

# **Anti-Inflammatory Plants Found in North-East India: A Review**

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**ABSTRACT:** Inflammation is a complex physiological response of the body to injury or infection, which, if left unregulated, can contribute to the development of various chronic diseases. Traditional systems of medicine, such as Ayurveda and traditional practices of Northeast India, have long relied on plant-based remedies to manage inflammation. This review aims to provide a comprehensive overview of the anti-inflammatory plants of Northeast India and their biological extracts involved in anti-inflammatory mechanisms. The rich flora of this region has been explored for its therapeutic potential, offering a diverse range of natural remedies for combating inflammation. This review highlights the importance of documenting scientifically validating the traditional and knowledge associated with these plants, which could lead to the development of novel anti-inflammatory agents.

KEYWORDS: Inflammation, Traditional, Plants, Northeast India, Anti-Inflammatory.

### I. INTRODUCTION

Inflammation is known as a complex biological that has been linked to several medical conditions, including chronic diseases. It is essential for the body's defense system against damage, infection, and tissue infection. However, prolonged or untreated inflammation can speed up the onset and spread of several diseases, including cancer, neurological disorders, and cardiovascular diseases [1,2]. The therapeutic potential of plant-based medicines in treating inflammation and related diseases has long been acknowledged by traditional medical systems. Herbal medicine offers an extensive variety of therapeutic herbs recognized for their anti-inflammatory properties and is based on the traditional knowledge and practices of various civilizations. These plants have a variety of bioactive substances that can control inflammatory pathways and treat inflammation-related symptoms[3,4].

Northeast India, encompassing the states of Assam, Meghalaya, Nagaland, Arunachal Pradesh,

Manipur, Mizoram, Tripura, and Sikkim, is renowned for its exceptional biodiversity. The area is host to a wide variety of ecosystems, such as forests, grasslands, and woods, all of which are host to several plant species with medical properties. The native people of Northeast India have an in-depth understanding of the local flora and how to use it traditionally to treat a variety of conditions, including inflammation [5,6].

### **Types of inflammation:**

#### Acute inflammation: a)

Acute inflammation is a localized response of the body's tissues to harmful stimuli, such as injury or infection. It is a common response of the immune system of the body and is characterized by redness, heat, swelling, pain, and occasionally loss of function in the affected area [7].

The immune system of the body releases chemicals during acute inflammation which helps in boosting blood flow to the affected area. This causes redness and heat. Swelling results from the specific blood vessels becoming more permeable, this enables fluid, proteins, and immune cells to circulate from the bloodstream into the tissues [8].

The increased blood flow and accumulation of fluid and immune cells contribute to the characteristic swelling and pain. White blood cells in particular, which are immune cells, are important in acute inflammation. They assist in beginning the healing process by removing the injury or infection's origin.[9] The first immune cells to reach the site of inflammation are neutrophils, which are then followed by other varieties of white blood cells, like macrophages, that assist in the removal of debris and the defense against pathogens.

#### b) **Chronic inflammation:**

Chronic inflammation refers to a prolonged or persistent inflammatory response in the body. Inflammation is a normal immune response that occurs when the body is injured or exposed to harmful stimuli, such as pathogens or toxins.[10] It can be recognized by pain, heat, swelling, and



inflammation.

redness at the injury or infection site. Even when there is no noticeable injury or infection, the immune system still releases inflammatory mediators in cases of chronic inflammation.[11] Over time, this ongoing inflammatory response can harm healthy tissues and organs. Numerous medical conditions, such as autoimmune diseases, cardiovascular diseases, diabetes, arthritis, and some types of cancer, have been linked to chronic inflammation.[12] In some cases, nonsteroidal antiinflammatory drugs (NSAIDs), corticosteroids, disease-modifying ant rheumatic drugs (DMARDs), or biological therapies are given to treat chronic

### Synthetic anti-inflammatory drugs:

Nonsteroidal anti-inflammatory drugs (NSAIDs), also referred to as anti-inflammatory medications, are frequently used to treat fever, pain, and inflammation. While these drugs are typically effective and secure if used as prescribed, some people may experience side effects.[13]

Here are some possible side effects associated with the use of anti-inflammatory drugs:

