Review Article

HERBAL ANTITUSSIVES AND EXPECTORANTS – A REVIEW

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Received on: 21-09-2010; **Finalized on:** 20-11-2010.

ABSTRACT

The problems emerging from the treatment of cough during many types of respiratory diseases by conventional opioid antitussive agents, such as codeine and codeine-like compounds. Medicinal plants are potential source of substances with high-antitussive efficiency with minimal unwanted effects. Recent trends of modern phytotherapy include specification of active substances responsible for therapeutic effect as well as their quantification in the healing drugs, which enables the treatment rationalization, especially the dosing and pursuing of adverse effects. This review is intended to describe the current status of plant used as antitussive and expectorant and their active compounds with cough-suppressing activity.

Keywords: Cough, Antitussive activity, Medicinal plants, expectorants.

INTRODUCTION

There are many types of drugs that are used to suppress cough and are often prescribed in combination. Before dealing with the particular type of drug used, it is important to consider briefly the nature of cough production, its role in disease and desirability of suppressing it¹. The studies showing that about 95 million units of pediatric drugs were sold for coughs and colds every year in the United States².

The sale of pediatric and adult cough medication represents a significant proportion of the pharmaceutical market in many Countries³. In most countries, these pharmaceutical preparations are sold as over-the-counter (OTC) drugs, a category that includes the following therapeutic classes: cough suppressants, expectorants, and mucolytics ⁴. In 2006, the American College of Chest Physicians published nine guidelines for treating acute cough which do not recommend use of OTC drugs⁵. Another concern regarding cough medications is fixed-dose combinations because using two or more drugs in the same formulation, besides having no supporting therapeutic grounds or scientific evidence, increases the risk of adverse events⁶.

Cough is a useful physiological mechanism that serves to clear the respiratory passages of foreign material and excess secretions and should not be suppressed indiscriminately^{7.} Cough is thought to be caused by a reflex. It occurs due to stimulation of mechano-or chemoreceptor in throat, respiratory passage or stretch receptor in the lungs⁸. The sensitive receptors are located in the bronchial tree, particularly in the junction of the trachea. These receptors can be stimulated mechanically or chemically e.g. by inhalation of various irritants than nerve impulses activate the cough center in the brain^{9.}

Traditionally cough is classified as either productive, *i.e.* producing mucus usually with expectoration, or nonproductive (dry)¹⁰. Therefore, the use of an effective antitussive agent such as dextromethorphan or codeine to suppress the debilitating cough suffered by such patients seems appropriate¹¹. Non-Narcotic antitussive agents anesthetize the stretch receptor located in respiratory passages, lungs and pleura by dampening their activity and thereby reducing the cough reflex at its source. Narcotic antitussive agents depress the cough center that is located in the medulla, thereby raising its threshold for incoming cough¹².

Expectorants are the mixtures have a definite but limited place in medicine. They are not curative, but undoubtedly alleviate the symptoms of patients in certain stages of bronchitis or tracheitis^{13.} They help to raise secretions from the respiratory passages. Even though they are used by 10% of American children weekly, they are not recommended in children 6 years of age or younger due to lack of evidence showing effect, and concerns of harm¹⁴. Statistical data analysis convinced the FDA that quaifenesin loosens and thins sputum and bronchial secretions and makes expectoration easier by increasing sputum volume and reducing sputum viscosity¹⁵. In the 1990s only a few of the early natural expectorants are in widespread use and some of these have been chemically modified to improve efficacy or physical characteristics¹⁶. Plants having antitussive and expectorant activity are listed in table 1.

