Natural support for treatment of Autoinflammatory diseases: A review

Mukta Gupta^{a,b}*, Nahanael D. Tuppa^a, Naresh Singh Gill^c

^aDepartment of Pharmaceutical Chemistry, Lovely Professional University, Phagwara, Punjab, India

^bDepartment of Pharmaceutical Sciences, I. K. Gujral Punjab Technical University, Kapurthala, Punjab, India

^cRayat Institute of Pharmacy, Railmajra, SBS Nagar, Punjab, India

*Corresponding Author E-mail: mukta.16541@lpu.co.in

Abstract

Auto-inflammatory diseases is a group of clinical manifestation that share common distribution pattern with auto-immune disorders, however differs in symptoms such as recurrent episodes of inflammation. The pathophysiology of auto-inflammatory diseases involves dysfunction of innate immune system. The various examples of auto-inflammatory diseases includes crohn disease, behcet disease, schnitzel syndrome, systemic juvenile idiopathic arthritis, familial Mediterranean fever, TNF receptor associated periodic syndrome, ankylosing spondylitis, stomatitis recurrent aphthous ulcer, psoriatic arthritis, gout, sarcoidosis. Conventional treatment approach of auto-inflammatory diseases involves immunomodulators (cyclosporine, mercaptopurine, methotrexate, azathrioprine); corticosteroids (prednisone, budesonide, methyl prednisone); aminosalicylates (sulfasalazine, mesalamine); biologics (infliximab, certolizumab, adalimumab) and NSAIDS (acetaminophen and ibuprofen) are used. All these drugs are associated with one or more side effects. As per the study conducted by the World Health Organization about 80% of world's population relies on traditional medicine. Various plants have been used traditionally in management of auto-inflammatory diseases. Some of the important natural compounds reported to be used in treatment of auto-inflammatory diseases (Aloe vera, Rhamnus cathartica), curcuminoids (Curcuma longa), includes anthraquinone flavonoids (Chrysanthemum indicum, Colocasia antiquorum, Momordica charantia), volatile oil (Olchicum autumnale, Oenothera biennis, Borago officinalis, Allium cepa), polyphenols (Punica granatum, Vitis venifera). Although a number of herbal medicines are recommended for auto-inflammatory diseases, but further research is required to investigate their safety, efficacy, and potential drug interactions.

P a g e | **3373** Copyright ⊚ 2019Authors

ISSN: 0971-1260

Vol-22-Issue-17-September-2019

Keywords: Auto-inflammatory diseases; Herbal products; Natural; Immunity

Introduction

Auto inflammatory diseases can be defined as the inflammatory disorders due to innate immune cells dysfunction which leads to the systemic or organ targeted inflammations. Most of these diseases are genetically caused but clinical data shows that there can be non-genetic causes may also be one factor [1]. The diseases can be identified by various symptoms such as recurrent high fever, diarrhea, nausea, arthritis, joint pains, skin rashes, lesions, inflammations and headache. Examples of auto-inflammatory diseases include schnitzels syndrome, crohn's disease, Behcet's disease and systemic juvenile idiopathic arthritis.

There has been an increasing incidence of auto inflammatory diseases worldwide and is seen in all age groups. However people with age between 20-40 years are mostly commonly affected. Along with the same systemic juvenile idiopathic arthritis is most commonly observed in children of age 6 years onwards.

The exact etiology of auto inflammatory disorder is not clear; however it is assumed that mutations in innate immune system may be one of the causative factors together with other inflammatory mediators. The diseases can be identified by various symptoms such as recurrent high fever, diarrhea, nausea, arthritis, joint pains, skin rashes, lesions, inflammations and headache [2]. Natural products have been used for treatment of various diseases from ancient time. These act as lead compound for identification and development of new drug molecules [3]. These are mainly plant secondary metabolites such as flavonoids, alkaloids, saponins, terpenoids etc [4-5]. Various auto-inflammatory diseases and their treatment with herbal products is listed below.

1. Crohn's disease (CD)

Inflammatory bowel diseases includes Crohn's disease (CD) and ulcerative colitis which these affect small or large intestine and is the major cause of morbidity. The risk factor for CD involves overproduction of reactive oxygen species and antioxidant capacity. The major target area of CD is colon although other parts can also be affected [1]. Symptoms include fever, abdominal pain, diarrhea, bloating, anal bleeding or fissures and weight loss. CD occurs due to antigenic stimulation which causes abscesses which develop to focal aphthoid ulcers, internal and external fistula and lastly bowel

obstruction due to inflammation. Conventional treatment approach of Crohn's disease include various classes such as immunomodulators (cyclosporine, mercaptopurine, methotrexate, azathrioprine); corticosteroids (prednisone, budesonide, methyl prednisone); aminosalicylates (sulfasalazine, mesalamine); biologics such as infliximab, certolizumab, adalimumab and nonsteroidal anti inflammation drugs (acetaminophen and ibuprofen) are used.