- a) Digestive issues: NSAIDs have the potential to irritate the lining of the stomach and intestines, which can result in side effects like stomach pain, heartburn, indigestion, nausea, vomiting, and even the emergence of stomach ulcers or gastrointestinal bleeding. People who have a history of stomach ulcers, gastrointestinal bleeding, high doses, or prolonged use of NSAIDs are more likely to experience these side effects.[14]
- b) Cardiovascular effects: Some NSAIDs, especially those classified as selective COX-2 inhibitors, have been linked to a higher risk of cardiovascular events like heart attacks and stroke. People who already have cardiovascular disease or those who take these drugs frequently or in high doses may be at higher risk.[15]
- c) Kidney issues: Long-term use of NSAIDs can impair kidney function and result in fluid retention, high blood pressure, and in rare instances, kidney failure. People taking other medications that can affect the kidneys or those who already have kidney disease may be at a higher risk.[16]
- d) Allergic reactions: Some people who take NSAIDs may experience allergic reactions, which include skin rashes, itching, hives, swelling (especially of the face, lips, tongue, or throat), wheezing, or breathing difficulties.

Anaphylaxis, a potentially fatal allergic reaction. can happen in extreme circumstances.[17]Liver toxicity: Although it is uncommon, NSAIDs have been linked to liver damage, including elevated liver enzymes and, in extremely rare circumstances, liver failure. People taking high doses of NSAIDs or those who already have liver conditions may be at a higher risk.[18]

- e) Effects on the central nervous system: Some people who take anti-inflammatory medications may experience headaches, vertigo, drowsiness, or confusion. Typically, these symptoms are transient and mild.
- f) Blood conditions: In a small percentage of cases, NSAIDs can interfere with blood clotting and raise the risk of bleeding. They might also contribute to other blood-related conditions like anemia (low red blood cell count).

#### II. PLANT AS AN ANTI-INFLAMMATORY AGENT

Plants have been utilized for their medicinal properties for thousands of years, and their role in managing inflammation is well recognized.[19] Plants are widely utilized as antiinflammatory agents in traditional medical systems all over the world, including Ayurveda, Traditional Chinese Medicine, and Indigenous healing methods. Plants possess a remarkable diversity of bioactive compounds that exhibit anti-inflammatory properties.[20] These substances can inhibit inflammatory mediators, modulate the immune response, and lessen oxidative stress.[21]

Additionally, plant-based antiinflammatory drugs frequently have benefits over synthetically produced ones, such as a reduced risk of side effects and a more comprehensive approach to healing.

This review paper aims to provide a comprehensive overview of the anti-inflammatory plants found in Northeast India, focusing on their traditional uses, phytochemical constituents, and scientific evidence supporting their antiinflammatory benefits. This review will contribute to the study of natural resources and traditional knowledge for the development of new antiinflammatory medicinal medicines by pulling together the existing knowledge. It will also shed insight into the potential of Northeast Indian plants in the area of current medicine and serve as a basis for further research and growth in this field.



Sl no.	Botanical name	Local name	Family	Parts used	Reference
1.	Amomum subulatum Roxb.	Bara elachi (Bengali)	Zingiberaceae	Pods	[22]
2.	Ageratum conyzoides (L.)	Imchenriza	Asteraceae	Leaves and roots	[23]
3.	Artemisia nilagirica (C.B. Clarke) Pamp.	Makampi	Asteraceae	Leaf	[22],[24]
4.	Bombax ceiba Linn.	Simul	Malvaceae	Bark	[25]
5.	Curcuma amada Amada Roxb. (Assamese);		Zingiberaceae	Rhizome	[26]
6.	Curcuma Haldi domestica (Assamese); (Medik) Valh.		Zingiberaceae	Rhizome	[27]
7.	Elettaria Elassi cardamomum (Assamese) Maton		Zingiberaceae	Seeds and pods	[28]
8.	Eria pannea Lindl. Seppu		Orchidaceae	Leaf	[29]
9.	Hedychium Aichhia coccineum (Mizoram); Mansila, Arunacahal Pradesh)		Zingiberaceae	Rhizome	[30]
10.	Homalomena aromatic Schott.		Araceae	Rhizome	[31]
11.	Jatropha curcus Randgula Linn.		Euphorbiaceae	Leaf/bark	[32]
12.	Kaempferia pulchra Ridl. Khanjanburah (Assamese)		Zingiberaceae	Rhizome leaves and stem	[33]
13.	Marchantia Matakain palmate Nees (Arunachal Pradesh)		Marchantiaceae	Whole plant	[34]
14.	Ricinus cammunis Linn.	Kunkaw	Euphorbiaceae	Leaf/seed	[35]
15.	Stephania Bhimraj glandulifera Miers.		Menispermaceae	Tuber	[36]
16.	Zingiber cassumunar Roxb. Bura-ud (Assamese); Naga-shing (Manipuri);		Zingiberaceae	Rhizome	[37]
17.	Zingiber Banada		Zingiberaceae	Rhizome	[38]

