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## Pharmacological intervention of various Indian medicinal plants in combating COVID-19 infection

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#### ABSTRACT

Coronavirus pandemic is progressing rapidly causing an eruption of successive waves around the globe due to its ability to cause recurrent mutations, making the prevention and control measures extremely essential. The success of therapeutic benefits of natural plants and herbs are well-known to humans since ancient times. Medicinal plants play an important role in curing human diseases due to the presence of phytochemicals and bioactive compounds. India is known for its heritage of medicinal plants, and Traditional Indian Medicines (TIM) have shown the potential to treat several diseases. The review highlights the detailed information of various Indian medicinal plants and their potential therapeutic role as an antiviral and immunomodulatory therapeutics. Ministry of AYUSH (Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy) has already issued several health advisory and routinely use of medicinal plants to strengthen the immune system to fight against COVID-19. Various medicinal plants, such as Ocimum sanctum, Withania somnifera, Tinospora cordifolia, Curcuma longa, Zingiber officinalis, Azadirachta indica, Piper nigrum, Nigella sativa, Allium sativum, Glycyrrhiza glabra with their antiviral properties against several viruses including SARS-CoV-2 virus have been discussed in the review, which might be an effective prophylaxis against COVID-19. Special emphasis has been given on the antiviral activities of these plants against SARS-CoV-2, highlighting their efficacy as potential drug candidates. Key words: Antiviral, Coronavirus, Medicinal plants, Phytochemicals, SARS-CoV-2

## BACKGROUND

Over the centuries, plants and herbs are used as an important source of medicines<sup>1</sup>. According to WHO, traditional medicines have always been the major source of treatment in primary healthcare system of communities. Right from the evolution of human civilization, the practice of use of medicinal plants have been documented for the purpose of curing human ailments<sup>2</sup>. The use of medicinal plants take us 5000 years back, providing the primitive evidence of use of traditional medicines in Indian, Chinese, Egyptian, Roman, Greek and Syrian texts<sup>3</sup>. The vast knowledge of the medicinal values of plants today is the result of long evolution through trials and error when everything was based on experimentations due to which man learned the healing properties of medicinal plants in barks, seeds, fruiting bodies and other parts of plant<sup>4</sup>. The use of traditional medicines depend on local availability of natural resources and their indigenous knowledge<sup>5</sup>. About 80% of the health needs of the world's population is facilitated by herbal medicine, and that too in rural areas of developing countries<sup>6</sup>. In majority of the developing countries, herbal medication has sustained its popularity, as modern medications are limited in

those regions<sup>7</sup>. According to the reports of WHO, 80% of the population in Africa depends on traditional medicines for health care.

India has always been a land of plants and possesses a rich history of traditional healing system, especially the use of plants and herbs. India has the rich diversity of medicinal plants and Indian herbs are extensively used for the medicinal properties throughout the world<sup>8</sup>. Forests of India are the major source of therapeutic medicinal plants, contributing to about 90% of the herbs and medicinal plants, with Gujarat, Haryana, Rajasthan, Andhra Pradesh, Uttrakhand and Tamil Nadu being the leading producers of herbal plants in India<sup>8</sup>. The ancient literatures of India, such as Rigveda, Charak Samhita, Atharvaveda and Sushruta Samhita, talk about the practices of medicinal plants to treat diseases<sup>3</sup>. In India, around 17,000-18,000 flowering species are found, among which 6,000-7,000 species are considered to have medicinal values<sup>3</sup>. Apart from the medicinal uses, herbal plants are the source of livelihood to a large section of population of India<sup>9</sup>. Around 70% population of rural India depends on medicinal plants as a source of treatment of various diseases<sup>10</sup>. Indians have been using medicinal plants to cure several diseases, treating the wounds and inflammation.

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Medicinal plants possess several properties and are known to cure some common prevalent diseases, such as malaria, tuberculosis, diarrhoea, asthma and pneumonia<sup>11</sup>. During the outbreak of epidemic diseases, such as malaria, cholera, small pox in the colonial era, traditional plants were continued to be used in India for medicinal purposes<sup>1</sup>. Medicinal plants are used against diseases like diabetes, intestinal disorders, parasitic infections, skin disorders, gastrointestinal disorders, neurological disorders, piles, skeletal diseases, viral infections etc.<sup>12</sup>. Infectious diseases across the world are the major causes of mortality and are increasing alarmingly within the last few years<sup>13</sup>. Viral diseases have become a major health concern throughout the world and the emergence of COVID-19 in late 2019 has resulted in a global pandemic.

The Indian Traditional System of Medicines is one of the ancient medical practice in the world<sup>14</sup>. There are several medicinal plants native to India, which are used as antiviral and immune stimulant<sup>14</sup>. Various plants, such as Tinospora cordifolia, Glycyrrhiza glabra, Azadirachta indica, Andrographis paniculata, Calotropis gigantea, Ocimum sanctum, Curcuma longa, Withania somnifera, Zingiber officinale, Allium sativum, Moringa oleifera etc. are known to possess the antiviral and immunomodulatory properties which boost the immune system<sup>15-17</sup>. The phytochemicals found in plants and the compounds specific to plants, such as flavonoids, saponins, alkaloids, quercetin, catechins and polysulphates play an important role in the inhibition of viral entry of viruses, which further inhibits their replication, causing damage to their nucleocapsid and genetic material<sup>16</sup>. Therefore, with the help of traditional practices of Indian medicinal plants, new treatment methods can be developed to combat the effects of COVID-19.

## A BRIEF OVERVIEW OF CORONAVIRUS

Coronavirus disease 2019 (COVID-19) originated in Wuhan, Hubei Province, China in late December, 2019<sup>18</sup>. It is a positive, single-stranded virus, appearing in a crown shape when seen under an electron microscope, as it has spike glycoprotein on the envelope<sup>19</sup>. Coronavirus comes under the broad realm of Riboviria, having a total of 39 species<sup>20</sup> (**Figure 1**). The virus has the largest genome (26.4-31.7kb) among all the RNA viruses known till date<sup>21</sup>. It has a 5'cap structure and 3'poly A tail with 14 open reading frames (ORFs) which encode 27 proteins<sup>22</sup>. There are four structural proteins of the virion, known as S (Spike), E (Envelope), M (Membrane) and N (Nucleocapsid); the S, E and M proteins together constitute



the viral envelope, while the protein N holds the RNA genome <sup>23</sup>. The viral envelope plays a major role in the assembly and release of virus, promoting viral pathogenesis<sup>24</sup>.

Symptoms of SARS-CoV-2 includes fever, coughing and shortness of breath, but in severe infection, it can lead to pneumonia, multi-organ failure, severe acute respiratory syndrome and even death<sup>25,26</sup>. Clinical reports reveal that the most distinctive comorbidities of SARS-CoV-2 were hypertension and diabetes mellitus<sup>27</sup>. SARS-CoV-2 binds to the host cells through the ACE 2 receptor (Angiotensin converting enzyme 2), which is facilitated by spike glycoprotein, and the process is set with the help of a protease called TM-PRSS2<sup>28,29</sup>. After further endocytosis followed by uncoating, components of SARS-CoV-2 with the aid of host cell machinery produce new viruses. As a result of stimulation of SARS-CoV-2, the host immune system releases cytokines following inflammation through activation of dendritic cells, NK cells, macrophages, and neutrophils, which can result into sepsis, multiple organ failure, septic shock and even death<sup>30</sup>. The expression of ACE 2 is high in heart, kidney, blood vessels, lungs and intestine<sup>31</sup>. Multiplication of viruses induce cellular responses comprising of innate and adaptive immune cells<sup>32,33</sup>. Neutrophils produces injury to lungs and adaptive immune cells, mainly the T cells (Cytotoxic CD8<sup>+</sup> T cells), which not just kill the virus, but also causes injury to lungs <sup>34,35</sup>. This triggers the progression of systemic inflammatory response called cytokine surge, in which there is an extensive increase in the number of cytokines (TNF- $\alpha$ , IL1, IL6, IL10 etc.) which thereby causes inflammation and cell death of Type 1 and Type 2 cells in the alveoli  $^{36}$ . This causes the interruption in transportation of oxygen, resulting in apoptosis in alveoli of the lungs and hence causes Acute Respiratory Distress or Syndrome (ARDS)<sup>37</sup>. Transmission of SARS-CoV-2 virus occurs from human to human through respiratory droplets during coughing and sneezing<sup>38</sup>.The high affinity of S-protein of SARS-CoV-2 to bind ACE 2 is 10 - 20 fold greater than S protein of SARS-CoV, due to which SARS-CoV-2 spreads rapidly<sup>31</sup>.

In the race to curb the spread of the novel Coronavirus, several strategies and measures are being implemented from social distancing to drugs and vaccine discoveries. In addition, traditional herbal medicines are also being explored side by side as there is still huge dependence on medicinal plants as complementary medicines<sup>39</sup>. As we know that SARS-CoV-2 affects weak, immune compromised people, herbal medicines can play a potential role in boosting the immune system and possess antiviral properties which can curb the effects of COVID-19, lowering down the death rates worldwide<sup>40</sup>.

# STATUS OF MEDICINAL PLANTS OF INDIA

Humans depend on nature and its source for survival and sustenance. Plants have been one of the important sources of medicines, and in India, curative properties of plants take us back to the age of the Rigveda (2500 to 1600 B.C.)<sup>1</sup>. Traditional herbal medicines hold a long history in treating various infectious diseases due to the presence of anti-bacterial, anti-viral, anti-inflammatory and immunomodulatory properties, which make them effective against a wide array of diseases  $^{39,41,42}$ . India has a rich traditional healing system, and Hortus Malabaricus, the oldest printed book on Indian Medicinal Plants, enlists the use of the medicinal plants. The most ancient written evidence of usage of medicinal plants for the preparation of medicine has been found from Nagpur on Sumerian clay slab, which dates back to 5000 years ago<sup>4</sup>. In India, there are more than 1.5 million practitioners who use traditional medicine system for healthcare, and more than 1500 herbal formulations are sold as dietary supplements <sup>10,43</sup>. 1000 species of medicinal plants are reported in India, among which 540 species are herbs, 100 are shrubs, 160 climbers, 200 species are trees, orchids are 15 species and ferns and conifers are 2044. 70% of Indian medicinal plants are found in tropical forests of Eastern and Western Ghats, Himalayas, Aravali Vindhya range and Chota Nagpur Plateau<sup>45</sup>.

