

REVIEW ARTICLE

A Panoramic Review on Ethnobotanical, Phytochemical, Pharmacological and Homeopathic Uses of Echinacea angustifolia

Shifa Shaffique^{1,*}, Anila Rehman², Saeed Ahmed², Haseeb Anwar¹, Hafiz Muhammad Asif², Ghulam Hussain¹, Tayyeba Rehman², Saba Javed¹

- ¹ Department of Physiology, Faculty of Life Sciences Government College University, Faisalabad, Pakistan
- ² University College of Conventional Medicine, Faculty of Pharmacy and Alternative Medicine, The Islamia University of Bahawalpur, Bahawalpur, Pakistan

ABSTRACT

Authors' Contributions 1 Conception & Study Design, Data Collection, Data Analysis, Drafting, Critical Analysis.

- 2 Conception, Data Analysis, Critical Analysis.
- 3 Conception, Drafting.
- 4,5 Conception, Data Collection.
- 6 Data Analysis.
- 7.8 Critical Analysis.

Article info.

Received: November 13, 2018 Accepted: November 30, 2018

Funding Source: Nil Conflict of Interest: Nil

Cite this article: Shaffique S, Rehman A, Ahmed S, Anwar H, Asif HM, Hussain G, Rehman T, Javed S. A Panoramic Review on Ethnobotanical, Phytochemical, Pharmacological and Homeopathic Uses of Echinacea angustifolia. RADS J. Pharm. Pharm. Sci. 2018; 6(4): 282-286.

*Address of Correspondence Author: shifa.shafiquee@gmail.com

Background: *Echinacea angustifolia* is traditionally used polychrest remedy and known since 18th century due to many medicinal properties. It is also well known homeopathic medicine that is useful for various diseases. Traditionally it is used in various ailments.

Objective: In present study, attempt has been made to review the literature of the botanical, ethnobotanical, taxonomical, chemical constituents, and homeopathic uses of *E. angustifolia*.

Study design: This is a narrative brief review in which information was collected from various search engines and text books.

Conclusion: It is concluded from present study that that *E. angustifolia* could be an alternative to immunomodulatory, antibacterial, antioxidant and anti-inflammatory agents.

Keywords: Echinacea angustifolia, polychrest, homeopathic uses.

INTRODUCTION

Echinacea angustifolia is a hard, erect, herbaceous perennial plant gaining height of 30-60 cm, having one to several stems. Leaves are simple, alternate, oblong to lance-shaped, almost linear of 8-20cm and all are all mitigate at base. Flower heads are light pink to purple in color and solitary at the end of branches [1]. Figure 1 is the pictural representation of *E. angustifolia*. Table 1 described the systematic taxonomy of *E. angustifolia*.

Table 1. Systematic taxonomy.

Source	Vegetable kingdom
Order	Asterales
Family	Compositeae
Genus	Echinacea
Species	E. angustifolia
Synonyms	English: Echinaceae, purple cone flower black sampson echinacea
Part used for preparation of homeopathic mother tincture	Whole plant
Homeopathically proved by	Dr. J.C. Fahnestock and contributed by T.C. Ducan

Distribution of Plant

It is found in United States, Canada and centeral parts of U.S.A. [1].

Active Principle

Echinacea angustifolia roots have 6 alkamides which are lipophilic in nature such as Dodeca-2E,4Z-diene-8, Dodeca-2*E*-ene-8,10-diynoic acid isobutylamide, 10-diynoic acid isobutylamide Dodeca-2E,4E,8Z,10E/Z-tetraenoic isobutylamides. acid Dodeca-2E,4E,8Z-trienoic isobutylamide, acid Undeca-2*E/Z*-ene-8, Dodeca-2*E*,4*E*-dienoic isobutylamide [2], Cichoric acid echinacoside, 10diynoic acid isobutylamides, chlorogenic cynarin, caffeic acid and caftaric acid were also identified and quantified from E. angustifolia root [3]. Cynarine is major constituent among all of them [4]. Figure 2 showed the structures of some important constituents of E. angustifolia.





Fig. 1. Different parts of Echinacea angustifolia.

Fig. 2. Structural formulas of Cichoric acid, Chlorogenic acid and Echinacoside.

Traditional Uses of E. angustifolia

Tradititionally *E. angustifolia* was used to stimulate immune system to treat common colds, respiratory

tract infection and lower urinary tract infections [2]. It was also used for treating infections, such as ulcers and wound infections, snake biting cases as an "antitoxin" and septicemia. Echinacea was also suggested for bacterial and viral infections, pyorrhoea, nasopharyngeal catarrh, tonsillitis, minor septicaemia, furunculosis and other skin conditions such as abscesses, boils, carbuncles and wound healing [4].