# Table 1. Traditionally Used Anti-Inflammatory Plants By The People Of North-East India



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	montanum (Koen.) Link ex A. Dietr.	(Assamese)			
18.	Zingiber zerumbet	Gathian	Zingiberaceae	Rhizome	[39]
	Rosc. EX	(Assamese);			
	SM.	Yaiimu			
		(Manipuri)			

# Table 2. List of traditionally used anti-inflammatory plants which have scientific evidence

SI. No	Botanical	Family	Study type	Study model	Extract	Reference
1.	Plantago erosa	Plantaginac eae	In vivo	Carrageenan- induced paw edema in rats and mice, formalin- induced paw licking in rats, and cotton pellet-induced granuloma in rats	Methanolic extract	[40]
2.	Parkia timoriana	Fabaceae	In vivo	Carrageenan- induced paw edema in rat	Methanolic extract	[41]
3.	Alocasia macrorrhizos	Araceae	In vitro	Inhibition of protein denaturation	Methanolic extract	[42]
4.	Paederia foetida	Rubiaceae	In vivo	Experimentally induced colitis in rats	Ethanolic extract	[43],[44]
5.	Oroxylum indicum	Bignoniace ae	In vivo	Carrageenan- induced paw edema in rat	Hydroalcoh olic extract	[45],[46]
6.	Anisomeles indica	Lamiaceae	In vitro	Inhibition of protein denaturation	Methanolic extract	[47],[48]
7.	Costus speciosus (koen.) Sm.	Costaceae	In vivo	Carrageenan- induced paw edema and cotton pellet- induced granuloma formation	Ethanolic extract	[22],[49]
8.	Drymaria cordata	Costaceae	In vivo	Carrageenan- induced paw edema model in rat	Aqueous extract	[50]

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9.	Hyptis suaveolens	Lamiaceae	In vivo	Carrageenan- induced paw edema model in rat	Ethanolic extract	[51],[52]
10.	Piper betle	Piperaceae	In vivo	Carrageenan- induced hind paw edema model in rat	Aqueous extract	[53],[54]
11.	Sida acuta	Malvaceae	In vivo	Carrageenan induced hind paw edema model in rat	Methanolic extract	[55]
12.	Verbena officinalis L.	Verbenacea e	In vivo	Carrageenan induced hind paw edema model in rat	Methanolic extract	[56]
13.	Vitex negundo L.	Lamiaceae	In vivo	Carrageenan induced hind paw edema model in rat	Aqueous extract	[57]
14.	Litsea cubeba	Lauraceae	In vitro	Protein denaturation assay	Aqueous extract	[58],[59]
15.	Curcuma caesia Roxb.	Zingiberace ae	In vitro	Protein denaturation assay	Aqueous extract	[60],[61]
16.	Enhydra fluctuans	Asteraceae	In vivo	Carrageenan- induced paw edema and cotton pellet- induced granuloma formation	Aqueous extract	[62],[63]
17.	Acorus calamus	Acoraceae	In vitro	Protein denaturation assay	Aqueous extract	[64],[65]
18.	Alpinia galanga	Zingiberace ae	In vitro	Protein denaturation assay	Methanolic extract	[66],[67]
19.	Spondias mangifera	Anacardiac eae		Protein denaturation assay and protease inhibitory activity	Ethanolic extract	[68],[69]
20.	Oryza sativa	Poaceae	In Vitro	Protein denaturation assay, protease inhibitory activity, and HRBC membrane stabilization	Ethanolic extract	[70]



				method		
21.	Garcinia lanceifolia	Clusiaceae	In Vivo	Carrageenan- induced paw edema model	Methanolic extract	[71]

# III. CONCLUSION AND FUTURE DIRECTIONS

In conclusion, the review of antiinflammatory plants from Northeast India highlights the rich botanical diversity and traditional knowledge of the region. The Northeastern region of India is known for its vast array of medicinal plants, many of which have been traditionally used for their anti-inflammatory properties.