Despite the progress of modern medical and pharmaceutical research, the use of medicinal plants are still significant and common, and the Indian Traditional



(Phytochemicals).

System of Medicines (Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy (AYUSH)) uses herbs and plants for treatment of various diseases<sup>1</sup> (**Table 1**). Studies reveal that plant derived compounds (Phytoconstituents), extracts of parts of plant such as roots, stems, barks, flowers, fruits and seeds, help in treating common to rare infections<sup>15</sup> (**Figure 2**).

National Medicinal Plant Board (NMPB), established in India in November 2000 by Government of India, acts as a primary board for coordinating all matters related to medicinal plants, their growth, export, conservation and cultivation. This board is located in Department of AYUSH of Ministry of Health and Family Welfare, Government of India<sup>3</sup>.

## Biomedical Research and Therapy, 8(7):4461-4475

Cable 1: List of some common medicinal plants found in India								
Local Name	English Name	Botanical Name	Parts used	Applications				
Tulsi	Holy basil	Ocimum sanctum	Leaves	antiallergic, antidiabetic				
Methi	Fenugreek	Trigonella foenum	Seeds	constipation, diabetes				
Dalchini	Bark Cinnamon	Cinnamomum zeylanicum		antibacterial, antiseptic				
Amla	Indian gooseberry	Embilica officanalis	Fruit	constipation, antioxidant, fever, diabetes, hyperacidity				
Mulethi	Licorice	Glycrrhiza glabra	Roots	digestive disorders, ulcers, bronchitis				
Руај	Onion	Allium cepa	Bulb	prostate cancer, stomach cancer				
Ghritkumari	Aloe	Aloe barbadensis	Leaves	laxative, wound healing, skin burns, ulcers				
Ashwagandha	Indian ginseng	Withania somnifera	Roots,	restorative tonic, stress,				
			leaves	nerves disorders, aphrodisiac				
Elaichi	Lesser Cardamom	Elettaria cardomomum	Pod and seeds	nausea, vomiting, dry cough				
Babool	Gum	Acacia arabica	Bark, root,	oral care, bleeding gums,				
	arabic tree		gum, leaves, pods, seeds	wounds				
Lehsun	Garlic	Allium sativum	Bulb	ringworm, dysentery, wounds, heart diseases				
Neem	Margosa tree	Azadirachta indica	Root, bark, flower	cough, diabetes, skin diseases, arthritis, bronchitis				
Chirayata	Bitter stick, East Indian Balmony	Andrographis paniculata	Whole plant	fever and jaundice				
Harad	Chebulic Myrobalan	Terminalia chebula	Fruits, roots, bark	digestive disorders, eye and skin diseases				
Doob	Bermuda grass	Cynodon dactylon	Leaves	jaundice, antidiarrheal				
Adrak	Ginger	Zingiber officinale Rosc.	Rhizome	antioxidant and anti-arthritic				
Giloe/Guduchi	Heart-leaved moonseed	Tinospora cordifolia	Stem	fever, urinary diseases, dys- pepsia				
Sadabahar	Madagascar Periwinkle	Catharanthus roseus	Whole plant	leukaemia, hypertension, an- tispasmodic				
Sarpgandha	Indian snake-root	Ranwolfia serpentina	Root	hypertension, insomnia				
Jyotishmati	Staff tree	Celastru spaniculatus	Seeds	gout, neurological disorders, rheumatism				
Laung	Clove	Syzygium aromaticum	Dried flower buds, leaves, and stems	analgesic, antioxidant, antitumor, antiviral, antifungal, anti- inflammatory and antibacterial activity				
Haldi	Turmeric	Curcuma longa	Rhizome	anti-inflammatory, hematuria, hemorrhage, flatulence, jaundice, menstrual difficulties				

Continued on next page

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Table 1 continued							
Local Name	English Name	Botanical Name	Parts used	Applications			
Guggul	Indian bdelliumtree	Commiphora wightii	Bark	urinary infections, ascites, piles, arthritis, swellings ulcers and in skin diseases			
Bhringaraj	False daisy	Eclipta prostrata L.	Whole plant	hepatotoxicity			
Paan	Betel	Piper betle	Leaf	anti-inflammatory, anti-apoptotic, anti-oxidant, anticancer and antibacterial activity			
Peepal	Sacred fig	Ficus religiosa	Bark, leaves, fruit, seeds, latex	constipation, gynecological diseases and skin diseases			
Datura	Thorn apples	Dhatura stramonium	Leaves and fruits	asthma, cardiac pains			

## Table 2: List of some common medicinal plants of India having antiviral properties

Plants	English name	Family	Effective against	References
(Scientific Name)			virus	
Withania somnifera	Indian ginseng	Solanaceae	HSV-1	46
Hibiscus sabdariffa	Roselle	Malvaceae	Measles	47
Glycyrrhiza glabra	Liquorice	Fabaceae	Japanese encephali- tis, Polio	48,49
Phyllanthus amarus	Indian gooseberry	Euphorbiaceae	Polio	50
Ocimum sanctum	Holy Basil	Lamiaceae	Vaccinia	51
Alpinia officinarium	Lesser galangal	Zingiberaceae	H1N1	52
Zingiber officinale	Ginger	Zingiberaceae	Hepatitis C	53
Chrysanthemum mori- folium	Florist's daisy	Asteraceae	HIV-1	54
Gardenia sp.	Cape jasmine	Rubiaceae	Influenza	55
Cinnamomum cassia	Chinese cassia, Chinese cinnamon	Lauraceae	HIV-1, HIV-2	56
Allium sativum	Garlic	Alliaceae	SARS	57
Vitex trifolia	Indian wild pepper	Lamiaceae	SARS-CoV	58
Avicenna marina	Gray mangrove	Avecennaceae	Fowl pox	59
Punica granatum	Pomegranate	Puniaceae	Influenza	60
Nigella sativa	Black cumin	Ranunculaceae	Newcastle	50
Sorghum bicolor	Great millet	Poaceae	HSV-1	61

## ANTIVIRAL ACTIVITY OF INDIAN MEDICINAL PLANTS

Earth contains around 10<sup>31</sup> viruses, and they are ubiquitous even in the marine environment, as nearly 5000 viral genotypes are present in every 200 L of water<sup>62,63</sup>. Viral diseases are increasing throughout the world and are a matter of great concern<sup>64</sup>. They enter the body and redirect body's metabolism to produce multiple copies of their genome and proteins<sup>65</sup>. Plants contain a variety of bioactive constituents, such as alkaloids, phenolic compounds, saponins, flavonoids, lignans and other bioactive components which make them a suitable treatment option against viral infections<sup>64,66,67</sup>. Studies reveal that compounds, such as andrographolide, glycyrrhizic acid, curcumin as well as extracts of Azadirachta have antiviral activities<sup>68</sup>. Antiviral activities of plants like Allium sativum, Helichrysum aureonitens, Quillaja saponaria, Pterocaulon sphaedatum are well known<sup>65</sup>. Antiviral activities of 38 Indian plants have been reported in 32 papers to be effective against human immunodeficiency virus (HIV)<sup>68</sup>. In another study by Mehrotra et al.<sup>69</sup> neutralizing activity of Phyllanthus amarus has been reported against hepatitis virus. Ahmed and Verma<sup>70</sup> studied the genus Phyllanthus (Euphorbiacae) and worked on plants namely P. amarus, P. niruri, P. fraternus. P. maderaspatensis, P. emblica, P. debelis, P. acidus, P. urinaria, P. sellowianus, P. stipulatus, P. corcovadensis, P. chamaecristoides, P. caroliniensis, P. tenellus, P. orbiculatus, P. acuminatus, P. myrtifolius, P. discoides, P. virgatus and P. mummuariifolius, which showed pharmacological and phytochemical properties of the genus exhibiting diverse biological activities such as antihepatotoxicity, anti-HIV, anti-carcinogenic and anti-inflammatory properties. Indian plants, such as Acacia nilotica (Family-Fabaceae), Avicenna marina (Family-Avecennaceae), Cissus quadrangularis (Family-Vitaceae), Ipomea carnea (Family-Convolvulaceae), Aristolochia bracteolate (Family-Aristolocheaceae), Trigonella foenumgraecum (Family-Fabaceae), Prosposis chilensis (Family-Mimosaceaeare), Trebulus terrestris (Family-Zygophyllaceae) and Maerua oblongifolia (Family-Capparidaceae) are found to possess antiviral properties against pox viruses in-vitro<sup>59</sup> (Table 2).

*Rhizophora mucronata* (Family- Rhizophoraceae) was assessed for its antiviral activities against Human immunodeficiency virus (HIV) *in vitro* cell culture system and the polysaccharide extracted from the bark of *Rhizophora mucronata* was found to be inhibiting the viral cycle as it protected MT-4 cells from HIV induced cytopathogenicity and inhibited expression of HIV antigens<sup>71</sup>. Fiore *et al.*<sup>72</sup> reported antiviral activity of *Glycyrrhiza* spp. (Licorice) against HIV-1, SARS related Coronavirus, hepatitis B virus, vaccinia virus and vesicular stomatitis virus, as it reduces transportation of the virus to the membrane and sialyation of surface antigen of hepatitis B virus inhibits fusion of the viral membrane of HIV-1 with the cell by reducing membrane fluidity. It also induces interferon gamma in T cells and inhibition of phosphorylating enzymes in the infection by vesicular stomatitis virus.

*Azadirachta indica*, commonly known as neem (Family- Meliaceae), native to Indian subcontinent, is another promising plant having active component azadirachtin and other constituents such as nimbidol, sodium nimbinate, gedunin, salannin, quercetin, nimbolinin, nimbin and nimbidin, and holds a long history of use in traditional medicines throughout the world<sup>73</sup>. Extracts of neem have shown antiviral activity on viruses such as vaccinia, Buffalo pox, chikunguniya, herpes, measles *etc*<sup>68</sup>.