Method for Preparation of Mother Tincture

Whole plant of *E. angustifolia* is used to prepare its mother tincture. 100 gram of *E. angustifolia* in coarse powder, 200 ml of purified water and 825ml of strong alcohol are required for preparation of 1 litre of mother tincture [1].

Homeopathic Uses

E. angustifolia is a significant remedy for treating blood poisoning and septic conditions of the body. Homeopathically it is used to treat malignanat ulcers, stomatitis, erysipelas, gangrene, recurring boils, carbuncles, puerperal fever septicaemia, typhoid diarrhoea, snake bite, meningitis, ulcerated sore throat, sting of poisonous insects, tendency to malignancy, irritation from poisonous plants, Goitre with exophthalmic symptoms and pains of cancer at last stage. All these conditions must expressed by following symptoms for calling E. angustifolia as a remedy, tongue, lips, and fauces feel pricking, fear of heart pain, fever with flushed face, full head, and accelerated pulse, laziness, neuralgic, darting, sharp, shifting pains, digestive and respiratory tracts catarrhal affections, lymphatic inflammation, copious offensive discharges, sloughing drowsiness. emaciation, chilliness with nausea and abdominal sensitiveness. The symptoms were aggravated after eating; in evening; after physical or mental exertion and ameliorated by lying down, and by rest [5-7].

Pharmacological Activities

In a research study, Echinacea herb and root crude powder and its preparations were evaluated for their pharmacological effects murine macrophages and human peripheral blood mononuclear cells (PBMCs). Echinacea raw material as well as its commercially offering preparations was investigated for their anti-inflammatory, immunostimulatory and antioxidant effects [8-11].

Antibacterial Activity of Echinacea

Different ethanolic concentrations of E. angustifolia and seven other plants were evaluated for their antibacterial potential against human four gramnegative pathogen including Pseudomonas aeruginosa, Salmonella enteritidis, Klebsiella pneumonia, Escherichia coli and four gram-positive pathogen including methicillin resistant Staphylococcus aureus (MRSA), Staphylococcus epidermidis, Staphylococcus aureus, Streptococcus pyogenes. Micro broth dilution method and standard well assay were used to evaluate extracts of 50, 70, and 90% ethanolic concentration of all medicinal plants. E. angustifolia did not expressed significant antibacterial potential as compare to other medicinal plants extracts [12, 13].

Antioxidant Property of Echinacea

In vitro study results expressed that murine macrophage cytokine excretion were stimulated by crude powder of Echinacea herb and roots and human PBMCs proliferations were also significantly increased by crude powder of Echinacea herb and roots. Whereas Echinacea preparations were not exhibited immunostimulatory effects but show antioxidant and anti-inflammatory effects of variable grades [10, 14, 15].

In a comparative study, three species of Echinacea (*E. purpurea*, *E. angustifolia* and *E. pallida*) were evaluated for their specific chemical constituents by using electrospray mass spectrometric detectors and HPLC combined with ultraviolet absorbance along with antioxidant activity of their alcoholic extracts. The lipid peroxidation test and free radical scavenging test were displayed antioxidants effects of alcoholic extracts of three Echinacea species roots and leaves [16, 17].

In another study, three Echinacea species (E. purpurea, E. angustifolia and E. pallida) were evaluated for analysis of their phenolic compounds and radical scavenging activity. Cichoric acid, echinacoside, cynarin, caffeic acid, chlorogenic acid and caftaric acid were identified and quantified in Echinacea roots. Analytical results revealed that roots of E. angustifolia contains 10.49 mg/g, E. pallida have 17.83 mg/g and E. purpurea have 23.23 mg/g of compounds. Commercial phenolic herbal of preparations Echinacea displayed variable concentration of phenolic contents. DPPH (2, 2diphenyl-1-picrylhydrazyl) reduction based

Spectrophotometric method was used to evaluate antioxidant potential of Echinacea methanolic extracts. Results revealed the highest antioxidant activity of pure echinacoside while lowest of caftaric acid. So, Echinacea roots were considered best source of natural antioxidants [18, 19].

