2nd Global Summit on Herbals & Natural Remedies October 17-19, 2016 Kuala Lumpur, Malaysia

Introduction: Cardiovascular diseases are the number one cause of morbidity and mortality in the world. Traditional herbal concoctions and herb derived drugs are commonly used for these ailments. These three abstracts review popular herbal remedies, which have demonstrated beneficial cardiovascular effects and results been validated by rigorous scientific studies.

Methods: PubMed interrogation revealed 65,034 entries under 'herbal medicines' and 2,963 under 'herbal and cardiovascular'. Relevant citations were reviewed. Other pertinent published scientific material was also consulted.

Results: Rauwolfia serpentine (Indian snakeroot):



Reserpine, a major alkaloid in rauwolfia serpentine, produces a strong and prolonged hypotensive effect in patients by decreasing cardiac output, peripheral vascular resistance,

HERBAL CARDIOCEUTICALS: 1 Shashi K. Agarwal, MD, FACN, ABIHM, FAAIM, FACC, NJ, USA

heart rate, and renin secretion. The main mechanism for its sympatholytic and antihypertensive actions appears to be depletion of catecholamines.

Rosmarinus officinalis (Rosemary):



Although research on rosemary is scant, its diterpenoids, especially carnosic acid and carnosol, have antioxidant activity that help with stabilizing erythrocyte membranes and inhibiting superoxide generation and lipid peroxidation. Rosemary leaves contain high amounts of salicylates, and its flavonoid pigment diosmin is reported to decrease capillary permeability and fragility. Rosemary may help retard atherogenesis.

Ruscus aculeatus (Butcher's Broom):



Ruscus aculeatus, through its vasconstrictive and

Venotonic properties may have a therapeutic role in ameliorating the symptoms of orthostatic hypotension and venous insufficiency. The active ingredients are two steroidal saponins, ruscogenin and neurogenin, which antagonize histamineinduced increases in vascular permeability.

Conclusions: Several herbal medicines have convincingly established their therapeutic role as cardioceuticals. Evidence based scrutiny has repeatedly validated their efficacy and safety in clinical trials.

References:

2009 Oct 7;(4):CD007655.



1. Villegas JF, Barabe DN, Stein RA, et al. Adverse effects of herbal treatment of cardiovascular disease: what the physician must know. Heart Dis. 2001 May-Jun;3(3):169-75.

2. Yilmaz MB, Yontar OC, Turgut OO, et al. Herbals in cardiovascular practice: are physicians neglecting anything? Int J Cardiol. 2007 Oct 31;122(1):48-51.

3. Cohen PA, Ernst E. Safety of herbal supplements: a guide for cardiologists. Cardiovasc Ther. 2010 Aug;28(4):246-53.

4. Shamon SD, Perez MI. Blood pressure lowering efficacy of reserpine for primary hypertension. Cochrane Database Syst Rev.

5. al-Sereiti MR, Abu-Amer KM, Sen P. Pharmacology of rosemary (Rosmarinus officinalis Linn.) and its therapeutic potentials. Indian J Exp Biol. 1999 Feb;37(2):124-30.

6. Boyle P, Diehm C, Robertson C. Meta-analysis of clinical trials of Cyclo 3 Fort in the treatment of chronic venous insufficiency. Int Angiol. 2003 Sep;22(3):250-62.