Table 1: Plants having Antitussives and Expectorant activity

S. No.	Botanical Name (Common Name)	Family	Part used	Chemical Constituent	Activity	Reference
1	Abies webbiana Lindl. (Indian Silver Fir)	Pinaceae	L	Flavonoids, biflavonoid glycosides and phytosterols.	Antitussive	[17]
2	Abrus precatorius L. (Indian liquorice)	Leguminosae	R, L, S	(L+) abrin, glucosides (abralin, haemagglutinin), N-Methyltryptophan and Urease.	Antitussive	[18]
3	Acacia concinna wild. DC (Shikakai)	Mimosaceae	L	Saponin, lupeol, aspinasterol and acacic acid lactone. It also contains hexacosanol and aspinasterone	Expectorant	[19]
4	Acorus calamus L. (Sweet flag)	Araceae	Rz	Sesquiterpenes, phenylpropanes, cis-isoasarone, acorone, ketones.	Antitussive	[20]
5	Adhatoda vasica L.Nees (Vasaka)	Acanthaceae	L, R, F, B	vasicine, vasicinone, Maiontone. vasicinolone, vasicol, kaempferol	Expectorant	[21]
6	Agaricus albus Linn (Purging agaric)	Agaricaceae	WP	Agaric acid (agaricin) present to the extent of 14-16%.	Expectorant	[22]
7	Ailanthus excelsa Roxb. (Tree of heaven)	Simaroubaceae	В	Quassinoids including ailanthone derivatives.	Expectorant	[22]
8	Alhagi pseudalhai Bieb. Desv (Camel thorn)	Fabaceae	WP	Flavonoids, tannins, sterols, triterpene, saponins and anthroquinones	Expectorant	[22]
9	Allium odorum L. (Sweet leek)	Liliaceae	L,B	Sulfur compounds, saponins And alkaloids.	Expectorant	[18]
10	Allium porrum Linn (Leek)	Liliaceae	L	Non-toxic saponins, thiosulphates, flavonoids, quercetin and kaempferol.	Expectorant	[22]
11	Althae officinalis Linn (Marshmallow)	Malvaceae	L,R	Starch, mucilage, pectin, flavonoids, phenolic acids, tannins, quercetin, kaempferol.	Antitussive	[23]
12	Amomum aromaticm Roxb. (Bengal cardamom)	Zingiberacea	Fr	Essential oil from seeds 1-1.5% containing cineole.	Antitussive	[22]
13	Anagallis arvensis Linn. (Chari saben)	Primulaceae	L	Saponins, valerian, cyclanins.	Expectorant	[23]
14	Andrographis paniculata Burm.f. Nees (Kalmegh)	Acanthaceae	L	Diterpenoid lactones (andrographolides), paniculides, farnesols and flavonoids	Expectorant	[18,21,24,25]
15	Artemisia Vulgaris Linn. (Arbaaka)	Asteraceae	F,R	A volatile oil, an acrid resin and tannin.	Expectorant	[26]
16	Asparagus racemosus Wild (Shatavari)	Liliacea	R, L	Asparagamine A, quercetin, rutin hyperoside, Mucilages,	Antitussive	[27]
17	Azima tetracantha Lam. (Mistletoe)	Salvadoraceae	L	Alkaloid, azocarpine, carpine.	Expectorant	[22]
18	Bacopa monnieri L. (Brahmi)	Scrophulariaceae	R, S, F ,Fr	Alkaloid, brahmine	Antitussive	[27,28]
19	Balanites aegyptiaca Linn.Delile. (Deseart date)	Smaroubaceae	S	Diosgenin, steroidal saponins, balanitins	Expectorant	[18]
20	Balsamodendron Myrrha Nees. (Surasa, Barbara)	Burseraceae	R, L, Se	Polysaccharides, volatile oil, eugenol, monoterpenes	Expectorant	[18]
21	Belamcana chinensis L. (Leopard lily)	Iridaceae	Rz	Belamcandin, tectoridin, shekanin and Iridin.	Expectorant	[18]
22	Bischofia javanica B. (Vinegar wood)	Euphorbiaceae	L, Sh	Tannin, Vit c.	Antitussive	[18]
23	Blepharis linariaefolia Pers. (Naethira Poondu)	Acanthaceae	L	Sesquiterpene lactones.	Expectorant	[26]
24	Blumea Balsamifera L. DC (Kukur Sunga)	Asteraceae.	L	Borneol, caryophyllene, ledol phytol, caryophyllene oxide, guaiol.	Antitussive	[29]
25	C. longa Linn(Turmeric)	Zingiberaceae	Rz	Curcumin, Essential oil, ketone, alcohol, Zingiberine.	Antitussive	[30,31]
26	Caesalpina Bonducella F. (Kuberakshi)	Leguminosae	Se, R, B, L	Aminoacids, aspartic acid, arginine, phenolic.	Antitussive	[32]
27	Cassia Tora L. (Cakunda)	Caesalpinaceae	Se ,L	Emodin, glucose, chrysophanol , rhein, oleic, linolic, palmitic	Antitussive	[33,34]
28	Celosia Cristata Linn. (Cock's comb)	Amaranthaceae	F, Se	Betanin, Amarantinin, Isoamarantinin, Celosianin, Protein.	Antitussive	[26]
29	Cephaelis ipecacuanha Rich. (Ipecac)	Rubiaceaea	L	Emetine, cholin, cephaeline ipecacuanhic acid, and nauseating ethereal oil.	Expectorant	[28]
30	Chelidonium major L. (Tetter wort)	Papaveraceae	R	Chelidonine, homochelidonine, berberine, protopine.	Antitussive	[35,36]
31	Chondrus crispus L. (Pearl Moss)	Gigartinaceae	Fr	Polysaccharides, carrageenan, tannins, iodine, bromine, iron,	Expectorant	[18]