The review identified several plants that showed promising anti-inflammatory activity, including Paederia foetida, Oroxylum indicum, Plantago erosa, Hyptis suaveolens, etc. which show good in vitro as well as in vivo anti-inflammatory activity.

The traditional use of these plants in Ayurveda and other traditional healing systems provides a historical foundation for their antiinflammatory properties. The knowledge and practices of the local communities have contributed to the identification and utilization of these plants for managing inflammatory conditions.

The efficacy and safety of the reviewed anti-inflammatory plants have been supported by a growing body of scientific evidence. In vitro studies have demonstrated their ability to inhibit proinflammatory mediators, while in vivo and clinical studies have provided promising results in terms of their anti-inflammatory properties. However, it is essential to acknowledge the need for further research, including well-designed clinical trials, to establish their efficacy and safety in specific inflammatory conditions.

However, further research is needed to fully understand the mechanisms of action, optimize dosages, and evaluate the safety and efficacy of these plants as anti-inflammatory agents. Clinical trials and studies focusing on these plants in the context of specific inflammatory conditions will provide more reliable data and guide their potential integration into the general healthcare system.

Overall, the review highlights the potential of Northeast India's rich botanical resources in providing natural and sustainable solutions for inflammation-related health issues. It draws attention to the importance of preserving traditional knowledge and exploring the therapeutic potential of plant-based remedies.

## REFERENCES

- Hotamisligil, G. S. (2006). Inflammation and metabolic disorders. Nature, 444(7121), 860-867.)
- [2]. Medzhitov, R. (2008). Origin and physiological roles of inflammation. Nature, 454(7203), 428-435
- [3]. Yadav, P., & Yadava, R. N. (2013). Antioxidant activity of a new flavone glycoside from the seeds of Albizzia odoratissima Benth. Int J Phytopharm, 3, 81-85.
- [4]. Ekor, M. (2014). The growing use of herbal medicines: issues relating to adverse reactions and challenges in monitoring safety. Frontiers in pharmacology, 4, 177.
- [5]. Dinarello, C. A. (2010). Anti-inflammatory agents: present and future. Cell, 140(6), 935-950.
- [6]. Das, G., Thou, K., Mondal, P., & Meeran, S. M. (2022). Ethnomedicinal plants used for wound healing and dermatological problem in the North-Eastern Hill Region of India. Asian Journal of Ethnobiology, 5(2).)
- [7]. Shil, S., Choudhury, M. D., & Das, S. (2014). Indigenous knowledge of medicinal plants used by the Reang tribe of Tripura state of India. Journal of Ethnopharmacology, 152(1), 135-141.
- [8]. Ryan, G. B., & Majno, G. (1977). Acute inflammation. A review. The American Journal of Pathology, 86(1), 183.
- [9]. Kumar, R., Clermont, G., Vodovotz, Y., & Chow, C. C. (2004). The dynamics of acute inflammation. Journal of theoretical biology, 230(2), 145-155.
- [10]. Rankin, J. A. (2004). Biological mediators of acute inflammation. AACN Advanced Critical Care, 15(1), 3-17
- [11]. Murakami, M., & Hirano, T. (2012). The molecular mechanisms of chronic inflammation development. Frontiers in immunology, 3, 323.
- [12]. Shacter, E., & Weitzman, S. A. (2002). Chronic inflammation and cancer. Oncology (Williston Park, NY), 16(2), 217-26.