By using a number of assays, evaluation of ethanolic extracts from some medicinal plants including *Glycyrrhiza lepidota* (roots), *E. angustifolia*, *Polygala senega*, *Arctostaphylos uva-ursi* (leaves) and two varieties of Equisetum spp. (aerial parts) were conducted for their antioxidant potential and free-radical scavenging capacity. Evaluated results expressed that extract from the leaves of *Arctostaphylos uva-ursi* show highest antioxidant potential as well as free radical-scavenging ability due to presence of polyphenolic constituents in extract [20, 21].

Echinacea (*E. angustifolia*, *E. pallida*, and *E. purpurea*) roots, after drying and freezing were used to make its methanolic extracts. These extracts were used to evaluate their antioxidant potential and free radical scavenging capacities. Significant results of all verities of Echinacea expressed its antioxidant as well as free radical scavenging activity [22, 23].

Anti-Inflammatory Effects of Echinacea

In a study, Echinacea polysaccharidic fraction (EPF) from roots *Echinacea angustifolia* was evaluated for its anti-inflammatory effects. After the 8 h of introduction of EPF (0.5 mg/kg I/V), carrageenan-induced edema started to reduce and almost inhibited. Croton oil induced ear edema of rat was inhibited after topical application of EPF. These resulted were evaluated by histological examination and peroxidase activity. It was concluded that *E. angustifolia* have anti-inflammatory potential due to its polysaccharide content [14, 20].

Echinacea for Ailment of Upper Respiratory Tract

In a randomized, double-blind placebo-controlled study, Echinacea compound herbal tea was evaluated for its efficacy in severity and time duration of upper respiratory tract symptoms. The results of 90 days study on 95 subjects expressed that Echinacea Plus® tea reduce the severity of symptoms in short time as compared to placebo [24-26].

Immune Modulatory Action of Echinacea

In an in vivo study, E. angustifolia and Hydrastis canadensis (golden seal) were evaluated for their effects on antigen-specific immunoglobulin G and M production. Antigen keyhole limpet hemocyanin (KLH) was injected in rats then treated with extracts of E. angustifolia and Hydrastis canadensis for 6 weeks. **ELISA** test was conducted for monitoring immunomodulatory potential of tested extracts after re-exposure to KLH. Significant results were expressed primary and secondary IgG response against antigen in group treated by Echinacea extract. Primary IgM response was increased in group treated by Hydrastis canadensis. So, it was concluded that tested plants have immunomodulatory potential [27, 28].

CONCLUSION

It is concluded from above panoramic review that *E. angustifolia* is traditionally used for various ailments and pharmacologically contains antibacterial, antifungal, anti-inflammatory and antioxidant agents as well.

REFERENCES

- Verma P, Vaid I. Encyclopaedia of Homeopathic Pharmacopoeia, Vol. IB. Jain Publishers, New Delhi, India; 2002.
- 2. Woelkart K, Koidl C, Grisold A, Gangemi JD, Turner RB, Marth E, *et al.* Bioavailability and pharmacokinetics of alkamides from the roots of Echinacea angustifolia in humans. J Clin Pharmacol 2005; 45(6): 683-9.
- Pellati F, Benvenuti S, Magro L, Melegari M, Soragni F. Analysis of phenolic compounds and radical scavenging activity of Echinacea spp. J Pharmaceut Biomed Anal 2004; 35(2): 289-301.
- Barnes J, Anderson LA, Gibbons S, Phillipson JD. Echinacea species (Echinacea angustifolia (DC.) Hell., Echinacea pallida (Nutt.) Nutt., Echinacea purpurea (L.) Moench): a review of their chemistry, pharmacology and clinical properties. J Pharm Pharmacol 2005; 57(8): 929-54.
- Ullman D. Why Homeopathy Makes Sense and Works. 'Available from: https://homeopathic.com/why-homeopathy-makessense-and-works-3/'.
- Parnham M. Benefit-risk assessment of the squeezed sap of the purple coneflower (Echinacea purpurea) for long-term oral immunostimulation. Phytomedicine 1996; 3(1): 95-102.
- Everett LL, Birmingham PK, Williams GD, Randall Brenn B, Shapiro JH. Herbal and homeopathic