Central Drug Research Institute, Lucknow (CDRI) screened top 11 families for their pharmacological activities, and the rank of 11 families on the basis of their antiviral activities were found to be in this order: Euphorbiaceae > Fabaceae > Asteraceae > Fagaceae > Myrtaceae > Rubiaceae > Rosaceae > Caesalpineaceae > Lamiaceae > Lauraceae > Anacardiaceae<sup>68</sup>.

## INDIAN MEDICINAL PLANTS EFFECTIVE AGAINST COVID-19

Medicinal plants are known to have antiviral properties and several health benefits and their bioactive constituents may provide help in designing novel alternative and supplementary treatment for COVID-1974. Due to less cost, easier availability and no side effects, majority of the Indian population rely upon herbal medicines<sup>40</sup>. Several plants of Indian origin have been quoted to possess antiviral activity against SARS-COV-275. Certain medicinal plants have been recommended by India for prevention and prophylaxis of coronavirus, such as Tinospora cordifolia, Zizyphus jujube, Cydonia oblonga, Cordiamyxa and Andrographis paniculata<sup>76</sup>. The medicinal drugs for coronavirus can be derived from turmeric, ginger, tulsi, fenugreek, cloves, cinnamon and fennel seeds<sup>77</sup>. As per the study conducted by Srivastava et al.78, 18 different species of Indian herbal plants were assessed in the pursuit of potent COVID-19 inhibitors through in silico, and the inhibition potentials of the plant were in order as follows: harsingar > aloevera > giloy > turmeric > neem > ashwagandha > redonion > tulsi > cannabis > black pepper, on the basis of lipophilicity, aqueous solubility and binding affinity. Molecular docking study against Mpro and ACE 2 showed that phytochemicals present in plants, such as *Curcuma longa, Ocimum gratissimum, Syzygium aromaticum, Piper longum, Phaseolus vulgaris, Artemisia absinthium and Inula helenium* have better binding energy with Mpro and ACE-2 as studied by Joshi *et al.*<sup>79</sup>.

In another research done by Maurya and Sharma<sup>80</sup>, phytochemicals and bioactive compounds present in tulsi, haldi, giloy, ginger, cloves, lemon, ashwagandha and ginger were assessed using molecular docking approach against SARS-CoV-2. The compounds in herbs were docked with viral capsid spike and protease to study their antiviral activities, and the phytochemicals were found potentially efficient in inhibiting different stages of SARS-CoV-2 infection and its target proteins. As studied by Shree *et al.*<sup>81</sup>, the compounds obtained from *Withania somnifera*, *Tinospora cordifolia* and *Ocimum sanctum* could bind to SARS-CoV-2 Mpro and was found to decrease the viral transcription and replication serving as a potential inhibitors .

#### **Ocimum sanctum**

Family: Labiatae; Lamiaceae

English Name: Holy Basil, Sacred Basil

**Ayurvedic Name:** Tulasi, Surasaa, Bhuutaghni, Sulabhaa, Manjarikaa, Suravalli, Bahumanjari, Devadundubhi, Apet-raakshasi, Shuu-laghni, Graamya, Sulabhaa

Unani: Tulasi

Siddha: Tulasi, Nalla-Tulasi

Habitat: Grown throughout Indian houses, gardens and temples.

In Ayurveda, Tulsi is known as 'Elixir of Life' due to its curative properties and several heath ailments such as bronchitis, asthma, gastric and hepatic disorders, microbial infections, rheumatism *etc.*<sup>40</sup>. *O. sanctum* is used as a nervine tonic and adaptogen, and is known for its stress releasing properties and improving health conditions during cancer<sup>82,83</sup>. Compounds including phenolics, flavonoids, phenylpropanoids, essential oil, fixed oil, terpenoids, coumarins and fatty acid derievatives are found in tulsi. Extracts of methanol and dichloromethane from *O. americanum*, *O. basilicum and O. sanctum* exhibit an anti-HSV activity as reported by Caamal-Herrera *et al.*<sup>84</sup>, Tang

*et al.*<sup>85</sup> and Ghoke *et al.*<sup>86</sup> reported the antiviral activities of *O. sanctum* methanol extract (terpenoids and polyphenols) against DENV1 and H9N2. Tulsi contains Tulsinol (A, B, C, D, E, F, G) and dihydrodieugenol-B which inhibits COVID-19 main protease and papain like protease, and also possess ACE 2 blocking properties with immune-modulatory feature <sup>87,88</sup>. According to the research done by Mohapatra *et al.*<sup>89</sup> the ethanolic extract of aerial parts of Holy Basil contain flavonoids and polyphenolic acids especially luteolin-7-O-glucuronide and chlorogenic acid may bind covalently to the active residue Cys145 of main protease of SARS-CoV-2 and inhibit the viral enzyme irreversibly when screened *in silico*.

#### Withania somnifera

Family: Solanaceae

**English name**: Winter Cherry, Indian ginseng, Poison gooseberry

Ayurvedic name: Ashwagandhaa, Ashwakanda, Gandharva-gandhaa, Varadaa, Balyaa, Turaga, Turagagandhaa, Haya-gandhaa, Turangagandhaa, Vaajigandhaa, Gokarnaa, Vrishaa, Varaahakarni, Varadaa, Balyaa, Vaajikari

Unani: Asgandh

Siddha: Amukkuramkizhangu

Habitat: Throughout the drier and semitropic parts of India

Ashwagandha means "the smell and strength of a horse", referring to its aphrodisiac properties. Roots of W. somnifera is used as an anti-inflammatory medicine for swellings, tumours and as a sedative; root contains alkaloids such as withanine, psuedowithanine, somnine, somniferinine and withaferin A<sup>90</sup>. Withaferin A obtained from Ashwagandha is used to treat common cold, gynaecological disorders and infertility issues<sup>77</sup>. They are known to enhance nitric oxide synthase activity of macrophages and restore immune homeostasis<sup>91</sup>. They can reduce interleukin-1, interleukin-6 and tumour necrosis factor<sup>92-94</sup>. Antioxidant and immune-modulatory effects of Ashwagandha have been studied over the last two decades, and the studies claim it to be effective in boosting immune response and in inhibiting viral replication 95,96. Grover et al.97 studied this plant through molecular docking approach, and reported the potential role of withaferin A against HSV by inhibition of DNA Polymerase enzyme. Balkrishna et al.98 reported that withanone (a compound found in W. somnifera) docked the binding interface of ACE 2-RBD (Receptor Binding Domain) complex, reduced the electrostatic component of binding free energies of ACE2-RBD complex and destabilized the salt bridges at the interface centre, significantly decreasing their occupancies. As Ashwagandha prevents cytokine storms as well as viral infections, it can be a potential candidate for treatment of SARS-CoV-2<sup>91</sup>. Withanolides, a group of bioactive compound found in *W. somnifera*, are potent immunity boosters; Withanolide\_G, Withanolide\_I and Withanolide\_M have the highest binding affinity with PLpro, 3CLpro and spike proteins respectively<sup>99</sup>. It can prove to be effective against SARS-CoV-2 through modulation of host Th-1/Th-2 immunity<sup>87</sup>.

#### **Tinospora cordifolia**

Family: Menispermaceae

English name: Heart leaved moonseed Ayurvedic name: Guduuchikaa, Guluuchi, Amrita, Amritaa, Amritalataa, Amritavall, Chinnaruuhaa, Chinnodbhavaa, Madhuparni, Vatsaadani, Tantrikaa, Kundalini, Guduuchisattva (starch) Unani: Gilo, Gulanchaa. Sat-e-Gilo Siddha: Seenil, Amrida-valli Habitat: Tropical India and the Andamans It is considered as the best rasayana due to its strong flexibility, and the herb is known to play an important role in boosting immune system<sup>77</sup>. T. cordifolia methanol extracts possess anti-bacterial properties against Staphylococcus aureus, Klebsiella pneumoniae, Proteus vulgaris, Salmonella typhi, Shigella flexneri, Salmonella paratyphi, Salmonella typhimurium, Pseudomonas aeruginosa, Enterobacter aerogene, Serratia marcesenses and Escherichia coli<sup>100</sup>. The antiviral properties of *T. cordifolia* against H1N1 and Chikungunya virus have already been documented by researchers<sup>101</sup>. The immunemodulatory property of Tinospora is well documented due to presence of compounds magnoflorine, tinocordiside, syringin, 11hydroxymustakone, N-methyl-2-pyrrolidone, Nformylannonain and cordifolioside<sup>100,102</sup>. It is known as the nectar of life<sup>103</sup>. According to Sagar and Kumar<sup>101</sup>, the binding efficacy of natural components Berberine, Isocolumbin, Magnoflorine and Tinocordiside isolated from T. cordifolia were assessed using in silico tools against four SARS-CoV-2 targets (Receptor binding domain (6M0J), surface glycoprotein (6VSB), RNA dependent RNA polymerase (6M71) and main protease (6Y84)), and all the four compounds showed high binding efficacy against all the four targets, making giloy a potential herb for the management of COVID-19 infection.

#### **Curcuma longa**

#### Family: Zingiberaceae

English name: Turmeric

Ayurvedic name: Priyaka, Haridruma, Kshanda, Gauri, Haridraa Kaanchani, Krimighna, Varavarnini, Yoshitapriyaa, Kshanda, Hattavilaasini, Naktaahvaa, Sharvari

#### Unani: Zard Chob

#### Siddha: Manjal

Habitat: Grown all over India, particularly in West Bengal, Tamil Nadu and Maharashtra

Turmeric is a herbaceous, perennial, rhizomatous plant, and is widely used in Ayurveda, Siddha and traditional Chinese medicines<sup>104</sup>. Curcumin (diferuloylmethane), the natural polyphenolic compound found in C. longa, makes up the major curcuminoid (77%), while curcumin II and curcumin III make up 17% and 3% respectively<sup>105</sup>. Curcumin exhibits therapeutic properties, such as antimicrobial, antiviral and anti-inflammatory activities<sup>91</sup>. The antiviral activity of curcumin is well documented, and evidences suggest that it has inhibitory effects against viruses, such as herpes simplex virus, respiratory syncytial virus, vesicular stomatitis virus, flock house virus and parainfluenza virus type 3<sup>106</sup>. Curcumin relieves congestion and pain, and improves breathing process in patients with sinusitis<sup>107</sup>. Turmeric acts as a natural cleanser of the respiratory tract. Curcumin contains anti-thrombotic properties, which aid in cleansing mucous in the lungs, thereby supporting proper oxygen supply to the entire body<sup>108</sup>.