Herbal products have also been used for treatment of various inflammatory disorders and also are free from side effects. The herbal plants used for treatment of CD includes Aloe (Aloe *vera*); mastic gum (*Pistacia lentiscus*); wormwood (*Artemisia absinthium*); turmeric (*Curcuma longa*); barley (*Hordeum vulgare*); asparagus (*Asparagus officinalis*) and soya beans (*Glycine max*)[6-9].

2. Behcet's disease (BD)

Behcet's disease occur systemically causing blood vessels inflammation in the entire body. Mostly affected sites are skin, oral and genital areas [10]. The disease can be identified by various symptoms such as genital sores, mouth sores, skin rash, lesions, ocular manifestations, arthritis and fatigue.

Clinical data shows that its pathophysiology is still unknown but it is believed that genetic and immune system irregularities and other triggering factors such as infectious agents may be responsible for this disease [10]. Behçet's disease negatively affects bio psychology and social life of patient therefore reduces the quality of life.

Conventional drugs used are mainly immunosuppressant (cyclosporine, mercaptopurine, methotrexate, azathrioprine); anti-inflammatory and steroid agents (prednisone, budesonide, methyl prednisone). The use of colchicine in treatment of BD is well documented and reported. BD can be treated by herbal plants such as colchicine (*Colchicum autumnale*) and liquorice root (*Glycyrrhiza uralensis*)[11-12].

3. Schnitzel syndromes

Schnitzel syndrome is an auto-inflammatory disease which primarily affects extremities and trunk sparing the head, neck, palms and soles [13]. The disease can be identified by various symptoms such as joint pain, bone pain, fatigue, malaise, periodic fever, swollen lymph glands and enlarged spleen and liver. The causative agent involved in pathogenesis of schnitzel syndrome involves the activation of IL-1 which further causes innate immune system dysfunction leading to the disease [13].

P a g e | **3375** Copyright ⊚ 2019Authors

Standard therapies that inhibit cytokine IL-1 such as Canakinumab are used. For schnitzel syndrome IL-1 receptor antagonist such as anakinra has shown success in treating schnitzel syndrome. Colchicine (*Colchicum autumnale*) is a herbal plant used for treatment of Schnitzel syndrome [14].

4. Systemic juvenile idiopathic arthritis (SJIA)

SJIA is an auto-inflammatory disease affecting mostly children of age five and younger than that and mainly targets joints. It is also known as still's disease. The various symptoms of the disease include swollen lymph nodes, rashes, fever, stiffness, swelling and pain at the joints [15]. The treatment of SJIA can be done by using herbal plants such as turmeric (*Curcuma longa*); ginger (*Zingiber officinale*); green tea (*Camellia sinensis*) and cinnamon (*Cinamomum zeylanicum*)[16-19].

5. Familial Mediterranean fever (FMF)

FMF is a hereditary auto inflammatory disease with two phenotypes that is type 1 and type 2 and affect mainly the female reproductive organs and if it is coupled with arthritis it will affect joints at knees, hips, ankles and elbows [20].

Type 1 FMF can be characterized by fever, inflammation, peritonitis, synovitis, chest and abdominal pains whereas Type 2 can be identified by amyloidosis or may otherwise be asymptotic. The causative agent is mutation in 781 amino acid proteins [21]. Conventional drugs used are NSAIDS and Immunomodulant. The herbal plant for treatment of FMF is colchicine (*Colchicum autumnale*)[22].

6. TNF receptor associated periodic syndrome (TRAPS)

TRAPS is an auto inflammatory disease that is hereditary and characterized with long lasting periods of fever. The disease can be identified by various symptoms such as oedema, arthritis, thoracic pain, skin rashes, periodic fever attacks and abdominal pain [23].

It occurs due to mutations in the p55 TNF receptor which further causes the manifestation of the symptoms of the disease. Colchicine (*Colchicum autumnale*) is used for treatment of TRAPS and is potent inhibitor of TNF- α receptor.

7. Ankylosing Spondylitis

The disorder involves sacroiliac joints, axial skeleton and it is usually more observed in people with age 30 years old and below disguised as chronic back pain [24]. Prevalence

P a g e | 3376 Copyright ⊚ 2019Authors

of ankylosing spondylitis in India was found to be at 0.03 percent as per Bone and Joint Decade India 2004 - 2010.