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- [13]. Tsalamandris, S., Antonopoulos, A. S., Oikonomou, E., Papamikroulis, G. A., Vogiatzi, G., Papaioannou, S., & Tousoulis, D. (2019). The role of inflammation in diabetes: current concepts and future perspectives. European cardiology review, 14(1), 50.)
- [14]. Bindu, S., Mazumder, S., & Bandyopadhyay, U. (2020). Non-steroidal anti-inflammatory drugs (NSAIDs) and organ damage: A current perspective. Biochemical pharmacology, 180, 114147.
- [15]. Sostres, C., Gargallo, C. J., Arroyo, M. T., & Lanas, A. (2010). Adverse effects of nonsteroidal anti-inflammatory drugs (NSAIDs, aspirin and coxibs) on upper gastrointestinal tract. Best Practice & research Clinical Gastroenterology, 24(2), 121-132.)
- [16]. Meek, I. L., Van de Laar, M. A., & Vonkeman, H. E. (2010). Non-steroidal antiinflammatory drugs: an overview of cardiovascular risks. Pharmaceuticals, 3(7), 2146-2162.)
- [17]. Bindu, S., Mazumder, S., & Bandyopadhyay, U. (2020). Non-steroidal anti-inflammatory drugs (NSAIDs) and organ damage: A current perspective. Biochemical pharmacology, 180, 114147.
- [18]. Wehling, M. (2014). Non-steroidal antiinflammatory drug use in chronic pain conditions with special emphasis on the elderly and patients with relevant comorbidities: management and mitigation of risks and adverse effects. European Journal of clinical pharmacology, 70, 1159-1172.
- [19]. Bessone, F. (2010). Non-steroidal antiinflammatory drugs: What is the actual risk of liver damage?. World Journal of Gastroenterology: WJG, 16(45), 5651.
- [20]. Kim, H. P., Son, K. H., Chang, H. W., & Kang, S. S. (2004). Anti-inflammatory plant flavonoids and cellular action mechanisms. Journal of pharmacological sciences, 96(3), 229-245.
- [21]. Schinella, G. R., Tournier, H. A., Prieto, J. M., De Buschiazzo, P. M., & Rios, J. L. (2002). Antioxidant activity of antiinflammatory plant extracts. Life Sciences, 70(9), 1023-1033.
- [22]. Basak, S., Sarma, G. C., & Rangan, L. (2010). Ethnomedical uses of Zingiberaceous plants of Northeast India. Journal of Ethnopharmacology, 132(1), 286-296.

- [23]. Tag, H., Das, A. K., & Loyi, H. (2007). Antiinflammatory plants used by the Khamti tribe of Lohit district in eastern Arunachal Pradesh India.
- [24]. Albaqami, J. J., Benny, T. P., Hamdi, H., Altemimi, A. B., Kuttithodi, A. M., Job, J. T., ... & Narayanankutty, A. (2022). Phytochemical Composition and In Vitro Antioxidant, Anti-Inflammatory, Anticancer, and Enzyme-Inhibitory Activities of Artemisia nilagirica (CB Clarke) Pamp. Molecules, 27(20), 7119.
- [25]. Anandarajagopal, K., Sunilson, J. A. J., Ajaykumar, T. V., Ananth, R., & Kamal, S. (2013). In-vitro anti-inflammatory evaluation of crude Bombax ceiba extracts. European Journal of Medicinal Plants, 3(1), 99.
- [26]. Mujumdar, A. M., Naik, D. G., Dandge, C. N., & Puntambekar, H. M. (2000). Antiinflammatory activity of Curcuma amada Roxb. in albino rats. Indian Journal of Pharmacology, 32(6), 375-377.
- [27]. Kuptniratsaikul, V., Dajpratham, P., Taechaarpornkul,W., Buntragulpoontawee, M., Lukkanapichonchut, P., Chootip, C., & Laongpech, S. (2014). Efficacy and safety of Curcuma domestica extracts compared with ibuprofen in patients with knee osteoarthritis: a multicenter study. Clinical Interventions in Aging, 451-458.
- [28]. Al-Zuhair, H., El-Sayeh, B., Ameen, H. A., & Al-Shoora, H. (1996). Pharmacological studies of cardamom oil in animals. Pharmacological Research, 34(1-2), 79-82.
- [29]. Chowlu, K., Mahar, K. S., & Das, A. K. (2017). Ethnobotanical studies on orchids among the Khamti Community of Arunachal Pradesh, India. Indian Journal of Natural Products and Resources (IJNPR)[Formerly Natural Product Radiance (NPR)], 8(1), 89-93.
- [30]. Pachurekar, P., & Dixit, A. K. (2017). A review on pharmacognostic phytochemical and ethnomedicinal properties of Hedychium coronarium J. Koenig an endangered medicine. International Journal of Chinese Medicine, 1(2), 49-61.
- [31]. Kehie, M., Kehie, P., & Pfoze, N. L. (2017). Phytochemical and ethnopharmacological overview of endangered Homalomena aromatica Schott: An aromatic medicinal herb of Northeast India.