S. No.	Botanical Name (Common Name)	Family	Part used	Chemical Constituent	Activity	Reference
32	Cimicifuga racemosa Nutt. (Black snakeroot)	Ranunculaceae	Rz, R	Tannins, isoferulic acid, salicylic acid, Mucilage ,starch, actein, cimigoside,	Expectorant	[18]
33	Citrus japonica Thunb. (Marumi Kumquat)	Rutaceae	L, Fr	Essential oil, sugar and organic acids	Antitussive & Expectorant	[18]
34	Coleus amboinicus Lour. (Indian borage)	Labiatae	L	The whole plant contains an essential oil consisting of carvacrol.	Antitussive	[18]
35	Cressa cretica Linn (Rudanti)	Convolulaceae	WP	Alkaloid, β sitosterol, scopoletin, quercetin glycosides, umbelliferone.	Antitussive & Expectorant	[37]
36	Curcuma Zedoaria Berg.	Zingiberaceae	RZ, L	α -pinene, D-camphene, cineol, D-camphor, D-	Antitussive	[18]
37	Rosc. (Cochin turmeric) Eclipta alba L.	Asteraceaea	R, Se	borneol, zingiberene Flavonoids(Apigenin, luteolin) Isoflavenoids	Antitussive	[38]
38	(Bhangra) <i>Eucalyptus globulus</i>	Myrtaceae	L,B	(Wedelolactone), Ecliptal, Terthienyl aldehyde crystallized resin, cymenes, terpenes, flavonoids,	Expectorant	[38-41]
39	Labill (Australian Fever) Euphorbia antiquorum	Euphorbiaceae	WP	including quercetin, tannins, volatile oils Euphorbin 35%, Latex two kinds-one is soluble in	Antitussive	[38-41]
40	Linn. (Indian spurge) Euphorbia hirata L.	Euphorbiaceae	S, L, F	ether other is insoluble. Gallic acid, querceitin, Phenyl glycoside and	Antitussive	[39]
41	(Snakeweed) Euphrasia officinalis	Scrophulariaceae	L	Sucrose. Aucubin, Catalpol, Luproside, Verproside,	Antitussive	[28]
42	Linn. (Eyebright) Foeniculum vulgare	Umbelliferae	Se, L,	Eukovoside, Tannins. Aromatic oil, fixed oil, Anethol and Fenchone.	Antitussive	[39]
43	Meller (Fennel) Ginkgo biloba L.	Ginkgoceae	R	Flavonoids, flavones, flavonols, tannins, biflavones	Antitussive	[42]
44	(Balkuwari) Glycyrrhiza glabra Linn.	Papilionaceae	R	,terpenoids Glycyrrhizin, Glycosides such as glycyrrhizol,	Antitussive &	[21,43,44]
45	(Liquorice) Inula helenium L.	Compositae	R	glabrins A and B, Monoterpenes, Diterpenes, Flavonoids, Glycolipids	Expectorant Expectorant	[45]
	(Tu-mu-xing)	(Asteraceae)				
48	Kaempferia galanga L. (Black thorn)	Zingiberaceae	L, Rz	Cinnamate ,pentadecane, 1,8-cineole, Terpenoid	Antitussive	[46]
49	Lindera benzoin L. Blume (Spicewood)	Lauraceae	B,L.	Linderol, Linderone, Linderalactone.	Expectorant	[47]
50	Lobelia inflate Linn. (Indian Tobacco)	Lobeliaceae	Se	Lobeline, Lobelachrin, Lobelia acid.	Antitussive	[48]
51	<i>Ocimum sanctum</i> Linn. (Tulsi)	Lamiaceae	L, Se, R	Eugenol, carvacrol, methyl eugenol, α-cymene, camphene, α - cymene, ρ-cymene.	Antitussive	[49,50]
52	Papaver rhoes L. (Red poppy)	Papaveraceae	F,	Cyanidine derivatives., alkaloid rhoeadine ,morphine, thebine and narcotine	Antitussive & Expectorant	[22]