Symptoms include musculoskeletal pain, stiffness and immobility of spine, tenderness in lumbar region to shoulder -neck region and foot and heel pain. The main etiology of ankylosing spondylitis is not clear yet; however it is assumed that people with gene called HLA- B27 are at a high risk of getting it. Also inflammatory mediators such as TNF- α , IL-6 and IL-1 β are also causative factors [25-30]. Conventional treatment approach includes the use of immunomodulators, corticosteroids and non-steroidal anti-inflammatory drugs [31]. Natural plants have also been used as treatment from ancient times for treatment of ankylosing spondylitis such as chyysanthemun (*Chrysanthemum indicum*); garlic (*Allium sativum*); turmeric (*Curcuma longa*) and buckthorn (*Rhamnus cathartica*)[32-35].

8. Stomatitis recurrent aphthous ulcer (RAU)

Stomatitis recurrent aphthous ulcer (RAU) is a chronic inflammatory ulcerative disease of oral mucosa and is also known as canker sore. Worldwide the disease is 2-66 percent of the total population.

The etiopathogenesis is still unclear but many causative factors such as stress, malnutrition, trauma, and family history, immunological and psychological factors have been associated with RAU [2]. The symptoms that occur are such as lesions, dysphasia and ulcers on non-keratinized mucosa as edges of tongue, buccal mucosa and the lips. For treatment of RAU various herbal plants have been used which includes myrtle (Myrtus communis); safflower (Carthamus tinctorius); purslane (Portulaca oleraceae); pomegranate (Punica granatum); sour cherry (Vitis venifera); taro (Colocasia antiquorum); catechu (Acacia catechu); camphor (Cinnamomum camphora); lemon (Citrus limon); myrrh (Commiphora myrrha); henna (Lawsonia inermis) and bayberry (Myrica pensylvanica)[36-40].

9. Gout

Gout is a chronic auto inflammatory disease with regular acute flares which cause painful joint inflammation. It is mostly seen in women after menopause and in men with above 40 years of age. Its main etiology is such as disease occurs due to hyperuricimea which leads to the presence of monosodium urate (MSU) crystals in joints

P a g e | **3377** Copyright ⊚ 2019Authors

[41], bones, and soft tissues which triggers the release of Il- 1beta which causes inflammation [42-45].

Symptoms that are observed are severe pain, redness and swelling of joints, chills, fever, lumps in joints, stiffness etc. Conventional treatment of gout includes the use of drugs that reduce uric acid (allopurinol, febuxostat); NSAIDS, and corticosteroids can be used. Various plants are used in the treatment of gout such as bitter gourd (Momordica charantia); chrysanthemum (Chrysanthemum indicum); cinnamon (Cinnamomum cassia); sand ginger (Kaempferia galangal); wormwood (Artemisia vulgaris); noni (Morinda elliptica); olive (Olea europaea); parsley (Petroselinum cripsum); berry (Synsepalum dulcificum); ginger (Zingiber officinalis); amla (Phyllanthus emblica); elephant garlic (Allium ampeloprasum) and wild onion (allium cepa) [46-52].

10. Psoriatic arthritis

The disease is a combination of the auto immune disease psoriasis together with inflammatory arthritis [53]. It occurs in people of age 30 – 50 where it first manifests as psoriasis then arthritis follows or vice versa. The symptoms of psoriatic arthritis are such as fatigue, inflamed toes of fingers, joint pain, stiffness, skin rashes and dents in nails. The main etiology is such as it occurs due to abnormal immune system functions causing inflammation and skin cells overproduction [54]. Folate antagonists such as methotrexate can also be used for its treatment but has toxicity. In treatment of this disease, various herbal plants are used such as evening primrose (*Oenothera biennis*); borage oil (*Borago officinalis*); peony (*Paeonia officinalis*); turmeric (*Curcuma longa*); ginger (*Zingiber officinalis*) and chilli pepper (*Capsicum frutescens*)[55-57].

11. Sarcoidosis

Sarcoidosis is an auto inflammatory disease which is characterized by the growth of tiny collections of inflammatory cells in different parts of the body. The exact etiology of this disease is not clear yet but various mediators such as TNF- α , IL-6 and IL-8 are assumed to be the causative factors [58].