- medication use in pediatric surgical patients. Pediatr Anaesth 2005; 15(6): 455-60.
- 8. Pellati F, Benvenuti S, Melegari M, Lasseigne T. Variability in the composition of anti-oxidant compounds in Echinacea species by HPLC. Phytochem Anal 2005; 16(2): 77-85.
- Hu C, Kitts DD. Studies on the antioxidant activity of Echinacea root extract. J Agric Food Chem 2000; 48(5): 1466-72.
- Sloley BD, Urichuk LJ, Tywin C, Coutts RT, Pang PK, Shan JJ. Comparison of chemical components and antioxidant capacity of different Echinacea species. J Pharm Pharmacol 2001; 53(6): 849-57.
- 11. Barrett B. Medicinal properties of Echinacea: a critical review. Phytomedicine 2003; 10(1): 66-86.
- Ahmad I, Aqil F, Owais M. Modern phytomedicine: Turning medicinal plants into drugs: John Wiley & Sons; 2006.
- Sharma S, Anderson M, Schoop S, Hudson J. Bactericidal and anti-inflammatory properties of a standardized Echinacea extract (Echinaforce®): dual actions against respiratory bacteria. Phytomedicine 2010; 17(8-9): 563-8.
- Raso GM, Pacilio M, Carlo G, Esposito E, Pinto L, Meli R. In-vivo and in-vitro anti-inflammatory effect of Echinacea purpurea and Hypericum perforatum. J Pharm Pharmacol 2002; 54(10): 1379-83.
- Amarowicz R, Pegg R, Rahimi-Moghaddam P, Barl B, Weil J. Free-radical scavenging capacity and antioxidant activity of selected plant species from the Canadian prairies. Food Chem 2004; 84(4): 551-62.
- Thygesen L, Thulin J, Mortensen A, Skibsted LH, Molgaard P. Antioxidant activity of cichoric acid and alkamides from Echinacea purpurea, alone and in combination. Food Chem 2007; 101(1): 74-81.
- Orhan I, Şenol F, Gülpinar A, Kartal M, Şekeroglu N, Deveci M, et al. Acetylcholinesterase inhibitory and antioxidant properties of Cyclotrichium niveum, Thymus praecox subsp. caucasicus var. caucasicus, Echinacea purpurea and E. pallida. Food Chem Toxicol 2009; 47(6): 1304-10.
- Kumar K, Ramaiah S. Pharmacological importance of Echinacea purpurea. Int J Pharma BioSci 2011; 2(4): 304-14.
- Tsao R, Deng Z. Separation procedures for naturally occurring antioxidant phytochemicals. J Chromatogr B Analyt Technol Biomed Life Sci 2004; 812(1-2): 85-99.
- Speroni E, Govoni P, Guizzardi S, Renzulli C, Guerra M. Anti-inflammatory and cicatrizing activity of Echinacea pallida Nutt. root extract. J Ethnopharmacol 2002; 79(2): 265-72.
- Zaporozhets OA, Krushynska OA, Lipkovska NA, Barvinchenko VN. A new test method for the evaluation of total antioxidant activity of herbal products. J Agric Food Chem 2004; 52(1): 21-5.
- Hou W-C, Chen Y-C, Chen H-J, Lin Y-H, Yang L-L, Lee M-H. Antioxidant activities of trypsin inhibitor, a 33 KDa root storage protein of sweet

- potato (Ipomoea batatas (L.) Lam cv. Tainong 57). J Agric Food Chem 2001; 49(6): 2978-81.
- Agnew L, Guffogg S, Matthias A, Lehmann R, Bone K, Watson K. Echinacea intake induces an immune response through altered expression of leucocyte hsp70, increased white cell counts and improved erythrocyte antioxidant defences. J Clin Pharm Therapeut 2005; 30(4): 363-9.
- Taylor JA, Weber W, Standish L, Quinn H, Goesling J, McGann M, et al. Efficacy and safety of echinacea in treating upper respiratory tract infections in children: a randomized controlled trial. JAMA 2003; 290(21): 2824-30.
- Melchart D, Walther E, Linde K, Brandmaier R, Lersch C. Echinacea root extracts for the prevention of upper respiratory tract infections: a

- double-blind, placebo-controlled randomized trial. Arch Fam Med 1998; 7(6): 541.
- Barrett B, Vohmann M, Calabrese C. Echinacea for upper respiratory infection. J Fam Pract 1999; 48(8): 628-35.
- Wüstenberg P, Henneicke-von Zepelin HH, Köhler G, Stammwitz U. Efficacy and mode of action of an immunomodulator herbal preparation containing Echinacea, wild indigo, and white cedar. Adv Ther 1999; 16(1): 51-70.
- 28. Bodinet C, Lindequist U, Teuscher E, Freudenstein J. Effect of an orally applied herbal immunomodulator on cytokine induction and antibody response in normal and immunosuppressed mice. Phytomedicine 2002; 9(7): 606-13.



This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.