traditional Use:** Digestive aid, headache relief, and respiratory conditions.
- o **Active Compounds:** Menthol, menthone.
- o **Scientific Evidence:** Enteric-coated peppermint oil capsules are clinically proven to reduce symptoms of irritable bowel syndrome (IBS), including bloating, gas, and abdominal pain.
- 6. Milk Thistle (Silybum marianum)
- o **Traditional Use:** Liver protection and detoxification.
- o **Active Compound:** Silymarin.





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- Scientific Evidence: Studies suggest hepatoprotective effects in conditions like alcoholic liver disease, non-alcoholic fatty liver disease (NAFLD), and drug-induced liver injury, though more high-quality trials are needed.
- 7. Ashwagandha (Withania somnifera)
- o **Traditional Use:** Adaptogen in Ayurveda for stress, fatigue, and strength.
- o Active Compounds: Withanolides.
- o **Scientific Evidence:** Randomized controlled trials have shown its effectiveness in reducing stress and anxiety levels, improving sleep quality, and enhancing strength and stamina.
- 8. Ginkgo (Ginkgo biloba)
- o **Traditional Use:** Memory enhancement, cognitive disorders, and circulatory issues.
- o Active Compounds: Ginkgolides, bilobalide.
- Scientific Evidence: Shown to improve cognitive function and slow progression in mild to moderate dementia and Alzheimer's disease. Also improves blood circulation and reduces symptoms of peripheral artery disease.

Bioactivity of Herbal Medicines

The bioactivity of herbal medicines refers to the pharmacological effects produced by the biologically active compounds within plants, which interact with physiological systems to promote health or treat diseases. These bioactive compounds—such as alkaloids, flavonoids, terpenoids, phenolic acids, glycosides, and saponins—exert a wide range of effects including antioxidant, antimicrobial, immunomodulatory, anti-inflammatory, neuroprotective activities. The therapeutic potential of many herbs arises from the synergistic action of multiple constituents rather than a single compound, making their mechanisms complex. For example, curcumin in turmeric inhibits key inflammatory pathways (like NFκB), while flavonoids in green tea scavenge free radicals, reducing oxidative stress. Similarly, alkaloids in plants like Catharanthus roseus have been the basis for important anticancer drugs such as vincristine. Bioactivity is influenced by factors such as the plant species, part used (root, leaf, bark), extraction method, dosage, and individual patient metabolism. Modern scientific tools—including in vitro assays, animal models, and clinical trials—help elucidate these effects and clarify mechanisms of action. Omics technologies (genomics, proteomics, metabolomics) and network pharmacology are increasingly used to understand the multi-target effects of herbal compounds, reflecting their holistic impact on biological systems. Understanding bioactivity is essential for optimizing herbal medicine use, ensuring safety, improving formulation standardization, and facilitating integration with conventional therapies.

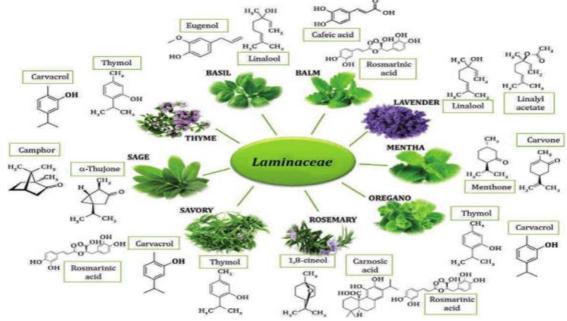


Figure 2: Overview of The Therapeutic Potential of Bioactive Compounds





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The Complex Mechanisms of Bioactive Compounds