It occurs in lymph's, eyes, skin, lymph nodes and also lungs. Symptoms include skin lesions, plaques, skin lesions, fatigue, wheezing and also weight loss. Various conventional drugs can be used in treatment such as immunomodulators (cyclosporine, mercaptopurine, methotrexate, azathioprine) and steroids (prednisone, budesonide,

P a g e | 3378 Copyright ⊚ 2019Authors

methyl prednisone). Herbal treatment therapy of sarcoidosis makes use of reishi mushrooms (*Ganoderma lucidum*); echinacea (*Echinacea purpurea*); devil's claw (*Harpogophytum procumbens*) and meadwort (*Filipendula ulmaria*)[59-61]. Plants used for treatment of auto-inflamamtory disoders with their molecular targets have been listed in **Table 1**.

The chemical structures of bioactive principles of herbal products used for auto-inflammatory diseases have been represented in **Figure 2.**

Figure 1: Chemical structures of bioactive principles of plants used in auto-inflammatory diseases

Table 1: Herbal products and their molecular targets

Scientific name	Chemical class	Biological source	Family	Target	Applicat ion	Reference
Aloe vera	Anthraquinone	Aloe vera	Asphadelaceae	NF-KB	CD	3
Pistacia lentiscus	Gum resin	Mastic gum	Pistacio	TNF-α	CD	4
Artemisia absinthium	Volatile oils	Wormwood	Astaraceae	Steroid spairing, uric acid	CD, Gout	5,28
Curcuma longa	Curcuminoid	Turmeric	Zingiberaceae	ROS,TNF- α, COX-1, COX-2, NF-KB, 5- LOX	CD, SJIA, AS, Psoriatic arthritis	6,18, 25,34
Hoedeum vulgare	Angiosperm	Barley	Gramineae	IL-2, IL-4	CD	7
Asparagus officinalis	Angiosperm	Asparagus	Asparagaceae	THP-1(α)	CD	8

ISSN: 0971-1260

Vol-22-Issue-17-September-2019

Glycine max	Glycines	Soyabean	Leguminoseae	IL-2, IL- 10	CD	9
Colchicum autumnale	Volatile oils	Colchicine	Autumn crocus	Mitosis	BD, SS, FMF, TRAPS	11, 14, 22, 23
Glycyrrhiza uralensis	Saponins	Liquorice root	Fabaceae	COX	BD	15
Zingiber officinale,	Polyphenols	Ginger	Zingiberaceae	LT, COX	SJIA, Gout	19,44
Camellia sinensis	Purine alkaloids	Green tea	Theacea	EGCG	SJIA	18
Cinamomu m zeylanicum	Essential oil	Cinnamon	Lauraceae	ROX, XOD	SJIA, Gout	19,44
Chrysanthe mum indicum	Terpenoids and flavonoids	Chrysanthem um	Asteraceae	TNF-α, IL-1β, IL- 6, ROS	AS	24
Allium sativum	Allicin	Garlic	Alliaceae	TNF-α, IL-8, HLA-B27 proteins	AS	25
Rhamnus cathartica	Anthraquinones	Rhubarb	Polygonaceae.	Apoptosis	AS	27
Myrtus communis	Monoterpenes	Myrtle	Myrtaceae	ROS, IL-6	RAU	29
Carthamus tinctorius	Fatty acids	Safflower	Asteraceae	IL-10	RAU	30
Portulaca oleraceae	Dicotyledons	Purslane	Portulacaceae	ROS, IL-2	RAU	31
Punica granatum	Polyphenols	Pomegranate flowers	Punicaceae	COX-2, PGE-2	RAU	32
Vitis venifera	Polyphenols	Sour cherry	Rosaceae	LT, COX-	RAU	33
Colocasia antiquorum	Flavonoids	Taro	Araceae	COX1, COX-2, IL-10	RAU	34
Acacia catechu	Catechin	Catechu	Leguminosae	COX, LOX	RAU	35
Cinnamom um camphora	Monoterpenoids	Camphor	Laurels	ROS, PGE-2	RAU	36
Citrus limon	Citrus fruits	Lemon	Rutaceae	IL-2, IL-6, histamine	RAU	37

