

Optimizing the Potentials of Herbs in a Growing Nigeria

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Abstract

The abundance of plants on the earth's surfaces has led to an increasing interest in traditional medicines as remedies to various ailments and potential sources of new drugs. In Africa, particularly Nigeria, the standards of nutrition, health infrastructure and environmental sanitation are relatively low; contributing significantly to the intensity of the damages caused by diseases. This has made communities in these societies seek herbal drug alternatives that are affordable, and quite available. This article provides an overview of some commonly used herbal medicines in Nigeria, their local names and general traditional uses. As it is usually conveniently assumed that naturally sourced drugs are completely harmless, this review also discusses the need for caution and scientific interventions in the use of herbal medicines as they can be potentially dangerous if wrongly used or handled.

Key words: Herbal; Medicines; Traditional Drugs

Introduction

Despite the non-debatable efficacies of synthetic drugs in the management of various medical conditions, their side effects and challenges of affordability remain limitations that cannot be neglected, thereby causing a rapidly growing interest in natural remedies [1]. In the world today, as the people are becoming aware of the potency and side effects of synthetic drugs, there is an increasing interest in the natural product remedies with a basic approach towards the nature [1]. Plant metabolites and plant based medicines appear to be one of the better alternatives as they are known to have minimal danger to consumers in contrast to synthetic counterparts [2]. The abundance of plants on the earth's surfaces has led to an increasing interest in the investigation of different extracts obtained from traditional medicinal plants as potential sources of new drugs [3]. Biologically active compounds present in the medicinal plants have always been of great interest to scientists. There are well-

documented problems regarding the harmful side effects and the continuous increase in the number of microorganisms that are resistant to chemical antibiotics. This highlights the need for new strategies and new classes of drugs with low toxicity and high selectivity in their action [4]. The prospects of availability, affordability, reduced side effects and resistance have favored the use of herbal medicine recently. In Africa, particularly Nigeria, the standard of nutrition, health infrastructure and environmental sanitation is declining by the day contributing significantly to the intensity of the damages caused by diseases [5,6]. This demands that research communities in these greatly disturbed societies seek better and more effective solutions in an effort to enhance the treatment and management of infections and diseases.

Phytotherapy is not entirely new in West Africa as different communities employ plants and their derivatives, usually in their crude forms to provide

solutions to their health challenges. Some commonly used medicinal plants in Nigeria are presented in Table 1.

s/n	Botanical Name	Common Name	Family	Yoruba Name	Igbo Name	Hausa Name	Uses	Parts Used
1	<i>Carica papaya</i>	Pawpaw	Caricaceae	Ibepe	Okworo-beke/ojo	Gwanda	Boil purgative	Latex fruit / seed
2	<i>Musa sapientum</i>	Banana	Musaceae	Ogede wewe	Ule/uneri	Ayaba	High blood pressure	Fruit
3	<i>Allium sativum</i>	Garlic	Alliaceae	Aayu	Ayo-ishi	Tafarunua	Antibiotic anti-diabetic anti hypertension	Bulb
4	<i>Zingiber officinale</i>	Ginger	Zingiberaceae	Ata-ile	Jinga	Chita	Detoxify liver bronchitis	Corm
5	<i>Vernonia amygdalina</i>	Bitter leaf	Asteraceae	Ewuro	Onugbu	Shiwaka	Pile, lower sugar content	Leaves
6	<i>Ocimum gratissimum</i>	Mint	Lamiaceae	Efinrin nla	Nchanwu	Dadoya	Stomach problem	Leaves
7	<i>Dioscorea alata</i>	Water yam	Dioscoreaceae	Isu ewura	Awoke	Dugura	Fever	Leaves
8	<i>Calotropis procera</i>	Sodom apple	Asclepeceae	Bomubomu	-	Tumifafiya	Measles	Leaves
9	<i>Azadirachta indica</i>	Neem tree	Meliaceae	Dongoyaro	Ogwu akom	Maina	Boils	Leaves & tree
10	<i>Rauvolfia vomitoria</i>	Indian snake root	Apocynaceae	Asofeyeje	Akanta	Wadda	Sedative , mental disorder	Root bark

Table 1: Some Commonly Used Nigerian Medicinal Plants [7].

Herbal medicines contain a combination of pharmacologically active plant constituents that are claimed to work synergistically to produce an effect greater than the sum of the effects of the single constituents [8]. In line with this, there is a general belief by the public that herbal medicines are all safe because they are natural. However, this is a hazardous oversimplification. Since all herbal medicines are mixtures of more than one active ingredient, such combinations of many substances obviously increase the likelihood of interactions taking place [8]. These interactions could be combined effects as seen with cases of severe hypoglycemia noticed in diabetics using *Vernonia amygdalina* (Ewuro) and Metformin concomitantly. These interactions may be traced to the tendency of induction or inhibition of liver enzymes by metabolites of these herbs or direct pharmacological actions of the herbs. In any case, there is need for more care and professional interventions geared towards minimizing interactions caused by medicinal plants.

All drugs, synthetic or herbal should be safe and effective. The lack of quality standards in some herbal preparations has resulted in mild to serious adverse

effects ranging from hepatotoxicity to death. Hence, herbal ingredients require tools for determining identity, purity and quality [9]. They are to be used in correct proportions and preserved effectively. Standardization of herbal drugs and derivatives therefore remains a priority.

Conclusion

The use of herbs is as old as man and no doubt highly beneficial, especially in developing economies like Nigeria. Serious caution is however required in their use and more research efforts aimed at standardization of these herbal medicines.

References

1. Verma S, Singh S (2008) Current and future status of herbal medicines. *Veterinary World* 1(11): 347-350.
2. Verma J, Dubey N (1999) Prospects of botanical and microbial products as pesticides of tomorrow. *Current Science* (76): 172-179.

3. Bonjar GH, Farrokhi PR (2004) Antibacillus activity of some plant used in traditional medicine of Iran. Nigerian Journal on National Prod Med (8): 34-39.
4. Neenah E, Ahmed M (2011) Anti-microbial activity of extracts and latex of *Calotropis procera* and synergistic effect with reference to anti-microbials. Res J Med Plants 5(6): 706-716.
5. Adebola OO (2004) Prevalence of skin diseases in Ibadan, Nigeria. Int J Dermatol 43(1): 31-36.
6. Ghebremedhin B, Olugbosi M, Raji A, Layer F, Bakare R, et al. (2009) Emergence of a Community-Associated Methicillin-Resistant *Staphylococcus aureus* Strain with a Unique Resistance Profile in Southwest Nigeria. Journal of Clinical Microbiology 47(9): 2975-2980.
7. Aiyeloja AA, Bello OA (2006) Ethnobotanical potentials of common herbs in Nigeria: A case study of Enugu state. Educational Research and Review 1(1): 16-22.
8. Izzo A (2012) Interactions between herbs and conventional drugs: Overview of the clinical data. Med Princ Pract 21(5): 404-428.
9. Sachan AK, Vishrini G, Kumar R (2016) Need of standardization of herbal medicines in modern era. International Journal of Phytomedicine 8(3): 300-307.