Das et al.<sup>109</sup> reported that curcumin isolated from turmeric can neutralize the entry of SARS-CoV-2 viral protein. The study used in silico approach, which demonstrated the binding of curcumin to RBD site of viral S protein along with the viral attachment sites of ACE 2 receptor. Curcumin can suppress pulmonary edema and fibrosis-associated pathways associated with COVID-19 infection<sup>110</sup>. It has several molecular mechanisms and inhibitory effects on toll like receptor, inflammatory cytokines, chemokines and bradykinin<sup>111</sup>. Diacetylcurcumin isolated from C. longa have been found more effective on SARS-CoV-2 (Mpro) compared to Nelfinavir<sup>112</sup>. Immunity and protective defence against COVID-19 infections boosted in many hospitalized patients in India due to the uptake of curcumin with vitamin C and Zinc<sup>113</sup>. Therefore, curcumin could be considered as a preventive herb in the inhibition of transmission of COVID-19

#### Zingiber officinalis

Family: Zingiberaceae

English name: Ginger

Ayurvedic name: Aardraka, Aadrikaa, Shrngibera, Shrngavera, Katubhadra

Unani: Zanjabeel-e-Ratab, Al-Zanjabeel

Siddha: Allam, Lokottai, Inji

**Habitat:** Indigenous to Southeast Asia; cultivated mainly in Kerala, West Bengal, Andhra Pradesh, Uttar Pradesh and Maharashtra

Ginger is used as a common traditional medicinal plant having therapeutic properties, such as antibacterial, antioxidant, antiviral, analgesic and antipyretic properties<sup>114</sup>. The phytocompound 6-gingerol obtained from ginger depicts ginger as a promising candidate for drug discovery against COVID-19, as it proved to have the highest binding affinity with multiple targets of SARS-CoV-2, such as viral protease, RNA binding proteins and viral proteases through DFT (Density Functional Theory) study<sup>115</sup>. Ginger is known to strengthen body's defense mechanism by improving the antioxidant property. 6-Shogaol, an important compound obtained from ginger, helps the patient in relieving respiratory issues<sup>77</sup>. Aqueous extract of fresh ginger showed antiviral activity against human respiratory syncytial virus in human respiratory tract cell lines (Hep-2(human laryngeal carcinoma) and A549 (Adeno carcinomic human alveolar)), reducing the plaque count<sup>14</sup>. According to Chang et al.<sup>116</sup>, ginger stimulates IFN- $\beta$  secretion which counteracts viral infection. Reduction in total nasal symptom scores (TNSS) in patients suffering from rhinitis allergy was also reported by taking oral alcoholic ginger extract<sup>117</sup>.

#### Azadirachta indica

Family: Meliaceae

**English name:** Neem tree, Margosa tree **Ayurvedic name:** Arishtaphala, Pichumarda, Pichumandaka, Tiktaka, Sutiktak, Paaribhadra, Nimbaka, Arishta

Unani: Aazaad-Darakht-e-Hindi

Siddha: Vemmu, Veppu, Veppan, Arulundi

Habitat: local to Burma; found all over India

Neem extract compounds have antiviral, anti-inflammatory, anti-hyperglycaemic, anticarcinogenic, anti-mutagenic, anti-ulcer and anti-oxidant effects<sup>118</sup>. The important phytochemicals present in neem are limonoids and terpene<sup>119</sup>. Antiviral activity of aqueous neem leaf extract is well documented against measles, Chikungunya and vaccinia virus<sup>120</sup>. Earlier studies have revealed that neem and its phytoconstituents play an important role in scavenging of free radical generation and prevents the pathogenesis of diseases<sup>73</sup>.

Baildya *et al.*<sup>121</sup> studied the inhibitory potential of neem extracts on PLpro (papain like protease) of SARS-CoV-2 through molecular docking and molecular dynamics simulation, and it was found that desacetylgedunin (DCG) found in neem showed the highest binding affinity towards PLpro. The bioactive compound found in neem, such as Azadiradione, Epiazadiradione, Nimbione, and Vepnin were assessed by Sharon<sup>122</sup> through Autodock 4.2, and Pymol and was found to be potential inhibitor of COVID-19 Mpro (6Y2E, 6LU7, and 2GTB).

#### Nigella sativa

Family: Ranunculaceae

English name: Black Cumin, Small Fennel

**Ayurvedic name:** Kaalaajaaji, Kalikaa, Prthvikaa, Sthulajiraka, Sushavi, Upkunchikaa

Unani: Kalonji, Kamaazaruus

Siddha: Karumseeragm

Habitat: Cultivated in Assam, Punjab, Bengal and Bihar

Prophet Muhammad quoted, 'In the black cumin, there is a cure for every disease except death,' and the Holy Bible denotes black cumin as a 'curative black seed' <sup>123</sup>. The phytoconstituents found in black cumin are terpenes such as dithymoquinone (DTQ), carvone, thymoquinone (TQ), limonine, trans-anethol, and p-cymene, indazole alkaloids like nigellidine and nigellicine, isoquinoline alkaloids like nigellidine and nigellicine, nigellicimine-N-oxide and  $\alpha$ -hederin<sup>124</sup>. It is known for its curative properties, including jaundice, diabetes, cough, bronchitis, fever, gastrointestinal, conjunctivitis, asthma and rheumatism<sup>125</sup>.

Studies have shown that TQ has an inhibitory property on SARS-CoV-2 protease, and has shown good antagonism to ACE 2 receptors<sup>126</sup>. Koshak and Koshak<sup>127</sup> reported that at least eight *in silico* studies have demonstrated that compounds of *N. sativa* have moderate to high affinity with SARS-CoV-2 enzymes and proteins.

#### Piper nigrum

Family: Piperaceae

English name: Black Pepper

**Ayurvedic name:** Maricha, Vellaja, Uushna, Suvrrita **Unani:** Filfil Siyaah, Safed

Siddha: Milagu, Milaguver

Habitat: Locally found in the Indo-Malaysian region, cultivated in Western Ghats, Karnataka, Maharashtra, Assam and Kerala

It is known as the 'King of Spices'. Piperine found in black pepper is widely known for its antitumour, anti-asthmatic, antihypertension and anticarcinogenic properties<sup>128</sup>. The alkaloid constituents present in black pepper gives it the characteristic strong smell<sup>129</sup>. According to Choudhary et al.<sup>130</sup>, peperine isolated from black pepper can be effective against proliferation of viral particles, as it can block RNA packaging inside the capsid protein. Researchers from Department of Physics at IIT, Dhanbad conducted a computational study and found that Piperine found in black pepper can inhibit SARS-CoV-2 virus. The phenolic compunds Kadsurenin L and methysticin found in Piper nigrum was found inhibiting COVID-19 main protease as studied by Davella *et al*. 131.

#### **Allium sativum**

Family: Liliaceae, Alliaceae

English name: Garlic

Ayurvedic name: Lashuna, Yavaneshta, Ugragandha, Rasona, Mahaushadh, Arishta

Unani: Seer, Lahsun

Siddha: Ullippoondu, Vellaippondu

Habitat: Cultivated all over India

The beneficial properties of garlic are known to humans from ages. The chemical constituents of garlic, which are responsible for its peculiar smell and taste, are mainly sulphur-based, such as S-allyl cysteine, alliin, vinyldithiin, ajoene, diallylpolysulfides, and some non-sulphur, such as saponins, maillard reaction products and flavonoids<sup>40</sup>. Garlic acts as an immunomodulatory by stimulating WBC, such as NK cells and macrophages<sup>132</sup>. Garlic induces cytokine secretion and increases CD4<sup>+</sup> and CD8<sup>+</sup> cells<sup>133</sup>. Shojai et al. 134 reported that concentration of 0.1 ml of garlic clove extract showed in vivo inhibitory effects against SARS-CoV-1 multiplication, possibly due to the blocking capacity of extract towards its structural proteins. Alliin found in A. sativum showed the highest binding ability, with the target protein of SARS-CoV- 2 (6LU7) when studied in silico by Pandey et al.<sup>135</sup>. Bioactives found in garlic and the serine-type protease found in SARS-CoV-2 form hydrogen bonds in the active site regions suppressing the outbreak of COVID-19, and it can act as a preventive measure against COVID-19 infection 136.

#### **Glycyrrhiza glabra**

Family: Papilionaceae; Fabaceae English name: Licorice, Liquorice Ayurvedic name: Yashtimadhu, Madhuyashtyaahvaa, Madhuli, Madhuyashtikaa, Atirasaa, Madhurasaa, Madhuka, Yastikaahva, Yashtyaahva, Yashti, Yashtika, Yashtimadhuka

Unani: Asl-us-soos, Mulethi

Siddha: Athimathuram

Habitat: Native to the Mediterranean regions. Now cultivated in Punjab, Jammu and Kashmir, and South India.

Glycyrrhizic acid, found in the roots of *Glycyrrhiza-glabra*, is the active antiviral compound which possesses antiviral activity against HIV, herpes simplex viruses and human and animal coronavirus<sup>137</sup>. Zhong *et al.*<sup>138</sup> documented the viral replication inhibitory property of licorice for various viruses, such as influenza, HIV, H1N1, hepatitis B and C.

Zhang et al.<sup>139</sup> assessed licorice, demonstrating that it contains three orally antiviral natural components which inhibit Mpro, S-proteins, 3C like protease and papain like protease of SARS-CoV-2. Licorice extract inhibits the main protease of SARS-CoV-2, and glycyrrhizin shows a high binding affinity and better ADMET (Absorption, Distribution, Metabolism, Excretion, and Toxicity) properties compared to other constituents of licorice<sup>40</sup>. Luo et al.<sup>140</sup> discussed the pharmacological action of glycyrrhizin, as it binds to ACE-2, inhibits accumulation of intracellular reactive oxygen species (ROS), inhibits hyperproduction of airway exudates and induction of endogenous interferons<sup>141</sup>. van de Sand et al.<sup>142</sup> demonstrated that glycyrrhizin inhibits 3CL protease of SARS-CoV-2. Different concentrations of glycyrrhizin 30  $\mu$ M and 2000  $\mu$ M and the complete protease inhibitor GC376 were dissolved with 90 ng Mpro in 30  $\mu$ L 0.5 M DTT buffer at room temperature for 30 mins, after which the 3CL Protease substrate was added, and the activity of protease was measured after overnight incubation at the wavelength 360 nm/460nm (exc/em). It was found that glycyrrhizin inhibited Mpro activity completely at a concentration of 2000  $\mu$ M, and at 30  $\mu$ M concentration, it reduced its activity to 70.3%.