ISSN: 0971-1260

Vol-22-Issue-17-September-2019

Commiphor a myrrha	Resins	Myrrh	Burseraceae	IL-1β	RAU	38
Lawsonia inermis	Naphthoquinone	Henna	Lythraceae	COX, LOX	RAU	39
Myrica pensylvanic	Myricetin	bayberry	Myricaceae	ROS	RAU	40
a Momordica charantia	Flavonioid	Bitter gourd	Curcubitaceae	uric acid	Gout	42
Morinda elliptica	NA	Noni	Rubiaceae	uric acid	Gout	46
Olea europaea	Oleuropein	Olive	Oleaceae	XOD	Gout	47
Petroselinu m cripsum	Myristicin	Parsley	Apiacea	uric acid	Gout	48
Synsepalum dulcificum	Phenyl propenoids	Berry fruit	Sapotaceae	XOD	Gout	49
Phyllanthus emblica	Punicafolin	Amla	Phyllanthaceae	XOD	Gout	50
Allium ampelopras um	Onions	Elephant garlic	Liliaceae	uric acid	Gout	51
Allium cepa	Onion	Wild onion	Amaryllidaceae	XOD	Gout	52
Oenothera biennis	Volatile oils	Evening primrose	Onagraceae	PG, IL-1	PA	54
Borago officinalis	Volatile oils	Borage oil	Boraginaceae	IL-2, IL- 1β	PA	54
Paeonia officinalis	Glycosides	Peony	Paeoniceae	IL-2, IL-6	PA	55
Capsicum frutescens	Alkaloids	Chilli pepper (Capsaicin)	Solanaceae	COX, LOX	PA	57
Ganoderma lucidum	Ganodermatace ae	Reishi mushrooms	Sterols, alkaloids	ROS	Sarcoid osis	59
Echinacea purpurea	Daisy family	Echinacea	Phenolic compounds	ROS	Sarcoid osis	58
Harpogoph ytum procumben s	Pedaliaceae	Devil's claw	Glycosides	COX, LOX	Sarcoid osis	60

ISSN: 0971-1260

Vol-22-Issue-17-September-2019

Filipendula	Rosaceae	Mead wort	Alcoholic	ROS	Sarcoid	61
ulmaria			compounds		osis	

NF-Kb: Nuclear factor kappa B cells; TNF-α: tumor necrosis factor; ROS: reactive oxygen species; IL: interleukin; COX: cyclooxegenase; LOX: lipooxegenase; EGCG: Epigallocate-chine-3-gallate; THP: Tamm Horsfall Protein; HLA- B 27: Human Leukocyte Antigen Subtype 27; XOD: Xanthine Oxidase enzyme; LT: leukotriene, PG: prostaglandin; FMF: familial mediterranean fever; TRAPS: TNF receptor associated periodic syndrome; RAU: recurrent stomatitis aphthous ulcer; SJIA: systemic juvenile idiopathic arthritis; CAPS: cryopyrine associated autoinflammatory syndromes; CD: Crohns disease; BD: Behcets disease; SS: Schnitzel syndrome

3. Conclusion

Auto inflammatory diseases are common and the causative factors for the etiology are still not clear. Conventional and nonconventional approaches are available for treatment of auto inflammatory diseases but all are associated with one or more side effects. Herbal products that are used for treatment of various diseases are mainly plants metabolites. The use of herbal products is increasing worldwide due to its safety profile. Various natural products have been used for auto-inflammatory diseases. However, further clinical studies must be conducted to provide its usefulness.

4. References

- 1. S. Sanctis, M, Nozzi and M. Del Torto, A. Scardapane, S. Gaspari, G. Michele, L. Breda and F. Chiarelli, "Auto inflammatory syndromes: diagnosis and management," Ital. J. Pediatr., vol. 36, pp.36-57, Sep. 2010.
- 2. F. Ciccarelli, De. M. Martinis and L. Ginaldi, "An update on auto inflammatory diseases", Current Med. Chem., vol.21, pp. 216-269, Jan. 2013.
- 3. J. K. Triantafillidis, "The use of natural products in treatment of inflammatory bowel diseases," Annals of gastroenterology, vol. 21, pp. 14-16, 2008.
- 4. M. Z. Siddiqui, "Boswella serrata, a potential anti-inflammatory agent: an overview," Indian J. Pharm. Sci., vol. 73, pp. 255-261, May 2011.
- 5. A. Judžentiene, "Essential oils in food preservation," *Flavour and safety*, pp. 849-856, 2016.
- 6. F. N. Cunha, L. T. Marton, S.V. DeMarqui, T.A. Lima and S.M. Barbalho, "Curcuminoids from Curcuma longa: New adjuvant for treatment of Crohn's