- [32]. Osman, S. A. Antioxidant and antiinflammatory activities of fractions from jatropha curcas linn. Root extract and attenuation of pro-inflammatory mediators in raw 264.7 cells.
- [33]. Singh, A., Singh, N., Singh, S., Srivastava, R. P., Singh, L., Verma, P. C., ... & Saxena, G. (2023). The industrially important genus Kaempferia: An ethnopharmacological review. Frontiers in Pharmacology, 14, 1099523.
- [34]. Namsa, N. D., Tag, H., Mandal, M., Kalita, P., & Das, A. K. (2009). An ethnobotanical study of traditional anti-inflammatory plants used by the Lohit community of Arunachal Pradesh, India. Journal of Ethnopharmacology, 125(2), 234-245.
- [35]. Ilavarasan, R., Mallika, M., & Venkataraman, S. (2006). Anti-inflammatory and free radical scavenging activity of Ricinus communis root extract. Journal of Ethnopharmacology, 103(3), 478-480.
- [36]. Nath, K. K., & Deka, P. (2011). Traditional remedies of Joint diseases in Assam. Indian Journal of traditional knowledge, 10(3), 568-571.
- [37]. Singh, C. B., Manglembi, N., Swapana, N., & Chanu, S. B. (2015). Ethnobotany, phytochemistry and pharmacology of Zingiber cassumunar Roxb.(Zingiberaceae). Journal of Pharmacognosy and Phytochemistry, 4(1), 01-06.
- [38]. Chakraborty, A., Santra, I., Haque, S. M., & Ghosh, B. (2023). In vitro conservation of commercial and threatened members of Zingiberaceae: an Indian scenario. Biodiversity and Conservation, 1-41.
- [39]. Kader, G., Nikkon, F., Rashid, M. A., & Yeasmin, T. (2011). Antimicrobial activities of the rhizome extract of Zingiber zerumbet Linn. Asian Pacific Journal of tropical biomedicine, 1(5), 409-412.
- [40]. Barua, C. C., Pal, S. K., Roy, J. D., Buragohain, B., Talukdar, A., Barua, A. G., & Borah, P. (2011). Studies on the antiinflammatory properties of Plantago erosa leaf extract in rodents. Journal of Ethnopharmacology, 134(1), 62-66.
- [41]. Ralte, L., Khiangte, L., Thangjam, N. M., Kumar, A., & Singh, Y. T. (2022). GC–MS and molecular docking analyses of phytochemicals from the underutilized plant,

Parkia timoriana revealed candidate anticancerous and anti-inflammatory agents. Scientific Reports, 12(1), 3395.