#### CONCLUSION

India has always been known for its rich biodiversity and extensive varieties of plants, which are found from Himalayas to the marine and desert to the rain forests. The present study revealed the status of medicinal plants and herbs of India and their various therapeutic benefits. Use of herbal medicines is not only safe and cost-effective, but it is also free from side effects. AYUSH system of medication emphasizes on simple natural remedies for the improvement and development of strong immune system. Efforts should be made to explore and promote the knowledge of healing through such medicinal plants. The proper use of medicinal plants against COVID-19 could safeguard lives of several people reducing the risks of infection, thereby minimizing the rate of mortality.

## **ABBREVIATIONS**

3CLpro: 3- Chymotrypsin Like Protease ACE 2: Angiotensin converting enzyme 2 ADMET: Absorption, Distribution, Metabolism, Excretion, and Toxicity ARDS: Acute Respiratory Distress or Syndrome AYUSH: Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy DCG: Desacetylgedunin DFT: Density Functional Theory DTQ: Dithymoquinone NMPB: National Medicinal Plant Board PLpro: Papain Like Protease **RBD**: Receptor Binding Domain **ROS:** Reactive Oxygen Species TIM: Traditional Indian Medicines TMPRSS2: Transmembrane Protease Serine 2 TNSS: Total Nasal Symptom Scores

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All authors equally contributed in this work. All authors read and approved the final manuscript.

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### **COMPETING INTERESTS**

The authors declare that they have no competing interests.

#### REFERENCES

- Mazid M, Khanb TA, Mohammad F. Medicinal Plants of Rural India: A Review of Use by Indian Folks. Indo glob. Journal of Pharmaceutical Sciences. 2012;2(3):286–304.
- Pal SK, Shukla Y. Herbal medicine: current status and the future. Asian Pacific Journal of Cancer Prevention. 2003;4(4):281–8. PMID: 14728584.
- Samal J. Medicinal plants and related developments in India: A peep into 5-year plans of India. Indian J Health Sci Biomed Res. 2016;9(1):14–9. Available from: 10.4103/2349-5006.183698.
- Petrovska BB. Historical review of medicinal plants' usage. Pharmacognosy Reviews. 2012;6(11):1–5. PMID: 22654398. Available from: 10.4103/0973-7847.95849.
- Awas T, Demissew S. Ethnobotanical study of medicinal plants in Kafficho people, southwestern Ethiopia. In Proceedings of the 16th International Conference of Ethiopian Studies. 2009;2009(3):711–726.
- Agisho H, Osie M, Lambore T. Traditional medicinal plants utilization, management and threats in Hadiya Zone, Ethiopia. J Med Plant. 2014;2(2):94–108.
- Tadesse A, Kagnew B, Kebede F, Kebede M. Ethnobotanical study of medicinal plants used to treat human ailment in Guduru District of Oromia Regional State, Ethiopia. Journal of Pharmacognosy and Phytotherapy. 2018;10(3):64–75. Available from: 10.21203/rs.3.rs-19634/v1.
- Gangola S, Khati P, Bhatt P. Parul, Anita S.India as the Heritage of Medicinal Plant and their Use. Current Trends in Biomedical Engineering {&}amp; Biosciences. 2017;4(4):555641. Available from: 10.19080/ctbeb.2017.04. 555641.
- 9. National Medicinal PlantsBoard. Ministry of AYUSH, Government of India.
- Pandey MM, Rastogi S, Rawat AK. Indian traditional ayurvedic system of medicine and nutritional supplementation. Evidence-Based Complementary and Alternative Medicine. 2013;2013:376327. PMID: 23864888. Available from: 10.1155/2013/376327.
- Mintah SO, Asafo-AgyeiT, Archer M, JuniorPA, Boamah D, Kumadoh D, Appiah A, Ocloo A, BoakyeYD, Agyare C.Medicinal Plants for Treatment of Prevalent Diseases, Pharmacognosy - Medicinal Plants. 2019. Available from: 10.5772/intechopen. 82049.
- Mishra D, Singh RK. Ethno-medicinal Plants used to Cure Different Diseases by Rural Folks and Tribes of North Eastern Tarai Districts of Uttar Pradesh, India. Res J Med Plant. 2012;6(4):286–299. Available from: 10.3923/rjmp.2012.286. 299.
- Singh A, Mishra A, Chaudhary R, Kumar V. Role of Herbal Plants in Prevention and Treatment of Parasitic Diseases. J Sci Res. 2020;64(1):50–8. Available from: 10.37398/JSR.2020. 640106.
- Ahmad S, Zahiruddin S, Parveen B, Basist P, Parveen A, Gaurav. Indian Medicinal Plants and Formulations and Their Potential Against COVID-19-Preclinical and Clinical Research. Frontiers in Pharmacology. 2021;11:578970. PMID: 33737875. Available from: 10.3389/fphar.2020.578970.
- Ganjhu RK, Mudgal PP, Maity H, Dowarha D, Devadiga S, Nag S. Herbal plants and plant preparations as remedial approach for viral diseases. Virusdisease. 2015;26(4):225–36. PMID: 26645032. Available from: 10.1007/s13337-015-0276-
- Dhama K, Karthik K, Khandia R, Munjal A, Tiwari R, Rana R, et al. Medicinal and therapeutic potential of herbs and plant metabolites / extracts countering viral pathogens - current knowledge and future prospects. Current Drug Metabolism. 2018;19(3):236–63. PMID: 29380697. Available from: 10. 2174/1389200219666180129145252.
- Tiwari R, Latheef SK, Ahmed I, Iqbal HM, Bule MH, Dhama K, et al. Herbal immunomodulators - A remedial panacea for designing and developing effective drugs and medicines: current scenario and future prospects. Current Drug Metabolism. 2018;19(3):264–301. PMID: 29380694. Available from: 10.2174/1389200219666180129125436.

- Hu B, Guo H, Zhou P, Shi ZL. Characteristics of SARS-CoV-2 and COVID-19. Nature Reviews Microbiology. 2021;19(3):141–54. PMID: 33024307. Available from: 10. 1038/s41579-020-00459-7.
- Cascella M, Rajnik M, Aleem A, Dulebohn SC, Napoli RD. Features, Evaluation, and Treatment of Coronavirus (COVID-19).
   2021 Apr 20. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2021.
- Coronaviridae Study Group of the International Committee on Taxonomy of Viruses (2020).The species Severe acute respiratory syndrome-related coronavirus: classifying 2019nCoV and naming it SARS-CoV-2. Nature Microbiology. 2020;5(4):536–44. PMID: 32123347. Available from: 10.1038/ s41564-020-0695-z.
- Mousavizadeh L, Ghasemi S. Genotype and phenotype of COVID-19: their roles in pathogenesis. Journal of Microbiology, Immunology, and Infection. 2021;54(2):159–63. PMID: 32265180. Available from: 10.1016/j.jmii.2020.03.022.
- Licastro D, Rajasekharan S, Monego SD, Segat L, D'Agaro P, Marcello A. Isolation and Full-Length Genome Characterization of SARS-CoV-2 from COVID-19 Cases in Northern Italy. Journal of Virology. 2020;94(11):e00543–20. PMID: 32238585. Available from: 10.1128/JVI.00543–20.
- Wu F, Zhao S, Yu B, Chen YM, Wang W, Song ZG. A new coronavirus associated with human respiratory disease in China. Nature. 2020;579(7798):265–9. PMID: 32015508. Available from: 10.1038/s41586-020-2008-3.
- Schoeman D, Fielding BC. Coronavirus envelope protein: current knowledge. Virology Journal. 2019;16(1):69. PMID: 31133031. Available from: 10.1186/s12985-019-1182-0.
- CDC: Coronavirus Disease 2019 (COVID-19). In. Edited by Prevention CfDCa. 2020.
- Vincent JL, Taccone FS. Understanding pathways to death in patients with COVID-19. The Lancet Respiratory Medicine. 2020;8(5):430–2. PMID: 32272081. Available from: 10.1016/ S2213-2600(20)30165-X.
- Fang L, Karakiulakis G, Roth M. Are patients with hypertension and diabetes mellitus at increased risk for COVID-19 infection? The Lancet Respiratory Medicine. 2020;8(4):e21.
  PMID: 32171062. Available from: 10.1016/S2213-2600(20) 30116-8.
- Hoffmann M, Kleine-Weber H, Schroeder S, Krüger N, Herrler T, Erichsen S, et al. SARS-CoV-2 Cell Entry Depends on ACE2 and TMPRSS2 and Is Blocked by a Clinically Proven Protease Inhibitor. Cell. 2020;181(2):271–280. PMID: 32142651. Available from: 10.1016/j.cell.2020.02.052.
- South AM, Brady TM, Flynn JT. ACE2 (Angiotensin-Converting Enzyme 2), COVID-19, and ACE Inhibitor and Ang II (Angiotensin II) Receptor Blocker Use During the Pandemic: The Pediatric Perspective. Hypertension. 2020;76(1):16–22. PMID: 32367746. Available from: 10.1161/ HYPERTENSIONAHA.120.15291.
- Kumar M, Khodor SA. Pathophysiology and treatment strategies for COVID-19. Journal of Translational Medicine. 2020;18(1):353. PMID: 32933536. Available from: 10.1186/ s12967-020-02520-8.
- Wan Y, Shang J, Graham R, Baric RS, Li F. Receptor Recognition by the Novel Coronavirus from Wuhan: an Analysis Based on Decade-Long Structural Studies of SARS Coronavirus. Journal of Virology. 2020;94(7):e00127-20. PMID: 31996437. Available from: 10.1128/JVI.00127-20.
- Xu H, Zhong L, Deng J, Peng J, Dan H, Zeng X. High expression of ACE2 receptor of 2019-nCoV on the epithelial cells of oral mucosa. International Journal of Oral Science. 2020;12(1):8. PMID: 32094336. Available from: 10.1038/s41368-020-0074-x.
- Tian X, Li C, Huang A, Xia S, Lu S, Shi Z, et al. Potent binding of 2019 novel coronavirus spike protein by a SARS coronavirusspecific human monoclonal antibody. Emerging Microbes and Infections. 2020;9(1):382–5. PMID: 32065055. Available from: 10.1080/22221751.2020.1729069.