P a g e | **3383** Copyright ⊚ 2019Authors

- disease and ulcerative colitis," Crit. Rev. Food Sci. Nutr.,vol. 59, pp. 2136 2143, 2019.
- 7. A. W. MacGregor, "Encyclopedia of food science and nutrition," ED-2, pp. 379-382, 2003.
- 8. A. Sharma and D. N. Sharma, "A comprehensive review of pharmacological actions of Asparagus racemosus," Am. J. Pharm. Tech. Res, vol.7, pp. 2249- 3387, Dec. 2017.
- 9. A. F. Juritsch and R. Moreau, "Role of soybean derived bioactive compounds in inflammatory bowel disease," Nutr. Rev., vol. 76, pp. 618-638, Aug. 2018.
- M. C. Pineton, B. Wechsler, G. Geri, P. Cacoub and D. Saadoun, "New insights into pathogenesis of Behcet's disease," Autoimmunity Reviews, vol. 11, pp. 687 – 698, Aug. 2012.
- 11. A. Y. Gasparyan, L. Ayvazyan, N. Yessirkeov and G. D. Akitas, "Colchicine as an anti-inflammatory and cardio protective agent," Expert opinion Drug Metab. Toxicol., vol. 11, pp. 1781-1794, 2015.
- 12. D. Wu, W. Lin and K. Wong, "Herbal medicine (Gancao Xiexin decoction) for Behçet's disease," Medicine, vol. 97, Sep.2018.
- 13. D. Lipsker, "The schnitzel syndrome," Orphanet journal of rare diseases, vol. 5, pp. 1-8, Dec. 2010.
- 14. M. Baresic, J. Mitrovic, J. M. Vergles and B. Anic, "Different therapeutic paths (Colchicine vs. Anankira) in two patients with Schnitzel syndrome," Arch. Rheumatol, vol. 31, pp. 377-380, Dec. 2016.
- 15. E. D. Mellins, C. Macaubas and A. Grom, "Pathogenesis of systemic idiopathic arthritis: some answers, more questions," Nat. Rev. Rheumatol, vol. 7, pp. 416-426, Jun. 2011.
- 16. C. Ailioaie and L. M. Ailioaie, "FRI0726-HPR Study on the efficiency of curcumin therapy in early stages of juvenile oligo arthritis," Annals of Rheumatic diseases, vol. 77, pp. 1810-1811, Jun. 2018.

- 17. N. S. Mashhadi, R. Ghiasvand, G. Askari, M. Hariri, L. Darvishi and M. R. Mofid, "Anti-oxidative and anti-inflammatory effect of ginger on health and physical activity: review of current evidence," Int. J. Prev. Med., vol. 4, pp. 536-542, Apr. 2013.
- 18. A. Tanwar, R. Chawla, M. M. Ansari, M.M; Neha, P. Thakur, A. S. Chakotiya, R. Goel, H. Ojha, M. Asif, M. Basu, R. Arora and H. A. Khan, "*Invivo* anti-arthritic efficacy of camellia sinesis (L.) in collagen induced arthritis model," Biomed. Pharmaco., vol. 87, pp. 92-101, Mar. 2017.
- 19. B. Rathi, S. Bodhankar, V. Mohan and P. Thakurdesai, "Ameliorative effects of polyphenolic fraction of cinnamonium zeylanicum L. bark in animal models in inflammation and arthritis," Sci. Pharm., vol. 81, pp. 92-101, Jun. 2013.
- 20. F. Ciccarelli, M. De Martinis and L. Ginaldi, "An update on auto inflammatory diseases," Current med. Chem., vol. 21, pp. 216-269, Jan. 2013.
- 21. M. Shohat and G. J. Halpern, "Familial Mediterranean fever: a review," Genet. Med., vol. 13, pp. 487-498, Jun. 2011.
- 22. C. Cerguaglia, M. Diaco, G. Nucera, M. Montalto and R. Manna, "Pharmacological and clinical basis of treatment of familial mediteranean fever (FMF) with colchicines or analogue; an update," Curr. Drug Target Inflamm. Allergy, vol. 4, pp. 117-124, Feb. 2005.
- 23. K. M. Hull, E. Drew and I. Aksentijevich, "The TNF receptor associated periodic syndrome (TRAPS); emerging concert of an auto inflammatory disease," *Medicine*, vol. 81, pp. 349- 368, Sep. 2002.
- 24. M. Dong, D. S. Yu, V. Duraipandiyan and N. A. Al- Dhabi, "The protective effect of Chrysanthemum indicum extract in ankylosing spondylitis in mouse model," Biomed. Res. Int., pp. 1-7, Feb. 2017.
- 25. X. Gu, H. Wu and P. Fu, "Allicin attenuates inflammation and suppresses HLA-B27 protein expression in ankylosing spondylitis in mice," Biomed. Res. Int, Nov. 2013.