- [42]. Barbhuiya, S. A. A., Devi, S. V., Kakati, A., Choudhury, R. A., & Mazumder, M. U. (2021). Pharmacognostic profile and comparative in vitro anti-inflammatory activity study of ethnomedicinal plants of North East India. Pharmacognosy Journal, 13(2).
- [43]. Kumar, V., Kaithwas, G., Anwar, F., Rahman, M., Patel, D. K., Singh, Y., & Verma, A. (2018). Effect of variable doses of Paederia foetida L. combat against experimentally-induced systemic and topical inflammation in Wistar rats. Current Bioactive Compounds, 14(1), 70-79.
- [44]. Chanda, S., Sarethy, I. P., De, B., & Singh, K. (2013). Paederia foetida—a promising ethnomedicinal tribal plant of northeastern India. Journal of forestry research, 24, 801-808.
- [45]. Laloo, D., Gogoi, B., Lyngdoh, W., Zaman, K., & Sharma, H. K. (2016). Antioxidant, analgesic and anti-inflammatory activities of bark of Oroxylum indicum Vent: an endemic medicinal plant of Northeast India. Asian Journal of Chemistry, 28(10), 2272.
- [46]. Deka, D. C., Kumar, V., Prasad, C., Kumar, K., Gogoi, B. J., Singh, L., & Srivastava, R. B. (2013). Oroxylum indicum–a medicinal plant of North East India: An overview of its nutritional, remedial, and prophylactic properties. Journal of Applied Pharmaceutical Science, 3(4,), S104-S112.
- [47]. Lavanya, R., Maheshwari, S. U., Harish, G., Raj, J. B., Kamali, S., Hemamalani, D., & Reddy, C. U. (2010). Investigation of in-vitro anti-inflammatory, anti-platelet and antiarthritic activities in the leaves of Anisomeles malabarica Linn. Research journal of pharmaceutical, biological and chemical sciences, 1(4), 745-752.
- [48]. Antil, R., Singh, L., Gahlawat, D. K., & Dahiya, P. (2019). Investigation of chemical composition of methanolic extract of Anisomeles indica (L.) Kuntze by using FTIR and GC-MS. Journal of Pharmacognosy and Phytochemistry, 8(4), 49-54.
- [49]. Binny, K., Kumar, S. G., & Dennis, T. (2010). Anti-inflammatory and antipyretic properties of the rhizome of Costus speciosus



(koen.) sm. Journal of Basic and Clinical Pharmacy, 1(3), 177.

- [50]. Barua, C. C., Roy, J. D., Buragohain, B., Barua, A. G., Borah, P., & Lahkar, M. (2011). Analgesic and anti-nociceptive activity of hydroethanolic extract of Drymaria cordata Willd. Indian Journal of Pharmacology, 43(2), 121.
- [51]. Mishra, P., Sohrab, S., & Mishra, S. K. (2021). A review on the phytochemical and pharmacological properties of Hyptis suaveolens (L.) Poit. Future Journal of Pharmaceutical Sciences, 7(1), 1-11.
- [52]. Nayak, P. S., Nayak, S., Shety, R., & Das, P. (2010). Hyptis suaveolens Poit: a review on its phytochemical and pharmacological profile. Research Journal of Pharmacognosy and Phytochemistry, 2(1), 1-6.
- [53]. Kumar, N., Misra, P., Dube, A., Bhattacharya, S., Dikshit, M., & Ranade, S. (2010). Piper betle Linn. a maligned Pan-Asiatic plant with an array of pharmacological activities and prospects for drug discovery. Current science, 922-932.
- [54]. Pin, K. Y., Chuah, A. L., Rashih, A. A., Mazura, M. P., Fadzureena, J., Vimala, S., & Rasadah, M. A. (2010). Antioxidant and antiinflammatory activities of extracts of betel leaves (Piper betle) from solvents with different polarities. Journal of Tropical Forest Science, 448-455.
- [55]. Konaté, K., Bassolé, I. H. N., Hilou, A., Aworet-Samseny, R. R., Souza, A., Barro, N., & M'Batchi, B. (2012). Toxicity assessment and analgesic activity investigation of aqueous acetone extracts of Sida acuta Burn f. and Sida cordifolia L.(Malvaceae), medicinal plants of Burkina Faso. BMC Complementary and Alternative Medicine, 12, 1-11.
- [56]. Calvo, M. I. (2006). Anti-inflammatory and analgesic activity of the topical preparation of Verbena officinalis L. Journal of Ethnopharmacology, 107(3), 380-382.
- [57]. Chawla, A. S., Sharma, A. K., Handa, S. S., & Dhar, K. L. (1992). Chemical investigation and anti-inflammatory activity of Vitex negundo seeds. Journal of Natural Products, 55(2), 163-167.
- [58]. Gogoi, R., Loying, R., Sarma, N., Munda, S., Pandey, S. K., & Lal, M. (2018). A comparative study on antioxidant, antiinflammatory, genotoxicity, anti-microbial activities and chemical composition of fruit

and leaf essential oils of Litsea cubeba Pers from North-east India. Industrial Crops and Products, 125, 131-139.