Bioactive compounds in herbal medicines exert their effects through complex, multi-layered mechanisms that often involve interactions with multiple molecular targets and biological pathways simultaneously. Unlike conventional single-target drugs, these natural compounds tend to work in a synergistic and holistic manner, affecting various cellular processes that contribute to health and disease modulation. At the core of their bioactivity is the ability to modulate key signaling pathways related to inflammation, oxidative stress, cell survival, apoptosis, immune regulation, and metabolism. For example, many polyphenols and flavonoids act as potent antioxidants by neutralizing reactive oxygen species (ROS) and activating endogenous defense mechanisms such as the Nrf2-antioxidant response element pathway. This reduces cellular damage and inflammation, which are common underlying factors in chronic diseases. In addition, bioactive compounds often regulate inflammatory pathways by inhibiting transcription factors like nuclear factor kappa B (NF-κB) and mitogenactivated protein kinases (MAPKs), thereby suppressing the production of pro-inflammatory cytokines and enzymes. Such modulation helps in controlling chronic inflammation implicated in conditions like arthritis, cardiovascular diseases, and neurodegenerative disorders Some compounds affect cell cycle regulation and apoptosis, which is crucial in anticancer activity. For instance, alkaloids such as vincristine disrupt microtubule formation, leading to cell cycle arrest and programmed cell death in cancer cells. Terpenoids and saponins can also induce apoptosis or modulate immune responses, enhancing the body's ability to fight tumors or infections. The complexity extends to pharmacokinetic factors, where absorption, metabolism (often by gut microbiota), distribution, and elimination influence the bioavailability and ultimate activity of these compounds. The gut microbiome, for example, can transform certain herbal constituents into more bioactive or bioavailable metabolites, further diversifying their effects. Modern research tools like systems biology, network pharmacology, and multi-omics technologies have begun to unravel these complex interactions, revealing how bioactive compounds orchestrate a coordinated modulation of biological networks rather than isolated molecular targets. This complexity not only explains the broad therapeutic potential of herbal medicines but also highlights challenges in standardizing and predicting their effects. The bioactivity of herbal compounds arises from their ability to engage with multiple molecular targets and pathways in a coordinated and synergistic fashion, contributing to their wideranging therapeutic effects and underscoring the importance of integrated scientific approaches to fully understand their mechanisms.

Mechanistic Insight of Bioactive Compounds

Bioactive compounds from herbal medicines exert their therapeutic effects by interacting with diverse molecular targets and modulating critical biological pathways. These compounds often act on multiple cellular mechanisms simultaneously, leading to complex pharmacological outcomes. Key mechanisms include antioxidant activity, where compounds such as flavonoids and phenolic acids neutralize reactive oxygen species (ROS) and upregulate endogenous antioxidant defenses via pathways like Nrf2-ARE. Anti-inflammatory effects are commonly mediated through inhibition of pro-inflammatory transcription factors such as nuclear factorkappa B (NF-κB) and mitogen-activated protein kinases (MAPKs), which reduces cytokine production and inflammatory mediator release. Some bioactive compounds induce apoptosis or regulate the cell cycle, particularly relevant in anticancer effects, by targeting pathways such as p53, caspases, and Bcl-2 family proteins. Additionally, modulation of immune responses, neurotransmission, and metabolic pathways contributes to their diverse therapeutic benefits. The pharmacokinetics of these compounds, including absorption, metabolism (often involving gut microbiota), and bioavailability, significantly influence their mechanistic actions. Emerging research using systems biology and network pharmacology helps unravel these multi-target interactions, offering a holistic view of how bioactive compounds orchestrate complex cellular responses. This mechanistic insight is critical for validating traditional uses, optimizing herbal formulations, and guiding safe integration with conventional therapies.





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Conclusion

The integration of traditional herbal medicines with modern scientific methodologies offers a promising avenue to validate, optimize, and safely incorporate these age-old therapies into contemporary healthcare. Scientific evaluation of bioactive compounds has unveiled complex, multi-target mechanisms underlying their therapeutic effects, highlighting both their potential and challenges. However, ensuring safety through rigorous toxicity assessments, understanding drug-herb interactions, and establishing robust regulation and quality control remain critical to harnessing their full benefits. Continued interdisciplinary research, improved standardization, and effective pharmacovigilance are essential to bridge traditional knowledge with evidence-based practice, ultimately enhancing patient outcomes and expanding the therapeutic repertoire of global medicine.

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