- 26. M. Hajialilo, S. Dolati, M. Ahmadi and A. Kamrani, "Nanocurcumin: A novel strategy in treating ankylosing spondylitis by modulating TH 17 cells frequency and function," J. Cell Biochem., Feb. 2019.
- 27. C. Ma, B. Wen, Q. Zhang, P. Shao, W. Gun and B. Wang, "Emodin induces apoptosis and autophagy of fibroblasts obtained from patients with ankylosing spondylitis," Drug Des. Devel. Ther, vol. 11, pp. 601-609, Feb. 2019.
- 28. S. Hamedi, O. Sadeghpour and M. R. Shamsardekai, "The most common herbs to cure most common oral disease: stomatitis recurrent aphthous ulcers (RAU)," Iran Red Cresent Med. J, vol. 18, pp. 216, Feb. 2016.
- 29. F. M. Samareh, A. Madegamy, H. R. Poursalehi and N. H. Nematollahi, "Protective effect of standardized extract of myrutus commis L. [mytre] on experimentally bleomycin induced pulmonary fibrosis: biochemical land histopathological study," Drug Chem. Toxico., vol. 41, pp. 408-414, Oct. 2018.
- 30. C. MasterJohn, "The anti-inflammatory properties of safflower oil and coconut oil may be mediated by their respective concentration of vitamin E," J. Am. Coll. Cardiol, vol. 49, pp. 1826-1826, May 2007.
- 31. E. Allahmoradi, S. Taghillo, O. V. Nava and S. S. Shobeir, "Antiinflammatory effect of portulaca oleracea hydroalcoholic extract on human peripheral blood mononuclear cells," Med. J. Islam Repub., vol. 32, Sep.2018.
- 32. *G. Shorab*, H. Zand and Z. Amiri, "Effects of pomegranate juice consumption in inflammatory markers in patients with type 2 diabetes; A randomized placebo controlled trial," J. Res. Med. Sci, vol. 19, pp. 215-220, Mar. 2014.
- 33. S. Chai, K. Davis, K. Zhang and L. Zha, "Effects of tart cherry juice on biomarkers of inflammation and oxidative stress in older adults," Nutrients, vol. 11, pp. 228, Jan. 2019.
- 34. I. M. Grimali, G. Tozzi and A. Nastasi, "Literally evidence of taro in the ancient mediteranean; A chronology of names and uses in multilingual word," PLos one, Jun. 2018.

- 35. S. J. Stohs and D. Bagchi, "Antioxidant, anti-inflammatory and chemoprotective properties of acacia catechu heartwood," Phytother. Res.,vol. 29, pp. 18-24, Jun. 2015.
- 36. S. Euclide and S. Filho, "Effects of camphor on behavior of leukocytes in vitro and in vivo in acute inflammation response," Tropical Journal of Pharmaceutical Research, vol. 13, pp. 2031-2037, Dec. 2014.
- 37. E. M. Galati, A. Cavallaro, T. Ainis, M. M. Tripodo, I. Bonaccorsi, G. Contartese, M. F. Taviano and V. Fimiani, "Antiinflammatory effect of lemon mucilage: invivo and invitro studies," Immunopharmacol. Immunotoxicol.,vol. 27, pp. 661-670, 2005.
- 39. S. Su, J. Duan, T. Chen, X. Huang and E. Shang, E, "Frankincense and myrrh suppress inflammation via regulation of the metabolic profiling and the MAPK signaling pathway," Sci. Rep., vol. 5, pp. 13668, Sep. 2015.
- 40. B. H. Ali, A. K. Bashir and M. O. Tanira, "Antiinflammatory, antipyretic and analgesic effect of Lawsonia inermis L. (henna) in rats," Pharmacology, vol. 51, pp. 356-363, Dec. 1995.
- 41. H. Guo, R. Zhang, Y. Liu and X. Jiang, "Effects of bayberry juice on inflammation and apoptosic markers in young adults with features of non-alcoholic fatty liver disease," Nutrition, vol. 30, pp. 198-203, Feb. 2014.
- 41. L. Punzi, A. Scanu, R. Ramonda and F. Oliviero, "Gout as auto inflammatory disease; new mechanism for more appropriate treatment targets," *Autoimmun. Rev.*, vol. 12, pp. 66-71, Nov. 2012.
- 42. S. Y. Ciou, C. C. Hsu, Y. H. Kuo and C. Y. Chao, "Effect of bitter gourd treatment on inflammatory responses in BALB/C mice with sepsis," *Biomedicine (Taipei)*, vol. 4, pp. 17, 2014.
- 43. D. Y. Lee, G. Choi, M. S. Cheon and B. K. Choo, "Autoinflammatory activity of chrysanthemum indicum extract in acute and chronic cutenous inflammation," J. Ethnopharmacol., vol. 123, pp. 149-154, May 2009.