- [59]. Kamle, M., Mahato, D. K., Lee, K. E., Bajpai, V. K., Gajurel, P. R., Gu, K. S., & Kumar, P. (2019). Ethnopharmacological properties and medicinal uses of Litsea cubeba. Plants, 8(6), 150.
- [60]. Borah, A., Paw, M., Gogoi, R., Loying, R., Sarma, N., Munda, S. & Lal, M. (2019). Chemical composition, antioxidant, antiinflammatory, anti-microbial and in-vitro cytotoxic efficacy of essential oil of Curcuma caesia Roxb. leaves: An endangered medicinal plant of North East India. Industrial crops and products, 129, 448-454.
- [61]. Paw, M., Gogoi, R., Sarma, N., Pandey, S. K., Borah, A., Begum, T., & Lal, M. (2020). Study of anti-oxidant, anti-inflammatory, genotoxicity, and antimicrobial activities and analysis of different constituents found in rhizome essential oil of Curcuma caesia Roxb., collected from north east India. Current pharmaceutical biotechnology, 21(5), 403-413.
- [62]. Sonawane, C. J., Patil, A. A., Patil, V. M., & Patil, P. A. (2021). Review on Enhydra fluctuans. Asian Journal of Pharmaceutical Research, 11(4), 260-262.
- [63]. Sarma, U., Borah, V. V., Saikia, K. K., & Hazarika, N. K. (2014). Enhydra fluctuans: A review on its pharmacological importance as a medicinal plant and prevalence and use in North-East India. Int. J. Pharmcy Pharm. Sci, 6, 48-50.
- [64]. Sharma, V., Sharma, R., Gautam, D. S., Kuca, K., Nepovimova, E., & Martins, N. (2020). Role of Vacha (Acorus calamus Linn.) in neurological and metabolic disorders: evidence from ethnopharmacology, phytochemistry, pharmacology and clinical study. Journal of clinical medicine, 9(4), 1176.
- [65]. Loying, R., Gogoi, R., Sarma, N., Borah, A., Munda, S., Pandey, S. K., & Lal, M. (2019). Chemical compositions, in-vitro antioxidant, anti-microbial, anti-inflammatory and cytotoxic activities of essential oil of Acorus calamus L. rhizome from North-East India. Journal of Essential Oil Bearing Plants, 22(5), 1299-1312.
- [66]. Barbhuiya, S. M., Kakati, A., Mazumder, M. U., Choudhury, M. R. A., & Laskar, M. A.

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(2022). The pharmacognostic profiling of traditionally used medicinal plants of Northeast India and evaluation of their invitro anti-oxidant and anti-inflammatory potential. Research Journal of Pharmacy and Technology, 15(11), 5062-5067.

- [67]. Bora, D., Bharall, J. C. B., & Nath, S. (2014). 3. New Medico-Ethno-Botanical Report Of Alpinia Galanga Will. (Zingiberaceae) Used By Chakma Tribe From Tripura In North East India By. Life Sciences Leaflets, 48, 32-to.
- [68]. Khalid, M., Alqarni, M. H., Shoaib, A., Arif, M., Foudah, A. I., Afzal, O.& Altamimi, A. S. (2021). Anti-arthritic and antiinflammatory potential of Spondias mangifera extract fractions: An in silico, in vitro and in vivo approach. Plants, 10(5), 825.
- [69]. Sachan, N. K., Arif, M., Zaman, K., & Kumar, Y. (2011). Anti-inflammatory, analgesic and antioxidant potential of the stem bark of Spondias mangifera Willd. Archives of Biological Sciences, 63(2), 413-419.
- [70]. Bora, N. S., Kakoti, B. B., Bairy, P. S., & Gogoi, B. (2014). Garcinia lanceifolia Roxb; an endemic medicinal plant of Assam relieves pain and delays nociceptive response: an assay for its analgesic and antiinflammatory activity. Int J Pharm Sci Drug Res, 6(3), 216-219.
- [71]. Rahman, H., Eswaraiah, M. C., & Dutta, A. M. (2015). In-vitro anti-inflammatory and anti-arthritic activity of Oryza Sativa Var. joha rice (an aromatic indigenous rice of Assam). Am Eurasian J Agric Environ Sci, 15(1), 115-121.