- Small BA, Dressel SA, Lawrence CW, Drake DR, Stoler MH, Enelow RI. CD8(+) T cell-mediated injury in vivo progresses in the absence of effector T cells. The Journal of Experimental Medicine. 2001;194(12):1835–46. PMID: 11748284. Available from: 10.1084/jem.194.12.1835.
- Tomar B, Anders HJ, Desai J, Mulay SR. Neutrophils and Neutrophil Extracellular Traps Drive Necroinflammation in COVID-19. Cells. 2020;9(6):1383. PMID: 32498376. Available from: 10.3390/cells9061383.
- Patel B, Sharma S, Nair N, Majeed J, Goyal RK, Dhobi M. Therapeutic opportunities of edible antiviral plants for COVID-19. Molecular and Cellular Biochemistry. 2021;476(6):2345– 64. PMID: 33587232. Available from: 10.1007/s11010-021-04084-7.
- Channappanavar R, Perlman S. Pathogenic human coronavirus infections: causes and consequences of cytokine storm and immunopathology. Seminars in Immunopathology. 2017;39(5):529–39. PMID: 28466096. Available from: 10.1007/s00281-017-0629-x.
- Stadnytskyi V, Bax CE, Bax A, Anfinrud P. The airborne lifetime of small speech droplets and their potential importance in SARS-CoV-2 transmission. Proceedings of the National Academy of Sciences of the United States of America. 2020;117(22):11875–7. PMID: 32404416. Available from: 10.1073/pnas.2006874117.
- Pandey P, Basnet A, Mali A. Quest for COVID-19 cure: integratintraditional herbal medicines in the modern drug paradigm. ASTA. 2020;1(1):63–71. Available from: 10.3126/ asta.v1i1.30275.
- Srivastava AK, Chaurasia JP, Khan R, Dhand C, Verma S. Role of Medicinal plants of Traditional Use in Recuperating DevastatingCOVID-19 Situation. Med Aromat Plants (Los Angeles). 2020;9(5):359. Available from: 10.35248/2167-0412. 20.9.359.
- Sen S, Chakraborty R. Revival, modernization and integration of Indian traditional herbal medicine in clinical practice: Importance, challenges and future. Journal of Traditional and Complementary Medicine. 2016;7(2):234–44. PMID: 28417092. Available from: 10.1016/j.jtcme.2016.05.006.
- Ren JL, Zhang AH, Wang XJ. Traditional Chinese medicine for COVID-19 treatment. Pharmacological Research. 2020;155:104743. PMID: 32145402. Available from: 10.1016/j.phrs.2020.104743.
- Patwardhan B, Warude D, Pushpangadan P, Bhatt N. Ayurveda and traditional Chinese medicine: a comparative overview. Evidence-Based Complementary and Alternative Medicine. 2005;2(4):465–73. PMID: 16322803. Available from: 10.1093/ecam/neh140.
- Santhan P. A field study on Indian medicinal plants. J Med Plants Stud. 2020;8(4):198–205.
- 45. Dar RA, Shahnawaz M, Qazi PH. Natural product medicines: A literature Update. J phytopharm. 2017;6(6):349–351.
- Kambizia L, Gooseb BM, Taylorc MB, Afolayana AJ. Anti-viral effects of Aloe ferox and Withaniasomnifera on herpes simplex virus type 1 in cell culture. South African Journal of Science. 2007;103:9–10.
- Sunday OA, Munir AB, Akeeb OY, Bolanle AA, Badaru SO. Antiviral effect of Hibiscus sabdariffa and Celosia argentea on measles virus. African Journal of Microbiological Research. 2020;4(4):293–6.
- Badam L. In vitro studies on the effect of glycyrrhizinfrom Indian Glycyrrhizaglabra Linn on some RNA and DNAviruses. The Indian Journal of Pharmacy. 1994;26:194–9.
- Badam L. In vitro antiviral activity of indigenous glycyrrhizin, licorice and glycyrrhizic acid (Sigma) on Japanese encephalitis virus. The Journal of Communicable Diseases. 1997;29(2):91–9. PMID: 9282507.
- Harikumar KB, Kuttan R. Antiviral activity of Phyllanthusamarus and curcumin. AmalaResearch Bulletin. 2006;26:198–205.
- 51. Dhar ML, Dhar MM, Dhawan BN, Mehrotra BN, Ray C. Screening of Indian plants for biological activity: I. Indian Journal

of Experimental Biology. 1968;6(4):232-47. PMID: 5720682.

- Sawamura R, Sun Y, Yasukawa K, Shimizu T, Watanabe W, Kurokawa M. Antiviral activities of diarylheptanoids against influenza virus in vitro. Journal of Natural Medicines. 2010;64(1):117–20. PMID: 20091245. Available from: 10. 1007/s11418-009-0372-2.
- 53. Sookkongwaree K, Geitmann M, Roengsumran S, Petsom A, Danielson UH. Inhibition of viral proteases by Zingiberaceae extracts and flavones isolated from Kaempferia parviflora. Die Pharmazie. 2006;61(8):717–21. PMID: 16964717.
- Lee JS, Kim HJ, Lee YS. A new anti-HIV flavonoid glucuronide from Chrysanthemum morifolium. Planta Medica. 2003;69(9):859–61. PMID: 14598216. Available from: 10.1055/s-2003-43207.
- Wang YZ, Cui XL, Gao YJ, Guo SS, Wang XK, Huang Y, et al. Antivirus effects of extract from gardenia. ZhongguoZhong Yao ZaZhi. 2006;31(14):1176–1178.
- Premanathan M, Rajendran S, Ramanathan T, Kathiresan K, Nakashima H, Yamamoto N. A survey of some Indian medicinal plants for anti-human immunodeficiency virus (HIV) activity. The Indian Journal of Medical Research. 2000;112:73– 7. PMID: 11094851.
- Keyaerts E, Vijgen L, Maes P, Neyts J, Ranst MV. In vitro inhibition of severe acute respiratory syndrome coronavirus by chloroquine. Biochemical and Biophysical Research Communications. 2004;323(1):264–8. PMID: 15351731. Available from: 10.1016/j.bbrc.2004.08.085.
- Liou CJ, Cheng CY, Yeh KW, Wu YH, Huang WC. Protective Effects of Casticin From Vitex trifolia Alleviate Eosinophilic Airway Inflammation and Oxidative Stress in a Murine Asthma Model. Frontiers in Pharmacology. 2018;9:635. PMID: 29962952. Available from: 10.3389/fphar.2018.00635.
- Mohamed IE, Nur EBE, Abdelrahman ME. The antibacterial, antiviral activities and photochemical screening of some Sudanese medicinal plants. EurAsian J Biosci. 2010;4(1):8–16. Available from: 10.5053/ejobios.2010.4.0.2.
- Vidal A, Fallarero A, Peña BR, Medina ME, Gra B, Rivera F. Studies on the toxicity of Punica granatum L. (Punicaceae) whole fruit extracts. Journal of Ethnopharmacology. 2003;89(2-3):295–300. PMID: 14611895. Available from: 10.1016/j.jep. 2003.09.001.
- Filho IC, Cortez DA, Ueda-Nakamura T, Nakamura CV, Filho BPD. Antiviral activity and mode of action of a peptide isolated from Sorghum bicolor. Phytomedicine. 2008;15(3):202–8. PMID: 17890069. Available from: 10.1016/ j.phymed.2007.07.059.
- Breitbart M, Rohwer F. Here a virus, there a virus, everywhere the same virus? Trends in Microbiology. 2005;13(6):278–84.
   PMID: 15936660. Available from: 10.1016/j.tim.2005.04.003.
- 63. Suttle CA. Viruses in the sea. Nature. 2005;437(7057):356–61. PMID: 16163346. Available from: 10.1038/nature04160.
- Pathak K, Baishya K. A Potential of Some Indian Medicinal Herbs As Antiviral Agents. Am J PharmTech Res. 2013;3(5):11–17.
- Sohail MN, Rasul F, Karim A, Kanwal U, Attitalla IH. Plant as a Source of Natural Antiviral Agents. Asian Journal of Animal and Veterinary Advances. 2011;6(12):1125–52. Available from: 10.3923/ajava.2011.1125.1152.
- Jassim SA, Naji MA. Novel antiviral agents: a medicinal plant perspective. Journal of Applied Microbiology. 2003;95(3):412–27. PMID: 12911688. Available from: 10. 1046/j.1365-2672.2003.02026.x.
- Ojo OO, Oluyege JO, Famurewa O. Antiviral properties of two Nigerian plants. Academic Journals. 2009;3(7):157–9. Available from: 10.5897/AJPS.9000025.
- Dhawan BN. Anti-Viral Activity of Indian Plants. Proceedings of the National Academy of Sciences India Section B, Biological Sciences. 2012;82(1):209–24. PMID: 32226204. Available from: 10.1007/s40011-011-0016-7.
- Mehrotra R, Rawat S, Kulshreshtha DK, Patnaik GK, Dhawan BN. In vitro studies on the effect of certain natural products against hepatitis B virus. Indian J Med Res. 1990;92:133–138.

PMID: 2370093.