- 44. N. S. Mashhadi, R. Ghiasvand and G. Askari, "Influence of ginger and cinnamon intake in inflammation and muscle soreness induced by exercise in Iranian female athletes," Int. J. Prev. Med, vol. 4, pp. S1-S5, Apr. 2013.
- 45. F. Algieri, A. R. Nogeles, E. R. Cabezas, S. Risco, M. A. Ocete, J. Galvej, "Botanical drugs as an emerging strategy in inflammatory bowel disease: A. Review," Mediators Inflamm., 2015.
- 46. B. J. West, S. Deng and F. Isami, "The potential health benefits of noni juice: a review of human intervention studies," Food, vol. 11, pp. 58, Apr. 2018.
- 47. P. Souza, A. Marcadenti, V. L. Portal, "Effects of olive oil phenolic compounds on inflammation in the prevention and treatment of coronary artery disease," Nutrients, vol. 9, pp. 1087, Sep. 2017.
- 48. F. I. Abu Bakar, M. F. Abu Bakar, A. Rahmat, N. Abdullah, S. F. Sabran and S. Endrini, "A. Anti-gout potential of Maylasian medicinal plants," Front. Pharmacol. Vol. 9, pp. 261, Mar. 2018.
- 49. S. V. Joseph, I. Edinsinghe and B. M. Burton-Freeman, "Berries: anti-inflammatory effect in humans," J. Agri. Food Chem, vol. 62, pp. 3886-3903, May 2014.
- 50. M. Goleccha, V. Sarangal, S. Ojha, J. Bhatia and D. S. Arya, "Anti-inflammatory effect of emblica officinalis in rodent models of acute and chronic inflammation: involvement of possible mechanism," Int. J. Infl., 2014.
- 51. G. Schafer, C. H. Kaschul, "The immunostimulatory and anti-inflammatory effect of garlic organosulfur compounds in cancer chemoprevention anticancer agent," Med. Chem., vol. 14, pp. 233-2014, Feb. 2014.
- 52. W. Dorsch, E. Schneider, T. Bayer, W. Brew and H. Wagner, "Anti-inflammatory effect of onions: inhibition of chemotaxis of human polymorphonuclear leukocytes by thiosulfinates and cepaenes," Int. Arch. Allergy Appl. Immunnol., vol. 92, pp. 39-42, 1990.
- 53. J. M. Moll and V. Wright, "Psoriatic arthritis," Seminars in arthritis and rheumatism, "vol. 3, pp. 55-78, 1973.

- 54. J. J. Belch and A. Hill, Evening primrose oil and baroge oil in Rheumatological conditions. Am. J. Clin. Nut., vol. 71, pp. 352S- 356S, Jan. 2000.
- 55. Y. N. Wang, Y. Zhan and Y. Wang, "The beneficial effect of total glycosides of paeony on Psoriatic arthritis links to circulating Tregs and Th 1 cell functions," Phytother. Res., vol. 28, pp. 372-381. Mar. 2014.
- 56. J. W. Daily, M. Yang and S. Park, "Efficacy of Turmeric Extracts and Curcumin for Alleviating the Symptoms of Joint Arthritis: A Systematic Review and Meta-Analysis of Randomized Clinical Trials," J. Med. Food., vol. 19, pp. 717-729, Aug. 2016.
- 57. D. J. Veale, H. I. Torley, I. M. Richards, A. O'Dowd, C. Fitzsimons, J. J. Belch and R. D. Sturrock, "A double blind placebo controlled trial of efamol marine on skin and joint symptoms of Psoriatic arthritis," Br. J. Rheumatol., vol. 33, pp. 954-958, Oct. 1994.
- 58. D. M. R. Leśniewska, E. S. Różewska, U. Demkow, J. Jozwiak, M. Sobiecka and B. J. Balan, "A natural herbal remedy modulates angiogenic activity of bronchoalveolar lavage cells from sarcoidosis patients," Cent. Eur. J. Immunol., vol. 41, pp. 25-34, 2016.
- 59. G. S. Kurtipek, A. Ataseven, E. Kurtipek, I. Kucukosmanoglu and M. R. Toksoz, "Resolution of Cutaneous Sarcoidosis Following Topical Application of Ganoderma lucidum (Reishi Mushroom)," Dermatol. Ther. (Heidelb), vol. 6, pp. 105-109, Mar. 2016.
- 60. L. Grant, D. E. McBean, L. Fyfe and A. M. Warnock, "A review of the biological and potential therapeutic actions of Harpagophytum procumbens," Phytother. Res., vol. 21, pp. 199-209, Mar. 2007.
- 61. S. Czabaj, J. Kawa-Rygielska, A. Z. Kucharska and J. Klicks, "Effect of mead wort heat treatment on the mead fermentation process and antioxidant activity," Molecules, vol. 22, pp. 803, May 2017.

ISSN: 0971-1260

Vol-22-Issue-17-September-2019