53	Pimpinella anisum L. (Anise)	Apiaceae	Se	volatile oil, coumarin, β amyrin, stigmasterol, flavonoid qlycosides	Expectorant	[39, 45]
54	Pistacia chinenis Bunge (Kakar singhi)	Anacardiaceae	Galls	volatile oil, terpentine oil, Hydrocarbon.	Antitussive	[39]
55	Plantago lancolata L. (Snake Weed)	Plantaginaceae	L, Se, R.	Polysaccharides, tannins, iridoid glycosides	Antitussive	[51]
56	Platycodon grandiflorum	Campanulaceae	R	Triterpenoid saponin,	Antitussive &	[18]
	Jacq. A. DC (Chinese bellflower)	Danier I	D	Platycodigenic acid, Platycodigenin,	Expectorant	[50]
57	Polemonium reptans L. (Bluebells)	Poemoniaceae	R	It contains triterpene saponins.	Expectorant	[52]
58	Polygala amara L. (Bitter milkworth)	Polygalaceae	Rz	phenol glycosides, polygalite	Expectorant & Antitussive	[52]
59	Polygala senega L. (Sneca Snake root)	Polygalaceae	Rz	Sitosterol (b-sitosterol), Dehydrocholic acid (3,7,12-trioxocholanic acid, steroids	Expectorant	[52,53]
60	Polygonum cuspidatum Sieb(JapaneseKnotweed)	Polygonaceae,	R,L	anthraquinones and anthraglycosides primarily emodin, rhein, chrysophenol, tannins, resveratrol.	Expectorant	[54]
61	Prunus armenica Linn (Wild Apricot)	Rosaceae	Se	Amygdalin (cyanhydrine-glucoside), emulsion	Expectorant	[45]
62	Sanguinaria canadenis Linne. (Bloodroot)	Papaveraceae	R	Sanguinarine, chelerythrine, protopine, citric and malic acids.	Expectorant	[45]
63	Sida rhombifolla L. (Indian hemp)	Malvaceae	L, R	Pseudoephedrine, beta-Phenethylamine.	Expectorant	[45]
64	Thymus vulgaris L. (Garden thyme)	Lamiaceae	F, L	It contains 2% essential oil.	Expectorant	[45]
65	Viola odorata L.	Violaceae	L, F, R	Volatile oil, salicylic acid methyl ester, saponins,	Expectorant	[45,54]
66	(Banafsaj) Withania Somnifera	Solanaceae	R,L	alkaloids. Withanine alkaloid, Somniferine, Tropine, Hygrine,	Antitussive	[26]
67	Dunal. (Ashwagandha) Zingiber officinale Rosc.	Zingiberaceae	Rz	Anaferine. Zingiberene, camphene, ß-pinene, myrcene,	Antitussive	[55,56]
	(Ginger)	ant Co Condo De Dhi		limonene, 1,8-cineole , ß-phellandrene. Fruit, R-Root, WP-Whole Plant		

L-Leaves, F-Flower, S-Stem, Sh-Shoot, Se-Seeds, Rz-Rhizomes, Fr-Fruit, R-Root, WP-Whole Plant



CONCLUSION

The past two decades have seen a worldwide upsurge in the use of traditional medicine (TM) and Complementary and alternative medicine (CAM) in both developed and developing countries. Current world-wide interest in traditional medicine has led to rapid development and studies of many remedies employed by various ethnic groups of the world. The information is recorded in common name of botanical name, common name, family, part used, active constituent, & reference. Scientists from divergent fields are investigating new plants with antitussive and expectorant activity.

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