- Ahmed B, Verma A. Pharmacological and phytochemical review on Phyllanthus species. Natural Products: An Indian Journal. 2008;4(1):5–21.
- Premanathan M, Kathiresan K, Yamamoto N, Nakashima H. In vitro anti-human immunodeficiency virus activity of polysaccharide from Rhizophora mucronata Poir. Bioscience, Biotechnology, and Biochemistry. 1999;63(7):1187– 91. PMID: 10478446. Available from: 10.1271/bbb.63.1187.
- Fiore C, Eisenhut M, Krausse R, Ragazzi E, Pellati D, Armanini D. Antiviral effects of Glycyrrhiza species. Phytotherapy Research. 2008;22(2):141–8. PMID: 17886224. Available from: 10.1002/ptr.2295.
- Alzohairy MA. Therapeutics Role of Azadirachta indica (Neem) and Their Active Constituents in Diseases Prevention and Treatment. Evidence-Based Complementary and Alternative Medicine. 2016;2016:7382506. PMID: 27034694. Available from: 10.1155/2016/7382506.
- Anand AV, Balamuralikrishnan B, Kaviya M, Bharathi K, Parithathvi A, Arun M. Medicinal Plants, Phytochemicals, and Herbs to Combat Viral Pathogens Including SARS-CoV-2. Molecules (Basel, Switzerland). 2021;26(6):1775. PMID: 33809963. Available from: 10.3390/molecules26061775.
- Divya M, Vijayakumar S, Chen J, Vaseeharan B, Durán-Lara EF. South Indian medicinal plants can combat deadly viruses along with COVID-19? - A review. Microbial Pathogenesis. 2020;148:104277. PMID: 32473390. Available from: 10.1016/j.micpath.2020.104277.
- Khanna K, Kohli SK, Kaur R, Bhardwaj A, Bhardwaj V, Ohri P. Herbal immune-boosters: substantial warriors of pandemic Covid-19 battle. Phytomedicine. 2021;85:153361. PMID: 33485605. Available from: 10.1016/j.phymed.2020.153361.
- Logeswari J, Shankar S, Biswas PG, Muninathan N. Role of Medicinal Plants in the Prevention of Covid-19 Pandemic. Medico-Legal Update. 2020;20(4):2303–6.
- Srivastava A.K., Kumar A., Mishra N. On the Inhibition of COVID-19 Protease by Indian Herbal Plants: An In Silico Investigation. arXiv:2004.03411 [q-bio.OT].
- Joshi T, Joshi T, Sharma P, Mathpal S, Pundir H, Bhatt V. In silico screening of natural compounds against COVID-19 by targeting Mpro and ACE2 using molecular docking. European Review for Medical and Pharmacological Sciences. 2020;24(8):4529–36. PMID: 32373991. Available from: 10. 26355/eurrev\_202004\_21036.
- Maurya DK, Sharma D. Evaluation of Traditional Ayurvedic Preparation for Prevention and Management of the Novel Coronavirus (SARS-CoV-2) Using Molecular Docking Approach. ChemRxiv. 2020;.
- Shree P, Mishra P, Selvaraj C, Singh SK, Chaube R, Garg N, et al. Targeting COVID-19 (SARS-CoV-2) main protease through active phytochemicals of ayurvedic medicinal plants - Withania somnifera (Ashwagandha), Tinospora cordifolia (Giloy) and Ocimum sanctum (Tulsi) - a molecular docking study. Journal of Biomolecular Structure and Dynamics. 2020;27:1–14. PMID: 32851919. Available from: 10.1080/07391102.2020.1810778.
- Balachandran P, Govindarajan R. Cancer an ayurvedic perspective. Pharmacological Research. 2005;51(1):19–30. PMID: 15519531. Available from: 10.1016/j.phrs.2004.04.010.
- 83. Chulet R, Pradhan P. A review on Rasayana. Pharmacognosy Reviews. 2009;3(6):229–34.
- Caamal-Herrera O, Muñoz-Rodríguez D, Madera-Santana T, Azamar-Barrios JA. Identification of volatile compounds in essential oil and extracts of OcimummicranthumWild leaves using GC/MS. International Journal of Applied Research in Natural Products. 2016;9(1):31–40.
- Tang LI, Ling AP, Koh RY, Chye SM, Voon KG. Screening of anti-dengue activity in methanolic extracts of medicinal plants. BMC Complementary and Alternative Medicine. 2012;12(1):3. PMID: 22244370. Available from: 10.1186/1472-6882-12-3.

- 86. Ghoke SS, Sood R, Kumar N, Pateriya AK, Bhatia S, Mishra A. Evaluation of antiviral activity of Ocimum sanctum and Acacia arabica leaves extracts against H9N2 virus using embryonated chicken egg model. BMC Complementary and Alternative Medicine. 2018;18(1):174. PMID: 29866088. Available from: 10.1186/s12906-018-2238-1.
- Brahmbhatt RV. Biological activities and medicinal properties of neem (Azadirachtaindica). Current Science. 2002;82(11):1336–1345. Available from: 10.36648/2321-2748.
- Varshney KK, Varshney M, Nath B. Molecular Modeling of Isolated Phytochemicals from Ocimum sanctum Towards Exploring Potential Inhibitors of SARS Coronavirus Main Protease and Papain-Like Protease to Treat COVID-19 (March 14, 2020). Available at SSRN: https://ssrn.com/abstract=355437 1. 2020;.
- Mohapatra PK, Chopdar KS, Dash GC, Raval MK. In Silico Screening of Phytochemicals of Ocimum Sanctum Against Main Protease of SARS-CoV-2. ChemRxiv. 2020;2020. Available from: 10.26434/chemrxiv.12599915.v1.
- Khare CP. Indian Medicinal Plants: An Illustrated Dictionary. Springer Science & Business Media, 2008. Available from: 10. 1007/978-3-540-37418-3\_4.
- Chopra D, Bhandari B, Dwivedi S. Beneficial role of Indian Medicinal plants in COVID-19. MGM J Med Sc. 2021;8(2):166– 70. Available from: 10.4103/mgmj.mgmj\_121.
- Dar NJ, Hamid A, Ahmad M. Pharmacologic overview of Withania somnifera, the Indian Ginseng. Cellular and Molecular Life Sciences. 2015;72(23):4445–60. PMID: 26306935. Available from: 10.1007/s00018-015-2012-1.
- Ingawale DSM, Namdeo AG, DS M. Pharmacological evaluation of Ashwagandha highlighting its healthcare claims, safety, and toxicity aspects. Journal of Dietary Supplements. 2021;18(2):183–226. PMID: 32242751. Available from: 10. 1080/19390211.2020.1741484.
- Mukherjee PK, Banerjee S, Biswas S, Das B, Kar A, Katiyar CK. Withania somnifera (L.) Dunal - Modern perspectives of an ancient Rasayana from Ayurveda. Journal of Ethnopharmacology. 2021;264:113157. PMID: 32783987. Available from: 10.1016/j.jep.2020.113157.
- Agarwal R, Diwanay S, Patki P, Patwardhan B. Studies on immunomodulatory activity of Withania somnifera (Ashwagandha) extracts in experimental immune inflammation. Journal of Ethnopharmacology. 1999;67(1):27–35. PMID: 10616957. Available from: 10.1016/s0378-8741(99)00065-3.
- Tillu G, Chaturvedi S, Chopra A, Patwardhan B. Public Health Approach of Ayurveda and Yoga for COVID-19 Prophylaxis. Journal of Alternative and Complementary Medicine (New York, NY). 2020;26(5):360–4. PMID: 32310670. Available from: 10.1089/acm.2020.0129.
- Grover A, Agrawal V, Shandilya A, Bisaria VS, Sundar D. Nonnucleosidic inhibition of Herpes simplex virus DNA polymerase: mechanistic insights into the anti-herpetic mode of action of herbal drug withaferin A. BMC Bioinform. 2011;12(Suppl 13):S22. PMID: 22373101. Available from: 10.1186/1471-2105-12-S13-S22.
- Balkrishna A, Pokhrel S, Singh J, Varshney A. Withanone from Withaniasomnifera may inhibit novel Coronavirus (COVID-19) entry by disrupting interaction between viral S-protein receptor binding domain and host ACE 2 receptor. Research Square. 2020;2020. Available from: 10.21203/rs.3.rs-17806/ v1.
- Khanal P, Chikhale R, Dey YN, Pasha I, Chand S, Gurav N, et al. Withanolides from Withania somnifera as an immunity booster and their therapeutic options against COVID-19. Journal of Biomolecular Structure and Dynamics. 2021;p. 1– 14. PMID: 33459174. Available from: 10.1080/07391102.2020. 1869588.
- Saha S, Ghosh S. Tinospora cordifolia: one plant, many roles. Ancient Science of Life. 2012;31(4):151–9. PMID: 23661861. Available from: 10.4103/0257-7941.107344.

- Sagar V, Kumar AH. Efficacy of Natural Compounds from Tinosporacordifolia Against SARS-CoV-2 Protease, Surface Glycoprotein and RNA Polymerase. BEMS Reports. 2020;6(1):6–8. Available from: 10.5530/bems.6.1.2.
- Sharma U, Bala M, Kumar N, Singh B, Munshi RK, Bhalerao S. Immunomodulatory active compounds from Tinospora cordifolia. Journal of Ethnopharmacology. 2012;141(3):918–26. PMID: 22472109. Available from: 10.1016/j.jep.2012.03. 027.
- 103. Nostro A, Germanò MP, D'angelo V, Marino A, Cannatelli MA. Extraction methods and bioautography for evaluation of medicinal plant antimicrobial activity. Letters in Applied Microbiology. 2000;30(5):379–84. PMID: 10792667. Available from: 10.1046/j.1472-765x.2000.00731.x.
- Thimmulappa RK, Mudnakudu-Nagaraju KK, Shivamallu C, Subramaniam KJ, Radhakrishnan A, Bhojraj S. Antiviral and immunomodulatory activity of curcumin: A case for prophylactic therapy for COVID-19. Heliyon. 2021;7(2):e06350.
   PMID: 33655086. Available from: 10.1016/j.heliyon.2021. e06350.
- 105. Thomas L. Curcuminnanosystems could be powerful COVID-19 therapeutics. News Medical Life Sciences. 2021.
- 106. Moghadamtousi SZ, Kadir HA, Hassandarvish P, Tajik H, Abubakar S, Zandi K, et al. Abdul Kadir H, Hassandarvish P, Tajik H, Abubakar S, Zandi K. A review on antibacterial, antiviral, and antifungal activity of curcumin. BioMed Research International. 2014;2014:186864. Available from: 10.1155/ 2014/186864.
- Benzie IFF, Wachtel-Galor S, editors. Herbal Medicine: Biomolecular and Clinical Aspects. 2nd ed. Boca Raton (FL): CRC Press/Taylor & Francis; 2011.
- Rocha FA, de Assis MR. Curcumin as a potential treatment for COVID-19. Phytotherapy Research. 2020;34(9):2085–7. PMID: 32442323. Available from: 10.1002/ptr.6745.
- Das S, Sarmah S, Lyndem S, Roy AS. An investigation into the identification of potential inhibitors of SARS-CoV-2 main protease using molecular docking study. Journal of Biomolecular Structure and Dynamics. 2021;39(9):3347–57. PMID: 32362245. Available from: 10.1080/07391102.2020.1763201.
- Zahedipour F, Hosseini SA, Sathyapalan T, Majeed M, Jamialahmadi T, Al-Rasadi K. Potential effects of curcumin in the treatment of COVID-19 infection. Phytotherapy Research. 2020;34(11):2911–20. PMID: 32430996. Available from: 10.1002/ptr.6738.
- Babaei F, Nassiri-Asl M, Hosseinzadeh H. Curcumin (a constituent of turmeric): new treatment option against COVID-19. Food Science {&}amp; Nutrition. 2020;8(10):5215– 27. PMID: 33133525. Available from: 10.1002/fsn3.1858.
- 112. Adem S, Eyupoglu V, Sarfraz I, Rasul A, Ali M. Identification of Potent COVID-19 Main Protease (Mpro) Inhibitors from Natural Polyphenols: An in Silico Strategy Unveils a Hope against CORONA. Preprints. 2020;2020. Available from: 10.20944/preprints202003.0333.v1.
- 113. Manoharan Y, Haridas V, Vasanthakumar KC, Muthu S, Thavoorullah FF, Shetty P. Curcumin: a Wonder Drug as a Preventive Measure for COVID19 Management. Indian Journal of Clinical Biochemistry. 2020;35(3):373–5. PMID: 32641876. Available from: 10.1007/s12291-020-00902-9.
- O'Hara M, Kiefer D, Farrell K, Kemper K. A review of 12 commonly used medicinal herbs. Archives of Family Medicine. 1998;7(6):523–36. PMID: 9821826. Available from: 10.1001/ archfami.7.6.523.
- 115. Rathinavel T, Palanisamy M, Srinivasan P, Subramanian A, Thangaswamy S. Phytochemical 6-Gingerol-A promising Drug of choice for COVID-19. Int J Adv Sci Eng. 2020;06(04):1482–9. Available from: 10.29294/IJASE.6.4. 2020.1482-1489.
- 116. Chang JS, Wang KC, Yeh CF, Shieh DE, Chiang LC. Fresh ginger (Zingiber officinale) has anti-viral activity against human respiratory syncytial virus in human respiratory tract cell lines. Journal of Ethnopharmacology. 2013;145(1):146–51. PMID: 23123794. Available from: 10.1016/j.jep.2012.10.043.

- 117. Yamprasert R, Chanvimalueng W, Mukkasombut N, Itharat A. Ginger extract versus Loratadine in the treatment of allergic rhinitis: a randomized controlled trial. BMC Complement Med Ther. 2020;20(1):119. PMID: 32312261. Available from: 10.1186/s12906-020-2875-z.
- Subapriya R, Nagini S. Medicinal properties of neem leaves: a review. Current Medicinal Chemistry Anti-Cancer Agents. 2005;5(2):149–6. PMID: 15777222. Available from: 10.2174/ 1568011053174828.
- Bhowmik D. Chiranjib, Yadav J, Tripathi KK, Kumar KPS. HerbalRemedies of Azadirachtaindica and its Medicinal Application. Journal of Chemical and Pharmaceutical Research. 2010;2(1):62–72.
- Biswas K, Chattopadhyay I, Banerjee RK, Bandyopadhyay U. Biological activities and medicinal properties of neem (Azadirachtaindica). Current Science. 2002;82(11):1336–45.
- 121. Baildya N, Khan AA, Ghosh NN, Dutta T, Chattopadhyay AP. Screening of potential drug from Azadirachta Indica (Neem) extracts for SARS-CoV-2: an insight from molecular docking and MD-simulation studies. Journal of Molecular Structure. 2021;1227:129390. PMID: 33041371. Available from: 10.1016/j.molstruc.2020.129390.
- 122. Sharon SF. Molecular docking of selected bioactive compounds from azadirachtaindica for the inhibition of COVID-19 protease. International Journal of Pharmacy and Pharmaceutical Sciences. 2020;12(9):71–7. Available from: 10.22159/ ijpps.2020v12i9.38875.
- Maideen NM. Prophetic Medicine-Nigella Sativa (Black cumin seeds) - Potential herb for COVID-19? Journal of Pharmacopuncture. 2020;23(2):62–70. PMID: 32685234. Available from: 10.3831/KPI.2020.23.010.
- Khan MA, Afzal M. Chemical composition of Nigella sativa Linn: Part 2 Recent advances. Inflammopharmacology. 2016;24(2-3):67–79. PMID: 27068721. Available from: 10. 1007/s10787-016-0262-7.
- Forouzanfar F, Bazzaz BS, Hosseinzadeh H. Black cumin (Nigella sativa) and its constituent (thymoquinone): a review on antimicrobial effects. Iranian Journal of Basic Medical Sciences. 2014;17(12):929–38. PMID: 25859296.
- 126. Badary OA, Hamza MS, Tikamdas R. Thymoquinone: A Promising Natural Compound with Potential Benefits for COVID-19 Prevention and Cure. Drug Design, Development and Therapy. 2021;15:1819–33. PMID: 33976534. Available from: 10.2147/DDDT.S308863.
- 127. Koshak DA, Koshak PE. Nigella sativa L as a potential phytotherapy for coronavirus disease 2019: A mini review of in silico studies. Current Therapeutic Research, Clinical and Experimental. 2020;93:100602. PMID: 32863400. Available from: 10.1016/j.curtheres.2020.100602.
- Damanhouri ZA, Ahmad A. A review on therapeutic potential of Piper nigrum L. black pepper), the King of Spices. Medicinal {&}amp; Aromatic Plants. 2014;3(3):161. Available from: 10.4172/2167-0412.1000161.
- Tasleem F, Azhar I, Ali SN, Perveen S, Mahmood ZA. Analgesic and anti-inflammatory activities of Piper nigrum L. Asian Pac J Trop Med. 2014;7(S1):S461–S468. Available from: 10.1016/ S1995-7645(14)60275-3.
- Choudhary P, Hillol C, Dikchha S, Chandrabose S, Singh SK, Kumar S. Computational studies reveal piperine, the pre-

dominant oleoresin of black pepper (Piper nigrum) as a potential inhibitor of SARS-CoV-2 (COVID-19). Current Science. 2020;119(8):1333–42. Available from: 10.18520/cs/v119/i8/ 1333-1342.

- Davella R, Gurrapu S, Mamidala E. Phenolic compounds as promising drug candidates against COVID-19 - An integrated molecular docking and dynamics simulation study. Materials Today: Proceedings. 2021;PMID: 34094885. Available from: 10.1016/j.matpr.2021.05.595.
- Gunathilake KD, Rupasinghe HV. Recent perspectives on theMedicinal potential of ginger. Botanics : Targets and Therapy. 2015;5:55–63. Available from: 10.2147/BTAT. S68099.
- Donma MM, Donma O. The effects of allium sativum on immunity within the scope of COVID-19 infection. Medical Hypotheses. 2020;144:109934. PMID: 32512493. Available from: 10.1016/j.mehy.2020.109934.
- 134. Shojai TM, Langeroudi AG, Karimi V, Barin A, Sadri N. The effect of Allium sativum (Garlic) extract on infectious bronchitis virus in specific pathogen free embryonic egg. Avicenna Journal of Phytomedicine. 2016;6(4):458–267. PMID: 27516987.
- Pandey P, Khan F, Kumar A, Srivastava A, Jha NK. Screening of potent inhibitors against 2019 novel coronavirus (Covid-19) from alliumsativum and allium cepa: an in silico approach. Biointerface Research in Applied Chemistry. 2021;11(1):7981–93. Available from: 10.33263/BRIAC111. 79817993.
- Khubber S, Hashemifesharaki R, Mohammadi M, Gharibzahedi SM. Garlic (Allium sativum L.): a potential unique therapeutic food rich in organosulfur and flavonoid compounds to fight with COVID-19. Nutrition Journal. 2020;19(1):124. PMID: 33208167. Available from: 10.1186/s12937-020-00643-8.
- Cheriyedath S. Glycyrrhizin in licorice root neutralizes SARS-CoV-2 in vitro by inhibiting the main protease Mpro. News Medical Life Sciences. 2021.
- Zhong LL, Lam WC, Yang W, Chan KW, Sze SC, Miao J. Potential Targets for Treatment of Coronavirus Disease 2019 (COVID-19): A Review of Qing-Fei-Pai-Du-Tang and Its Major Herbs. The American Journal of Chinese Medicine. 2020;48(5):1051–71. PMID: 32668969. Available from: 10. 1142/S0192415X20500512.
- 139. 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. Journal of Integrative Medicine. 2020;18(2):152–8. PMID: 32113846. Available from: 10.1016/j.joim.2020.02.005.
- Luo P, Liu D, Li J. Pharmacological perspective: glycyrrhizin may be an efficacious therapeutic agent for COVID-19. International Journal of Antimicrobial Agents. 2020;55(6):105995.
   PMID: 32335281. Available from: 10.1016/j.ijantimicag.2020. 105995.
- 141. Petric D. Glycyrrhizin and Coronaviruses. Preprint . 2020;2020. Available from: 10.13140/RG.2.2.30633.13926/1.
- van de Sand L, Bormann M, Alt M, Schipper L, Heilingloh CS, Steinmann E. Glycyrrhizin Effectively Inhibits SARS-CoV-2 Replication by Inhibiting the Viral Main Protease. Viruses. 2021;13(4):609. PMID: 33918301. Available from: 10.3390/ v13040609.